

**Santa Cruz County
Housing for Health Partnership (H4HP) Policy Board
Regular Meeting Agenda
December 13, 2023; 3 pm**

420 Capitola Avenue, Capitola, CA 90501 - Capitola City Hall - Community Room

Zoom Conference Link: <https://santacruzcounty-us.zoomgov.com/s/1602726676>

Call-In Number: +16692545252 Webinar ID#: 160 272 6676

Call to Order/Welcome

Non-Agenda Public Comment

Action Items (vote required) {3:15 – 4 pm}

1. Approval of Minutes: October 18, 2023, Regular Meeting
2. Approval of Housing for Health Partnership Emergency Shelter Standards

Information Items (no vote required): {4-4:30 pm}

3. 2024 Point-in-Time (PIT) Count Volunteer Recruitment
4. Miracle Messages - Volunteer and Participant Recruitment
5. Lived Expertise Action Boards – Recruitment of Participants
6. 25th Santa Cruz County Annual Homeless Memorial
7. 2024 Housing for Health Partnership Current Meeting Schedule

Report/Discussion Items (no vote required): {4:30 pm – End}

8. Regionally Coordinated Homelessness Action Plan (HHAP-5) & Housing for a Healthy Santa Cruz Framework Update

Board Member Announcements

Adjournment

Next Meeting: Wednesday, February 21, 2024, 3 pm

The County of Santa Cruz does not discriminate based on disability, and no person shall, by reason of a disability, be denied the benefit of the services, programs, or activities. This meeting is in an accessible facility. If you are a person with a disability and require special assistance to participate in the meeting, please call (831) 763-8900 (TDD/TTY- 711) at least 72 hours in advance of the meeting to make arrangements. Persons with disabilities may request a copy of the agenda in an alternative format. As a courtesy to those affected, please attend the meeting smoke and scent free.

Action Item 1: Approval of Meeting Minutes

(Action required) – Robert Ratner

Recommendation

Approve the October 18, 2023, Housing for Health Partnership Policy Board Regular Meeting minutes.

Suggested Motion

I move to approve the October 18, 2023, Housing for Health Partnership Policy Board Regular Meeting minutes.

Housing for Health Partnership (H4HP) Policy Board

Regular Meeting Minutes

October 18, 2023; 3 pm

Call to Order/Welcome

Present: Heather Rodgers, Jamie Goldstein, Judy Hutchison, Justin Cummings, Kate Nester, Lisa Murphy, Manu Koenig, Mariah Lyons, Martine Watkins, Susan True, Suzi Merriam, Tamara Vides, Tom Stagg, Tiffany Cantrell-Warren

Absent: None

Additions and Deletions to the Agenda: None

Non-Agenda Public Comment

No public comment received.

Action Items (vote required)

1. Approval of Minutes: August 16, 2023, Regular Meeting

Discussion: None.

Public Comment: None.

Motion to Approve: Heather Rodgers

Motion Seconded: Judy Hutchison

Abstentions: None

Board Action: Motion passed with all members.

2. Approval of Operations Committee supported changes to CoC Governance Charter

Discussion: Housing for Health Division staff discussed proposed changes to the governance charter, including incorporating people with lived experience of homelessness into decision-making processes in the CoC's Policy Board and Operations Committee. Discussed that these changes aim to align with state and federal emphasis on involving people with lived experience. Discussed plans to support a paid youth-specific and general population Lived Expertise Action Boards. Concerns were raised regarding the naming of the groups and whether the newly formed groups fall under the Brown Act. Discussed need to use appropriate language to clarify scope and role of these new groups. Mentioned how the new action board groups will require training and support to ensure that people with lived experience do not feel isolated or overpowered. Mentioned concern about potentially making the group too large and diluting shared ownership. Some Policy board members felt expanding the group to include more people with lived expertise was needed and appropriate. Discussed the adequacy of city and county representation on the

Policy Board and reviewed the long history of work and conversations that led to the current configuration. Staff were encouraged to convene an ad hoc working group to consult with city and county leadership on the adequacy of city representation given that Scotts Valley and Capitola rotate seats on the Board every two years. Board agreed to revisit impact of lived expertise involvement after new groups start and individuals get incorporated into the operations group and Policy Board.

Public Comment: USICH regional representative Helene Schenider indicated CoC governance structures and methods for involving those with lived expertise vary significantly around the country. Emphasized the importance of genuine and supported involvement as key. Serg Kagno emphasized the importance of clarifying language in the governance charter and appropriately recruiting, training, and supporting new members, especially those with lived expertise.

Motion: Maintain current sizes of the policy and operations group at 15 members. Ensure each group has at least 1 youth lived expertise official member and alternate member and at least 1 general lived expertise official member and alternate member. Update language and group responsibilities in Governance charter to ensure Policy Board is the only group that triggers Brown Act public meeting requirements. Approve other recommended changes in CoC Governance Charter.

Motion to Approve: Manu Koenig

Motion Seconded: Heather Rodgers

Abstentions: None.

Board Action: Tom Stagg, no. Others, yes. Motion passed.

3. Approval of Memorandum of Understanding (MOU) with the Housing Authority of the County of Santa Cruz for 41 Stability Housing Vouchers

Discussion: The board discussed how Santa Cruz County, in partnership with the Housing Authority, was recognized as one of the top ten fastest users of Emergency Housing Vouchers in the United States in one of the most expensive real estate markets in the country. Mentioned that Housing Matters and the CoC received a HUD competitive grant to address Unsheltered Homelessness that will fund 13 project-based housing subsidies for Harvey West Studios. The award also came with an allocation of 41 stability vouchers to the Housing Authority to provide housing subsidies for prioritized households experiencing homelessness in the County. Reviewed that staff aimed to identify and refer eligible recipients for these new vouchers by March 2024, with goal of having all vouchers issued by summer 2024. Questions were raised if vouchers would be targeted towards specific groups or locations. These vouchers will be prioritized for people with disabilities and long histories of homelessness from anywhere in the County. Discussed proposed MOU between the CoC and the Housing Authority of the County of Santa Cruz to utilize

Stability Vouchers through the Coordinated Entry System process. Referred individuals will be connected to supportive services to secure and maintain housing.

Public Comment: *Mentioned the need for enhanced care management and housing stabilization to ensure that individuals who are housed also have access to support and community connections, especially for those with mental health and substance use issues.*

Motion to Approve: *Heather Rodgers*

Motion Seconded: *Judy Hutchison*

Abstentions: *None*

Board Action: *Motion passed with all members.*

4. Approval of CoC/HMIS Data Use Agreement for Abode Services Cash Transfer Pilot Research Study

Discussion: *Discussed possible CoC participation in a rapid rehousing cash transfer research study sponsored by Abode Services and the University of Notre Dame. Randomly selected participants in Abode Services rapid rehousing programs in five counties throughout California will have an opportunity to participate in the study to assess the housing and other impacts of direct cash transfers to randomly selected participants. Current CoC HMIS policies required CoC Policy Board approval of research studies that involve the use of HMIS data. The proposed study requires individual participant consents to release their HMIS data.*

Public Comment: *None*

Motion to Approve: *Heather Rodgers*

Motion Seconded: *Judy Hutchison*

Abstentions: *None*

Board Action: *Motion passed with all members.*

Information Items (no vote required):

5. 2024 Point-in-Time (PIT) Count Scheduled for January 25, 2024

Discussion: *Reviewed planned meetings to prepare for the upcoming 2024 Point-in-Time (PIT) Count Scheduled for January 25, 2024. Mentioned that announcements for the meetings will be sent out via the Housing for Health Partnership membership mailing list. Mentioned that the first meeting will be held in person on October 26, 2023, at the Capitola Library. Discussed that there will be other Zoom meetings and in person meetings in the next four months. Mention that there will be a specific in person Youth meeting in December. Mentioned that 150 volunteers are needed to ensure coverage on the day of the count.*

6. When We Walk by – 1440 Foundation/Housing for Health Dinner Event – November 29, 2023

Discussion: *Discussed Housing for Health collaboration with the 1440 Foundation on hosting a dinner and educational event. Discussed that during the event, Kevin Adler, the*

Executive Director of Miracle Messages in San Francisco, will be sharing his story and discussing his new book, "When We Walk By: Forgotten Humanity, Broken Systems, and the Role We Can Each Play in Ending Homelessness in America." He will shed light on the work of Miracle Messages, an organization that helps reconnect people with their communities and loved ones. Mentioned The event will take place on November 29th at the 1440 Multiversity campus in Scotts Valley. The cost is \$85, and all proceeds will go to participating nonprofits. Discussed how the 1440 Foundation is providing funding for a pilot program for Miracle Messages to implement their family reunification services and phone buddy program in Santa Cruz County.

7. Policy Board Two-year Terms Ending, New Appointments/ Re-Appointments Needed

Reviewed the Housing for Health Partnership Governance charter that requires Board Members to serve two-year terms. Mentioned CoC Staff will reach out to currently Policy Board members to determine their interest in continuing to serve. Current members can be re-appointed if approved to continue by their supporting entity. Reviewed Policy Board Meetings take place at least six times per year.

Report/Discussion Items (no vote required):

8. Review of CoC NOFO Rating and Ranking Review Committee Process

Discussion: Discussed the Housing and Urban Development Continuum of Care Notice of Funding Opportunity (NOFO) rating and ranking review committee process that involved making final determinations on local scores and ranks of renewal and new applications for HUD CoC funding. Mentioned how the Review and Ranking committee members gained valuable information from the interview process with some applicants. Discussed that Sienna House and Front Street applied for HUD funding for the first time and were ranked high enough to be considered for funding. Mentioned that Sienna House had split up their proposal to qualify for a Domestic Violence bonus, which would increase their chances of receiving funding. Mentioned that two grants were recommended for funding reductions by the rating and ranking review committee – the Health Services Agency MATCH program and the Encompass Youth Drop-In Center.

9. Coordinated Entry Brief Update

Discussion: Reviewed how Coordinated Entry is still in early stages of implementation. Mentioned that 48 people have completed the connector training and 11 agencies signed connector MOU's. Discussed how 374 people have been enrolled in the new HMIS coordinated entry project and 212 have been exited from the project. Discussed that currently veterans, youth and families are not going into the housing queue they are getting directly referred into programs. Mentioned there

are no firm threshold scores yet due to low numbers of active participants with completed Housing Needs Assessments.

Board Member Announcements

No additional announcements.

Adjournment

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Action Item 2: Approval of Housing for Health Partnership Emergency Shelter Standards

(Action required) – CoC Staff/Operations Committee

Recommendation

- (1) Approve proposed and updated “Housing for Health Partnership Santa Cruz County Continuum of Care Emergency Shelter Standards” as developed and proposed by CoC staff and members of the CoC Operations group.

Background

HUD requires CoC Boards to prepare, adopt, and update written standards related to the operations of key components of their local system of housing and supportive services. Many standards in place for the Santa Cruz County CoC were written on or before 2017 and do not contain information currently required by new federal and state laws and regulations. In November 2021, Housing for Health Division (H4H) staff met with a group of shelter providers involved in a COVID-19 shelter provider workgroup to discuss the benefits of creating updated shelter operational standards. Representatives from the following agencies were present Housing Matters, Association of Faith Communities (AFC), Salvation Army (both North and South County), Monarch Services, County-operated COVID-19 Isolation/Quarantine/Vulnerable (IQV) Shelters, Pajaro Valley Shelter Services (PVSS), and Siena House. The group provided initial input related to the development of standards.

H4H staff started drafting Emergency Shelter standards through a community process that included surveying the practices of existing county funded shelters and reviewing standards from other communities and other public funding standards. H4H presented initial draft standards to the shelter workgroup in February 2022 and gathered feedback. The group discussed at length standards related to permanent housing exit planning and a proposed six-month cap on lengths of stay.

H4H incorporated the shelter workgroup’s feedback and drafted another version that was presented to the H4H Partnership Operations Committee in August 2022. Committee members requested the addition of further details and definitions to various standards throughout the document. H4H incorporated Operations Committee’s feedback and presented another draft to the group in September. Minor changes were requested and made and approved by the Operations Committee.

These Operations Committee DRAFT shelter standards were presented at a H4H Partnership Policy Board meeting on October 19, 2022. The Policy Board did not approve the DRAFT standards at the meeting and requesting specific changes including updating the standards to distinguish between federal and state legal requirements, locally required or created standards, and optional quality standards. The Board also requested clarification on how the standards would be used and monitored. H4H staff updated the DRAFT standards to reflect the requested changes and reviewed the updated document with members of the Operations Committee. The standards presented today reflect the recommended standards from staff and the Operations Committee.

Suggested Motion

I move to adopt the Operations Committee proposed “Housing for Health Partnership Santa Cruz County Continuum of Care Emergency Shelter Standards.”

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Preface

These Emergency Shelter Standards, adopted by Santa Cruz County's Continuum of Care Housing for Health Partnership on **December 13, 2023**, were developed based on the guiding principles of inclusion, dignity, accessibility, self-determination, and mutual accountability. They are intended to ensure a consistent quality of care across all County funded emergency shelters and to operationalize the County's commitment to providing low barrier, housing first, and shelter supportive services to those without homes in our community. The standards were developed through a community process that included surveying the practices of existing county funded shelters and reviewing standards from other communities and other public funding standards, such as those required by the federal Emergency Solutions Grants (ESG) program and the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Continuum of Care Program Interim Rules.

Most county funded emergency shelters already meet many of these standards, and it is understood that compliance will increase over time. Technical assistance and training will help shelters to meet the standards over the course of the next several years.

To request a waiver of any standards outlined in this document, contact Santa Cruz County's Human Services Department's H4H Division at HousingForHealth@santacruzcounty.us. Any future substantial revisions made to these standards must first be approved by the Housing for Health Partnership.

Introduction

The Housing for Health Partnership Continuum of Care (CoC) is responsible for coordinating and implementing a system to meet the needs of the population and subpopulations experiencing homelessness within the geographic coverage area of Santa Cruz County. Both the Emergency Solution Grant Rules and Regulations (ESG) and the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Continuum of Care Program Interim Rules state that the CoC, in consultation with recipients of Emergency Solutions Grants program funds within the geographic area, (1) establish and consistently follow written standards for providing Continuum of Care assistance, (2) establish performance targets appropriate for population and program type, and (3) monitor recipient and sub-recipient performance.

All programs that receive ESG, CoC or the Human Services Department's Housing for Health Division funding are required to abide by these written standards. *The CoC strongly encourages programs that do not receive any of these sources of funds to accept and utilize these written standards to ensure community-wide continuity in shelter services.*

Program Standards serve as a common policy framework and the minimum standards for Santa Cruz County Emergency Shelters. All projects funded under the CoC, Emergency Solutions Grant (ESG) Program, or by the Human Services Department shall apply the following standards consistently for the benefit of all program participants. While most of these standards are based on the ESG and/or the CoC Program Interim HEARTH Rules, there are some additional standards that have been established by the CoC that will assist programs in meeting and exceeding performance outcomes that will help the CoC reach the goal of ending homelessness.

These policies have been developed through a working consensus process. While the Emergency Shelter Program standards are not policies and procedures, they were written to comply with the ESG Emergency Shelter Policy¹ and ESG Minimum Habitability Standards for Emergency Shelter². Each individual provider or program will be expected to develop and maintain policies and procedures consistent with this umbrella set of standards.

Programs Covered

These standards cover year-round Emergency Shelter and Navigation Center Shelter programs operating in Santa Cruz County that receive ESG, CoC, or County of Santa Cruz Human Services Department Housing for Health Division funding.

California law defines emergency shelter as "housing with minimal supportive services for homeless persons that is limited to occupancy of six months or less by a homeless person." See also California Code, § 65582, subd. (d) and Health and Safety Code, § 50801, subd. (e).

California Gov. Code § 65660 describes Low Barrier Navigation Centers as "Housing first, low-barrier, service-enriched shelter focused on moving people into permanent housing that provides temporary

¹ <https://www.hcd.ca.gov/sites/default/files/docs/grants-and-funding/esg/ca-hcd-esg-emergency-shelter-policy.pdf>

² <https://files.hudexchange.info/resources/documents/ESG-Emergency-Shelter-and-Permanent-Housing-Standards.pdf>

living facilities while case managers connect individuals experiencing homelessness to income, health services, shelter and housing."

Seasonal or inclement weather shelters, emergency shelters that open due to a natural disaster or local emergency event, safe sleeping sites, and safe-parking programs may not offer the same level of services as a year-round shelter and may not be able to and are not required to align with all the standards detailed in this document. However, these types of temporary sheltering programs should strive to comply with these operational standards to the maximum extent possible given space and funding constraints.

Additionally, transitional housing provides limited housing but with longer lengths of stay and more intensive services than emergency shelter. Transitional housing programs are not covered by these standards.

Program Monitoring

The Santa Cruz County Human Services Department's Housing for Health (H4H) Division serves as the administrative entity for the Housing for Health Partnership CoC. The CoC is required to monitor compliance with ESG and locally adopted shelter standards. All CoC funded shelters can expect H4H Division staff to monitor their program at least once annually to ensure adherence to these standards and ESG's Minimum Habitability Standards for Emergency Shelters.

Shelter providers must keep relevant records on file to help facilitate annual reviews, such as local or state inspection reports (fire-safety, food preparation, building/occupancy, etc.) and policy and procedure documents related to emergency shelter facility maintenance or renovations.

Housing for a Healthy Santa Cruz

The County and its partners created the Housing for a Healthy Santa Cruz County Strategic "Framework" through a collaborative process that used the experience, knowledge, and input of a broad set of community members including cities, non-profit organizations, County Departments, and people with lived experiences of homelessness. The Framework's Core Goal #1 is to improve the effectiveness of all programs in helping people secure housing. This includes reducing lengths of stay in shelter programs and increasing the percentage of people exiting from shelter to permanent housing.

State of California Housing First Principles

On September 29, 2016, Governor Jerry Brown signed Senate Bill 1380, making California a "Housing First" state. This requirement applies to any program providing housing or housing-based services to people experiencing homelessness or at risk of experiencing homelessness using funding from the state.

The Housing First model is an approach to serving people experiencing homelessness that recognizes a homeless person must first be able to access a decent, safe place to live, that does not limit length of stay (permanent housing), before stabilizing, improving health, reducing harmful behaviors, or increasing income.

Under the Housing First approach, anyone experiencing homelessness should be connected to a permanent home as quickly as possible, and programs should remove barriers to accessing the housing, like requirements for sobriety or absence of criminal history. It is based on a hierarchy of need principle that people must first access basic necessities - like a safe place to live and food to eat - before being able to achieve quality of life or pursue personal goals.

Commented [ML1]: Section added per direction from Policy Board

Some Housing First requirements are only applicable to permanent housing programs, but others are applicable to both shelter and permanent housing. Shelter providers are expected to comply with the State of California's Housing First requirements as applicable to emergency shelter programs. The requirements may be found in the Welfare and Institutions Code (WIC) Section 8275(b). Additional information on Housing First may be found at the California Interagency Council on Homelessness (CAL-ICH) website.³

Referral, Admission and Access Procedures

Basic Eligibility Requirements

Commented [ML2]: ESG Requirement

Shelter guests must meet criteria under either or both of (a) or (b), below:

a. They are an individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- i. Has a primary nighttime residence that is a public or private place not meant for human habitation, or;
- ii. Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels/motels paid for by charitable organizations or by federal, state, and local government programs), or;
- iii. Is exiting an institution where they have resided for 90 days or fewer and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

b. They are an individual or family who:

- i. Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, and/or human trafficking, and;
- ii. Has no other residence, and;
- iii. Lacks resources or support networks to obtain other permanent housing.

Note for family shelters: The age of a child under age 18 must not be used as a basis for denying any family's admission to a shelter that uses ESG funding or services and provides shelter to families with children under age 18.

Coordinated Entry System Protocols

Commented [ML3]: Updated to meet new CES protocols

Emergency shelters are required to participate to the maximum extent possible in the H4HP Coordinated Entry process as Coordinated Entry provides a critical path from homelessness to housing for many people experiencing sheltered homelessness.

Commented [ML4]: ESG Requirement

Coordinated Entry Connection Points are the virtual or physical places or programs where an individual or family experiencing homelessness or at imminent risk of homelessness accesses the H4HP response system and may receive assistance to connect to resources available through Coordinated Entry.

³ <https://bcsh.ca.gov/calich/resources.html>

All Santa Cruz County shelters must operate as Coordinated Entry Connection points, by providing the full array of Connector services to its participants or must provide access to the Coordinated Entry System (CES) through referral to another CES Connection Point. Coordinated Entry will designate certain Connectors and Outreach teams to make direct referrals to emergency shelter programs. Shelter referrals will not use the CES Housing Needs Assessment for shelter prioritization but will consider participant willingness to enter a specific shelter as well as other participant characteristics.

Further CES details can be found in the [H4HP Coordinated Entry Policies](#) adopted in April 2023.

Admission

All shelters must have clearly written and consistently implemented admission policies and hours for new guest admission. Shelters should aim to accept new guest admissions when the shelter is open, and beds are available, Monday through Friday for at least a four-hour period daily. Where feasible, admissions should be accepted on weekends.

Denial of Admission

Denial of admission to the facility is at the discretion of the shelter and can only be based on the reasons outlined below if evidence is available to support a denial for the given reason. Denial reasons must be documented in HMIS, when appropriate.

- Client does not meet the basic eligibility criteria for shelter admission (e.g., gender, age, homeless status, domestic violence victim, etc.). Shelters with beds designated by funding sources as having additional restrictions (e.g., VA beds that require advance approval by the VA) may deny entry to those not meeting funder requirements.
- Client has a criminal conviction involving sexual offenses, arson or violent crime that poses a current risk to the health and safety of staff and/or guests. When considering a guest's record of criminal convictions, shelters must include an assessment of the length of time since the crime occurred and efforts made towards rehabilitation in the evaluation of eligibility for entrance. This standard does not require that shelters assess criminal history.
- A restraining order that prohibits admission to the facility.
- Violent or threatening behavior.
- Conduct from a prior stay at the shelter that puts the health and safety of staff or guests at risk (e.g., violence, weapons violations, disclosing confidential location of shelter, and egregious damage to property). Shelters will not implement permanent bans based on prior shelter behavior. When considering denial of admission based on prior behavior, shelters must include an assessment of the length of time since the participant's former stay and the potential for behavior or situational change. If a client is denied entrance based on a prior stay the client must be informed of the reason, conditions for lifting the restriction and right to appeal, including whom to contact regarding an appeal and information about the appeal process. Additional requirements for communication regarding grievance and appeals procedures at the point of discharge are included in the [Grievance](#) standard.
- Infectious disease that significantly increases the risk of harm to other guests. Note that guests with lice or scabies or exhibiting symptoms of TB should be allowed to stay in shelter and sent to a health care provider for treatment as soon as possible. Precautions should be taken to avoid spread as feasible. For additional guidance on this regulation, please also refer to "Preventing Tuberculosis (TB) in Homeless Shelters" published by the Los Angeles County Department of Public Health:

Commented [ML5]: Revised language per direction from Policy Board

<http://publichealth.lacounty.gov/tb/docs/LATBGuidelinesforShelters.pdf>. Noncompliance with treatment or containment measures that endangers other guests may be cause for discharge.

- The individual requires care and supervision to manage the activities of daily living (feeding, toileting, selecting proper attire, grooming, maintaining continence, putting on clothes, bathing, walking, and transferring) without the appropriate supports available on-site (e.g., an inappropriate request for admission as a discharge location from a hospital).

Accessibility

Commented [ML6]: Federal law

All shelters must conform to all pertinent requirements of the Americans with Disabilities Act (ADA). See [ADA's Checklist for Emergency Shelters](#)⁴

Beds designated as accessible must comply with federal height and distance standards requiring a minimum of 36 inches⁵ between sleeping units and a sleeping surface height between 17-19 inches above the finished floor. Beds designated as accessible must be prioritized for guests with disabilities. Shelters are encouraged to provide as many ADA accessible beds as possible, but it is not required or expected that all beds meet these requirements.

Program documentation must be provided in forms accessible to hearing-impaired and sight-impaired individuals, upon request. Shelters that provide transportation for guests must also make provisions for guests who need vehicles that are wheelchair accessible.

Non-discrimination/reasonable accommodation

Commented [ML7]: Federal law

All shelters must have policies on non-discrimination and reasonable accommodation and make reasonable modifications in programs, activities, and services when necessary to ensure equal access to individuals with disabilities, unless fundamental alteration in the nature of the program would result from the accommodation.

Transgender Access

Commented [ML8]: Federal law

All shelters must comply with the HUD Rule on Appropriate Placement for Transgender Persons in Single-Sex Emergency Shelters and Other Facilities. See link: [Transgender Placements](#)⁶.

⁴ <https://archive.ada.gov/pccatoolkit/chap7shelterchk.htm>

⁵ This spacing requirement pre-dates COVID-19. For bed spacing guidance during the COVID-19 pandemic, please refer to Congregate Shelter COVID-19 Policies and Recommendations document (<https://housingforhealthpartnership.org/ForProviders/ShelterGuidance.aspx>)

⁶ <https://www.hud.gov/sites/documents/15-02CPDN.pdf>. Requires that providers that place eligible persons in single-sex emergency shelters should place based on the gender with which the person identifies, taking health and safety concerns into consideration. A client's own views with respect to personal health and safety should be given serious consideration in making the placement. A provider will not make an assignment or re-assignment based on complaints of another person when the sole stated basis of the complaint is a client's or potential client's non-conformance with gender stereotypes. There generally is no legitimate reason for the provider to request documentation of a person's sex in order to determine appropriate placement, nor should the provider have any basis to deny access to a single-sex emergency shelter solely because the provider possesses identity documents indicating a sex different than the gender with which the client identifies. The provider may not ask questions or otherwise seek information or documentation concerning the person's anatomy or medical history. Nor may the provider consider the client ineligible for an emergency shelter or other facility because his or her appearance or behavior does not conform to gender stereotypes.

Language Accessibility

Commented [ML9]: Federal law

Staff must ensure that guests have access to interpreter services and that written materials are available if needed in another language. Language access services include a free interpreter and free translation of important documents.

Shelter Operations

Intake

Upon admissions, guests must be provided with copies of the following:

- Guest rights (see [Guest Rights](#) standard)
- Written program rules (see [Guidelines/Rules](#) standards)
- Visitation policy (see [Visitors](#) standard)
- Storage policy, including storage after exit (see [Storage](#) standards)
- Medication storage policy (see [Medication](#) standard)
- Grievance Procedure (see Visitor's standard)

Guest Emergency Information

Shelter staff must collect emergency contact information and information about health needs upon admission that may impact an emergency response. Such information should be kept in a place accessible to on-duty staff in the event of an emergency.

Guidelines (aka Rules)

Hours/Sleeping Hours/Curfew

All shelters must post hours of operation in a visible location. Guests must always be allowed access to their possessions and to the facility common space. If access to sleeping areas is not available during the day, accommodations should be made to allow access for those working second and third shifts, those who are ill, etc.

Shelters should remain open 24/7 unless prohibited by inadequate funding or space limitations. As feasible, shelters not open 24/7 must make reasonable accommodations to normal hours for illness, weather, disabilities, persons working second and third shifts, and other reasonable requests. Shelters that serve children must permit 24-hour access to an area where children can nap.

All shelters must provide facilities available to guests for sleeping for a minimum of eight (8) hours.

If a shelter has a curfew policy, the policy must be clearly written and explained to guests at shelter entry. The policy must be consistently enforced. Missing a curfew cannot be a reason for denial of entry or discharge unless the late arrival compromises the health or safety of other guests or staff or if the guest's late arrival repeatedly interferes with the rights of other guests to peaceful enjoyment of the facility.

Some shelters maintain a curfew policy to ensure the safety of participants. In some cases, shelters may have a policy that includes filing a missing person report if a participant does not return by the curfew time. This should be clearly explained to guests at the time of shelter entry.

Drug and alcohol use/possession

Shelters must have a policy prohibiting the possession, use or distribution of alcohol, **marijuana**⁷, or illegal drugs on the premises. If alcohol or legal drugs are found, guests should be given the opportunity to dispose of the prohibited substance or leave the shelter for that night if they do not wish to dispose of the prohibited substance. A violation of this policy cannot be a reason for discharge unless the violation compromises the health or safety of other guests or staff, violates federal or state law, or repeatedly interferes with the rights of other guests to peaceful enjoyment of the facility.

Admission, discharge, and service restriction policies must not be based on substance use or possession alone, unless the program is designated as an abstinence-based program in its funding contract.

Drug testing of guests is prohibited unless the testing is part of an agreed upon treatment plan with the guest. Submission to drug testing cannot be a requirement for residency and refusal to participate in drug testing cannot be the basis for involuntary discharge.

Being under the influence on-site may not be the basis for discharge. Discharge must be based on specific behaviors that meet the standard for discharge as described in the [Discharge Reasons](#) standard.

Weapons

All shelters must have a written weapons prohibition policy. Weapons include but are not limited to firearms, pepper spray, mace, and knives. Shelters should use discretion when determining which types of knives should be prohibited. Shelters may, but are not required to, have a mechanism for checking weapons upon entry.

Smoking

Shelters shall prohibit smoking indoors and reasonable efforts must be made to prevent smoke from entering buildings. No smoking should be allowed within 25 feet of shelter facilities unless this is infeasible due to layout of grounds. Shelters are required to follow any local ordinances regarding smoking in public areas.

Commented [ML10]: local

It is recommended that information about tobacco cessation resources be posted.

Visitors

Shelters must have and post a visitation policy. The visitation policy should also be provided in writing to each guest upon entry into the shelter. Each shelter should determine the visitation policy for their program; however, each shelter's visitation policy must include that service providers from other programs or agencies will be accommodated to meet with a guest.

⁷ Marijuana possession should be permitted when accompanied with a medical prescription or physician's written recommendation.

Participant Rights and Responsibilities

Participant Rights

Participant rights must be provided in writing and posted in the facility. All program requirements must be consistent with these standards. Rights must include:

- Guests have the right to be treated with dignity and respect.
- Guests have the right to privacy within the limitations of the shelter environment.
- Guests have the right to be treated with cultural sensitivity.
- Guests have the right to self-determination in identifying and setting goals.
- Services should be provided to guests only in the context of a professional relationship based on valid, informed consent.
- Guests should be clearly informed, in understandable language, about the purpose of the services being delivered, including guests who are not literate and/or have limited-English proficiency.
- Guests have the right to confidentiality and information about when confidential information will be disclosed, to whom and for what purpose, as well as the right to deny disclosure, unless disclosure is required by law.
- Guests have the right to reasonable access to records concerning their involvement in the program.

Participant Responsibilities

Participant responsibilities must be provided to each guest in writing upon admission and posted in the facility in a visible location. This must include:

- A clear description of all program rules and potential consequences for violations of these rules.
- A “good neighbor” policy that outlines expected behavior to not interfere with the rights of other guests including the use of scented products when guests with chemical sensitivities are in residence.
- Any expectations related to chores.
- Expectations regarding working to exit shelter into stable housing as quickly as possible.

On-Site Expectations

Written program rules must specify any chores and/or housekeeping requirements of guests and must be provided to participants upon entry or posted in a location easily visible by guests. Chore policies should allow for accommodations for those who cannot participate in chores due to disability, pregnancy, etc.

Noncompliance with a chore policy cannot be a reason for discharge unless a repeated pattern of violation occurs that impacts other guests.

Actively Engaged in Exit Planning

After an initial grace period at entry allowing shelter guests time to adjust to their new setting, participants have an obligation to be engaged in a housing plan and shelters may discharge a guest who refuses to work towards a housing plan and/or has refused multiple housing opportunities. Before discharge for this reason, evidence must be present that the shelter staff actively attempted to engage the participant in housing support designed to assist shelter exit to stable housing with consideration given to each guest's barriers to engagement.

As a system, we will work towards providing training for program staff on developing housing plans and motivating guests towards successful exits to permanent housing. The intent of this standard is for each person or household's shelter stay to be focused on exiting to permanent housing.

Length of Stay

Shelters are not long-term solutions. Stays should be considered brief stops on a participant's pathway to housing. As part of the Housing for a Healthy Santa Cruz County Strategic Framework, the County and its partners adopted a goal to reduce the average length of shelter stays. Shelters should work with participants toward achieving this goal through the development of permanent housing plans.

Subdivision (e) of the California Health and Safety Code §50801 limits shelter occupancy to six months or less. Shelters will follow this state regulation to ensure lengths of stay are no more than six months and beds are made available for others in need.

Commented [ML11]: State law

Exceptions to this rule may be made when participants are actively engaged to find housing. Shelter staff should consider that "active engagement" may be interpreted differently depending on the individual guest. Assistance and expectations should be tailored to each individual or household's needs, strengths, and barriers. At minimum, guests need to be following a mutually agreed upon housing plan (see [Housing Plan and Navigation Assistance](#) standard) and be actively engaged in exit planning (see [Actively Engaged in Exit Planning](#) standard).

Shelter staff can submit a waiver of this standard to the Housing for Health Division to request an extension for an individual or household considered actively engaged. Extension requests must be resubmitted monthly after the initial six-month stay has lapsed and will include a rationale for the extended stay and updated exit plans.

Guests can appeal length of stay exits by demonstrating they are actively engaged in to find housing (see [Grievance](#) standard for more information).

Voluntary Supportive Services

Support services are voluntary. Guests cannot be discharged for lack of participation in services. However, guests have an obligation to be engaged in a housing plan (see [Actively Engaged in Exit Planning](#) section).

Grievance

All shelters must have a written grievance and complaint protocol that is provided to each participant upon intake and is publicly posted in a location visible to guests. The protocol must include:

- The opportunity for participants to present their case before a neutral decision-maker (a supervisor or manager who was not directly involved in the incident or situation of the grievance).

- Process for reporting assault or harassment against other guests or staff that includes non-retaliation protection for the reporting party.
- Accommodation of third-party advocates in the grievance process. Reasonable efforts must be made to coordinate with a participant's advocate to schedule the appeal.
- A requirement that participants be given a written response to their grievance within a reasonable time frame.
- A provision that when a participant files a grievance related to his/her ability to stay in the shelter the action is suspended until the grievance process is completed unless allowing the participant continued residence poses a risk to the health and safety of other participants and/or staff.
- An appeals procedure that allows participants to appeal, at a minimum, decisions related to admissions denials for cause, terminations, and disciplinary actions.
- Provisions for providing participants with information about any subsequent appeals process available through any funding agency.

Additional Grievance standard information will be available and may be modified when the CoC's Grievance standards are finalized and approved by the CoC's Policy Board.

Participant Input

Programs shall provide guests with on-going opportunities to voice opinions, participate in program operation and programming, and make suggestions regarding programming and rules. This can be accomplished in a variety of ways including exit interviews, discharge surveys, one-on-one interviews, participant surveys, guest focus groups, inclusion of homeless or formerly homeless members on the agency board of directors, having homeless or formerly homeless people trained and hired as staff, and/or the creation of a participants' advisory council.

In addition to any other activities, shelters must host guest meetings once per month and provide at least 24 hours advance notice to participants of the meeting time and location.

Abuse Reporting

All shelters must have a policy that details any legal duties to report child or elder abuse and a written plan and process for reporting such abuse to the appropriate reporting agency. Additionally, shelters deploy non-retaliation standards for guests that report abuse or harassment against other guests or staff.

Safety Inspections

Routine safety inspections must be performed by shelter staff to ensure guest and facility safety. All shelters must provide participants with the agency's safety inspection policy at intake.

All shelters must have a policy and procedures in place governing how and when searches of participants' private possessions may be conducted. Searches outside routine safety inspections may only be conducted when there is "probable cause" to believe that the person has in his or her possession something which may jeopardize the safety of other guests or staff, including a weapon, or illegal material, including illegal drugs, or something which is interfering with the peaceful enjoyment of the facility for other guests such as food that is attracting vermin. If the person does not consent to the search, and "probable cause" exists to search, the person must be given the choice of being discharged or being searched.

Pet/Service Animals

Commented [ML12]: Federal law

Shelters must have a policy regarding whether pets are allowed in the facility. Per ADA requirements, shelters must make reasonable accommodation for service animals. Additional information regarding ADA requirements for service animals from the U.S. Department of Justice is included in https://www.ada.gov/regs2010/service_animal_qa.html. According to this guidance, emotional support, therapy, comfort, or companion animals are not considered service animals under the ADA. These terms are used to describe animals that provide comfort just by being with a person. Because they have not been trained to perform a specific job or task, they do not qualify as service animals under the ADA.

Guest Mail

If a shelter provides mail service, any mail sent or received cannot be interfered with (e.g., staff opening guests' mail, not providing mail to the guest on the day it is received, etc.).

Emergency Response Plan

All shelters must have an emergency response plan in place.

Storage

Storage While Participant is in Shelter

All shelters must have a written policy that is provided upon intake as to what provision is made for securing belongings including what possessions can be held by the program at participant request such as money, medications, and vital documents.

If a shelter holds funds or possessions on behalf of participants, this service must be voluntary, the program must maintain a log of items in their possession, and the funds or possessions must be promptly returned upon the participant's request. Each shelter should decide how specific to make their log, with consideration of their liability. It is expected that the log would track only those belongings that participants choose to store with the program and not all possessions brought into the shelter. This does not apply to belongings abandoned by a person who does not return to the shelter; in that situation, please refer to [Storage of Belongings After Discharge](#).

Shelters must provide lockable lockers, storage trunks or make other accommodations that allow participants to securely store their belongings. Reasonable access by the participants to their belongings must be provided. Waivers of the requirement that storage space be lockable can be requested if the physical layout of the shelter does not allow for lockable space.

Storage of Belongings After Discharge

Shelters must have a written policy for the storage of belongings after a participant exits, which must include, at a minimum, storage of belongings for at least five (5) working days after guest exit. A copy of the policy must be provided to all guests at intake.

First Aid

There must be at least one staff person on duty at all times trained in emergency first aid and CPR, unless granted a waiver to the on-site staffing requirement. Basic first aid supplies must always be available on-site and accessible to staff.

Medication

Shelters may not administer or dispense medication and may not require guests to turn over medication.

Shelters must have a written policy that is provided upon intake as to whether provision is made for securing prescription medications and guests' responsibility to store and utilize their medication safely. Shelters may encourage guests to lock medications in secure storage areas made available to protect medication from theft but may not require guests to turn over medication.

Shelters must make available a lockable storage area for medications and access to refrigeration for medications. This can include a locked box within a refrigerator that also serves other functions.

Discharging

Discharge Reasons

Only the following reasons may be used as a basis for discharge from a shelter facility:

- Possession of a weapon at the facility
- Possession of illegal drugs on premises (see [Drugs and Alcohol](#) standard for additional information about drug and alcohol use by guests)
- Assault or other violent behavior
- Theft
- Destruction of property
- Restraining order precludes continued residence
- Participant behavior endangers health or safety of guests or staff
- Disclosure of confidential shelter location
- Repeated interference with the rights of other guests to peaceful enjoyment of the facility
- Presence of infectious disease that significantly increases the risk of harm to other guests. Note that guests with lice or scabies or exhibiting symptoms of TB should be allowed to stay in shelter and sent to a health care provider for treatment as soon as possible. Precautions should be taken to avoid spread as feasible. Noncompliance with treatment or containment measures that endangers other guests may be cause for discharge.
- Individual requires care and supervision to manage their activities of daily living (feeding, toileting, selecting proper attire, grooming, maintaining continence, putting on clothes, bathing, walking, and transferring) without appropriate supports available on-site. Shelters must refer individuals needing a higher level of care to appropriate supports made available through In-Home Supportive Services and the health care system. Individuals discharged due to care and supervision needs cannot be discharged to the streets.

Guests may be discharged for refusing to work towards a housing plan and/or refusing multiple housing opportunities: however, evidence must be present that shelter staff actively attempted to engage the guest in services designed to support shelter exit to stable housing with consideration given to each guest's barriers to engagement.

Shelters are not required to hold beds for longer than 72 hours. If a participant is absent from their bed for 72 hours without appropriate notification of shelter staff regarding absence, the participant may be discharged.

While guests may be encouraged to get a TB test, lack of a test cannot be used as a reason for discharge. If a guest is exhibiting symptoms of TB and does not comply with testing and treatment recommendations, the guest may be discharged to protect the health and safety of other shelter guests and staff.

Discharge Requirements

All shelters must provide a written copy of the procedure for filing a grievance to the guest when a guest is involuntary discharged. If it is infeasible to provide the procedure at the time of discharge (e.g., the guest is being removed by law enforcement) this requirement may be waived; however, if the participant returns subsequently to the facility, the grievance procedure must be provided. (Additional requirements related to grievance protocols are included in the [Grievance](#) standard).

If a participant may be denied future readmission because of the circumstances of discharge, the participant must be informed of the reason, the conditions for lifting the restriction and right to appeal, including whom to contact regarding an appeal and information about the appeal process.

Unless the participant poses an immediate threat to the health and safety of other guests and/or staff members, shelters should avoid discharging participants at night.

Unless the participant poses an immediate threat to the health and safety of other guests and/or staff members, involuntary discharges must be approved by a supervisor. During hours that there is no supervisor on site, there must be a supervisor available on call to approve discharge decisions. Approval may be given verbally but should be documented in case notes.

Support Services

Shelters are strongly encouraged to provide services that support exits to stable housing including information and referral, linkage to other services as needed, assistance with accessing services, benefits linkage and advocacy, provision of or referral to employment services, and regular check-ins about progress towards the shelter exit plan.

Housing Problem Solving

Housing Problem Solving (HPS) is a conversation-based strategy aimed at helping persons experiencing homelessness find safe housing solutions with minimal or no H4HP system resources. HPS services are offered when people experiencing or at risk of immediate homelessness first reach out for assistance to resolve their housing crisis. Its strategies are also applied throughout a person's path to housing, with HPS continually offered while people are receiving outreach services or staying in shelter or transitional housing programs. HPS uses creative, interactive conversations to understand factors that contributed to a person's housing crisis, explore possible solutions that may be available through personal or community resource networks, and action plans to make identified housing options possible.

The delivery of Housing Problem Solving is integrated into the Coordinated Entry process and should continue at every intervention stage provided to a participant, including at shelter entry and throughout their stay. Shelters must detail how their projects will provide housing problem-solving services,

Commented [ML13]: ESG requirement

including diversion services at initial shelter request and rapid-exit strategies in their policies and procedures.

Housing Plan and Navigation Assistance

Commented [ML14]: Added new CES protocol

A housing plan must be developed as soon as possible with the guest upon entry. The development of a housing plan should include inquiring about and fostering family and/or friend relationships that may open potential housing opportunities, including inviting those people to participate in housing plan conversations if and when appropriate, and with consent from the guest. Ongoing housing search assistance shall be provided while the household is staying at the shelter.

Shelter staff may find case management tools helpful to develop housing plans such as those used in the Strengths Model and Critical Time Intervention.

Shelter staff providing CES Connector services shall conduct Housing Needs Assessments and create new Housing Action Plans or work off existing assessments and/or plans that were developed prior to the participant's shelter stay. Connectors must also support guests obtain critical "housing ready" documents to help facilitate program referrals and move-ins. More information about this can be found in the H4HP Coordinated Entry Policies⁸.

CES Follow-up

Commented [ML15]: Added new CES protocol

Shelters are strongly encouraged to follow up with housing programs to ensure that guests connect with services to which they are referred through the County's Coordinated Entry System. The intention of this is to ensure participants have the support and information needed to make a successful connection when a referral is made.

Shelter providers providing CES Connector Services must coordinate with housing programs their guests have been referred to and facilitate warm hand offs with housing program providers. Additional information can be found in the H4HP Coordinated Entry Policies⁹.

Exit Planning

Shelters must develop exit plans with all households served, including linkage to aftercare resources.

Outside Service Linkage

Shelters must have a resource area that guests can access without staff assistance that provides information about available community services and housing opportunities. Shelters are strongly encouraged to provide or link participants to drug and alcohol services, mental health services, life skills services, employment services, money management/credit counseling, parenting support and other services as needed. Examples include:

- Health services access: Shelter staff should encourage guests to obtain and maintain health insurance, obtain a primary care provider, and access immunization services. This must

⁸ <https://housingforhealthpartnership.org/GetHelp/CoordinatedEntry.aspx>

⁹ <https://housingforhealthpartnership.org/GetHelp/CoordinatedEntry.aspx>

include publicly posting or otherwise making available information on health-related services.

- Drug and alcohol dependency services through the County's Substance Use Disorders Division.
- Behavioral Health services such as through the County's Behavioral Health Access Team
- County Benefits: Shelter staff should connect participants to all potentially eligible benefits and service programs, such as General Assistance, CalFresh, and MediCal.
- Employment connections to programs such as CalFresh Employment and Training and Workforce Innovation and Opportunity Act (WIOA).

Transportation

Shelters are strongly encouraged to aid with transportation to appointments which can include assisting guests to access public transportation. Shelters are permitted, but not required, to have policies regarding how to prioritize the allocation of limited transportation resources such as bus passes or taxi vouchers.

Food Service

Sanitary facilities

All shelters that either prepare and serve meals or provide areas for guests to prepare and consume their own meals must ensure that all areas used for food storage and preparation are sanitary. Kitchen and dining areas must be kept clean and comply with all relevant health codes.

See [the Santa Cruz County Environmental Health's Food Safety resources website¹⁰](#) for additional guidance related to safe food preparation.

Dining Facilities

Shelters must provide a table and chairs if food is served.

Donated Food

Programs that serve food prepared off site by regular donors must provide donors with a handout that details the requirements for food preparation. All food donors must read and sign the handout to confirm knowledge of the standards and must provide current contact information.

Programs are discouraged from accepting food that has been prepared off-site by intermittent donors.

Meal Schedule

If meals are served, a meal schedule must be posted.

Dietary Modifications

If meals are served or food is provided for guests to use to prepare their own meals, shelters must make dietary modifications and/or provide appropriate food options based on guests' health, allergies, religious, and/or cultural practices.

Commented [ML16]: Local regs

¹⁰ <https://scceh.com/NewHome/Programs/ConsumerProtection/Food.aspx>

As feasible, food provided should promote healthy eating.

CalFresh

Shelters cannot accept a guest's CalFresh benefits but should assist with application assistance linkage.

Staffing Requirements and Training

Staffing Pattern

Commented [ML17]: ESG Requirement

Shelters must have staffing patterns detailed in their policies and procedures, including:

- Estimated caseloads for staff providing case management, which must be sufficient to meet any commitments or projections regarding the number of participants to be served by the project during a given period.
- Other staff who are providing services funded by the project other than case management, including staff who are responsible for providing essential services like food services and staff who are responsible for maintaining the facility such as maintenance workers.

Staffing Qualifications

Ongoing professional development and supervision must be provided by the agency and may include case conferences, case supervision, workshops, and training courses. Shelter providers should maintain a log or other similar record of trainings each staff member has successfully completed. This may be maintained in the personnel file or through a separate tracking system.

Staff on Duty

Shelters must always have sufficient staff on duty. When only one staff person is scheduled on a shift, shelters must make provisions to have on-call staff available. Shelters must have at least one staff on duty and awake during all hours of operation. If the size of the shelter and population served by the shelter do not always warrant on-site staff, the shelter may request a waiver of this requirement. Shelters granted a waiver must have staff on-call and available by phone during all times that guests are on-site. Shelters must always have a supervisor/manager available on call to the program for consultation to staff about challenging guest situations and other urgent matters. All shelters should have a consultation policy in place that outlines situations requiring consultation up the chain of command.

Infectious Disease Control

All shelter staff must be tested for tuberculosis every 12 months and referred to any necessary follow up and/or treatment if indicated. Staff must comply with any recommended follow up testing necessary as indicated by a health care provider.

Staff should be encouraged to obtain an annual flu vaccine.

Required Training

The following trainings must be provided to all staff within six months of hire or an agency defined probationary period:

- Confidentiality protocols
- Crisis prevention and/or verbal de-escalation
- Mandatory reporting requirements related to child/elder abuse
- Universal precautions/infectious disease prevention
- Proper food handling and storage if required by law. State law requires all food handlers in the state of California have California Food Handler Card. New hires have 30 days from the date of hire to obtain a card.
- Anti-discrimination/reasonable accommodation training including accommodation of transgender guests
- Shelter policies and procedures
- Emergency evacuation procedures and fire safety
- HMIS Privacy and Security Certification Training (for HMIS users only)
- Ethics/boundaries
- First Aid/CPR (at least one staff on site as required in [First Aid](#) standard)
- Housing Problem Solving
- Harm reduction approach to substance use disorders
- Domestic violence recognition and referral
- Diversity awareness/cultural awareness/humility
- Overdose detection and response
- Mental Health issues in the homeless population
- De-escalation Techniques
- Coordinated Entry New Connector Training (for CES participating shelter staff)

Commented [ML18]: H4HP Operations Committee recommends that all these trainings be required rather than recommended, as was indicated in the first version presented to Policy Board in Oct. 2022

Administration

Homeless Management Information System (HMIS)

All shelters must participate in HMIS or a comparable system for Domestic Violence providers.

Data Quality

All shelters must utilize HMIS (or comparable) data quality reports to ensure the accuracy of submitted information. All HMIS participating agencies must designate at least one staff who serves as the HMIS Lead. HMIS leads are required to attend monthly meetings with the County's HMIS System Administrators to learn about best practices, new software features, data quality issues, and new HMIS related policy and procedures. Agency HMIS leads are responsible for sharing with their respective agencies information obtained from these meetings and through communications with HMIS System Administrators.

Confidentiality

All shelters must have confidentiality policies that at minimum are consistent with Homeless Management Information System (HMIS) privacy and security requirements, make certain that files are

kept in a secure or locked location, and ensure that verbal communication of confidential information is done in such a way that avoids unintended disclosure.

Recordkeeping

Shelters must have written intake and client record keeping procedures and files that include intake interviews and records of services provided.

Tracking Available Beds

HMIS has a new referral to shelter bed feature called the Bed and Unit Inventory. H4H Division staff are exploring the usage of this feature to facilitate CES referrals. Additional standard information will be included later, TBD.

Tracking Denials

All shelters must track all reasons for denials based on cause (this does not include denials because the shelter is at capacity) and report this information to the County's H4H Division.

Tracking Discharges

All shelters must track all reasons for involuntary discharge in HMIS or a comparable database for Domestic Violence providers.

Tracking Services Provided

All shelters must track supportive services provided and report this information in HMIS or a comparable database for Domestic Violence providers.

Staff Hiring and Supervision

The agency must have written job descriptions for all shelter positions.

Shelters must conduct criminal background checks on all staff members. Each agency shall have a policy regarding when a criminal conviction would disqualify an applicant from hiring that considers the responsibilities of the position to be filled, the population to be served (e.g., will the position be interacting with minors), the nature, severity and recentness of the crime, and evidence of rehabilitation.

Shelters must follow all local and state minimum and living wage ordinances.

Commented [ML19]: State and local wage ordinances

Board of Directors

The agency must have a volunteer Board of Directors that meets at least quarterly.

Fiscal System

The agency must have an accounting system that is maintained in accordance with Generally Accepted Accounting Principles (GAAP). The shelter shall have internal fiscal control procedures that are reviewed and approved by its Board of Directors.

Physical Building Standards

Commented [ML20]: ESG and state law

Basic Building Standards and Fire Safety

All facilities must comply with HUD Emergency Solution Grants Minimum Habitability Standards for Emergency Shelters¹¹ and local applicable building and fire codes. Evidence of compliance with local codes must be provided.

Facilities that do not have a fire alarm system designed for hearing-impaired guests may request funding from the County for this purpose that is separate from the shelter's regular operations allocation.

Facilities must have annual fire inspections conducted by the fire department and conduct regular fire drills.

Training must be provided to staff on fire safety.

Safety Standards Compliance

Shelters must comply with all state and local health, environmental and safety standards.

AB 362¹² mandates an investigation requirement when a complaint exists that a shelter is substandard as defined by California Health & Safety Code § 17920.3¹³.

The entity responsible for investigating the complaint depends on the jurisdiction where the shelter exists and the subject of the complaint.

Toilets/Showers

Shelters must provide sufficient toilets and wash basins with warm and cold running water. The guest to toilet ratio must be 1 toilet/15 guests (excluding infants) or 1:30 if over 100 guests.

Shelters must make a reasonable supply of showers available or provide referrals to community shower access. The guest to shower ratio must be 1 shower/20 guests (excluding infants).

Hygiene Products

Shelters must provide toilet tissue, soap, towels, and feminine hygiene products (if females served).

Beds/linens

Shelters must provide a bed, crib or cot, clean mattress and pillow, linens, and towels. For shelters using tents, sleeping bags and mats must be provided.

¹¹ <https://www.hudexchange.info/resource/3766/esg-minimum-habitability-standards-for-emergency-shelters-and-permanent-housing/>

¹²

<https://legiscan.com/CA/text/AB362/id/2435121#:~:text=This%20bill%20would%20require%20a%20city%20or%20county,substandard%20to%20inspect%20the%20homeless%20shelter%2C%20as%20specified.>

¹³ <https://casetext.com/statute/california-codes/california-health-and-safety-code/division-13-housing/part-15-regulation-of-buildings-used-for-human-habitation/chapter-2-rules-and-regulations/section-179203-substandard-building>

Linens and sleeping bags must be laundered regularly and/or when soiled. These items can be laundered by shelter staff, or a shelter may require guests to launder their own linens/sleeping bags if facilities are available. Newly laundered linens/sleeping bags must be provided to each new guest upon entry.

Electrical Outlet Access

Shelters must provide access to electrical outlets for charging cell phones and medical equipment.

Phone Access

A telephone must be available to staff for emergencies. Emergency numbers should be posted by the telephone or otherwise made available to on duty staff. Shelters must take emergency phone messages and messages from service providers for guests in residence. If the shelter has periods where no staff are on duty, there must be a phone available to guests for emergencies with information posted nearby with emergency numbers.

Pest Control

Shelters must ensure adequate provision of pest control services. Shelters must have a protocol in place for the prevention and control of bed bugs. (See <https://www.cdc.gov/parasites/bedbugs/> for best practices related to bed-bug prevention).

24-hour notice must be provided to guests of pest control activities unless the type and degree of infestation requires an immediate response (e.g., bed bugs).

Maintenance/Repair

Facilities must be maintained in good repair. The general appearance of the building must be well maintained. There must be a written housekeeping and maintenance plan. Shelters must post the process for reporting maintenance concerns, acknowledge issues reported within two days, and identify the timeframe for addressing the concern. Emergency maintenance items must be immediately addressed.

Cleanliness

Bath/toilet areas, hallways, and other common use areas must be cleaned daily. Shelters must have proper trash receptacles that are emptied regularly. Both the interior and exterior of the facility must be free of debris, clutter, and unsanitary items and there must be no obvious safety risks.

Hazardous Materials

Shelters must label all chemicals and cleaning supplies and keep all such materials out of reach of children. Any hazardous materials must be stored separate from food.

Building Entrances/Exits

Exits must be clearly marked and must be kept clear of blockage and tripping hazards. All steps must have handrails as required by applicable codes. Steps must have treads or similar accommodation to prevent slipping. Exit signage must be consistent with all applicable codes.

Agency Vehicle

If a shelter maintains a vehicle used for guest transport, the vehicle must be properly maintained, licensed, and insured. All drivers must be properly licensed. Car seats must be used by children. Provisions must be made to provide equal access to transportation services to disabled guests.

Health Standards

COVID-19

See Congregate Shelter COVID-19 Policies and Recommendations for standards guidance and required public health protocol related to COVID-19.

Infectious Disease

All shelters must have policies for responding to infectious disease including tuberculosis (TB) and lice/scabies along with staff trained in infectious disease response in place. See [Disease Reporting Information \(santacruzhealth.org\)](https://www.santacruzhealth.org) for a full listing of reportable diseases. These policies must include protocols for:

- Making referrals to health care providers when a guest shows symptoms of TB, lice, or scabies.
- Notifying guests when there is a possibility that they were exposed to a communicable disease that is spread through casual contact.
- Policies on participant confidentiality related to communicable diseases.
- Protocols for responding to any identified communicable disease, including consultation with a medical professional when determining if a guest is infected with a contagious communicable disease that might seriously endanger the health of other guests.

A TB test may not be required as a condition of entry.

An infectious disease that significantly increases the risk or harm to other guests may be a reason for denial or discharge. Noncompliance with treatment or containment measures that endangers other guests may be cause for discharge.

Shelters must comply with California Code of Regulations, Title 8, Section 5199, regarding Aerosol Transmissible Diseases (ATD) control and worker and client safety expectations¹⁴For additional guidance on this regulation, please also refer to “Preventing Tuberculosis (TB) in Homeless Shelters” published by the Los Angeles County Department of Public Health and Santa Cruz County Tuberculosis Program Services¹⁵

Higher Level of Care

Individual requiring care and supervision to manage their activities of daily living (feeding, toileting, selecting proper attire, grooming, maintaining continence, putting on clothes, bathing, walking, and transferring) must be connected to appropriate supports. See [Discharge](#) standards for additional information.

¹⁴ <http://www.dir.ca.gov/title8/5199.HTML>

¹⁵ <https://www.santacruzhealth.org/HSAHome/HSA/Divisions/PublicHealth/CommunicableDiseaseControl/TuberculosisProgramServices.aspx>

Family Shelter Standards

Family Definition

A family is defined as a household that includes one or more minor children (17 or under) in the legal custody of one or more adults who, prior to losing housing, were living together, and working cooperatively to care for the children. This includes 2-parent and 1-parent families, including those with same-sex partners, families with intergenerational and/or extended family members, unmarried couples with children, families that contain adults who are not the biological parents of the children and other family configurations.

Child Supervision

Children must be always supervised by parents, staff or volunteers following established staff to child ratios.

Child Safety Proofing

The shelter facility must be child safety proofed including:

- Childproof electrical outlets.
- Floors above ground have precautions in place to prevent children from falling out of windows (see [National Safety Council](https://www.nsc.org/community-safety/safety-topics/child-safety/window-safety?)'s website¹⁶ for window safety tips)
- Doors open from inside without a key.
- There are precautions in place to protect children from burns (from stoves or other heating units).
- There are precautions in place to protect children from injury from fans.

Inspections

Annual safety inspections must be performed by agency staff to ensure child safety.

Facilities

Adequate space must be provided for bathing and changing young children and feeding children. Private space should be offered for breastfeeding.

Diaper Changing Space

Shelters that house infants must provide an appropriate, sanitary place for use by parents to change diapers.

Play Space

Play space for infants, toddlers, and preschoolers should be provided as feasible within the confines of the physical space available in the shelter.

Collaboration with Early Childhood Programs

Shelters must have procedures in place for collaboration with local early care and education programs (e.g., Head Start, Early Head Start, childcare subsidy programs).

¹⁶ <https://www.nsc.org/community-safety/safety-topics/child-safety/window-safety?>

Collaboration with Schools

Shelters that serve families must have procedures in place for collaborating with local K-12 education support programs and the schools. Heads of households must be advised of their rights as they relate to the public education system. Shelter policies and practices must be consistent with laws related to providing education services to individuals and families.

Shelters must have a designated staff person responsible for ensuring that children are enrolled in school and receive educational services, as appropriate. The staff person may be either an operations or a support services staff person.

Resource Referrals

Shelters must post information about and support access to Head Start, childcare, preschool, etc. and support connections to mainstream benefits.

Home Visits

Shelters must provide space for home visits to occur either on-site or at another location.

Toys

Shelters must maintain developmentally appropriate toys and books that are clean and in good repair.

Food Storage and Preparation

Shelters must provide refrigeration and cooking equipment to prepare and store formula, baby food and milk.

Furniture/Cribs

Shelters must provide age-appropriate cribs/beds.

Document Properties

Document Name	Emergency Shelter Standards
Publication Date	Dec. 13, 2023
Questions/Comments:	Monica Lippi, Housing for Health Manager, Human Services Dept.

Commented [ML21]: Local regs

APPENDIX: Applicable Local, State and Federal Laws

Local

- Santa Cruz County, CA, Smoking Pollution Control Ordinance, Ord. 4322 § 2 (1994)
- Santa Cruz County, CA, Food Facilities, Ord. 5439 § 7.04 (2023)
- Santa Cruz County, CA, Living Wage Ordinance, Ord. 5439 § 2.122 (2023)

State

- California Retail Food Code: California Health and Safety Code, Div. 104, Part 7 § 113700
- Regulation of Buildings Used for Human Habitation: California Health & Safety Code, Div. 13, Part 1.4, Chapter 2 § 17920.3 and Div. 13, Part 1.5, Chapter 5 § 50800
- Emergency Shelter Definition: California Health and Safety Code, Sub Div. E, § 50801
- Housing First: Welfare and Institutions Code (WIC) § 8275(b)
- ATD Control and Worker Safety: California Code of Regulations, Title 8, § 5199
- California Government Codes § 65582 and § 65660
- Minimum Wage Requirements: California Labor Code § 1197

Federal

- Emergency Solutions Grant Minimum Habitability Standards for Emergency Shelters and Permanent Housing: ESG Program Interim Rule, 24 CFR 576.403
- Titles II and III of the Americans with Disabilities Act (ADA)
- HUD Equal Access Rule: 24 CFR 5.105(a)(2); 24 10 CFR parts 574 and 576; 77 FR 5662
- McKinney-Vento Homeless Assistance Act: Title IX, Part A
- Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act
- Language Accessibility: Title VI of the Civil Rights Act of 1964

Information Items 3-7

Item 3: 2024 Point-in-Time (PIT) Count Volunteer Recruitment

The 2024, HUD required, Point-in-Time (PIT) count of persons experiencing homelessness is scheduled to take place in the early morning of January 25, 2024. More information about the count can be found here: [Point-in-Time \(PIT\) Counts \(housingforhealthpartnership.org\)](https://housingforhealthpartnership.org). We typically need to have 150 volunteers sign-up for the count to ensure we have enough volunteer coverage on the day of the count. Please consider volunteering or encourage others to volunteer. Volunteer teams of three are encouraged to register together as a team with a designated team leader. Volunteer registration is available online at the link provided above.

Item 4: Miracle Messages – Volunteer and Participant Recruitment

The 1440 Foundation with support from the Housing for Health Partnership, Housing Matters, and Community Action Board hosted a dinner and educational event on the 1440 Multiversity campus on November 29th. The event helped raise funds for Housing Matters, the Community Action Board, and Miracle Messages. The event also helped formally launch a one-year 1440 Foundation funded pilot program to incorporate the work of [Miracle Messages](#) into Santa Cruz County. Miracle Messages needs assistance from Policy Board and CoC members to help recruit volunteers and participants for their Reunion Services and Miracle Friends programs. Flyers with more information about these programs are included in the Board packet. Staff from Miracle Messages will attend the Board meeting to provide a brief presentation and answer questions about these new efforts in Santa Cruz County.

Item 5: Lived Expertise Action Boards – Recruitment of Participants

The Housing for Health Division launched recruitment efforts for two Lived Expertise Action Boards, one specifically for youth. Housing for Health staff are seeking help with identifying individuals interested in participated in these groups through nominations or self-interest forms. Interest and nomination forms can be found here - [Lived-Expertise Action Board \(housingforhealthpartnership.org\)](https://housingforhealthpartnership.org). Forms can be completed online or printed out and submitted via email or mail. The application period is open through January 19, 2024. Individuals participating in these groups will have opportunities to become active participants in the Policy Board and Operations Committee and some will have formal roles with these groups. Selected participants will receive compensation of \$25/hour for a 20 hour monthly commitment as well as training and educational opportunities.

Item 6: 25th Santa Cruz County Annual Homeless Memorial

Members of the public are invited to the 25th Annual Homeless Memorial Service, to be held on Tuesday, December 21st from 10am – 11:30 am at the Santa Cruz Civic Auditorium at 307 Church St. in downtown Santa Cruz. Attendance is free.

Held in conjunction with the National Homeless Persons Memorial Day each year, the event will honor homeless community members who passed away in 2023. The event is presented by Santa Cruz County Homeless Persons Health Project, Housing Matters, and Wings, a local non-profit agency.

Through November, 105 persons experiencing homelessness died on the streets of Santa Cruz County, nearly one every three days. While the figure is likely to increase by the new year, it is already the highest number of recorded deaths in any given year.

People experiencing homelessness have much shorter life expectancies than those with housing. A [recent study](#) by the National Bureau of Economic Research showed non-elderly homeless persons are 3.5 times more likely to die as their housed counterparts, and are more likely to experience violence and illness.

Item 7: 2024 Housing for Health Partnership Policy Board Meeting Schedule

The 2024 Housing for Health Partnership Policy Board meeting calendar is listed below. All meetings will be held at the Capitola Library – 2005 Wharf Road, Capitola, 95010, Ow Family Community Room. All meetings start at 3 pm and will not last more than 3 hours.

- Wednesday, January 17, 2024; New Board Member Orientation
- Wednesday, February 21, 2024
- Wednesday, April 17, 2024
- Wednesday, June 19, 2024
- Wednesday, August 21, 2024
- Wednesday, October 16, 2024
- Wednesday, December 18, 2024

You are not alone.

**Want to reconnect with a loved one?
Or make a new friend?**

1-800-MISS-YOU

Call us, or visit 1800missyou.org

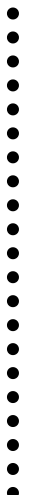


We are nonprofit that helps people experiencing
homelessness rebuild their social support systems.

You are not alone.



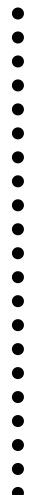
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**WANT TO
RECONNECT WITH
A LOVED ONE?**

**OR
MAKE A NEW
FRIEND?**

REUNION SERVICES

Take the first step to
reconnect with a loved one!

Our digital detectives will
help you find them and
deliver a personal message.

MIRACLE FRIENDS

Match with a phone buddy
for weekly calls & texts!

Share stories & laughs with a
caring friend, through good
times & bad.

CALL OUR HOTLINE

1-800-MISS-YOU

We believe everyone is
someone's somebody, and
everyone needs a friend.



**Miracle
Messages**

www.MiracleMessages.org

Reconnect With Your Loved Ones, or Make a New Friend!

REUNION SERVICES

- Reconnect with a family member or friend
- Our digital detectives will help you deliver a message & reconnect!



MIRACLE FRIENDS PHONE BUDDIES

- Make a new friend!
- Form a fun & supportive friendship thru weekly phone calls & texts



Sign Up Online at www.1800MissYou.org
Or call 1-800-MISS-YOU

¡Reconectarte con tus seres queridos, o haz un nuevo amigo!

SERVICIOS DE REUNION

- Reconectate con un ser querido
- ¡Nuestros detectives digitales lo ayudarán a entregar un mensaje y reconectarse!



AMIGOS MILAGROSOS TELEFÓNICOS

- ¡Haz un nuevo amigo!
- Forme una amistad divertida y solidaria a través de llamadas y textos semanales



Regístrese en línea en www.1800MissYou.org
O llame al 1-800-MISS-YOU

Become a Miracle Friend TODAY!

Everyone needs a friend.

Miracle Friends is a phone-based buddy system matching volunteers with individuals experiencing homelessness for weekly 1:1 phone calls and texts.

We are on a mission to end relational poverty on the streets, and in the process, inspire people to embrace their unhoused neighbors not as problems to be solved, but as people to be loved.

The role of the volunteer is to offer general companionship and support, not to be a caseworker.



**Miracle Friends
is 100% virtual
and remote!**

Volunteers can be based anywhere in the world, and are offered a phone number via Dialpad or Google Voice, if requested. Each volunteer is supported by a mentor.



Sign up takes seconds to complete.
Visit www.MiracleFriends.org



Report/Discussion Item 8: Regionally Coordinated Homelessness Action Plan & Housing for a Healthy Santa Cruz Framework Update

Background

California law requires local governments and tribes to develop “Regionally Coordinated Homelessness Action Plans” to secure Homeless Housing Assistance and Prevention Round 5 funding (HHAP-5). The Action Plans must be prepared and submitted with HHAP-5 applications to the state on or before March 27, 2024. Funding applications *must* include a Memorandum of Understanding (MOU) between the jurisdictions eligible to receive HHAP-5 funding that outlines the roles and responsibilities of the parties to the agreement. In the case of Santa Cruz County, only the County and CoC will receive allocations. Other city jurisdictions within the County *may* be included in the MOU but are not required to be included.

HHAP-5 allocation amounts will be announced by the end of January 2024 and are expected to be less than 2024 allocations - \$3,056,022.29 for the CoC and \$2,867,209.63 for the County – due to declines in our County’s 2023 PIT Count.

The Housing for a Healthy Santa Cruz Framework is a three-year framework that guided the formation and work of the Housing for Health Division between January 2021 and December 2023. Housing for Health Division staff plan to update the Framework to incorporate goals and action steps included in the HHAP-5 Regional Homeless Action Plan.

HHAP-5 requires at least three public meetings to gather community input on the proposed plan. Housing for Health staff have secured rooms for at least three public meetings geographically distributed throughout the County between January 23, 2024, and February 7, 2024.

Housing for Health staff propose the following general approach and timeline for creating the HHAP-5 required plan, MOU, and the updated Framework:

- Staff will solicit public input on the regional plan from key community partners through focus groups, meetings, and focused conversations with key partner organizations;
- Staff will develop a DRAFT version of the HHAP-5 regional plan using a state-provided template and post the DRAFT document on its website for public review and comment by mid-January 2024;
- The DRAFT plan will be used to structure and collect feedback at three public forums in late January and early February;
- Information gathered during the forums will be used to update the proposed plan, Framework, and MOU for CoC Policy Board review, comment, and approval at its February 21, 2024 meeting. A special meeting of the Board will be called if necessary to complete the review and approval process before the end of February.
- Following CoC Policy Board approval the plan, Framework, and MOU will be presented to the Board of Supervisors for review and approval at its March 19, 2024, meeting.

- H4H staff will submit the completed HHAP-5 application with Plan and executed MOU prior to the application deadline of March 27, 2024.

A copy of the state-provided HHAP-5 Action Plan template and Santa Cruz County baseline data to be used in developing the plan are included as information with the Policy Board packet.

Discussion Questions

- 1) What clarifying questions do Board members have about the Plan requirements and proposed process?
- 2) H4H staff recommend NOT including local cities in the *required MOU process* for the HHAP-5 application given the tight timeline. However, staff do recommend working toward the development of a CoC-County-City MOU that outlines general roles and responsibilities of the entities and ongoing financial contributions toward emergency shelter operations. Do Board members have questions or concerns about this staff recommendation?
- 3) The HHAP-5 plan requires the development of Key Actions to address Racial and Gender Disparities related to housing instability, homelessness, and access to housing-related services and programs. Are there specific current or proposed new actions that Board members would like to ensure get incorporated into the plan?
- 4) What role(s) would Board members like to play in the proposed steps in the development of the HHAP-5 plan and updates to the Framework?



California Interagency Council on Homelessness

In partnership with the Department of Housing and Community Development



REGIONALLY COORDINATED HOMELESSNESS ACTION PLAN AND APPLICATION TEMPLATE

HOMELESS HOUSING, ASSISTANCE AND PREVENTION PROGRAM
ROUND 5 (HHAP-5)

Purpose of this Template

The California Interagency Council on Homelessness (Cal ICH) in partnership with the Department of Housing and Community Development (HCD) is providing this optional application template, inclusive of the Regionally Coordinated Homelessness Action Plan, for use by jurisdictions seeking funding under Round 5 of the Homeless Housing, Assistance and Prevention Program (HHAP-5).

This template closely mirrors the online application portal and is intended to support the regional development and submission of information required for approval by Cal ICH as required in AB 129 (Health & Safety Code § 50230, et seq.).

This template will not be collected by Cal ICH nor reviewed in lieu of an official application submission. Applicants are responsible for inputting the required information into the [online application portal](#) and submitting the official application through the portal no later than 5:00 p.m. on March 27, 2024.

- **PART I: REGIONAL IDENTIFICATION AND CONTRACTING INFORMATION**

- **PART II: REGIONALLY COORDINATED HOMELESSNESS ACTION PLAN**

- 2.1: Participating Jurisdictions' Roles and Responsibilities
- 2.2 Performance Measures and Improvement Plan
- 2.3 Equity Improvement Plan
- 2.4 Plan to Reduce the Number of People Experiencing Homelessness Upon Exiting an Institutional Setting
- 2.5 Plan to Utilize Local, State, and Federal Funds to End Homelessness
- 2.6 Plan to Connect People Experiencing Homelessness to All Eligible Benefit Programs
- 2.7 Memorandum of Understanding
- 2.8 Application Development Process Certification

- **PART III: FUNDING PLAN(S)**

Part I: Regional Identification and Contracting Information

1. Select the CoC Region.
2. Indicate which of the eligible applicants are participating in this HHAP-5 application.

Guidance

*All overlapping jurisdictions within a region must complete a Regionally Coordinated Homelessness Action Plan and submit a single regional HHAP-5 application. For purposes of HHAP-5, the term “region” refers to the geographic area served by a **county**, including all large cities and the CoC or CoCs within it. When multiple counties are served by the same CoC, those counties may choose to apply together or as separate county regions; however, multi-county regions that are served by the same CoC are encouraged to apply as one region and submit a single Regionally Coordinated Homelessness Action Plan.*

Applicants may apply together and still receive and administer funds separately.

- **Large Cities must** apply as part of the regional application with the County and CoC.
- **Counties must** apply as part of a regional application with the CoC and any overlapping Large Cities.
 - In a multi-county CoC: Counties are strongly encouraged to apply in collaboration with other counties that are served by the same CoC.
- **A CoC that serves a single county must** apply as part of the regional application with the County and any overlapping Large Cities.
- **A CoC that serves multiple counties must either:**
 - Apply as part of the regional application with multiple Counties and any overlapping Large Cities; and/or
 - Participate in the regional application of **each** overlapping County and the Large Cities therein.

3. Indicate the Administrative Entity and provide contact information for each Eligible Applicant.

Guidance

Each eligible applicant (Large City, County, and CoC) has the discretion to receive their base allocation directly or may designate an eligible applicant in their region to serve as their Administrative Entity. This selection will indicate to Cal ICH which eligible applicant will enter into contract with the state to receive and administer each eligible applicant’s HHAP-5 allocation.

The Administrative Entity is responsible for HHAP funds and meeting the terms and conditions of the contract. Broadly speaking, this means administering funds, contracting (when necessary) with sub-recipients, and reporting on HHAP-5 dollars and activities to Cal ICH.

- If you plan to contract with the state to receive and administer **only** your (single) HHAP-5 allocation, select: “Will enter into contract with the state to receive and administer their HHAP-5 allocation individually” under the contracting selection in the application.
- If you **do not plan to contract with the state** and instead plan to identify another participating eligible applicant in the region to enter into contract with the state to receive and administer your HHAP-5 allocation, select: “Identify another participating eligible applicant in their region to enter into contract with the state to receive and administer their HHAP-5 allocation” under the contracting selection in the application. You will then be prompted to designate the Administrative Entity from a list of eligible applicants in the region.
- If you plan to contract with the state to **receive and administer multiple HHAP-5 allocations** within your region, select “Will enter into contract with the state to receive and administer their HHAP-5 allocation and allocation(s) from other eligible applicants in the region” under the contracting selection in the application.

Administrative Entity Information

Participating Eligible Applicant	1. Administering only your own HHAP-5 allocation 2. Administering multiple allocations or 3. Designating a different eligible applicant as your Administrative Entity	If designating, identify the Administrative Entity that will be administering your HHAP-5 Allocation

Contact Information for each Eligible Applicant

Participating Eligible Applicant	Name	Title	Email	Phone Number

Part II: Regionally Coordinated Homelessness Action Plan

2.1 Participating Jurisdictions' Roles and Responsibilities

1. **First** identify and describe the specific roles and responsibilities of **each participating Eligible Applicant** in the region regarding:
 - a. Outreach and site coordination;
 - b. Siting and use of available land;
 - c. Development of interim and permanent housing options; and
 - d. Coordination and connection to the delivery of services for individuals experiencing or at risk of experiencing homelessness within the region.
2. **Then** describe and explain how all collaborating Eligible Applicants in the region are coordinating in each area.

Optional: You may also include roles and responsibilities of small jurisdictions in the region that elect to engage and collaborate on the plan.

Guidance

Each jurisdiction must identify and describe their role in the region for each table.

To add additional Jurisdictions, add rows to the bottom of each table.

Outreach and Site Coordination

Participating Jurisdictions	Role(s) and Responsibilities in Outreach and Site Coordination

Given the individual roles and responsibilities identified above, describe and explain how all participating jurisdictions are or will begin to coordinate these efforts to ensure comprehensive outreach and site coordination to individuals experiencing and at-risk of experiencing homelessness in the region.

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Land Use and Development

Participating Jurisdictions	Role(s) and Responsibilities in land use and development

Given the individual roles and responsibilities identified above, describe and explain how all participating jurisdictions are or will begin to coordinate these efforts to use and develop available land to address and end homelessness in the region.

Development of Interim and Permanent Housing Options

Participating Jurisdictions	Role(s) and Responsibilities in development of interim and permanent housing options

Given the individual roles and responsibilities identified above, describe and explain how all participating jurisdictions are or will begin to coordinate these efforts to develop adequate interim and permanent housing options to address and end homelessness in the region.

Coordination of and Connection to Service Delivery

Participating Jurisdictions	Role(s) and Responsibilities in connection to service Delivery

Given the individual roles and responsibilities identified above, describe how all participating jurisdictions are or will begin to coordinate to provide the full array of services, including interim and permanent housing solutions to people experiencing and at-risk of experiencing homelessness in the region.

2.2 System Performance Measures and Improvement Plan

1. **First** identify the most recent system performance measures for the region.
2. **Then** describe the key action(s) the region intends to take to improve each system performance measure.

Guidance

Cal ICH shall provide each region with system performance measures by CoC, with the exception of the LA region, which will receive data from all four CoCs within LA County. Applicants must enter that data in the corresponding metrics fields in the application. Applicants should not adjust the data provided even if the geographic region of the data does not perfectly align with the participating applicant geography of this application.

*Regions must have **at least one** key action for **each** system performance measure. All columns must be filled out for each action.*

For “Funding Type” enter Federal, State, Local, or the unique funding source type.

To add additional actions or racial equity measures, add rows to the bottom of each table.

Note: While Cal ICH expects most of the disparities listed to be based on race or ethnicity, applicants may identify other populations that are also overrepresented among people experiencing homelessness in the region.

Definitions:

- **Key Action(s)** may include a brief description of a strategic initiative or step identified to address or improve the specific system performance measure. This can be a policy, program, partnership, target metric, or any other approach which reflects an improvement and delivers positive impact. Provide a clear description of the action and its intended outcome.
- **Lead Entity** should include the name of the regional Eligible Applicant responsible for managing the key action.
- **Collaborating Entity/ies** may include a group, organization, or jurisdiction within your region working to address or improve the system performance measure. This can be another participating jurisdiction, a system partner, or any organization actively participating in the key action.
- **Timeframe** should include a target date for completion of the key action.
- **Success Measurement Method** may include a systematic approach or tool used to assess the effectiveness and impact of the key action on the performance measure. This can be quantitative measures, qualitative feedback, or any combination that provides insight into the progress and outcomes pertaining to the key action. Provide a clear description of how you plan to track and report on the success of your key action.

SPM 1a: Number of people accessing services who are experiencing homelessness.

Measure

Key Action(s) for Improving SPM 1a

Key Action(s)	Funding Source(s) the region intends to use to achieve the action	Funding Type (Federal/ State/ Local gov/Other)	Lead Entity	Collaborating Entity/ies	Timeframe for Action	Method(s) of Measuring success of the Action

SPM 7.1a: Racial and ethnic disparities among those accessing services who are experiencing homelessness.

Racial or Ethnic Group	Measure

Key Action(s) for Improving SPM 7.1a

Key Action(s)	Funding Source(s) the region intends to use to achieve the action	Funding Type (Federal/ State/ Local gov/Other)	Lead Entity	Collaborating Entity/ies	Timeframe for Action	Method(s) of Measuring success of the Action

SPM 1b: Number of people experiencing unsheltered homelessness on a single night (unsheltered PIT count)

Measure

Key Action(s) for Improving SPM 1b

Key Action(s)	Funding Source(s) the region intends to use to achieve the action	Funding Type (Federal/ State/ Local gov/Other)	Lead Entity	Collaborating Entity/ies	Timeframe for Action	Method(s) of Measuring success of the Action

SPM 7.1b: *Racial and ethnic disparities among those experiencing unsheltered homelessness on a single night.*

Racial or Ethnic Group	Measure

Key Action(s) for Improving SPM 7.1b

Key Action(s)	Funding Source(s) the region intends to use to achieve the action	Funding Type (Federal/ State/ Local gov/Other)	Lead Entity	Collaborating Entity/ies	Timeframe for Action	Method(s) of Measuring success of the Action

SPM 2: *Number of people accessing services who are experiencing homelessness for the first time.*

Measure

Key Action(s) for Improving SPM 2

Key Action(s)	Funding Source(s) the region intends to use to achieve the action	Funding Type (Federal/ State/ Local gov/Other)	Lead Entity	Collaborating Entity/ies	Timeframe for Action	Method(s) of Measuring success of the Action

SPM 7.2: *Racial and ethnic disparities in the number of people accessing services who are experiencing homelessness for the first time.*

Racial or Ethnic Group	Measure

Key Action(s) for Improving SPM 7.2

Key Action(s)	Funding Source(s) the region intends to use to achieve the action	Funding Type (Federal/ State/ Local gov/Other)	Lead Entity	Collaborating Entity/ies	Timeframe for Action	Method(s) of Measuring success of the Action
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SPM 3: Number of people exiting homelessness into permanent housing.

Measure

Key Action(s) for Improving SPM 3

Key Action(s)	Funding Source(s) the region intends to use to achieve the action	Funding Type (Federal/ State/ Local gov/Other)	Lead Entity	Collaborating Entity/ies	Timeframe for Action	Method(s) of Measuring success of the Action

SPM 7.3: Racial and ethnic disparities in the number of people exiting homelessness into permanent housing.

Racial or Ethnic Group	Measure

Key Action(s) for Improving SPM 7.3

Key Action(s)	Funding Source(s) the region intends to use to achieve the action	Funding Type (Federal/ State/ Local gov/Other)	Lead Entity	Collaborating Entity/ies	Timeframe for Action	Method(s) of Measuring success of the Action

SPM 4: Average length of time that people experienced homelessness while accessing services.

Measure

Key Action(s) for Improving SPM 4

Key Action(s)	Funding Source(s) the region intends to use to achieve the action	Funding Type (Federal/ State/ Local gov/Other)	Lead Entity	Collaborating Entity/ies	Timeframe for Action	Method(s) of Measuring success of the Action

SPM 7.4: *Racial and ethnic disparities in the average length of time that people experienced homelessness while accessing services.*

Racial or Ethnic Group	Measure

Key Action(s) for Improving SPM 7.4

Key Action(s)	Funding Source(s) the region intends to use to achieve the action	Funding Type (Federal/ State/ Local gov/Other)	Lead Entity	Collaborating Entity/ies	Timeframe for Action	Method(s) of Measuring success of the Action

SPM 5: *Percent of people who return to homelessness within 6 months of exiting the homelessness response system to permanent housing.*

Measure

Key Action(s) for Improving SPM 5

Key Action(s)	Funding Source(s) the region intends to use to achieve the action	Funding Type (Federal/ State/ Local gov/Other)	Lead Entity	Collaborating Entity/ies	Timeframe for Action	Method(s) of Measuring success of the Action

SPM 7.5: Racial and ethnic disparities in the percent of people who return to homelessness within 6 months of exiting the homelessness response system to permanent housing.

Racial or Ethnic Group	Measure

Key Action(s) for Improving SPM 7.5

Key Action(s)	Funding Source(s) the region intends to use to achieve the action	Funding Type (Federal/ State/ Local gov/Other)	Lead Entity	Collaborating Entity/ies	Timeframe for Action	Method(s) of Measuring success of the Action

SPM 6: Number of people with successful placements from street outreach projects.

Measure

Key Action(s) for Improving SPM 6

Key Action(s)	Funding Source(s) the region intends to use to achieve the action	Funding Type (Federal/ State/ Local gov/Other)	Lead Entity	Collaborating Entity/ies	Timeframe for Action	Method(s) of Measuring success of the Action

SPM 7.6: Racial and ethnic disparities in the number of people with successful placements from street outreach projects

Racial or Ethnic Group	Measure

Key Action(s) for Improving SPM 7.6

Key Action(s)	Funding Source(s) the region intends to use to achieve the action	Funding Type (Federal/ State/ Local gov/Other)	Lead Entity	Collaborating Entity/ies	Timeframe for Action	Method(s) of Measuring success of the Action

2.3 Equity Improvement Plan

1. Identify and describe the key action(s) the region will take to ensure racial and gender equity in 1) service delivery; 2) housing placements; and 3) housing retention; and 4) identify any changes to procurement or other means to affirm equitable access to housing and services for groups overrepresented among residents experiencing homelessness.
2. Identify if place-based encampment resolution is occurring in the region and if so, CoC must describe and provide evidence of collaboration with the cities or counties providing encampment resolution services that addresses how people served through encampment resolution have or will be prioritized for permanent housing within the Coordinated Entry System.
OPTIONAL: upload any evidence the region would like to provide regarding collaboration and/or prioritization as it relates to question 2.

Guidance

*Of the four tables below, the first three must include at a minimum one key action to address racial equity **and** one key action to address gender equity. The fourth and final table must include at least one key action.*

To add additional actions, add rows to the bottom of the table.

Definitions:

- **Key Action(s)** may include a brief description of a strategic initiative or step identified to address or improve the inequity. This can be a policy, program, partnership, target metric, or any other approach which reflects an improvement and delivers positive impact. Provide a clear description of the action and its intended outcome.
- **Lead Entity** should include the name of the regional Eligible Applicant responsible for managing the key action.
- **Collaborating Entity/ies** may include a group, organization, or jurisdiction within your region working to address or improve the inequity. This can be another participating jurisdiction, a system partner, or any organization actively participating in the key action.

Key Action(s) the Region Will Take to Ensure Racial and Gender Equity in Service Delivery

Key Action(s)	Lead Entity	Collaborating Entity/ies

Key Action(s) the Region Will Take to Ensure Racial and Gender Equity in Housing Placements

Key Action(s)	Lead Entity	Collaborating Entity/ies

Key Action(s) the Region Will Take to Ensure Racial and Gender Equity in Housing Retention

Key Action(s)	Lead Entity	Collaborating Entity/ies

Key Action(s) the Region Will Take to Change Procurement or Other Means to Affirm Equitable Access to Housing and Services for Overrepresented Groups Among People Experiencing Homelessness in the Region

Key Action(s)	Lead Entity	Collaborating Entity/ies

Coordinated Entry Prioritization for Place-Based Encampment Resolution

Guidance

Answer the following question(s)

In the online application portal applicants may upload any evidence the region would like to provide regarding collaboration and/or prioritization.

Is place-based encampment resolution occurring within the region?

Yes/No

If yes, then the CoC must describe and provide evidence of collaboration with the cities or counties providing encampment resolution services that addresses how people served through encampment resolution have or will be prioritized for permanent housing within the Coordinated Entry System.

2.4 Plan to Reduce the Number of People Experiencing Homelessness Upon Exiting an Institutional Setting

1. Identify and describe the Key Action(s) **each participating Eligible Applicant** will take to reduce the number of people falling into homelessness as they exit institutional settings including but not limited to jails, prisons, and hospitals.

Guidance

At a minimum, if an institutional setting is present in a jurisdiction, the jurisdiction must identify and describe their role.

To add additional actions, add rows to the bottom of the table.

Definitions:

- **Key Action(s)** may include a brief description of a strategic initiative or step identified to address or improve the specific performance metric. This can be a policy, program, partnership, target metric, or any other approach which reflects an improvement and delivers positive impact. Provide a clear description of the action and its intended outcome.
- **Lead Entity** should include the name of the regional Eligible Applicant responsible for managing the key action.
- **Collaborating Entity/ies** may include a group, organization, or jurisdiction within your region working to address or improve the performance metric. This can be another participating jurisdiction, a system partner, or any organization actively participating in the key action.

Key Action(s) to Reduce the Number of People Experiencing Homelessness Upon Exiting a Jail

Key Action(s)	Lead Entity	Collaborating Entity/ies

Key Action(s) to Reduce the Number of People Experiencing Homelessness Upon Exiting a Prison

Key Action(s)	Lead Entity	Collaborating Entity/ies

Key Action(s) to Reduce the Number of People Experiencing Homelessness Upon Exiting a Hospital

Key Action(s)	Lead Entity	Collaborating Entity/ies

Key Action(s) to Reduce the Number of People Experiencing Homelessness Upon Exiting Other Institutional Settings (such as foster care, behavioral health facilities, etc. as applicable in the region)

Institutional Setting	Key Action(s)	Lead Entity	Collaborating Entity/ies

2.5 Plan to Utilize Local, State, and Federal Funds to End Homelessness

1. The plan must include the total amount of available funding, the amount prioritized for permanent housing solutions, and an explanation of how each participating applicant is utilizing local, state, and federal funding programs to end homelessness.

These programs must include, but are not limited to:

- The Homekey Program,
- The No Place Like Home Program
- The Multifamily Housing Program
- The Housing for a Healthy California Program
- The Homeless Housing, Assistance, and Prevention Program
- Building Homes and Jobs Act
- The California Emergency Solutions Grants Program
- The National Housing Trust Fund established pursuant to the Housing and Economic Recovery Act of 2008
- HOME Investment Partnerships Act
- Parolee or probation programs that are intended to prevent homelessness upon release.

Guidance

*All of the above programs **must** be included and fully explained in the table. Where the region has multiple awards for the same program that are administered by different entities, those may be listed on separate lines. For example, in a region with one county and one CoC who receive their HHAP awards separately, each jurisdiction may enter their HHAP awards in separate lines.*

If one of the ten required programs is not present in a region, type N/A.

In addition to the listed programs, participating Eligible Applicants should add any other funds and programs that are being utilized to address and end homelessness in the region.

To add additional funding programs, add rows to the bottom of the table.

Definitions:

- **Local Fund Administrator:** The entity responsible for administering the given funding source.
- **Description of How Funds are/will be Utilized to End Homelessness in the Region:** Comprehensive summary of how the funding program will be utilized in the region. Applicants should highlight whether, how, and to what extent the funds are being used for permanent housing.
- **Funding Amount:** Amount of known, dollars secured or available to spend within the HHAP-5 grant timeframe (FY 23-24 through FY 27-28)
- **Timeframe of Use:** The date range the local fund administrator anticipates expending the identified program funds.

Funding Program	Local Fund Administrator	Description of How Funds are/will be Utilized to End Homelessness in the Region	Funding Amount	Amount Prioritized for Permanent Housing Solutions	Timeframe of Use
The Homekey program					
The No Place Like Home Program					
The Multifamily Housing Program					
The Housing for a Healthy California Program					
The Homeless Housing, Assistance, and Prevention Program					
The Building Homes and Jobs Act Funding					
The California Emergency Solutions Grants Program					
The National Housing Trust Fund established pursuant to the Housing and Economic Recovery Act of 2008					
HOME Investment Partnerships Act					
Parolee or probation programs that are intended to prevent homelessness upon release.					
[other]					

2.6 Plan to Connect People Experiencing Homelessness to All Eligible Benefit Programs

1. Explain how the region is connecting, or will connect, individuals to wrap-around services from all eligible federal, state, and local benefit programs, including, but not limited to, housing and homelessness services and supports that are integrated with the broader social services systems and supports. Benefit Programs include, but are not limited to:
 - CalWORKs
 - CalFresh
 - Supplemental Security Income/State Supplemental Program (SSI/SSP) and disability benefits advocacy
 - In-home supportive services
 - Adult protective services
 - Child welfare
 - Child care
 - Medi-Cal benefits through Managed Care Plans

Guidance

*All of the above benefit programs **must** be included and fully explained in the table. In addition to these benefit programs, participating jurisdictions should add other benefit programs that provide wrap-around services in the region.*

To add additional benefit programs, add rows to the bottom of the table.

Definitions:

- **Connection Strategy/ies** means methods and actions that support client access and/or enrollment in eligible benefit programs. This may be a method or action that supports connection between a benefit program and clients, between benefits programs, and/or between benefits programs and the homeless services system, so long as the method or action supports client access and/or enrollment in the eligible benefit program.
- **Lead Entity** should include the name of the regional Eligible Applicant responsible for managing the key action.
- **Collaborating Entity/ies** may include a group, organization, or jurisdiction within your region working to address or improve the metric. This can be

Benefit Programs

Benefit Program	Connection Strategy/ies	Lead Entity	Collaborating Entity/ies
CalWORKs			
CalFresh			
Supplemental Security Income/State Supplemental Program (SSI/SSP) and disability benefits advocacy			
In-home supportive services			
Adult protective services			
Child welfare			
Child care			

Medi-Cal benefits through Managed Care Plans			
[other]			
[other]			

2.7 Memorandum of Understanding

1. Upload the Region's Memorandum of Understanding (MOU).
 - a. Optional: upload any additional supporting documentation the region would like to provide.

Guidance

A Memorandum of Understanding (MOU) must be submitted along with the application. This MOU must reflect the actions in the Regionally Coordinated Homelessness Action Plan submitted under this application, be signed by each participating eligible applicant, and commit each signatory to participate in and comply with the Regionally Coordinated Homelessness Action Plan. Smaller cities that choose to participate in the Regionally Coordinated Homelessness Action Plan may also be signatories to this MOU.

2.8 Application Development Process Certification

1. Provide the dates of the three public meetings that were conducted with stakeholders before the Regionally Coordinated Homelessness Action Plan was completed.

Guidance

No less than three public meetings must be held for each Regionally Coordinated Homelessness Action Plan. Applicants should retain documentation of the meetings in alignment with Cal ICH's records retention requirement outlined in the NOFA. To add additional meetings, add rows to the bottom of the table.

Meeting	Date
1	
2	
3	

2. Describe how specific stakeholder groups were invited and encouraged to engage in the public stakeholder process.

Guidance

A description is required for each stakeholder group for each Regionally Coordinated Homelessness Action Plan. Applicants should retain documentation of these efforts in alignment with Cal ICH's records retention requirement outlined in the NOFA.

Stakeholders	Description of how Stakeholders were invited and encouraged to engage in the public stakeholder process
People with lived experience of homelessness	
Youth with lived experience of homelessness	
Persons of populations overrepresented in homelessness	
Local department leaders and staff of qualifying small jurisdictions, including child welfare, health care, behavioral health, justice, and education system leaders	
Homeless service and housing providers working in that region	
Each Medi-Cal Managed Care Plan contracted with the State Department of Health Care Services in the region	
Street medicine providers and other providers directly serving people experiencing homelessness or at risk of homelessness	

3. Certify under penalty of perjury that all participating eligible applicants met the statutory public meeting process requirements in developing the Regionally Coordinated Homelessness Action Plan.

Part III: Funding Plan

Each **Administrative Entity** is required to submit a funding plan as part of the HHAP-5 Application. The funding plan must account for 100 percent of the HHAP-5 Base allocation(s), 100 percent of the HHAP-5 Planning allocation(s), and 100 percent of the Initial Supplemental Funding allocation(s) which the Administrative Entity will be responsible for administering.

For both the HHAP-5 base allocation and the initial \$100 million supplemental funding, individual allocations for each eligible applicant will be based on their proportionate share of the state's homeless population as reported by HUD in the 2023 PIT count. Allocation amounts will be calculated and released to all applicants once HUD publishes their 2023 Annual Homeless Assessment Report (AHAR).

Cal ICH currently anticipates providing eligible applicants with their calculated allocations by the end of January 2024. This will give applicants at least two months to finalize their HHAP-5 budgets before applications are due at the end of March. Until HHAP-5 final allocations are released, applicants should use their HHAP-4 base allocation as an approximation of their HHAP-5 allocation amount, for planning purposes.

1. Complete a Funding Plan for each Administrative Entity participating in this application.
 - a. Identify all Eligible Use Categories the Administrative Entity anticipates using.
 - b. Provide the **dollar amount** budgeted per eligible use category. Again, this must account for 100 percent of the HHAP-5 Allocation(s) the Administrative Entity will be responsible for administering.
 - c. Where applicable, provide the **dollar amount** that will be designated under the Youth Set-Aside from the selected eligible use categories. **Reminder: the youth set-aside must total at least 10% of all monies received.**
 - d. Provide a brief description of activities HHAP-5 funds will support in each selected eligible use category.
 - e. Provide an explanation of how the activities therein align with the state's HHAP-5 priorities to prioritize permanent housing solutions and sustain existing investments towards long-term sustainability of housing and supportive services.
2. Complete the New Interim Housing Certification
 - a. Indicate whether the budget proposes to support **ANY** new interim housing solutions outside of the youth set-aside.
 - b. Indicate whether the budget proposes to support new interim housing solutions for youth in excess of 10% of the total HHAP-5 Dollars budgeted.
 - c. If the Administrative Entity answers "yes" to either of the above, they will be asked to demonstrate dedicated, sufficient resources from other funding sources for long-term permanent housing solutions. This entails summarizing total available dollars for preventing and ending homelessness in the region, including the percentage of these resources dedicated to permanent and interim housing solutions, providing the status of five policy actions for each eligible applicant in the region, and demonstrating the need for additional shelter.

Guidance

Each Administrative Entity must submit a **single** Funding Plan that accounts for the entire HHAP-5 Allocation(s) which the Administrative Entity will be responsible for administering. This includes:

- 100 percent of the HHAP-5 Base allocation(s);
- 100 percent of the HHAP-5 Planning allocation(s); and
- 100 percent of the Initial Supplemental Funding allocation(s).

The youth set-aside must total at least 10% of all monies received.

Administrative costs **may not exceed 7%** of all monies received.

Up to 1% of all monies received may be budgeted for costs related to the Homeless Management Information System (HMIS). Related costs include HMIS licenses, training, system operating costs, and costs associated with carrying out related activities. Upon agreement between Cal ICH, the grantee, and the Homeless Management Information System lead entity, the grantee shall transfer the authorized amount of funds directly to the HMIS lead entity.

Each funding plan must include:

- Identification of all Eligible Use Categories the Administrative Entity anticipates using
- **Dollar amount** budgeted per eligible use category. Again, this must account for 100 percent of the HHAP-5 Base allocation(s) and 100 percent of the Initial Supplemental Funding allocation(s) which the Administrative Entity will be responsible for administering.
 - If applicable, **dollar amount** from the selected eligible use category that will be designated under the Youth Set-Aside. **Reminder: the youth set-aside must total at least 10% of all monies received.**
 - Administrative costs **may not exceed 7%** of all monies received.
 - Applicants may budget **up to 1%** for costs related to the Homeless Management Information System (HMIS). Related costs include HMIS licenses, training, system operating costs, and costs associated with carrying out related activities. Upon agreement between Cal ICH, the grantee, and the Homeless Management Information System lead entity, the grantee shall transfer the authorized amount of funds directly to the HMIS lead entity.
- A brief description of activities HHAP-5 funds will support in each selected eligible use category.
- An explanation of how the activities therein align with the state's HHAP-5 priority to sustain existing investments towards long-term sustainability of housing and supportive services and prioritize permanent housing solutions.
- Certification that the Administrative Entity does not intend to support new interim housing solutions using HHAP-5 funds.
 - If an Administrative Entity proposes to use HHAP-5 funds to support any new interim housing solutions outside of the youth set-aside and/or interim housing for youth in excess of 10% of the total HHAP-5 allocation, **the region** will be asked to demonstrate how it has dedicated sufficient resources from other funding sources to long-term permanent housing solutions and the need for new interim housing.
 - Reminder: per HSC section 50230(v) "region" means the geographic area served by a county, including all cities and CoCs within it. For the LA region, this means all eligible applicants within the County of LA.

To add another funding plan for an additional Administrative Entity, copy the entire funding plan section (including the "New Interim Housing Certification" and "Demonstrated Need" Subsections) and paste at the bottom of the template.

Funding Plan – [Administrative Entity Name:_____]

Eligible Use Category	Dollars Budgeted	If applicable, Dollars Budgeted for the Youth Set-Aside	Activities these funds will support	How are these activities aligned with the State's priorities?
Rapid Rehousing				
Prevention and Shelter Diversion				
Delivery of Permanent Housing and Innovative Housing Solutions				
Operating Subsidies - Permanent Housing				
Operating Subsidies - Interim Housing				
Improvements to Existing Interim Housing				
Interim Housing				
Street Outreach				
Services Coordination				
Systems Support				
Administrative Costs				
Additional 1% for HMIS				

New Interim Housing Certification

Does this budget propose to support any new interim housing solutions outside of the youth set-aside?

Yes/No

Does this budget propose to support new interim housing solutions for youth in excess of 10% of the total HHAP-5 Dollars budgeted?

Yes/No

If yes to **either** of the above questions, identify **the region and Eligible Applicants in the region**. Then, respond to all of the below prompts under Demonstration of Dedicated, Sufficient Resources for Permanent Housing. In reviewing whether a region has dedicated sufficient resources from other sources to long term permanent housing solutions, Cal ICH will evaluate financial

resources and policy actions related to reducing and ending homelessness, as well as demonstrated need for additional interim housing.

Demonstration of Dedicated, Sufficient Resources for Permanent Housing

Applicants must respond to this section **when** they have responded “Yes” to either of the questions under “New interim Housing Certification”. At a minimum, this section must reflect all eligible applicants in the region where the eligible applicant is proposing to fund new interim housing.

1. Identify Region and all eligible applicants in the Region.
2. Provide required metrics and narrative under “Status of Financial Resources”
3. Complete the 5 tables under “Status of Policy Actions
4. Provide required metrics and narrative under “Demonstrated Need”

Guidance

Per HSC section 50230(v) “region” means the geographic area served by a county, including all Cities and Continuums of Care within it. For the LA region this means all eligible applicants (Large Cities, CoCs, and the County) within the County of LA.

Region

Eligible Applicants in the Region

Status of Financial Resources

Provide the following financial resource metrics for the region.

Guidance

Per HSC section 50230(v) “region” means the geographic area served by a county, including all Cities and Continuums of Care within it. For the LA region this means all eligible applicants (Large Cities, CoCs, and the County) within the County of LA.

- *For Single County CoCs and the LA region: the application is already aligned with the “region” definition. Therefore, the first two metrics must exactly reflect the information in “[Plan to Utilize Local, State, and Federal Funds to End Homelessness](#)” above. In the Cognito Form, the first two metrics will automatically populate from the information provided. The applicant will need to provide the “Percent dedicated to interim housing solutions”.*

- For multi-county CoCs: because the participating eligible applicants may or may not exclusively align with the “region” definition, the applicant will need to assess and summarize the relevant information from the in “[Plan to Utilize Local, State, and Federal Funds to End Homelessness](#)” above. Here relevant information refers to the aggregate dollars available to the [Eligible Applicants](#) listed the tables directly above, in alignment with the “region” definition.

Total amount of funds the region is using from its available federal, state, and local dollars to prevent and end homelessness as described in the Action Plan Section: Utilization of Local, State and Federal Funds to End Homelessness

\$

Percent of the above that is dedicated to <u>permanent</u> housing solutions	Percent of the above that is dedicated to <u>interim</u> housing solutions
%	%

Describe the impact your proposed use(s) of HHAP-5 dollars would have on the above percentages.

Status of Policy Actions

Provide a status update for each Eligible Applicant in the region on the following policy actions related to reducing and ending homelessness.

Guidance
<p>Per HSC section 50230(v) “region” means the geographic area served by a county, including all Cities and Continuums of Care within it. For the LA region this means all eligible applicants (large cities, CoCs, and the county) within the County of LA.</p> <p>Each of the following tables must be fully filled out for every Eligible Applicant in the Region</p> <ul style="list-style-type: none"> The Italicized text in the table provides selections available

Housing Element

Eligible Applicant	Is this Eligible Applicant's Housing Element Compliant?	If <u>no</u> , provide a timeline of plans to submit revisions to HCD and request technical assistance to address remaining issues
	Yes/No	

Prohousing Designation

Eligible Applicant	Current Prohousing Designation Status	If the Eligible Applicant has not been designated <u>Prohousing</u> , identify Prohousing policies that this Eligible Applicant has adopted or plans to adopt in the future.
	<i>Has been designated Prohousing/ Has applied for Prohousing Designation/ Plans to apply for Prohousing Designation</i>	

USICH Seven Principles for Addressing Encampments

Eligible Applicant	Does the Eligible Applicant have a current practice or commitment to follow the Seven Principles?
	<i>Has a current practice of following the Seven Principles/ Has made an active commitment to follow the Seven Principles/ Neither of the above</i>

Housing Law Violations

Eligible Applicant	Does this Eligible Applicant have any outstanding housing law violations with HCD's housing accountability unit or the Attorney General's Office?	If the Eligible Applicant has an outstanding housing law violation, provide a plan to resolve issues or plans to request technical assistance to address remaining issues.
	Yes/No	

Surplus Land

Eligible Applicant	Does this Eligible Applicant have a current practice or commitment to identify local surplus land that could be encouraged for use as housing?
	1. <i>Has a current practice of identifying local surplus land for housing.</i> 2. <i>Has a current commitment to identifying local surplus land for housing.</i> 3. <i>Requests technical assistance from HCD's Surplus Land Unit to analyze local surplus land for potential use as housing.</i>

Demonstrated Need

Additionally, consistent with previous rounds of HHAP, interim housing is limited to clinically enhanced congregate shelters, new or existing non-congregate shelters, and operation costs of existing navigation centers and interim housing based on demonstrated need. Demonstrated need for purposes of this paragraph shall be based on the following for the region:

Number of shelter beds in the region	#
Number of people experiencing unsheltered homelessness (PIT)	#
Percentage of exits from emergency shelters to permanent housing solutions	%

A plan to connect residents to permanent housing.

NOTE: If there are multiple Administrative Entities applying as part of this regional application, copy and paste the above Funding Plan template here, one for each additional Administrative Entity.

CA SPM Data Report: Calendar Years 2020-2022						
CA-508 Watsonville/Santa Cruz City & County CoC						
Measure #1a: Reducing the number of persons experiencing homelessness.						
Number of people accessing services who are experiencing homelessness.						
Performance Data						
CY 2020	CY 2021	CY 2022	# Change from CY 2020	% Change from CY 2020	# Change from CY 2021	% Change from CY 2021
2,458	2,510	2,301	-157	-6%	-209	-8%
Measure #1b: Reducing the number of persons experiencing unsheltered homelessness on a daily basis.						
Estimated number of people experiencing unsheltered homelessness on the CoC's Point-in-Time Count (on a single day in the last week of January).						
Performance Data						
CY 2020	CY 2021	CY 2022	# Change from CY 2020	% Change from CY 2020	# Change from CY 2021	% Change from CY 2021
1,700	-	1,774	74	4%	n/a	n/a
Measure #2: Reducing the number of persons who become homeless for the first time.						
Number of people accessing services who are experiencing homelessness for the first time (defined as not accessing services while experiencing homelessness in the past two years).						
Performance Data						
CY 2020	CY 2021	CY 2022	# Change from CY 2020	% Change from CY 2020	# Change from CY 2021	% Change from CY 2021
1,272	1,138	1,088	-184	-14%	-50	-4%
Measure #3: Increasing the number of people exiting homelessness into permanent housing.						
Number of people exiting homelessness into permanent housing, including people who exited the homelessness response system to permanent housing and people who moved into permanent housing within the homelessness response system.*						
Performance Data						
CY 2020	CY 2021	CY 2022	# Change from CY 2020	% Change from CY 2020	# Change from CY 2021	% Change from CY 2021
754	823	662	-92	-12%	-161	-20%
Measure #4: Reducing the length of time persons remain homeless.						
Average length of time (in number of days) that people were enrolled in street outreach (SO) or other non-residential projects (while experiencing homelessness), emergency shelter (ES), transitional housing (TH), and safe haven (SH) projects, as well as time during which people were enrolled in, but had not yet moved into, rapid rehousing (RRH), permanent supportive housing (PSH), and other permanent housing (OPH) projects.						
Performance Data						
CY 2020	CY 2021	CY 2022	# Change from CY 2020	% Change from CY 2020	# Change from CY 2021	% Change from CY 2021
151	194	190	39	26%	-4	-2%
Measure #5: Reducing the number of persons who return to homelessness after exiting homelessness to permanent housing.						
Percent of people who return to homelessness within 6 months of exiting homelessness response system to permanent housing.						
Performance Data						
CY 2020	CY 2021	CY 2022	% Point Change from CY 2020	% Change from CY 2020	% Point Change from CY 2021	% Change from CY 2021
7%	7%	8%	0.63%	n/a	0.60%	n/a
Measure #6: Increasing successful placements from street outreach.						
The number of people with successful placements from street outreach projects, which includes exits to an emergency shelter (ES), safe haven (SH), transitional housing (TH), or permanent housing (PH) destinations.						
Performance Data						
CY 2020	CY 2021	CY 2022	# Change from CY 2020	% Change from CY 2020	# Change from CY 2021	% Change from CY 2021
0	0	0	0	n/a	0	n/a

-PIT data are not included in the CY21 report due to COVID-related inconsistencies.

*Measure 3 has been updated to include all exits to permanent housing, including system exits to permanent housing destinations and exits to permanent housing projects within the system. The detail tab includes a separate metric for system exits only.

CAL ICH HHAP-3 Outcome Goals

Calendar Year 2021

Status Report

CA-508 Watsonville/Santa Cruz City & County CoC

Supporting data to understand how people who are experiencing homelessness are accessing services within the CoC

January 1 through December 31, 2020 Report Period

Measures 1a and 2: Number of people accessing services, while experiencing homelessness, within 2020	January 1 through December 31, 2020 Report Period			
	Number of people experiencing homelessness who were active in a project at the start of the report period (continuously homeless)	Number of people entering the system who are experiencing homelessness for the first time (Measure 2)	Number of people returning to the system during the report period	Total number of people accessing services who are experiencing homelessness during the report period (Measure 1a)
Systemwide (all projects, all clients)	539	1,272	647	2,458
Enrolled in non-residential projects only, while homeless (e.g. street outreach, coordinated entry, SSO projects)	4	183	87	274
Enrolled in residential projects only, while homeless	451	869	395	1,715
Enrolled in residential and non-residential projects at some point in the reporting year	84	220	165	469
Number of people enrolled in this project type while experiencing homelessness:				
Enrolled in SO	7	53	28	88
Enrolled in CE	15	90	50	155
Enrolled in ES	350	956	501	1,807
Enrolled in SH	0	0	0	
Enrolled in TH	118	27	12	157
Enrolled in RRH	227	180	96	503
Enrolled in PSH	31	6	10	47
Enrolled in any other permanent housing	0	0	0	
Enrolled in Services, Day Shelter, or Other	73	287	197	557

Measure #1b: Reducing the number of persons experiencing unsheltered homelessness on a daily basis

Estimate of # of people experiencing unsheltered homelessness on the most recent PIT count

1700

Measure 3: The number of persons served within the homelessness response system who exited to permanent housing, in relation to all exits, listed separately based on the setting in which the person was last served**	January 1 through December 31, 2020 Report Period		
	System Exits to Permanent Housing (#)	All Exits (#)	System Exit Success Rate (%)
Unduplicated system exits (i.e. the last exit date within the report period for clients)	521	1,629	32%
System exit is from Emergency Shelter, Safe Haven, or Transitional Housing projects	294	989	30%
System exit is from Rapid Rehousing (RRH)	185	242	76%
System exit is from Permanent Supportive Housing (PSH) or other permanent housing (OPH) projects, with a Move-In Date	17	21	81%

CAL ICH HHAP-3 Outcome Goals

Calendar Year 2021

Status Report

System exit is from Permanent Supportive Housing (PSH) or other permanent housing (OPH) projects, without a Move-In Date	0	1	0%
System exit is from Street Outreach, Services Only, Day Shelter, Coordinated Entry, or "Other" project types*	25	376	7%
Number of people who are enrolled in permanent housing at the end of the report period	Moved into Housing (#)	All Active Clients (#)	Percent Moved into Housing (%)
People who are enrolled in RRH, PSH or OPH on the last day of the reporting period	235	375	63%
Number of people who are enrolled in permanent housing at the end of the report period, or who exited the homelessness response system	Total Exits to Permanent Housing (#)	All System Exits and Active Clients	Percentage of People Transitioning to Permanent Housing (%)
People who are enrolled in RRH, PSH or OPH at the end of the report period, or who exited the homelessness response system (unduplicated)	754	1,972	38%

*This calculation includes all "successful" exits, defined as exits to both permanent and transitional destinations when the client moved off the streets.

**People who are enrolled in permanent housing with a move-in date prior to the report period are excluded from this data because they did not experience homelessness during the report period.

Measure 4: Length of time people were known to be homeless, as documented within the CoC's HMIS	January 1 through December 31, 2020 Report Period	
	Average	Median
Cumulative system days homeless recorded in HMIS continuous with or during the report period	151	73
Days homeless in ES/SH continuous with or during the report period	125	77
Days homeless in TH continuous with or during the report period	422	370
Cumulative days homeless in sheltered situations (ES/SH/TH) continuous with or during the report period	155	89
Additional days homeless in SO/DS/CE continuous with or during the report period	12	16
Additional days homeless while enrolled in, but not moved into, RRH or PSH	165	77

Measure 5: Of those who exited from the system, the number who returned to the system within 6 months of their exit date	January 1 through December 31, 2020 Report Period			
	Destination Type	Number of people with a system exit during the report period	Number of people who returned within 6 months of their exit date	Return Rate (%) within 6 months of prior exit date
System exit from any project type (based on the earliest exit date within the exit cohort period)	All Exits	1,629	394	24%
	To Perm	520	36	7%
	To Temp	545	195	36%
	To Unk	564	163	29%

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Status Report

System exit is from Emergency Shelter, Safe Haven, or Transitional Housing projects	To Perm	303	28	9%
	To Temp	470	167	36%
	To Unk	231	74	32%
System exit is from Rapid Rehousing	To Perm	187	7	4%
	To Temp	39	14	36%
	To Unk	24	6	25%
System exit is from Permanent Supportive Housing or other permanent housing projects, with a Move-In Date	To Perm	17	1	6%
	To Temp	4	0	0%
	To Unk	0	0	
System exit is from Permanent Supportive Housing or other permanent housing projects, without a Move-In Date	To Perm	0	0	
	To Temp	1	0	0%
	To Unk	0	0	
System exit is from Street Outreach, Services Only, Day Shelter, Coordinated Entry, or "Other" project types	To Perm	13	0	0%
	To Temp	31	14	45%
	To Unk	309	83	27%

Note: Returns are based on a subsequent enrollment in an emergency shelter, safe haven, transitional housing, rapid re-housing, or permanent supportive housing project. Subsequent enrollments in non-residential projects and other permanent housing projects are also counted as a return if the person's current living situation is a homeless setting at the time of the contact.

Measure 6: The number of persons who exited street outreach projects to successful destinations, in relation to all persons who exited street outreach	January 1 through December 31, 2020 Report Period		
	Successful Placements (temporary or permanent destinations) (#)	All Exits (#)	Exit Success Rate (%)
Street Outreach exits (based on last street outreach exit in reporting period)	0	85	0%

Measure 7: Breakout data for specific population groups	January 1 through December 31, 2020 Report Period						
	Measure 1a: Number of people accessing services who are experiencing homelessness	Measure 1b: Estimated number of people experiencing unsheltered homelessness on the PIT	Measure 2: Number of people accessing services who are experiencing homelessness for the first time	Measure 3: Number of people exiting homelessness into permanent housing	Measure 4: Average length of time (in days) persons spent enrolled in street outreach, emergency shelter, transitional housing, safe haven projects and time prior to move-in for persons enrolled in rapid rehousing and permanent housing projects	Measure 5: Percent of people who return to homelessness within 6 months of exiting homelessness to permanent housing	Measure 6: Number of people served in street outreach projects who exit to emergency shelter, safe haven, transitional housing, or permanent housing destinations.
Performance by Household Composition*							
All persons	2,458	1,700	1,272	754	151	7%	0
Persons in HHs without children	1,968	1,477	1,031	394	129	8%	0

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Status Report

Persons in HHs with at least 1 adult and 1 child	549	223	260	340	221	5%	0
Persons in HHs with only children	106	26	51	18	175	6%	0
Performance by Gender							
Woman/Girl	962	503	494	352	166	7%	0
Man/Boy	1,461	1,197	757	398	141	7%	0
People who are Transgender	11	0	***	0	178	0%	0
People with No Single Gender	***	0	***	***	107	0%	0
People who are Questioning	***	-	***	0	0	0%	0
People with Unknown Gender (e.g. doesn't know Gender, refused to respond, or data were not collected)	20	-	15	***	92	0%	0
Performance by Ethnicity and Race							
People who are Hispanic/Latino	1,057	513	588	417	139	5%	0
People who are Non-Hispanic/ Non-Latino	1,295	1,187	586	311	167	10%	0
People with Unknown Ethnicity (client doesn't know ethnicity, refused to repond, or data were not collected)	106	-	98	26	67	0%	0
People who are American Indian or Alaska Native	100	139	36	25	200	5%	0
People who are Asian	16	16	11	***	53	13%	0
People who are Black or African American	118	139	55	24	171	6%	0
People who are Native Hawaiian or Other Pacific Islander	29	22	12	***	111	0%	0
People who are White	1,841	1,125	904	541	156	9%	0
People who are Multiple Races	117	259	45	26	189	7%	0
People with Unknown Race (client doesn't know race, refused to respond, or data not collected)	237	-	209	128	69	2%	0
People who are American Indian or Alaska Native AND Hispanic/Latino	67	-	22	†	224	0%	0
People who are American Indian or Alaska Native AND Non-Hispanic/Non-Latino	31	-	12	***	161	25%	0
People who are Asian AND Hispanic/Latino	***	-	0	***	47	0%	0
People who are Asian AND Non-Hispanic/Non-Latino	†	-	***	***	65	33%	0
People who are Black or African American AND Hispanic/Latino	***	-	***	***	353	0%	0
People who are Black or African American AND Non-Hispanic/Non-Latino	†	-	†	†	157	6%	0
People who are Native Hawaiian or Other Pacific Islander AND Hispanic/Latino	***	-	***	***	62	0%	0
People who are Native Hawaiian or Other Pacific Islander AND Non-Hispanic/Non-Latino	†	-	***	***	130	0%	0
People who are White AND Hispanic/Latino	757	-	378	274	148	8%	0
People who are White AND Non-Hispanic/Non-Latino	1,031	-	477	259	167	10%	0
People who are Multiple Races AND Hispanic/Latino	26	-	14	***	109	0%	0
People who are Multiple Races AND Non-Hispanic/Non-Latino	88	-	28	†	216	10%	0
People with Unknown Race (doesn't know race, refused to respond, or data not collected) AND Hispanic/Latino	†	-	†	†	70	3%	0
People with Unknown Race (doesn't know race, refused to respond, or data not collected) AND Non-Hispanic/Non-Latino	***	-	***	***	108	0%	0
Performance for various Sub-Populations and Other Characteristics**							
# of Adults who are Experiencing Significant Mental Illness	466	-	179	85	137	10%	0
# of Adults who are Experiencing Substance Abuse Disorders	355	-	143	45	128	26%	0
# of Adults who are Veterans	180	128	87	80	122	14%	0
# of Adults with HIV/AIDS	***	-	***	0	231	0%	0

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# of Adults who are Currently Fleeing Domestic Violence	126	-	60	37	124	11%	0
# of Unaccompanied Youth (18- 24 years old)	187	564	114	45	87	0%	0
# of Parenting Youth (18-24 years old)	22	8	11	18	126	0%	0
* People may be served in different household configurations over the course of a year, so the sum of the rows reported by household composition may exceed the total number of persons reported.							
** Data required to identify some sub-population groups are only collected from a subset of projects within HMIS; therefore, these data will not identify everyone with these characteristics who accessed the homeless services.							
*** Data suppressed due to the small number of people reported in this category, per State of California privacy policies.							
† Data point suppressed: when small values are obscured, but could be calculated via subtraction, the next-highest number, which may be >10, is also suppressed, per State of California privacy policies.							
- Data for this subpopulation are not collected in the PIT.							

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Status Report

CA-508 Watsonville/Santa Cruz City & County CoC

Supporting data to understand how people who are experiencing homelessness are accessing services within the CoC

January 1 through December 31, 2021 Report Period

Measures 1a and 2: Number of people accessing services, while experiencing homelessness, within 2021	January 1 through December 31, 2021 Report Period			
	Number of people experiencing homelessness who were active in a project at the start of the report period (continuously homeless)	Number of people entering the system who are experiencing homelessness for the first time (Measure 2)	Number of people returning to the system during the report period	Total number of people accessing services who are experiencing homelessness during the report period (Measure 1a)
Systemwide (all projects, all clients)	870	1,138	502	2,510
Enrolled in non-residential projects only, while homeless (e.g. street outreach, coordinated entry, SSO projects)	8	296	103	407
Enrolled in residential projects only, while homeless	688	635	260	1,583
Enrolled in residential and non-residential projects at some point in the reporting year	174	207	139	520
Number of people enrolled in this project type while experiencing homelessness:				
Enrolled in SO	15	33	24	72
Enrolled in CE	60	266	123	449
Enrolled in ES	722	691	350	1,763
Enrolled in SH	0	0	0	
Enrolled in TH	88	55	6	149
Enrolled in RRH	348	244	115	707
Enrolled in PSH	31	16	8	55
Enrolled in any other permanent housing	0	0	0	
Enrolled in Services, Day Shelter, or Other	132	282	138	552

Measure #1b: Reducing the number of persons experiencing unsheltered homelessness on a daily basis

Estimate of # of people experiencing unsheltered homelessness on the most recent PIT count

n/a

Measure 3: The number of persons served within the homelessness response system who exited to permanent housing, in relation to all exits, listed separately based on the setting in which the person was last served**	January 1 through December 31, 2021 Report Period		
	System Exits to Permanent Housing (#)	All Exits (#)	System Exit Success Rate (%)
Unduplicated system exits (i.e. the last exit date within the report period for clients)	607	1,857	33%
System exit is from Emergency Shelter, Safe Haven, or Transitional Housing projects	285	986	29%
System exit is from Rapid Rehousing (RRH)	290	360	81%
System exit is from Permanent Supportive Housing (PSH) or other permanent housing (OPH) projects, with a Move-In Date	11	12	92%

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System exit is from Permanent Supportive Housing (PSH) or other permanent housing (OPH) projects, without a Move-In Date	0	2	0%
System exit is from Street Outreach, Services Only, Day Shelter, Coordinated Entry, or "Other" project types*	21	497	4%
Number of people who are enrolled in permanent housing at the end of the report period	Moved into Housing (#)	All Active Clients (#)	Percent Moved into Housing (%)
People who are enrolled in RRH, PSH or OPH on the last day of the reporting period	219	556	39%
Number of people who are enrolled in permanent housing at the end of the report period, or who exited the homelessness response system	Total Exits to Permanent Housing (#)	All System Exits and Active Clients	Percentage of People Transitioning to Permanent Housing (%)
People who are enrolled in RRH, PSH or OPH at the end of the report period, or who exited the homelessness response system (unduplicated)	823	2,357	35%

*This calculation includes all "successful" exits, defined as exits to both permanent and transitional destinations when the client moved off the streets.

**People who are enrolled in permanent housing with a move-in date prior to the report period are excluded from this data because they did not experience homelessness during the report period.

Measure 4: Length of time people were known to be homeless, as documented within the CoC's HMIS	January 1 through December 31, 2021 Report Period	
	Average	Median
Cumulative system days homeless recorded in HMIS continuous with or during the report period	194	102
Days homeless in ES/SH continuous with or during the report period	195	130
Days homeless in TH continuous with or during the report period	400	357
Cumulative days homeless in sheltered situations (ES/SH/TH) continuous with or during the report period	221	148
Additional days homeless in SO/DS/CE continuous with or during the report period	12	16
Additional days homeless while enrolled in, but not moved into, RRH or PSH	141	73

Measure 5: Of those who exited from the system, the number who returned to the system within 6 months of their exit date	January 1 through December 31, 2021 Report Period			
	Destination Type	Number of people with a system exit during the report period	Number of people who returned within 6 months of their exit date	Return Rate (%) within 6 months of prior exit date
System exit from any project type (based on the earliest exit date within the exit cohort period)	All Exits	1,857	335	18%
	To Perm	618	43	7%
	To Temp	632	158	25%
	To Unk	607	134	22%
System exit is from Emergency Shelter, Safe Haven, or Transitional Housing projects	To Perm	304	28	9%
	To Temp	556	138	25%
	To Unk	178	39	22%
System exit is from Rapid Rehousing	To Perm	285	10	4%
	To Temp	56	13	23%

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	To Unk	16	4	25%
System exit is from Permanent Supportive Housing or other permanent housing projects, with a Move-In Date	To Perm	11	0	0%
	To Temp	0	0	
	To Unk	1	0	0%
System exit is from Permanent Supportive Housing or other permanent housing projects, without a Move-In Date	To Perm	0	0	
	To Temp	2	0	0%
	To Unk	0	0	
System exit is from Street Outreach, Services Only, Day Shelter, Coordinated Entry, or "Other" project types	To Perm	18	5	28%
	To Temp	18	7	39%
	To Unk	412	91	22%
Note: Returns are based on a subsequent enrollment in an emergency shelter, safe haven, transitional housing, rapid re-housing, or permanent supportive housing project. Subsequent enrollments in non-residential projects and other permanent housing projects are also counted as a return if the person's current living situation is a homeless setting at the time of the contact.				

Measure 6: The number of persons who exited street outreach projects to successful destinations, in relation to all persons who exited street outreach	January 1 through December 31, 2021 Report Period		
	Successful Placements (temporary or permanent destinations) (#)	All Exits (#)	Exit Success Rate (%)
Street Outreach exits (based on last street outreach exit in reporting period)	0	72	0%

Measure 7: Breakout data for specific population groups	January 1 through December 31, 2021 Report Period						
	Measure 1a: Number of people accessing services who are experiencing homelessness	Measure 1b: Estimated number of people experiencing unsheltered homelessness on the PIT	Measure 2: Number of people accessing services who are experiencing homelessness for the first time	Measure 3: Number of people exiting homelessness into permanent housing	Measure 4: Average length of time (in days) persons spent enrolled in street outreach, emergency shelter, transitional housing, safe haven projects and time prior to move-in for persons enrolled in rapid rehousing and permanent housing projects	Measure 5: Percent of people who return to homelessness within 6 months of exiting homelessness to permanent housing	Measure 6: Number of people served in street outreach projects who exit to emergency shelter, safe haven, transitional housing, or permanent housing destinations.
Performance by Household Composition*							
All persons	2,510		1,138	823	194	7%	0
Persons in HHs without children	1,986		847	363	191	6%	0
Persons in HHs with at least 1 adult and 1 child	656		372	425	178	7%	0
Persons in HHs with only children	128		73	34	176	16%	0
Performance by Gender							
Woman/Girl	1,008		474	409	199	6%	0
Man/Boy	1,480		654	409	190	8%	0

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People who are Transgender	12		***	***	259	0%	0
People with No Single Gender	***		***	0	143	0%	0
People who are Questioning	0	-	0	0	0	0%	0
People with Unknown Gender (e.g. doesn't know Gender, refused to respond, or data were not collected)	***	-	***	***	144	0%	0
Performance by Ethnicity and Race							
People who are Hispanic/Latino	1,091		575	470	172	7%	0
People who are Non-Hispanic/ Non-Latino	1,325		500	328	216	7%	0
People with Unknown Ethnicity (client doesn't know ethnicity, refused to repond, or data were not collected)	94	-	63	25	132	0%	0
People who are American Indian or Alaska Native	121		61	35	168	12%	0
People who are Asian	20		†	***	89	0%	0
People who are Black or African American	128		55	40	205	8%	0
People who are Native Hawaiian or Other Pacific Islander	22		***	***	245	33%	0
People who are White	1,910		826	617	204	8%	0
People who are Multiple Races	117		41	33	245	8%	0
People with Unknown Race (client doesn't know race, refused to respond, or data not collected)	192	-	138	85	74	0%	0
People who are American Indian or Alaska Native AND Hispanic/Latino	83	-	40	†	156	17%	0
People who are American Indian or Alaska Native AND Non-Hispanic/Non-Latino	35	-	18	***	209	0%	0
People who are Asian AND Hispanic/Latino	***	-	***	***	92	0%	0
People who are Asian AND Non-Hispanic/Non-Latino	†	-	***	***	89	0%	0
People who are Black or African American AND Hispanic/Latino	15	-	***	***	179	50%	0
People who are Black or African American AND Non-Hispanic/Non-Latino	104	-	†	†	214	5%	0
People who are Native Hawaiian or Other Pacific Islander AND Hispanic/Latino	***	-	***	***	237	0%	0
People who are Native Hawaiian or Other Pacific Islander AND Non-Hispanic/Non-Latino	†	-	***	***	263	33%	0
People who are White AND Hispanic/Latino	794	-	390	342	193	8%	0
People who are White AND Non-Hispanic/Non-Latino	1,061	-	399	259	215	8%	0
People who are Multiple Races AND Hispanic/Latino	29	-	11	11	217	14%	0
People who are Multiple Races AND Non-Hispanic/Non-Latino	86	-	30	22	252	6%	0
People with Unknown Race (doesn't know race, refused to respond, or data not collected) AND Hispanic/Latino	†	-	†	†	65	0%	0
People with Unknown Race (doesn't know race, refused to respond, or data not collected) AND Non-Hispanic/Non-Latino	***	-	***	***	202	0%	0
Performance for various Sub-Populations and Other Characteristics**							
# of Adults who are Experiencing Significant Mental Illness	645	-	266	109	134	20%	0
# of Adults who are Experiencing Substance Abuse Disorders	428	-	163	63	149	11%	0
# of Adults who are Veterans	167		76	67	165	8%	0
# of Adults with HIV/AIDS	22	-	11	***	52	0%	0
# of Adults who are Currently Fleeing Domestic Violence	166	-	86	52	111	3%	0
# of Unaccompanied Youth (18- 24 years old)	167		90	25	135	0%	0
# of Parenting Youth (18-24 years old)	33		20	21	116	15%	0
* People may be served in different household configurations over the course of a year, so the sum of the rows reported by household composition may exceed the total number of persons reported.							
** Data required to identify some sub-population groups are only collected from a subset of projects within HMIS; therefore, these data will not identify everyone with these characteristics who accessed the homeless services.							

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Status Report

***	Data suppressed due to the small number of people reported in this category, per State of California privacy policies.
†	Data point suppressed: when small values are obscured, but could be calculated via subtraction, the next-highest number, which may be >10, is also suppressed, per State of California privacy policies.
-	PIT data are not included in the CY21 report due to COVID-related inconsistencies.

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Status Report

CA-508 Watsonville/Santa Cruz City & County CoC

Supporting data to understand how people who are experiencing homelessness are accessing services within the CoC

January 1 through December 31, 2022 Report Period

Measures 1a and 2: Number of people accessing services, while experiencing homelessness, within 2022	January 1 through December 31, 2022 Report Period			
	Number of people experiencing homelessness who were active in a project at the start of the report period (continuously homeless)	Number of people entering the system who are experiencing homelessness for the first time (Measure 2)	Number of people returning to the system during the report period	Total number of people accessing services who are experiencing homelessness during the report period (Measure 1a)
Systemwide (all projects, all clients)	710	1,088	503	2,301
Enrolled in non-residential projects only, while homeless (e.g. street outreach, coordinated entry, SSO projects)	10	565	214	789
Enrolled in residential projects only, while homeless	531	364	180	1,075
Enrolled in residential and non-residential projects at some point in the reporting year	169	159	109	437
Number of people enrolled in this project type while experiencing homelessness:				
Enrolled in SO	10	33	27	70
Enrolled in CE	68	520	160	748
Enrolled in ES	488	327	206	1,021
Enrolled in SH	0	0	0	
Enrolled in TH	73	43	13	129
Enrolled in RRH	374	240	120	734
Enrolled in PSH	25	12	7	44
Enrolled in any other permanent housing	0	0	0	
Enrolled in Services, Day Shelter, or Other	142	323	209	674

Measure #1b: Reducing the number of persons experiencing unsheltered homelessness on a daily basis

Estimate of # of people experiencing unsheltered homelessness on the most recent PIT count

1774

Measure 3: The number of persons served within the homelessness response system who exited to permanent housing, in relation to all exits, listed separately based on the setting in which the person was last served**	January 1 through December 31, 2022 Report Period		
	System Exits to Permanent Housing (#)	All Exits (#)	System Exit Success Rate (%)
Unduplicated system exits (i.e. the last exit date within the report period for clients)	381	1,768	22%
System exit is from Emergency Shelter, Safe Haven, or Transitional Housing projects	161	459	35%
System exit is from Rapid Rehousing (RRH)	206	314	66%
System exit is from Permanent Supportive Housing (PSH) or other permanent housing (OPH) projects, with a Move-In Date	4	18	22%

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Status Report

System exit is from Permanent Supportive Housing (PSH) or other permanent housing (OPH) projects, without a Move-In Date	2	3	67%
System exit is from Street Outreach, Services Only, Day Shelter, Coordinated Entry, or "Other" project types*	8	974	1%
Number of people who are enrolled in permanent housing at the end of the report period	Moved into Housing (#)	All Active Clients (#)	Percent Moved into Housing (%)
People who are enrolled in RRH, PSH or OPH on the last day of the reporting period	285	548	52%
Number of people who are enrolled in permanent housing at the end of the report period, or who exited the homelessness response system	Total Exits to Permanent Housing (#)	All System Exits and Active Clients	Percentage of People Transitioning to Permanent Housing (%)
People who are enrolled in RRH, PSH or OPH at the end of the report period, or who exited the homelessness response system (unduplicated)	662	2,229	30%

*This calculation includes all "successful" exits, defined as exits to both permanent and transitional destinations when the client moved off the streets.

**People who are enrolled in permanent housing with a move-in date prior to the report period are excluded from this data because they did not experience homelessness during the report period.

Measure 4: Length of time people were known to be homeless, as documented within the CoC's HMIS	January 1 through December 31, 2022 Report Period	
	Average	Median
Cumulative system days homeless recorded in HMIS continuous with or during the report period	190	57
Days homeless in ES/SH continuous with or during the report period	243	129
Days homeless in TH continuous with or during the report period	329	242
Cumulative days homeless in sheltered situations (ES/SH/TH) continuous with or during the report period	269	165
Additional days homeless in SO/DS/CE continuous with or during the report period	13	16
Additional days homeless while enrolled in, but not moved into, RRH or PSH	164	103

Measure 5: Of those who exited from the system, the number who returned to the system within 6 months of their exit date	January 1 through December 31, 2022 Report Period			
	Destination Type	Number of people with a system exit during the report period	Number of people who returned within 6 months of their exit date	Return Rate (%) within 6 months of prior exit date
System exit from any project type (based on the earliest exit date within the exit cohort period)	All Exits	1,768	449	25%
	To Perm	397	30	8%
	To Temp	402	121	30%
	To Unk	969	298	31%

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Status Report

System exit is from Emergency Shelter, Safe Haven, or Transitional Housing projects	To Perm	168	15	9%
	To Temp	299	91	30%
	To Unk	59	19	32%
System exit is from Rapid Rehousing	To Perm	220	15	7%
	To Temp	62	13	21%
	To Unk	41	3	7%
System exit is from Permanent Supportive Housing or other permanent housing projects, with a Move-In Date	To Perm	4	0	0%
	To Temp	5	1	20%
	To Unk	9	0	0%
System exit is from Permanent Supportive Housing or other permanent housing projects, without a Move-In Date	To Perm	2	0	0%
	To Temp	0	0	
	To Unk	1	0	0%
System exit is from Street Outreach, Services Only, Day Shelter, Coordinated Entry, or "Other" project types	To Perm	3	0	0%
	To Temp	36	16	44%
	To Unk	859	276	32%

Note: Returns are based on a subsequent enrollment in an emergency shelter, safe haven, transitional housing, rapid re-housing, or permanent supportive housing project. Subsequent enrollments in non-residential projects and other permanent housing projects are also counted as a return if the person's current living situation is a homeless setting at the time of the contact.

Measure 6: The number of persons who exited street outreach projects to successful destinations, in relation to all persons who exited street outreach	January 1 through December 31, 2022 Report Period		
	Successful Placements (temporary or permanent destinations) (#)	All Exits (#)	Exit Success Rate (%)
Street Outreach exits (based on last street outreach exit in reporting period)	0	65	0%

Measure 7: Breakout data for specific population groups	January 1 through December 31, 2022 Report Period						
	Measure 1a: Number of people accessing services who are experiencing homelessness	Measure 1b: Estimated number of people experiencing unsheltered homelessness on the PIT	Measure 2: Number of people accessing services who are experiencing homelessness for the first time	Measure 3: Number of people exiting homelessness into permanent housing	Measure 4: Average length of time (in days) persons spent enrolled in street outreach, emergency shelter, transitional housing, safe haven projects and time prior to move-in for persons enrolled in rapid rehousing and permanent housing projects	Measure 5: Percent of people who return to homelessness within 6 months of exiting homelessness to permanent housing	Measure 6: Number of people served in street outreach projects who exit to emergency shelter, safe haven, transitional housing, or permanent housing destinations.
Performance by Household Composition*							
All persons	2,301	1,774	1,088	662	190	8%	0
Persons in HHs without children	1,705	1,759	764	337	193	12%	0

CAL ICH HHAP-3 Outcome Goals

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Status Report

Persons in HHs with at least 1 adult and 1 child	750	15	405	313	160	3%	0
Persons in HHs with only children	167	0	84	***	190	6%	0
Performance by Gender							
Woman/Girl	1,016	419	501	316	185	7%	0
Man/Boy	1,263	1,325	574	342	194	8%	0
People who are Transgender	***	10	***	***	244	0%	0
People with No Single Gender	***	20	***	0	98	0%	0
People who are Questioning	0	-	0	0	0	0%	0
People with Unknown Gender (e.g. doesn't know Gender, refused to respond, or data were not collected)	***	-	***	***	46	0%	0
Performance by Ethnicity and Race							
People who are Hispanic/Latino	1,009	698	523	337	174	3%	0
People who are Non-Hispanic/ Non-Latino	1,218	1,076	524	†	206	13%	0
People with Unknown Ethnicity (client doesn't know ethnicity, refused to repond, or data were not collected)	74	-	41	***	142	0%	0
People who are American Indian or Alaska Native	172	53	113	45	159	4%	0
People who are Asian	14	20	***	***	149	0%	0
People who are Black or African American	117	233	39	36	199	4%	0
People who are Native Hawaiian or Other Pacific Islander	16	7	***	***	203	0%	0
People who are White	1,747	1,274	794	513	199	8%	0
People who are Multiple Races	119	187	48	35	185	17%	0
People with Unknown Race (client doesn't know race, refused to respond, or data not collected)	116	-	82	23	88	8%	0
People who are American Indian or Alaska Native AND Hispanic/Latino	132	-	98	†	144	4%	0
People who are American Indian or Alaska Native AND Non-Hispanic/Non-Latino	39	-	15	***	209	0%	0
People who are Asian AND Hispanic/Latino	***	-	0	***	0	0%	0
People who are Asian AND Non-Hispanic/Non-Latino	13	-	***	***	160	0%	0
People who are Black or African American AND Hispanic/Latino	15	-	***	***	158	0%	0
People who are Black or African American AND Non-Hispanic/Non-Latino	98	-	†	†	208	6%	0
People who are Native Hawaiian or Other Pacific Islander AND Hispanic/Latino	***	-	***	***	159	0%	0
People who are Native Hawaiian or Other Pacific Islander AND Non-Hispanic/Non-Latino	†	-	***	***	238	0%	0
People who are White AND Hispanic/Latino	736	-	347	260	189	3%	0
People who are White AND Non-Hispanic/Non-Latino	974	-	429	249	207	13%	0
People who are Multiple Races AND Hispanic/Latino	47	-	22	15	153	0%	0
People who are Multiple Races AND Non-Hispanic/Non-Latino	70	-	25	19	200	30%	0
People with Unknown Race (doesn't know race, refused to respond, or data not collected) AND Hispanic/Latino	75	-	†	†	98	11%	0
People with Unknown Race (doesn't know race, refused to respond, or data not collected) AND Non-Hispanic/Non-Latino	13	-	***	***	102	0%	0
Performance for various Sub-Populations and Other Characteristics**							
# of Adults who are Experiencing Significant Mental Illness	602	-	233	90	128	19%	0
# of Adults who are Experiencing Substance Abuse Disorders	412	-	163	64	129	9%	0
# of Adults who are Veterans	146	310	59	75	193	10%	0
# of Adults with HIV/AIDS	26	-	***	***	82	100%	0

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# of Adults who are Currently Fleeing Domestic Violence	199	-	94	35	94	10%	0
# of Unaccompanied Youth (18- 24 years old)	144	216	79	24	138	7%	0
# of Parenting Youth (18-24 years old)	45	0	24	23	125	0%	0
* People may be served in different household configurations over the course of a year, so the sum of the rows reported by household composition may exceed the total number of persons reported.							
** Data required to identify some sub-population groups are only collected from a subset of projects within HMIS; therefore, these data will not identify everyone with these characteristics who accessed the homeless services.							
*** Data suppressed due to the small number of people reported in this category, per State of California privacy policies.							
† Data point suppressed: when small values are obscured, but could be calculated via subtraction, the next-highest number, which may be >10, is also suppressed, per State of California privacy policies.							
- Data for this subpopulation are not collected in the PIT.							