



Continuum of Care Program Standards

July 2017

Written Standard Review and Revisions

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Purpose and Overview

The goal of these standards is to synthesize the key elements of the U.S. Department of Housing and Urban Development (HUD) regulations for projects funded under HUD's Continuum of Care (CoC) Program. These standards also incorporate the policy priorities of the CCoC, as adopted by the CCoC Steering Committee and in consultation with recipients of the Emergency Solutions Grant program funds within the geographic area. All CoC Program funded projects must comply in full with the applicable standards described in this manual, as well as all HUD regulations and NOFA requirements established for the CoC Program. HUD regulations may be found at:

<https://www.hudexchange.info/resources/documents/CoCProgramInterimRule.pdf>

CoC Program funded projects may also be subject to additional criteria as set forth in annual competitive application processes administered by the CCoC in conjunction with HUD annual CoC program competitions.

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Prevention

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II. Definitions

Homeless

(NOTE: CoC Program funded projects should only be serving people who meet the criteria in Category 1 unless otherwise indicated under the eligibility standards for a given project type.)

Category 1: Literally Homeless

An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- (i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
- (ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals); or
- (iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

Category 2: Imminent Risk of Homelessness

An individual or family who will imminently lose their primary nighttime residence, provided that:

- (i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
- (ii) No subsequent residence has been identified; and
- (iii) The individual or family lacks the resources or support networks, *e.g.*, family, friends, faith-based or other social networks, needed to obtain other permanent housing.

Category 3: Homeless Under Other Federal Statutes

(NOTE: CoC Program funded projects are not authorized by HUD to serve this category):

Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:

- (i) Are defined as homeless under section 387 of the Runaway and Homeless of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);
- (ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;
- (iii) Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and
- (iv) Can be expected to continue in such status for an extended period of time because of chronic disabilities; chronic physical health or mental health conditions; substance addiction; histories of domestic violence or childhood abuse (including neglect); the presence of a child or youth with a disability; or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment;

Category 4: Fleeing/Attempting to Flee Domestic Violence

Any individual or family who:

- (i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
- (ii) Has no other residence; and
- (iii) Lacks the resources or support networks, *e.g.*, family, friends, and faith-based or other social networks, to obtain other permanent housing. 24 CFR 578.3.

Chronically Homeless

The NYC CCoC has formally adopted the definition of Chronically Homeless as described in the CPD-16-11 Prioritization Notice. Please refer to the Permanent Housing section on page 8 for further details.

The definition of "chronically homeless" currently in effect for the CoC Program is that which is defined in the CoC Program interim rule at 24 CFR 578.3, which states that a chronically homeless person is:

1. **(a)** A "homeless individual with a disability," as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:

- i. lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
- ii. Has been homeless and living as described in paragraph (a)(i) continuously for at least 12 months or on at least four separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (a)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering an institutional care facility;

(b) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (a) of this definition, before entering the facility;

(c) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (a) or (b) of this definition (as described in Section I.D.2.(a) of this Notice), including a family whose composition has fluctuated while the head of household has been homeless.

Developmental Disability

Developmental disability means, as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C.15002): (1) A severe, chronic disability of an individual that—(i) Is attributable to a mental or physical impairment or combination of mental and physical impairments;(ii) Is manifested before the individual attains age 22;(iii) Is likely to continue indefinitely; (iv) Results in substantial functional limitations in three or more of the following areas of major life activity:(A) Self-care;(B) Receptive and expressive language; (C) Learning; (D) Mobility; (E) Self-direction; (F) Capacity for independent living;(G) Economic self-sufficiency; and (v) Reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated. (2) An individual from birth to age 9, inclusive, who has a substantial developmental delay or specific congenital or acquired condition, may be considered to have a developmental disability without meeting three or more of the criteria described in paragraphs

(1)(i) through (v) of the definition of “developmental disability” in this section if the individual, without services and supports, has a high probability of meeting those criteria later in life. 24 CFR 583.5

Disabling Condition

(1) A condition that: (i) Is expected to be long-continuing or of indefinite duration; (ii) Substantially impedes the individual’s ability to live independently; (iii) Could be improved by the provision of more suitable housing conditions; and (iv) Is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury; (2) A developmental disability, as defined in this section; or (3) The disease of acquired immunodeficiency syndrome (AIDS) or any conditions arising from the etiologic agent for acquired immunodeficiency syndrome, including infection with the human immunodeficiency virus (HIV). 24 CFR 583.5

Housing First

A model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions for entry (such as sobriety or a minimum income threshold).

Prioritization

Per Notice CPD-16-11, Prioritization means implementing an admissions preference for chronically homeless persons for CoC Program-funded PSH beds. In the context of the coordinated entry process, Per Notice CPD-17-11, HUD uses the term “Prioritization” to refer to the coordinated entry-specific process by which all persons in need of assistance who use coordinated entry are ranked in order of priority.

Access Points

Access points are the places—either virtual or physical—where an individual or family in need of assistance accesses the coordinated entry process.

Assessment

In the context of the coordinated entry process, HUD uses the term “Assessment” to refer to the use of one or more standardized *assessment tool(s)* to determine a household’s current housing situation, housing and service needs, risk of harm, risk of future or continued homelessness, and other adverse outcomes.

Fair Market Rent

Fair Market Rent (FMR) means the Fair Market Rents published in the Federal Register annually by HUD. Family

A *family* includes, but is not limited to, the following, regardless of actual or perceived sexual orientation, gender identity, or marital status: (1) A single person, who may be an elderly person, displaced person, disabled person, near-elderly person, or any other single person; or (2) A group of persons residing together, and such group includes, but is not limited to: (i) A family with or without children (a child who is temporarily away from the home because of placement in foster care is considered a member of the family). 24 CFR 5.403

Permanent Housing

Permanent housing means community-based housing without a designated length of stay, and includes both permanent supportive housing and rapid rehousing. To be permanent housing, the program participant must be the tenant on a lease for a term of at least one year, which is renewable for terms that are a minimum of one month long, and is terminable only for cause.

Permanent Supportive Housing

Permanent supportive housing means permanent housing in which supportive services are provided to assist homeless persons with a disability to live independently.

Rapid Re-Housing

The provision of supportive services, as set forth in § 578.53, and/or short-term (up to 3 months) and/or medium-term (for 3 to 24 months) tenant-based rental assistance, as set forth in § 578.51(c), as necessary to help a homeless individual or family, with or without disabilities, move as quickly as possible into permanent housing and achieve stability in that housing.

Transitional Housing

Transitional housing means housing where all program participants have signed a lease or occupancy agreement, the purpose of which is to facilitate the movement of homeless individuals and families into permanent housing within 24 months. The program participant must have a lease or occupancy agreement for a term of at least one month that ends in 24 months and cannot be extended. 24 CFR 578.3.

Victim Service Provider

Victim service provider means a private nonprofit organization whose primary mission is to provide services to victims of domestic violence, dating violence, sexual assault, or stalking. This term includes rape crisis centers, battered women's shelters, domestic violence transitional housing programs, and other programs.

Violence Against Women Act (VAWA) Rule.

On November 16, 2016, HUD published its VAWA final rule (81 FR 80798), which provides various protections to victims of domestic violence, dating violence, sexual assault, and stalking under the CoC Program and other HUD programs. HUD funded projects are required to comply with the VAWA rule as provided in 24 CFR 578.99(j)(3).

HUD Emergency Solutions Grant

The ESG program provides funding to: (1) engage homeless individuals and families living on the street; (2) improve the number and quality of emergency shelters for homeless individuals and families; (3) help operate these shelters; (4) provide essential services to shelter residents, (5) rapidly re-house homeless individuals and families, and (6) prevent families and individuals from becoming homeless.

SSI/SSDI Outreach, Access and Recovery (SOAR)

SAMHSA's SOAR program assists states and localities to expedite access to the Social Security Administration's (SSA) disability programs -- Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) -- for persons who are experiencing or at risk for homelessness and who have a mental illness, a co-occurring substance use disorder or other serious medical condition.

III. All CoC Program Funded Projects

A. Housing First Practices

Housing First is a proven method of ending all types of homelessness and is the most effective approach to ending chronic homelessness. Housing First approaches quickly connect people experiencing a housing crisis with permanent housing without preconditions (e.g., sobriety, treatment or service participation requirements) and the supports needed to maintain housing. Evidence from communities and programs that follow a Housing First approach shows that Housing First can reduce the length of time people are homeless, increase consumer choice, and increase housing stability.

Housing First is an alternative to approaches where people experiencing homelessness must demonstrate their readiness for permanent housing or otherwise participate in a linear set of time-limited housing and services before obtaining permanent housing. By contrast, Housing First is premised on the understanding that everyone is “housing ready”, that people experiencing a wide variety of barriers can successfully find and maintain housing with the right supports, and that people are better able to address their concerns and goals when stably housed.

In line with Housing First, providers should eliminate eligibility requirements that prevent higher need families and individuals from accessing their programs, especially requirements related to employment, minimum income, rental history, or substance use history. Providers who do not have the skills to serve these families and individuals should be increasing their capacity either internally or through partnerships.

A project that adheres to a Housing First approach focuses on ensuring rapid placement and stabilization in permanent housing. This means helping clients find or directly offering permanent housing without preconditions, such as sobriety or income, avoiding requirements that are not normally included on a lease, and connecting clients to supports most critical to ongoing housing stability. Housing First is not housing only, however, as many people who experience homelessness need and want assistance with increasing their income, accessing medical care, addressing mental health and/or substance abuse issues, and dealing with other personal problems that may directly or indirectly cause them to become homeless again. Overwhelming evidence now shows that people are best able to address their personal needs when they are not on the street or in a shelter, but are instead in their own housing with the right amount of temporary or permanent financial and service supports necessary to stay housed. This also means that projects should strive to offer assistance in a progressive manner – offer more only when more is needed and desired to obtain permanent housing quickly and maintain it, and also less when such help is not needed.

Housing First practices are required to be used in all CoC Program funded **PSH, RRH, and TH** projects unless otherwise prohibited by other project funding sources or otherwise indicated in these standards.

B. Coordinated Assessment and Placement System (CAPS) and Evaluating Eligibility

- All projects HUD Continuum of Care and Emergency Grant Solutions funds are expected to participate in CAPS, as designated by the CCoC and system partners
- General eligibility requirements are included in sections below; all projects expected to collaborate in CAPS eligibility screening processes

- All CoC funded projects are only allowed to serve people who are literally homeless (including persons in Category 4 (DV) who are literally homeless) unless otherwise indicated under the eligibility standards for a given project type.
- All projects expected to understand and adhere to HUD requirements
 - Meet all participant eligibility criteria as defined in the NOFA under which the program was funded.
 - The NYC CCoC has the discretion to specify additional eligibility criteria if voted in by the Steering Committee.

C. Data Collection and HMIS Participation

All providers receiving CoC & ESG Program funding are required to participate in the CCoC's Homeless Management Information System (HMIS). Providers must execute an HMIS Participation Agreement with the Department of Social Services (CCoC designated HMIS lead). Programs must follow NYC CCoC HMIS Policies and Procedure and remain in good standing with HMIS participation requirements.

D. Program Evaluation and Continuous Improvement

CoC program funded projects are evaluated each year in preparation for HUD's CoC Program competition by the CoC's Evaluation Committee. Evaluation results are used to inform project selection and ranking, as well as to identify any performance issues that may need to be addressed. When a performance issue is identified, a provider may be referred to the CCoC's performance and quality improvement (PQI) committee for follow-up assistance and support in creating a plan to improve performance. Severe and persistent performance issues, including issues related to compliance with CCoC standards and chronic underspending, may negatively impact a project's ability to continue to receive CoC Program funding.

E. Consumer Involvement

Each CoC Program funded project is expected to engage consumers in ongoing program evaluation and quality improvement processes. Toward that end, at a minimum each project is required to survey consumers/residents and/or complete documented interviews with current consumers at least annually to obtain feedback on program service quality, the service/housing environment, and opportunities for improvement.

F. Homeless Veterans

All CoC funded projects shall, to the extent possible, prioritize serving veterans and their families who are ineligible for Department of Veterans Affairs (VA) HEALTH CARE services, HUD-VASH, AND/OR SSVF. When it is determined that a veteran household that is ineligible for these housing programs and services has the same or higher level of need as a non-veteran household, the veteran household should receive priority for CoC funded services.

G. Other HUD Requirements

All CoC Program funded projects are expected to be familiar with and adhere to all HUD requirements for the CoC Program as described in the CoC Program Interim Rule, applicable Notices, and CoC Program NOFA(s) under which the project is funded. This includes, but is not limited to:

- Participant eligibility
- Prioritization
- Allowable activities and costs
- Site control
- Subsidy layering
- Environmental review
- Matching requirements.
- Calculating occupancy charges and rent.
- Limitations on transitional housing.
- Term of commitment, repayment of grants, and prevention of undue benefits.
- Displacement, relocation, and acquisition.
- Timeliness standards.
- Limitation on use of funds.
- Limitation on use of grant funds to serve persons defined as homeless under other federal laws.
- Termination of assistance to program participants.
- Fair Housing and Equal Opportunity.
- Conflicts of interest.
- Program income.
- Recordkeeping requirements.
- Grant and project changes
- Other applicable federal requirements as explained in the CoC Program Interim Rule

Serving Families in Homeless Projects

CoC Program funded projects serving families must ensure they comply with HUD's [Equal Access Rule](#) . The Equal Access Rule outlines the federal definition of 'family' for purposes of receiving assistance from certain programs. For the CoC Program, the definition of 'family' is as follows:

Family includes, but is not limited to, regardless of marital status, actual or perceived sexual orientation, or gender identity, any group of persons presenting for assistance together with or without children and irrespective of age, relationship, or whether or not a member of the household has a disability. A child who is temporarily away from the home because of placement in foster care is considered a member of the family.

What this means is that any group of people that present together for assistance and identify themselves as a family, regardless of age or relationship or other factors, are considered to be a family and must be served together as such. CoC Program funded projects cannot discriminate against a group of people presenting as a member of a family based on the composition of the family (e.g., adults and children or just adults), the age of any family, the disability status of any members of the family, marital status, actual or perceived sexual orientation, or gender identity. Involuntarily separating families based on the gender or age of their minor children is a violation of HUD regulations. Projects must serve families regardless of the marital status, sexual orientation of the adults or actual or perceived gender related characteristics.

Equal Access Regardless of Sexual Orientation or Gender Identity

On February 3, 2012, HUD published the *Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity* final rule (Equal Access Rule) (77 FR 20 5662). This final rule requires that HUD's housing programs be made available to individuals and families without regard to actual or perceived sexual orientation, gender identity, or marital status. The rule defines "gender identity" to mean "actual or perceived gender-related characteristics." 24 CFR 5.100; 77 FR at 5665. The final rule also prohibits owners and administrators of HUD-assisted or HUD-insured housing, approved lenders in an FHA mortgage insurance program, and any other recipients or sub-recipients of HUD funds from inquiring about sexual orientation or gender identity to determine eligibility for HUD-assisted or HUD-insured housing. The rule does not, however, prohibit voluntary self-identification of sexual orientation or gender identity, and it provides a limited exception for inquiries about the sex of an individual to determine eligibility for temporary, emergency shelters with shared sleeping areas or bathrooms, or to determine the number of bedrooms to which a household may be entitled.

H. Security & Confidentiality Policies

The address or location of any housing or rental units of any program participant, including youth, individuals living with HIV/AIDS, victims of domestic violence, dating violence, sexual assault, and stalking; and individuals and families who have the highest barriers to housing will not be made public, except as provided under a preexisting privacy policy of the provider and consistent with state and local laws regarding privacy and obligations of confidentiality with written authorization of the person responsible for the operation of the rental unit.

I. Consequence of Not Meeting Standards

Failure to meet the established standards shall trigger a review by the Lead Agency (DSS), CoC Steering Committee and/or Performance and Quality Improvement Committee (PQI). This review will involve providing technical support and guidance to improve performance. Organizations must show the efforts that they have undertaken to meet the standards. If the organization continues to fail to meet the performance standards established herein, despite technical assistance, funding reductions and/or defunding in future applications will occur.

IV. Transitional Housing

Transitional housing provides services and temporary housing assistance necessary to help homeless persons maintain interim stability, and successfully move to and maintain permanent housing as quickly as possible. CoC Program funding may be used for acquisition, rehabilitation, new construction, leasing, rental assistance, operating costs, and supportive services, as approved by the CCoC and HUD.

CoC Program funded transitional housing projects must provide safe, affordable housing that meets participants' needs in accordance with client intake practices, described in CPD-17-01, and in accordance with HUD and CCoC requirements for transitional housing programs.

A. Eligibility and Prioritization

The key to the success of any program is a screening and assessment process that thoroughly explores a family's or individual's situation and pinpoints their unique housing and service needs. Based upon the assessment, families and individuals should be referred to the kinds of housing and services most appropriate to their situations and need.

Within the New York City homeless services system, and specifically for CoC Program funded projects, the CCoC seeks to ensure that transitional housing is targeted to homeless families and individuals who most need and desire such assistance to address their health and safety needs and move to permanent housing. At the same time, the CCoC seeks to minimize time people spend in transitional housing versus their own permanent housing, so as to reduce overall length of time people spend literally homeless and ensure efficient use of limited transitional housing assistance.

Toward these ends, the CCoC requires the following for CoC Program funded transitional housing projects:

Eligibility:

- **Transitional housing projects that do not target youth under 25 or victims of domestic violence:** *The primary objective of transitional housing is to end literal homelessness within the CoC. Eligibility is, generally, restricted to families and individuals who are literally homeless, including those who may also be fleeing or attempting to flee domestic violence and who are literally homeless (homeless definition Category 1 and Category 4, if also literally homeless). Transitional housing projects may admit people who are at imminent risk of homelessness (Category 2) only when the applicant met the literal homelessness (Category 1) definition within the past 2 years. Such admissions should be rare and may not, generally, comprise more than 10% of program admissions.*
- **Transitional housing projects that target youth under age 25 or victims of domestic violence:** Transitional housing projects are encouraged to serve youth and DV victims under Category 1. Such projects may also serve people who are imminently at-risk of homelessness, including those fleeing or attempting to flee domestic violence and that are not also presently literally homeless (homeless definition Categories 2 and 4).
- Unless prohibited by other project funding sources, transitional housing programs are required to use a low barrier Housing First model (i.e., not have service participation requirements or preconditions to entry, such as sobriety or a minimum income threshold, and must prioritize rapid placement and stabilization in permanent housing).
- Projects should be aware that placing a household in transitional housing can affect their eligibility for other programs.
- All projects must document eligibility according to HUD recordkeeping requirements for the CoC Program. You can find the document [here](#).

Prioritization:

- Transitional housing projects should generally seek to target and prioritize assistance for families and individuals with the most severe needs, including those living on the street, and those who have experienced longer homeless episodes – as well as those who are best served by transitional housing. This means projects should target and prioritize homeless people who:
 - Desire and make an informed decision choice to enter transitional housing.
 - Have health and/or safety needs that are best addressed in a transitional housing environment and by the services offered by the project. Examples include transition age youth with no prior independent living experience, people in early recovery from substance abuse, and victims of domestic violence and trauma; and
 - Have no other available permanent housing options with financial and service supports they need and want that is readily available (e.g., rapid re-housing, permanent supportive housing, or transitional financial assistance to obtain permanent housing while accessing other homeless system or community-based supports).
- People who are simply struggling financially and/or who may have other personal issues that can be dealt with in a community-based setting with proper supports or in permanent supportive housing are not a target population for CoC Program funded transitional housing.

B. Types of Assistance

Transitional housing projects may offer various types of assistance allowable under the CoC Program or as otherwise funded through other sources, and as appropriate to the target population served by each project. While transitional housing projects may differ in terms of the population served and assistance offered to meet the unique needs of that population, all projects must at a minimum:

- Provide assistance to facilitate the application process to ensure access for people with the most severe needs or greater vulnerabilities. For example: ensure screening interviews occur in easily accessible locations and at convenient times for prospective participants; provide help obtaining needed documentation, etc.
- Assess the needs of the individual or family experiencing homelessness immediately upon entry to ensure appropriate transitional housing arrangements and participant safety.
- Provide individualized assistance offered in a manner that does not obligate the participant to stay in the project longer than necessary to quickly move to permanent housing when desired and that does not delay establishing a permanent housing plan and offering related placement assistance.
- Assist all participants with establishing a permanent housing plan within two weeks after project entry.
- Provide access to permanent housing placement assistance (whether such assistance is provided directly or through a partnership) without preconditions, such as length of time in program or demonstrated progress on clinical goals.
- Offer supportive services to program participants on a voluntary basis. However, projects may require program participants to meet with a case manager on a regular basis for purposes of evaluating the extent to which a participant has ongoing need for assistance from the project.

Transitional Housing Projects Serving People with Substance Abuse Disorders

Projects serving persons with substance abuse disorders should keep in mind that their primary goals, as with all transitional housing, are to meet the service needs of program participants AND place program participants into permanent housing as quickly as possible and desired. This means that treatment-related services should be offered to clients on a voluntary basis (unless required by another funder), and they should focus on treatment related issues that are serving as immediate barriers to securing and maintaining housing. Unless required by another funder, projects should not terminate a client because of a relapse in substance use. Relapses should instead be used to facilitate conversations with clients to determine their service needs and desires.

V. Rapid Re-Housing

CoC Program rapid re-housing funds are designed to provide the services necessary to help homeless persons quickly regain stability in permanent housing after experiencing homelessness. In line with the HUD's national homelessness policy as outlined in *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*, federal programs aimed at ending homelessness have shifted towards providing stable, permanent housing opportunities for the homeless and at-risk homeless and less towards transitional housing. Rapid Re-Housing programs funded through the CoC will be required to meet HUD defined housing first standards as described [here](#).

A. Eligible Applicants

Only not for profit organizations are eligible to apply. In addition to being a not for profit, applicants must meet all of the HUD applicant eligibility criteria defined under the NOFA under which they are applying. Eligible applicants must also meet with the following criteria:

1. If currently a recipient of HUD NYC CCoC funds, the applicants must be in good standing with HUD and the NYC CCoC. This is defined as not having any significant unresolved monitoring findings.
2. Have experience in providing housing and/or services to people who are currently or formerly homeless.
3. Participate in or commit to participate in the NYC CCoC Homeless Management Information System (HMIS).¹

B. Eligible Program Participants

NYC CCoC rapid re-housing program participants must meet the following minimum standards:

1. Meet HUD's Category 1 definition of homelessness:

Individuals and families who lack a fixed, regular, and adequate nighttime residence:

- An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, etc.

¹ Providers that serve survivors of Domestic Violence only have to meet the basic HUD HMIS requirements for DV programs.- (i.e collect all of the data elements an HMIS collects, however victim service providers are directed to store that data in a comparable database and report on aggregate level and not client level specific data).

- An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low income individuals); or
- An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

For information on HUD's other homeless categories, eligible for other CoC funds, visit:

https://www.hudexchange.info/resources/documents/HEARTH_HomelessDefinition_FinalRule.pdf

2. Have a maximum combined income (earned and from benefits) of 50% of the Area Median Income. However, providers may consider significant garnishments or recoupment in determining that financial appropriateness of each potential participant and on a case-by-case basis allow a participant whose income is above 50% Area Median income. Providers will be required to show that the average of their RRH participants' income was at or below 50% AMI.
3. Meet all participant eligibility criteria as defined in the NOFA under which the program was funded.

The NYC CCoC has the discretion to specify additional eligibility criteria if voted in by the Steering Committee.

C. Standards for Amount of Rental Assistance

Providers shall determine the type, maximum amount and duration of housing stabilization and/or relocation services for individuals and families who are in need of rapid re-housing assistance through the initial evaluation, re-evaluation and ongoing case management processes.

Standards for determining the share of rent and utilities costs that each program participant must pay, if any, will be based on the following guidelines:

- I. The maximum amount of rent that a participant can be up to 100% of the rental amount.
- II. Providers may provide up to 100% of the cost of rent in rental assistance to participants. However to maximize the number of households that can be served with rapid re-housing resources, it is expected that providers will provide the level of need based on the goal of providing only what is necessary for each household to be stably housed for the long term.
- III. Rental assistance cannot be provided for a unit unless the rent for that unit is at or below the Fair Market Rent limit, established by HUD. A complete listing of Fair Market Rents for New York counties can be found at: <http://www.huduser.org/portal/datasets/fmr.html>
- IV. The rent charged for a unit must be reasonable in relation to rents currently being charged for comparable units in the private unassisted market and must not be in excess of rents currently being charged by the owner for comparable unassisted units.

For more details see sections 578.37 and 578.51 of the HUD CoC rapid re-housing and rental assistance guidelines.

D. Standards for Duration of Assistance

Providers may provide a program participant with up to 24 months of rental assistance.

Participants may be eligible for rapid re-housing assistance for multiple instances based on their need. However, if a participant needs assistance more than once, the participant will be subject to a re-assessment process for a different level of service intervention.

There must be a lease between the landlord and the tenant and the leases must be for at least one-year, renewable for at least one year and terminable only for cause.

E. Standards for Type of Assistance

Providers may use funds for rental assistance costs and eligible services, including the following: security deposits (up to 2 months), first month's rent and/or last month's rent, eligible supportive services, property damage, one-time moving costs and one-time utility deposits.

F. Policies & Procedures for Assessing & Prioritizing Participants

The key to the success of any program is a screening and assessment process that thoroughly explores a family's or individual's situation and pinpoints their unique housing and service needs. Based upon the assessment, families and individuals should be referred to the kinds of housing and services most appropriate to their situations and need.

G. Coordinating Intake & Assessment

Providers must demonstrate an ability to outreach to NYC CCoC eligible RRH participants and to prioritize applicants who meet the criteria for HUD Homeless Category 1. Providers must also utilize New York City's coordinated assessment system to help match individuals and families with the most appropriate assistance. Additional coordination or centralization of referrals may be required (e.g. if required by a NYC CCoC RRH Request for Proposals).

H. Case Management Services

Providers must assist each program participant, as needed, to obtain appropriate supportive services, including assistance in obtaining permanent housing, medical treatment, mental health treatment, counseling, supervision, and other services essential for achieving independent living; housing stability case management; and other Federal, State, local, or private assistance available to assist the program participant in obtaining housing stability including but not limited to:

- Supplemental Nutrition Assistance Program
- Social Security Disability Insurance (SSDI)
- Federal-State Unemployment Insurance Program
- Medicaid
- Veteran's Benefits
- Veteran's Disability Benefits
- Women, Infants and Children (WIC)
- Supplemental Security Income (SSI)
- Child and Adult Care Food Program, and
- Other mainstream resources such as housing, health, social services, employment, education services and youth programs that an individual or family may be eligible to receive

RRH program participants are required by HUD regulations to meet with a case manager not less than once per month. Providers may also provide case management services for up to six months after rental assistance stops.

I. Inspections

CoC funded rapid re-housing units must meet the HUD Housing Quality (HQS) Standards under 24 CFR part 578.37(a)(1)(ii). However, in instances, when allowed, providers may apply for waivers and exemptions, to use HUD Habitability standards when the use of HQS standards would result in the loss of an affordable housing unit.² Providers may utilize their own staff to perform HQS inspections.

J. Rental Subsidy Administration

The administering of RRH rental assistance must comply with the HUD regulations. Guidance is forthcoming.

K. Data Collection & Evaluation

All providers receiving rapid re-housing assistance must work with the NYC CCoC to track key data elements for analyzing the success of the program including the use of HMIS data.

L. Security & Confidentiality Policies

The address or location of any housing or rental units funded under rapid re-housing of any program participant, including youth, individuals living with HIV/AIDS, victims of domestic violence, dating violence, sexual assault, and stalking; and individuals and families who have the highest barriers to housing will not be made public, except as provided under a preexisting privacy policy of the provider and consistent with state and local laws regarding privacy and obligations of confidentiality with written authorization of the person responsible for the operation of the rental unit.

M. Terminations, Complaints, Appeals & Grievance Procedures

All providers with rapid re-housing programs shall be required to have a termination and grievance policies. Policies must allow an applicant to formally dispute an agency decision on *eligibility to receive assistance*. The policy must include the method that an applicant would be made aware of the provider's grievance procedure and the formal process for review and resolution of the grievance.

If a program participant violates program requirements, the provider may terminate the assistance in accordance with a formal process established by the provider. All providers must have policies that allow a program participant to formally dispute a provider decision to *terminate assistance*. The policy must include the method that a written notice would be provided containing clear statement of reason(s) for termination; a review of the decision in which the program participants is given the opportunity to present information before someone other than the person who made the termination decision; and a prompt written notice of the final decision to the program participant.

N. Standards for Re-Evaluation

In accordance with HUD regulations, recipients and subrecipients must conduct regular re-evaluations, at least annually, of program participants receiving RRH assistance.

To continue to receive CoC-RRH assistance, a program participant's re-evaluation must demonstrate eligibility based on:

² For ESG funded RRH programs, HUD only requires following the HUD Habitability Standards.

- **Lack of resources and support networks.** The program participant's household must continue to lack sufficient resources and support networks to retain housing without ESG or CoC program assistance.
- **Need.** The recipient or subrecipient must determine the amount and type of assistance that the individual or family will need to (re)gain stability in permanent housing.

VII. Permanent Supportive Housing

CoC Program funding for permanent supportive housing is designed to provide the services necessary to help homeless persons maintain stability in permanent housing after experiencing homelessness. In line with the HUD's national homelessness policy as outlined in *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*, federal programs aimed at ending homelessness have shifted towards providing stable, permanent housing opportunities for the homeless and at-risk homeless and less towards transitional housing.

A. Eligibility and Prioritization

Eligibility:

- All households served in CoC-funded PSH must have documentation on file verifying their status of homelessness and disability, including any necessary 3rd Party documentation as required by HUD.
- All permanent supportive housing projects must seek to minimize any barriers to applicant's entry into their project. This means that projects cannot require things of potential clients to enter their project over and beyond demonstrating meeting basic eligibility and any population prioritization requirements.
- Unless prohibited by other project funding sources and the project received an exemption from the NYC CoC Steering Committee, permanent supportive housing projects are required to use a low-barrier, Housing First model (i.e., PSH projects may not: have service participation requirements; screen out participants based on having too little or no income, active or history of substance abuse, a criminal record, or a history of domestic violence. PSH projects also may not terminate participants from the project for any of the following reasons: failure to participate in supportive services, failure to make progress on a service plan, loss of income or failure to improve income, domestic violence, any other activity not covered in a customary and enforceable lease agreement).

Requirement to dedicate or prioritize PSH beds to people experiencing chronic homelessness:

All New York City Continuum of Care (NYC CoC) funded PSH beds are required to dedicate or prioritize 100% of their beds to people experiencing chronic homelessness, as defined by HUD (See definitions section). When filling vacant beds, CoC-funded PSH projects must seek referrals only through the *By-Name Prioritized List of People Experiencing Chronic Homelessness* maintained by the New York City Human Resources Administration's Placement, Assessment and Client Tracking Unit (PACT).

This by-name list uses the order of priority established in HUD Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing. Relevant guidance from the Notice appears below, and the full Notice is available at:

<https://www.hudexchange.info/resources/documents/notice-cpd-16-11-prioritizing-persons-experiencing-chronic-homelessness-and-other-vulnerable-homeless-persons-in-psh.pdf>

The notice defines which chronically homeless people get priority access to PSH beds and how to prioritize PSH beds when no chronically homeless persons exist within the geographic area.

Accepting Referrals through a Single Prioritized List for PSH

All CoC-funded PSH projects are required to accept referrals ONLY from *By-Name Prioritized List of People Experiencing Chronic Homelessness* maintained by PACT. The single prioritized list is updated frequently to reflect the most up-to-date and real-time data as possible.

Prioritizing Chronically Homeless Persons in CoC Program-funded Permanent Supportive Housing Beds Dedicated or Prioritized for Occupancy by Persons Experiencing Chronic Homelessness:

When selecting participants for housing, PACT and CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness are required to use the following order of priority that has been established by the NYC CoC Steering Committee, which is consistent with HUD Notice CPD-16-11:

- Priority #1: People who meet the HUD definition of chronic homelessness and have been determined to be Level I based on New York City's Standardized Vulnerability Assessment, which considers, length of time homeless, multi-system contact, and functional impairment/high utilization of Medicaid.
- Priority #2: People who meet the HUD definition of chronic homelessness and have been determined to be Level II based on New York City's Standardized Vulnerability Assessment.
- Priority #3: People who meet the HUD definition of chronic homelessness and have been determined to be Level III based on New York City's Standardized Vulnerability Assessment.
- Within each priority group described above, applicants will be prioritized based on the number of days of cumulative homelessness during the past 3 years. For example, applicants in priority group #1 with more cumulative days of homelessness will be prioritized over other applicants in priority group #1 with fewer cumulative days of homelessness. Only as necessary to break a tie, applicants within each priority group will be further prioritized based on date of application, with earlier application dates being prioritized over later application dates.
- Exceptions to the order specified above may be considered in extraordinary circumstances and must be approved by a subcommittee appointed for this purpose by the NYC Coordinated Assessment and Placement System (CAPS) Steering Committee, which is a committee of the NYC CoC. For example a project might seek an exception to prioritize someone who has been living in an unsheltered location for 400 days, is Level I and has been diagnosed with terminal cancer over someone who has been living in shelter for 600 days and is Level I.

Recipients of CoC funds ("recipients") must follow the order of priority while also considering any target populations served by the project as identified in the project application submitted to HUD. For example, a CoC Program-funded PSH project that targets homeless persons with a serious mental illness should follow the order of priority to the extent to which persons with serious mental illness meet the criteria. In this example, if there were no persons with a serious

mental illness that also met the criteria of chronically homeless, the recipient should follow the order of priority for PSH when no chronically homeless person exists on the By-Name List (see below).

Recipients must exercise due diligence when conducting outreach and assessment to ensure that chronically homeless individuals and families are prioritized for assistance based on their total length of time homeless and/or the severity of their needs. The NYC CoC recognizes that some persons—particularly those living on the streets or in places not meant for human habitation—might require significant engagement and contacts prior to their entering housing and recipients of CoC Program-funded PSH are not required to allow units to remain vacant indefinitely while waiting for an identified chronically homeless person to accept an offer of PSH. Projects should continue to make attempts to engage those persons that have not accepted an offer of PSH and these chronically homeless persons must continue to be prioritized for PSH until they are housed.

Prioritizing access to PSH when participants are transferred from a different PSH project:

Existing PSH participants being transferred from a different NYC CoC PSH project are exempt from the order of priority established in HUD Notice CPD-16-11. Such transfers should be considered to best serve the needs of PSH participants and/or ensure efficient use of PSH resources. All PSH transfers must be coordinated through and approved by PACT to ensure that any resulting PSH vacancy is filled using the order of priority established in this policy and HUD Notice CPD-16-11, except in cases where existing project participant households exchange units. In all cases, PSH units must be prioritized for eligible applicants residing in the NYC CoC covered geography over eligible applicants residing in another CoC.

Order of priority for PSH when no chronically homeless person exists on the By-Name List or wants to live in the jurisdiction where the vacancy is:

When no chronically homeless person or no chronically homeless person who meets a project's HUD-approved target population criteria (e.g. families with children, youth under 25, veterans, survivors of domestic violence, people with mental illness, people who use substances, or people with HIV/AIDS) exists on the *By-Name Prioritized List of People Experiencing Chronic Homelessness* maintained PACT, CoC Program-funded PSH projects are required to follow the order of priority below when selecting participants. PACT will work with CoC Program-funded PSH projects to match eligible applicants to vacancies in their preferred geographic area, and homeless people may decline referrals that are inconsistent with their geographic preferences. Projects are required to follow the order of priority below when there is no eligible chronically homeless applicant who wishes to live in the geographic area where the vacancy exists.

(a) First Priority—Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs

An individual or family that is eligible for CoC Program-funded PSH who has experienced fewer than four occasions in the past three years where they have been living or residing in a place not meant for human habitation or in an emergency shelter but where the cumulative time

homeless during the three-year period is at least 12 months **and** who has been identified as having severe service needs as demonstrated by being assigned to Level I based on New York City's Standardized Vulnerability Assessment.

(b) Second Priority—Homeless Individuals and Families with a Disability with Severe Service Needs.

- i. An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation or in an emergency shelter where the cumulative time homeless during the three-year period is at least 8 months **and** who has been identified as having severe service needs as demonstrated by being assigned to Level I based on New York City's Standardized Vulnerability Assessment.
- ii. An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation or in an emergency shelter where the cumulative time homeless during the three-year period is less than 8 months **and** who has been identified as having severe service needs as demonstrated by being assigned to Level I based on New York City's Standardized Vulnerability Assessment.

Applicants who meet the definition in section i above (i.e., those whose period of cumulative time homeless during the three-year period is at least 8 months) will be prioritized over applicants who meet the definition in section ii above.

(c) Third Priority—Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Emergency Shelter Without Severe Service Needs.

An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation or an emergency shelter where the individual or family has not been identified as having severe service needs as demonstrated by being assigned to Level II or Level III based on New York City's Standardized Vulnerability Assessment, with Level II applicants being prioritized over Level III applicants.

(d) Fourth Priority—Homeless Individuals and Families with a Disability Coming from Transitional Housing.

An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing the applicant had lived in a place not meant for human habitation, or in an emergency shelter. This priority also includes individuals and families residing in transitional housing who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and prior to residing in that transitional housing project even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing.

Within each priority group described above, applicants will be prioritized based on the number of days of cumulative homelessness during the past 3 years. For example, applicants in priority group "a" with more cumulative days of homelessness will be prioritized over other applicants in priority group "a" with fewer cumulative days of homelessness. Only as necessary to break a tie, applicants within each priority group will be further prioritized based on date of application, with earlier application dates being prioritized over later application dates.

Beds assigned to applicants who do not meet HUD criteria for chronic homelessness will continue to be dedicated or prioritized, so when that bed becomes vacant again it must be used to house a chronically homeless person unless there are still no eligible persons who meet that criterion within the CoC's geographic area at that time.

B. Types of Assistance

The program will provide safe, affordable housing that meets participants' needs in accordance with client intake practices and within HUD guidelines for permanent supportive housing programs.

- There can be no predetermined length of stay for a PSH program
- Program participants in PSH must enter into a lease agreement for an initial term of at least one year. Must be automatically renewable upon expiration up to a maximum of 24 months.
- PSH may not have any requirements that are not in a standard lease. (i.e. no preconditions such as income or sobriety)

VI. Supportive Services Only

Supportive services only (SSO) projects may provide a range of services for people who are homeless. However, in New York City, the CoC generally limits SSO projects to street outreach or projects that otherwise fill a critical, unmet need.

Unless prohibited by other project funding sources, SSO projects are required to use a low barrier Housing First model (i.e., not have service participation requirements or preconditions to entry, such as sobriety or a minimum income threshold, and must prioritize rapid placement and stabilization in permanent housing).

A. Eligibility and Prioritization

- SSO projects must serve people who are literally homeless (homeless definition Category 1).
- SSO street outreach projects should prioritize persons with the most severe service needs, greatest vulnerabilities, and with the longest homeless episodes.

IX. Appendix

Section I. Recordkeeping Requirements:

All households served in CoC-funded PSH must have documentation on file verifying their status of homelessness and disability, including any necessary 3rd Party documentation as required by HUD. Recipients of CoC Program-funded PSH, will maintain evidence of implementing these priorities. Evidence of following these orders of priority must be demonstrated by:

- A. Evidence of Severe Service Needs.** Evidence of severe service needs is that by which the recipient is able to determine the severity of needs as defined in this policy using data-driven methods such as an administrative data match or through the use of a standardized assessment. The documentation should include any information pertinent to how the determination was made, such as notes associated with case-conferencing decisions.
- B. Evidence that the Recipient is Following the CoC's Written Standards for Prioritizing Assistance.** Recipients must follow the CoC's written standards for prioritizing assistance, as described in this policy. Recipients must also document that the CoC's revised written standards have been incorporated into the recipient's intake procedures and that the recipient is following its intake procedures when accepting new program participants into the project.

C. Evidence that there are no Households Meeting Higher Order of Priority within CoC's Geographic Area.

- (a)** When dedicated and prioritized PSH is used to serve non-chronically homeless households, the recipient of CoC Program-funded PSH should document how it was determined that there were no chronically homeless households identified for assistance within the geographic area at the point in which a vacancy became available. This documentation should include evidence of the outreach efforts that had been undertaken to locate eligible chronically homeless households within the defined geographic area and, where chronically homeless households have been identified but have not yet accepted assistance, the documentation should specify the number of persons that are chronically homeless that meet this condition and the attempts that have been made to engage the individual or family. The recipient of PSH may refer to a single prioritized list maintained by PACT as evidence.
- (b)** When non-dedicated and non-prioritized PSH is used to serve an eligible individual or family that meets a lower order of priority, the recipient of CoC Program-funded PSH should document how the determination was made that there were no eligible individuals or families within the geographic area that met a higher priority. The recipient of PSH may refer to a single prioritized list maintained by PACT as evidence that there were no households identified within the CoC's geographic area that meet a higher order of priority.

Section II. Severity of Service Need Requirements

For the purposes of this policy, severity of service needs must be documented in a program participant's case file. The determination must not be based on a specific diagnosis or disability type, but only on the severity of needs of the individual or family. The NYC CoC uses the NYC Standardized 1i Assessment to determine severity of service needs.