

Albuquerque CoC Written Standards for Administering Permanent Supportive Housing

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Introduction

In accordance with Title 24 of the Code of Federal Regulations (24 CFR) 91.220(l)(4)(i), 576, and 578, the City of Albuquerque (CABQ), through the Albuquerque Strategic Collaborative (ABQ CoC Membership), has developed the following Written Standards. These standards apply to all programs that receive Continuum of Care (CoC) Permanent Supportive Housing (PSH) funding in the Albuquerque CoC and are intended as the set minimum standards for administering these funds. Albuquerque CoC-PSH programs may develop additional standards for administering program assistance, but any additional standards cannot be in conflict with those established by the ABQ CoC, HUD CoC Program Interim Rule, the most recent HUD CoC Notice of Funding Availability (NOFA), or limit access to those that would otherwise benefit from assistance. In addition, all CoC-PSH programs must comply with the applicable NOFA under which the program was originally awarded and any additional eligibility requirements imposed by future NOFAs. The purpose of these standards is to outline key elements of the HUD regulations and priorities set by the Albuquerque CoC, and to ensure that the CoC-PSH programs are administered fairly and methodically. The Albuquerque Strategic Collaborative will continue to build upon and refine this document to address the needs of those in the community experiencing homelessness.

CoC Permanent Supportive Housing Summary

CoC Permanent Supportive Housing is designed to aid individuals and families experiencing homelessness with a disability with stable permanent housing. Enrollment in an Albuquerque CoC-PSH program should rely heavily on a case management approach that ensures long-term stability for program participants. Providers are expected to implement a case management plan that, through connection to community resources and mainstream benefits, will increase household income and housing stability.

The benefit of the CoC-PSH is that the program is not time limited, allowing providers to tailor assistance to the unique needs of each household without limited rental assistance.

Participation in the Coordinated Entry System (CES)

Coordinated Entry System (CES) is a community wide process for facilitating access to Continuum of Care and Emergency Solutions Grants (ESG) resources, designated for individuals and families experiencing homelessness. CES ensures that every homeless individual or family is assessed using a common assessment tool, is known by name, is provided assistance based on the individual or family's unique needs, and is matched to the most appropriate service strategy or housing intervention. The common assessment tool used by CES is the Vulnerability Index - Service

Prioritization Decision Assistance Tool (VI-SPDAT), and is a self-identifying survey. Completed VI-SPDATs and corresponding prioritization lists, used to make referrals for housing and resources, are entered into a shared database, known as the NM Homeless Management Information System (HMIS) database.

The New Mexico Coalition to End Homelessness (NMCEH) serves as the Lead Agency for the Coordinated Entry System (CES), has staff dedicated to the operation of the system, and provides oversight for the Albuquerque CoC's use of the CES, ensuring system coordination among emergency shelters, essential service providers, homelessness prevention providers, transitional housing providers, permanent housing providers, other homeless assistance providers, and mainstream services and housing.

All Albuquerque CoC funded programs are required to participate in the CES (24 CFR part 578). Requirements of participation are as follows:

- Providers will operate within an agency that serves as an access point for anyone that experiences homelessness and presents at that agency for assistance; where, at a minimum, one staff member is trained in administering the VI-SPDAT, and one staff member is trained and registered in HMIS and trained in CES Prioritization List navigation. Providers will have 60 days to allow for new staff to be trained and registered, in the event that staff turnover removes trained staff.
- To the maximum extent practicable, households presenting for assistance will be assessed using the VI-SPDAT. Where the provider is unable to administer the VI-SPDAT, households that present for service will be provided appropriate referrals to CES.
- Providers will submit all completed VI-SPDAT surveys to CES within three business day of being completed.
- Providers will post notice about CES, to include contact information, in a public space, viewable by anyone presenting for housing or services.
- Providers will have a current NM-HMIS data sharing agreement.
- Providers will select all program participants using CES, using the prioritization and tenant selection process outlined in these standards.

- Providers will not add stipulations to applicant referral requests that are not explicitly outlined in HUD regulations or the program application submitted to HUD for that operating year.
- Providers will not use answers in the VI-SPDAT or NM-HMIS records to deny housing or services to any program applicant.
- Providers will not make updates to a participant's answer(s) in the VI-SPDAT without the participant's knowledge and consent.

Fair Housing

Providers will not prohibit access to CoC-PSH funded programs to anyone that would otherwise be eligible for assistance based on race, color, religion, national origin, sex, age, familial status, disability type, actual or perceived sexual orientation, gender identity or marital status. Providers will post publically a HUD issued Fair Housing notice, in a place that is visible to all program participants and persons who present for assistance or services, and provide participants with written notice of their rights under Fair Housing at program entry.

Equal Access

Units of general local government and nonprofit organizations shall make it known that facilities and services supported by this grant are available to any person (who otherwise meets the eligible criteria for the program) in accordance with the Equal Access Rule (24 CFR 5.105(a)(2)) which prohibits discriminatory eligibility determinations in HUD-assisted or HUD-insured housing programs based on actual or perceived sexual orientation, gender identity, or marital status, including any programs funded by the CoC, ESG and HOPWA Programs.

It is allowable for housing programs to exclusively serve families with children, but they must serve all types of families with children including both male and female headed households. The housing may also be limited to one sex, where such housing consists of a single structure with shared bedrooms or bathing facilities such that the considerations of personal privacy and the physical limitations of the configuration of the housing make it appropriate for the housing to be limited to one sex.

Prohibition Against Involuntary Family Separation

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. Providers cannot discriminate against a group of people presenting as a family based on the composition of the family, the age of any members of the family, the disability status of any members of the family, marital status, actual or perceived sexual orientation, or gender identity. Further, the age and gender of a child under age 18 must not be used as a basis for denying any family's admission to CoC-PSH.

Affirmative Outreach

Providers must make known that use of the facilities, assistance, and services are available to all on a nondiscriminatory basis. If it is unlikely that the procedures that the provider intends to use to make known the availability of the facilities, assistance, and services will reach persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for those facilities and services, the provider must establish additional procedures that ensure that those persons are made aware of the facilities, assistance, and services. The provider must take appropriate steps to ensure effective communication with persons with disabilities including, but not limited to, adopting procedures that will make available to interested person's information concerning the location of assistance, services, and facilities that are accessible to persons with disabilities.

Consistent with Title VI and Executive Order 13166, providers are also required to take reasonable steps to ensure meaningful access to programs and activities for limited English proficiency (LEP) persons.

Providers will market their program in an ongoing effort to assure that potential participants who are least likely to access the program, (without regard to race, color, national origin, sex, religion, familial status, sexual orientation, and disability) have access to the program. Providers will develop, and document efforts, to follow a written strategy to provide public notice and conduct outreach to educate those least likely to access resources. At a minimum, affirmative marketing strategies will include efforts to communicate information regarding services and resources available through the program, eligibility requirements, and information about the CES and how the program participates in the CES.

Prioritization for Albuquerque CoC-PSH

In accordance with HUD's *Notice CPD-16- 11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing*, prioritizing CoC-PSH for chronically homeless households is not a one-size-fits-all approach and should only be offered to those households that truly need the level of support provide by this program. In order to use the limited

resources available within the community in the most effective way possible, the Albuquerque CoC is committed to prioritizing PSH for those most in need through an established order of priority.

The Albuquerque CoC has developed an order of priority to establish a process for prioritizing placement into PSH through the CES. The overarching intent of this order of priority is to ensure that chronically homeless households with the longest length of time homeless and the most severe service need are prioritized over other eligible households.

Evidence of Service Needs

The Albuquerque CoC has approved the use of a standard common assessment tool, the VI-SPDAT detailed in these standards, as the assessment tool to determine the level of “service need,” wherein the higher the calculated numerical value reported on the VI-SPDAT, the higher the service need. The VI-SPDAT covers 6 domains of acuity for families and individuals experiencing homelessness. No additional criteria may be used to determine a participant’s service need, as determination must not be based on a specific diagnosis or disability type, but only on the severity of needs of the individual. The determination cannot be made based on any factors that would result in a violation of any nondiscrimination and equal opportunity requirements, see 24 C.F.R. § 5.105(a).

Order of Priority

First Priority

The order of priority established prioritizes chronically homeless households with the most severe service need. Chronically homeless households are offered housing interventions in descending order from highest VI-SDPAT score to lowest.

- Where two chronically homelessness households are presenting with an identical service need score, the household with the longest history of homelessness will be offered the housing intervention first, in descending order from longest to shortest history of homelessness (either continually or cumulatively).
- Where two households have matching service need score and length of homelessness, the household that had been identified in the community first, as recorded in HMIS, will be offered the housing intervention first.

Second Priority

In the event that there are no chronically homeless households identified within the Albuquerque CoC geographical coverage area, households that are not chronically homeless with the most severe service need will be prioritized first.

- Where two households are presenting with an identical service need score, the household with the longest history of homelessness will be offered the housing intervention first, in descending order from longest to shortest time homeless (either continually or cumulatively).
- Where two households have matching service need score and length of homelessness, the household that had been identified in the community first, as recorded in HMIS, will be offered the housing intervention first.

*Note: The order of priority established above will be followed in the context of each program's construction and target population. Referrals will follow the household construction designation (with or without children) in accordance with the program's contractual obligation to HUD. Once a program's contractual obligation is met, programs may request referrals for additional households of either construction, based on capacity to serve that household construction (e.g. with or without children, not household size).

Evidence That There Are No Households Meeting the First Order of Priority Within the CoC's Geographic Area

In the event that CES is unable to locate a household that meets the first order of priority outlined in these Written Standards, the CES will document how it was determined that there were no chronically homeless households that met a higher priority identified for assistance within the CoC's geographic area at the point in which a vacancy became available. Outlined in the *Notice CPD-16- 11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing*, prioritizing. This documentation will include evidence of all outreach efforts that had been undertaken to locate eligible chronically homeless households within the Albuquerque CoC defined geographic coverage 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. Programs must keep this documentation on file for any non-chronically homeless households placed in CoC-PSH.

Transfers from one CoC-PSH Program to Another CoC-PSH Program

PSH is intended to be permanent, with no time limits and is intended to target disabled persons that are literally homeless that have not been successful at maintaining permanent housing on their own. Under rare circumstances, CoC-PSH programs may serve individuals and families from other CoC-PSH programs who met the eligibility requirements for the *new* CoC-PSH program at the time that

they entered the *original* CoC-PSH program. (Section 423(f) of the McKinney-Vento Act, as amended by the HEARTH Act).

Once an eligible household is placed in CoC-PSH, the household does not retain their homeless or chronic homeless status, but can be transferred between CoC-PSH programs, under certain circumstances. Eligible households that request a transfer, that were also chronically homeless prior to entering the original CoC-PSH that they are currently participating in, or who are otherwise eligible for a transfer under the Albuquerque CoC VAWA Emergency Transfer Plan, will be prioritized for available CoC-PSH openings over households that are not yet participating in CoC-PSH.

This means that an individual or family may transfer from one CoC-PSH program to another, under the CoC Program Rule. A transfer can occur if there is another CoC-PSH program that better meets the service needs of the program participant, a transfer is needed under the VAWA Emergency Transfer Plan, or where the current CoC-PSH program in which they reside is ending operations or is reducing in size.

A CoC-PSH provider cannot determine when a program participant is "ready" to be transferred or exited from a program and must forward the request for transfer to the CES. CoC-PSH providers cannot look for or make decisions regarding transferring participants outside of CES. Transfers are not guaranteed for all current participants receiving CoC-PSH assistance that may seek a transfer due to eligibility requirements, availability of funds, or program designation.

CoC-PSH providers accepting program participants from other CoC-PSH programs must keep records on file including a CoC transfer sheet, demonstrating that the individual or family is (1) transferring from another CoC-PSH program; (2) the reason for the transfer; and (3) confirmation that the participant met the eligibility requirements for PSH prior to entering the original PSH program.

*Note: Programs transferring a participant from one CoC-PSH to another under the VAWA Emergency Transfer Plan must follow the additional processes and documentation requirements outlined in these standards under VAWA Emergency Transfer Plan.

Participant Selection

All Albuquerque CoC-PSH providers will select program participants through a prioritized referral process from the CES. To ensure rapid referrals and program intake, providers should not wait until requesting a referral to notify CES of upcoming available funds. If a provider is aware that they will

be requesting a referral, because program participants will be exiting the program, the program is new, or the program will be expanding capacity, they should notify CES immediately.

Referral Process

When CoC-PSH providers are ready to accept new participants into their program, they will submit a referral request form to CES. CES will provide a referral in accordance with the following:

- Once an opening is available, CES will have five business days to provide the program with an appropriate referral and completed CoC Common Application, in accordance with the prioritization established by these Written Standards.
- CES is not permitted to provide referrals that would violate these Written Standards or HUD regulations. If CES is unable to provide a referral, because the request is out of compliance, they will provide notice, to include the reason for refusing to provide a referral, within five business days. It will be the responsibility of the provider to, within five business days of receiving the notice, either modify the request for referral, or contact the CoC Lead for assistance in finding a resolution.

CES will provide a completed CoC Common Application for the applicant to the PSH provider, along with any available supporting documentation, and will assist with connecting the applicant being referred to the PSH provider to the maximum extent practical.

- The provider must make contact with the program applicant within three business days of receiving a referral, and notify CES immediately if not able to reach the applicant after three attempts using all available methods.
- In the event that the applicant is not reachable by CES or the provider within three business days of attempted contact, the provider will send the CoC Common Application back to CES listing inability to contact the client as reason for denial, and a new referral will be issued by CES within three business days.

The PSH provider must give the applicant and CES a specified date, time, and location for all meetings pertaining to eligibility determination and program intake that accommodate the applicant's schedule.

- If the program applicant fails to attend a scheduled meeting, the provider must notify CES immediately. If neither the program nor CES are able to contact the applicant for three business days, the provider will send the CoC Common Application back to CES listing

inability to contact the client as reason for denial and a new referral will be issued by CES within three business days.

- If the program applicant fails to attend three scheduled meetings within a two-week timeframe, the provider will send the CoC Common Application back to CES listing inability to determine eligibility as reason for denial, and a new referral will be issued by CES within three business days.

The PSH provider must make an eligibility determination within ten business days of receiving a referral. Once an eligibility determination is made, regardless of the outcome, the provider must submit confirmation or denial of eligibility and intake to CES within one business day, using the CoC Common Application.

- If a program applicant is determined to be eligible for the program, and accepts the offer to participate in the program, the applicant will be accepted into the program. The date of eligibility determination will be the official program intake date, and listed as such in HMIS.
- If a program applicant is determined to be ineligible, based on one of approved reasons listed in the CoC Common Application, or if the program applicant declines to participate in the program, CES will send a new referral within five business days of receiving the returned CoC Common Application.

If a referral is denied for one of the above reasons, the CoC-PSH provider will notify the program applicant verbally, and when possible, in writing as quickly as possible.

Eligibility Determination

CoC-PSH providers are responsible for ensuring that participants are eligible for CoC Permanent Supportive Housing prior to program intake. The requirements for participant eligibility are imposed by the current NOFA through which the program is operating. Currently, to receive Albuquerque CoC-PSH assistance, heads of household must qualify as “chronically homeless” based on the “Final Rule for Defining Chronic Homelessness” definition found in 24 CFR parts 91 and 578, meaning that the applicant, serving as the head of household, meets the following three conditions: has a qualifying disability, is experiencing literal homelessness at time of program intake, and has experienced a history of literal homelessness that meets the standard for chronic homelessness.

CoC-PSH providers will determine eligibility based solely on HUD eligibility requirements and may not add additional eligibility requirements for CoC-PSH housing programs.

Qualifying Disability

A Qualifying Disability is defined as:

1. A physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury that meets the following criteria:
 - a. Is expected to be long-continuing or of indefinite duration; and
 - b. Substantially impedes the individual's ability to live independently; and
 - c. Could be improved by the provision of more suitable housing conditions; or
- b. A developmental disability as defined in section 102 of the *Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002)*; or
- c. The disease of acquired immunodeficiency syndrome (AIDS) or any condition arising from the etiologic agency for acquired immunodeficiency syndrome (HIV).

Literal Homelessness

Literal homelessness is defined, by HUD, as currently living in one of following:

- A place not meant for human habitation such as on the streets, in a car, in a tool shed or garage, or under a bridge; or
- An emergency shelter to include a motel/hotel paid for by a charitable organization or a government entity; or
- An institution, where the applicant has been residing for less than 90 days, and where there residing in a place not meant for human habitation or an emergency shelter immediately prior to entering the institution.

Chronic Homelessness

The applicant must have experienced at least 12 months of literal homelessness under one of the following conditions:

- Continuously, were the applicant has experienced 12 consecutive months of literal homelessness immediately prior to intake, with no breaks in literal homelessness lasting longer than six days; or

- The applicant has experienced at least four *separate* occurrences of literal homelessness within the three years immediately prior to intake, that total at least 12 months of literal homelessness. Each occurrence must be separated by a break in literal homelessness of seven or more days.

Record Keeping Requirements for Program Eligibility

CoC-PSH providers must meet specific record-keeping requirements when documenting participant eligibility for this program. This section will address the methods that programs must use, in order to establish written documentation that shows a program applicant meets the eligibility criteria for PSH programs.

CoC-PSH providers have the primary responsibility to collect HUD required documentation of homelessness and disability to verify eligibility. Applicants are expected to assist in collecting documentation when possible, but providers are responsible for determining and providing the level of support needed to complete this task.

Documenting a Disability

Programs must document that a participant has a qualifying disability at program intake using one of the following:

- Written verification by a professional licensed to diagnose and treat the qualifying disability;
or
- Written verification from the Social Security Administration, which may include an award/benefit verification letter that specifies that benefits were *awarded for a disability*; or
- The receipt of a current disability check, where an SSDI or Veteran Disability check establishes a disability with no further clarification needed, but an SSI check must clarify that it is *for a disability*; or
- If one of the above is not available at intake, a documented observation made by the person determining eligibility, known as an “intake worker observation,” where additional documentation in the form of written verification by a licensed professional, written verification from the social security administration, or the receipt of a current disability check is also obtained *within 45 days* of program intake.

Note: Medical records or treatment plans do not qualify as appropriate documentation of a disability, and should therefore not be used in determining the eligibility of an applicant.

Documenting Homelessness

HUD does not require documentation showing that an applicant is literally homeless for every day of the 12 months used to determine eligibility for chronic homelessness. One documented day within a calendar month is enough to establish homelessness for that entire calendar month, unless there is documentation showing that the applicant had a break in literal homelessness during that month.

For literal homelessness status at time of intake, documentation must show that the applicant was literally homeless *within 14 days* of eligibility determination.

HUD has established additional specific record-keeping requirements and standards for documenting homelessness status for current literal homelessness, and chronic homelessness that are outlined below.

Order of Priority for Collecting Eligibility Documentation

HUD has established an “Order of Priority” for documenting literal homelessness. This order of priority establishes guidelines for how program staff should prioritize different forms of documentation, with attempts to collect higher-priority documentation before moving on to lower-priority documentation. Reasonable efforts should be made to follow the order of priority established by HUD. The order of priority is as follows:

1. Third Party Verification – Intake staff should make a reasonable effort to obtain third party documentation for current literal homelessness and for all 12 months showing chronic homelessness. For months that cannot be covered by third party documentation, the effort to do so should be recorded as due diligence.
2. Intake Worker Observation – Where applicable, intake worker observation should take priority over self-certification of literal homelessness.
3. Self-Certification – For any month that the applicant must document literal homelessness because third-party verification or intake-worker observation is not available, the applicant must provide self-certification of their living situation during that month.
4. All 12 months used to establish chronic homelessness, must be covered by one of the following: third party verification, intake worker observation, or self-certification by applicant.

Order of Preference for Third Party Verification

In order to build the strongest case possible for documenting literal homelessness and chronic homelessness, the following order of preference should be used when collecting third party verification.

1. HMIS
2. Third Party Verification provided by a housing or service provider or institutional documentation.
3. Third Party Verification provided by a community member that does not have a personal relationship with the applicant.
4. Third Party Verification provided by a community member that has a personal relationship with the applicant.

HMIS Records

HMIS records can be used to establish shelter stays only. Outlined below are the detailed instructions that must be followed in pulling HMIS records, as provided by the local HUD field office.

1. An HMIS record should be a “screen shot” that includes Client name, Shelter name, and entry/exit dates.
2. The local HUD field office has asked that programs generate a “Client Event Report.” To do this, programs must:
 - a. Log into ServicePoint, and click on “REPORTS”,
 - b. Click on “ART”,
 - c. Once in the “ART” directory, open the “PUBLIC FOLDER”,
 - d. In the “PUBLIC FOLDER”, open the “CoC and MFA” sub-directory,
 - e. Select the “409 – CLIENT EVENT HISTORY” report,
 - f. There is only one user prompt within this report, enter the desired “HMIS CLIENT ID”, and
 - g. Save the report.
3. A printed hard copy of the report and retain the “CLIENT TRANSACTION DETAIL” tab information in the participant file.

4. It is important to note when using HMIS records, HMIS relies on user input to be timely and accurate, so program staff should discuss with the applicant their own memory of shelter stays and encounters and not assume that every encounter and shelter stay is recorded, properly or at all, in HMIS.

Institutional Records

Institutions, such as hospitals or prisons, can provide official records that confirm institutional stays or literal homelessness at time of intake. If an individual qualifies as chronically homeless because he or she has been residing in an institutional care facility for less than 90 days and was living in a shelter or place not meant for human habitation immediately prior to entering the institutional care facility, evidence must include one of the following:

- Discharge paperwork or a written or oral referral from a social worker, case manager, or other appropriate official of the institutional care facility stating the beginning and end dates of the time residing in the institutional care facility. All oral statements must be recorded by the intake worker; or
- Where the evidence listed above is not obtainable, a written record of the intake worker's due diligence in attempting to obtain that evidence and certification by the individual seeking assistance that states that he or she resided for fewer than 90 days; *and* third party verification or self-certification that the individual was living in a shelter or place not meant for human habitation immediately prior to entering the institutional care facility.

Verification by a Housing or Service Provider or a Community Member

Third party contacts have different authorization to provide verification, based on their relationship with the applicant. Housing and service providers who know the applicant in their professional capacity, such as shelter staff, housing staff from other programs, doctors, teachers, case managers, therapists, or police officers can verify living situations that they see or that they hear about. If they hear about a living situation, they need to clarify that it is their professional opinion that the information is accurate.

Outreach Workers must physically observe an applicant's living situation to verify current literal homelessness, but may provide verification for previous months of homelessness that they either observed or were told about at the time of the encounter.

Community Members such as shop keepers, volunteers, neighbors, family members or friends may only provide third-party verification for living situations that they physically observed.

Written verification is always preferred over oral verification. There are two circumstances where oral verification is appropriate.

- When it is not possible to obtain written verification.
- When written verification that has already been provided is not complete, and requesting updated written verification is burdensome, program staff can document oral conversations where they obtained clarification about the details of the third-party's encounter with the applicant.

Written third party verification must include a printed name, signature, and contact information of the person providing verification. Details of the verification must provide either the specific date or the month for which verification is being provided, exactly where the applicant was residing, the third party's relationship to the applicant, and why the third party is able to provide verification.

If the written verification is provided by a housing or service provider, the document should be on letterhead. If verification is being provided because the applicant reported their homelessness status to the housing or service provider, then the verification must include certification that the provider believes the information to be accurate.

Documenting Breaks in Homelessness

When documenting episodic chronic homelessness, any breaks in literal homelessness need to be documented and all breaks can be documented using self-certification by the applicant. A minimum of three separate breaks must be documented in the file, in order to establish episodic chronic homelessness.

Homeless Management Information System (HMIS) Requirements

All CoC-PSH providers are required to enter participants in the NM Homeless Management Information System (NM-HMIS) at first contact, reassessment, and exit, per current data standards. Programs that are specifically forbidden by other statutes or regulations (e.g., domestic violence victim service providers) must participate utilizing an approved comparable database to meet reporting requirements. Albuquerque CoC-PSH DV Providers shall actively utilize the Osnium comparable database system and shall be in compliance with all data quality standards set forth by HUD.

All providers must collect and maintain common data fields as determined by current HUD data standards in effect, and considering all relevant regulations. This requirement helps to ensure

coordination between service providers through the Coordinated Entry System (NM-CES), while avoiding duplication of services and client data, and provides an opportunity to document homelessness for eligibility of assistance. Providers must enter and maintain all data required to complete all reporting requirements established by HUD, the City, and the CoC. All NM-HMIS participating agencies must also adhere to the policies and procedures outlined in the NM-HMIS Standard Operating Procedures, including timely, accurate, and complete data quality management.

Confidentiality of Records

All CoC-funded programs must uphold all privacy protection standards established by the NM-HMIS Standard Operating Procedures and relevant federal and State of New Mexico (State) confidentiality laws and regulations that protect client records. Confidential client records may only be released with the participant's or the participant's guardian's consent, unless otherwise provided for in the pertinent laws and regulations. All required HMIS forms can be found within the NM-HMIS database program.

Verbal Explanation

Prior to every participant's initial assessment, CoC-funded programs must provide a verbal explanation that the participant's information will be entered into an electronic database that stores client information and an explanation of the NM-HMIS Client Consent Form terms. Participants should also be informed that they may be removed from the database at any time at their request.

Written Consent

After being provided a verbal explanation, each participant who agrees to have his or her personal protected information (PPI) entered into the NM-HMIS must sign the NM-HMIS Client Consent Form. Exception: verbal consent to enter PPI into the NM-HMIS may be obtained during a phone screening, outreach, or diversion, provided that the provider obtains the participant's written consent at the next available opportunity. Households that do not sign the consent are entered into NM-HMIS using only an identifier number.

Privacy Policy

Providers must establish a written privacy policy, which must be posted in a place where all participants may easily view it, and will be provided upon a participant's request.

**Note: The standards outlined in the following two sections are separated by program funding type, and are applicable to CoC-PSH programs based on program funding type.*

Standards Specific to Leasing and Operations Funded Programs

Below are standards applicable **ONLY** to CoC-PSH providers that operate with leasing or operations funds.

Fair Market Rent

CoC-PSH providers utilizing leasing or operating funds to pay for rental assistance are required to meet Fair Market Rent standards (FMR). HUD establishes FMR to determine payment standards or rent ceilings for HUD-funded programs that provide housing assistance, which it publishes annually for 530 metropolitan areas and 2,045 non-metropolitan county areas. Federal law requires that HUD publish final FMRs for use in any fiscal year on October 1, the first day of the HUD fiscal year. FMRs for each fiscal year can be found by visiting HUD's website. Providers must evaluate FMR at lease signing and at least once annually.

Leasing & Occupancy Agreements

For leasing and operations programs, the lease must be between the CoC-PSH provider and the landowner/owner of the property. An additional occupancy agreement or sublease must also be signed between the grantee and program participant that formalize his or her housing rights and outlines program expectations regarding continued occupancy in the housing. The occupancy agreement must be for a term of at least one year and be automatically renewable upon expiration for terms that are a minimum of one month long, except if prior notice is provided by either party.

Rent Responsibility and Payment

CoC-PSH providers utilizing leasing or operating funds are responsible for 100% of the rent or subleasing costs, even in circumstances where the program participant does not pay their portion in a given month. Payment of rent is made directly to the landowner or owner based on actual cost. Leasing funds may be used to pay up to 100% of the costs of leasing a structure.

CoC-PSH providers are not permitted to provide leasing or operations rental assistance to a program applicant who is already receiving rental assistance, or living in a housing unit receiving rental assistance or operating assistance through other Federal, State, or local sources.

Vacant Units

CoC-PSH provider utilizing leasing or operating funds must continue to pay rent on a temporarily vacant unit that is still under contract or lease.

Security Deposits

CoC-PSH programs may use leasing funds to pay for security deposits, in an amount not to exceed 2 months of actual rent. An advance payment of the last month's rent may be provided to the landlord in addition to the security deposit and payment of the first month's rent.

Multiple security deposits for the same participant are allowable when a household must be relocated to a different unit (e.g., if FMR and/or rent reasonableness changes or if household composition changes). Any refund of the initial deposit must be returned to the provider.

Property Ownership Restrictions

Leasing funds cannot be used to lease units or structures owned by the provider, or their parent, subsidiary, or affiliated organization. HUD has the authority, however, to grant an exception to the ownership clause for good cause. Providers that own their property may not conduct HQS inspections for that property.

Standards Specific to Rental Assistance Programs

Below are standards applicable **ONLY** to CoC-PSH providers that operate with rental assistance funds.

Lease Agreement

Each program participant receiving rental assistance must have a legally binding written lease for the rental unit. The participant must be the tenant on a lease for a term of at least one year that is renewable and terminable only for cause. The lease must be renewable for terms that are a minimum of one month.

Rental Agreement

The CoC-PSH providers must have a written agreement with the landowner governing the payment of rental assistance. Providers must make timely payments to each landlord or property owner in accordance with this rental agreement. All rent payments must go directly to a third-party (directly to landlord). Providers are solely responsible for paying late payment penalties that are incurred by the program with non-CoC funds.

Rent Payments

Program participants receiving rental assistance funds pay their portion of rent directly to the landlord. The difference between the total rent and the amount paid by the participant is then paid by the provider. CoC-PSH providers may not use CoC funds to cover the cost of the program

participant's rent, or late payment penalties, if the program participant fails to pay his or her portion of rent.

Providers must make timely payments to each landlord or property owner in accordance with the rental assistance agreement. All rent payments must go directly to a third-party (directly to landlord). Providers are solely responsible for paying late payment penalties, that are incurred as a result of late payments on the agency portion of rent, with non-CoC funds.

Security Deposit

CoC-PSH programs may use rental assistance funds to pay for security deposits, in an amount not to exceed 2 months of actual rent. An advance payment of the last month's rent may be provided to the landlord in addition to the security deposit and payment of the first month's rent.

**Note: The standards outlined below are no longer separated by program funding type, and are applicable to all CoC-PSH programs.*

Application Fees

CoC PSH providers may pay for application fees for a participant during the housing search process. The CoC PSH provider may only pay for one application fee at a time, but the CoC PSH provider does not have to limit to one application fee per participant. CoC PSH providers are allowed to pay multiple application fees per participant as long as they are necessary, reasonable and within the grant budget (e.g. participant has zero income). The CoC PSH program policies and procedures should provide a standard for distribution of application fees that can be applied consistently across the program.

Utility cost

If electricity, gas, and water are included in the lease total, these utilities may be paid from leasing funds. If rental unit utilities are not covered by the lease, these utility costs are an operating cost. If a structure is being used as a supportive service facility, then these utility costs are a supportive service cost.

Programs can require the program participants to pay for utilities that are not included in the lease. If the participant is required to pay utilities, then a utility allowance must be factored into the rent calculation determination. If the Public Housing Authority's monthly allowance for utilities exceeds the amount the program participant is required to pay for a rent contribution, the program participant must be reimbursed for the difference. Where a utility reimbursement is owed to the program participant this amount would need to be paid in one of the following ways:

1. Pay the program participant directly. The provider can pay the utility reimbursement directly to the program participant.
2. Pay the Utility Company on Behalf of the Program Participant. The provider can pay the utility reimbursement to the utility company on behalf of the program participant. If the provider chooses to do this, the provider must have the permission of the program participant and must notify the program participant in writing of the amount paid to the utility company (to allow the program participant to pay any outstanding amounts).

Note: CoC-PSH providers must maintain records of the program participant's permission to pay the utility company directly and the notification(s) to the program participant of the amount(s) paid on their behalf. In either method, the budget line item that the provider uses to pay the utility reimbursement depends on the type of assistance provided. In no case may leasing funds awarded under the CoC Program be used to pay for those utilities that are not included in the provider's lease. To the extent the utility reimbursement would be an eligible cost under the CoC Program, providers may also use program income or matching funds to pay for the utilities.

Rent Reasonableness

Program participant rent must comply with HUD's standard of rent reasonableness, meaning that 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. These rent restrictions are intended to help ensure that program participants can remain in their housing after their assistance ends. Providers will evaluate rent reasonableness at program intake and at least once annually. Documentation of rent reasonableness evaluations will be kept in participant files.

Securing and Maintaining Housing

CoC-PSH providers will assist participants, to the maximum extent practicable, in reducing barriers to securing or maintaining housing, including connection to appropriate resources, efforts to resolve matters related to poor rental history or bad credit, and obtaining identification.

Providers will follow Housing First Principles. Participants will not be screened out for having too little or no income, a history of or active substance abuse, a criminal record (except for state mandated restrictions), or a history of victimization from domestic violence, sexual assault, or childhood abuse. Participants will not be terminated from the program for failure to participate in supportive services, failure to make progress on a service plan, loss of income or failure to improve

income, or any other activity not covered in a lease agreement typically found for unassisted persons in the City of Albuquerque.

Providers will assist participants, to the maximum extent practicable, in identifying potential housing opportunities. Participants will select their own housing. Providers will not restrict housing choices, or deny assistance or services based on the participant's choice to accept or deny a housing opportunity.

Providers will establish clear and consistent policies and procedures that outline a 30-day timeframe for program participants to secure housing after program intake. Providers may grant up to two additional 30-day extensions, for program participants that are actively addressing barriers to securing housing in well-documented and extraordinary circumstances.

At program intake, providers will give program participants, in writing, notice of time limits for securing housing. If program participants do not secure housing within the established timeframe, they will be terminated from the program, in accordance with the provider's termination policy.

Income Verification

All program participants will provide proof of income, or to certify that they have no income at program enrollment, when they provide notice that their income has changed, and at annual assessment. Providers will complete the HUD rent calculation form to determine the maximum portion that the participant may pay toward rent, to meet utility reimbursement requirements, and to support the completion of a needs assessment. CoC-PSH providers must follow guidelines found under 24 CFR 5.609 when calculating income.

CoC-PSH providers must require program participants to notify them regarding changes in their income.

Income Record Keeping Requirements

The following order of priority will be followed in collecting documentation to verify income:

1. **Source Documents.** Source documents for the assets held by the program participant and income received over the most recent period for which representative data is available before the date of the evaluation (e.g. wage statement, unemployment compensation statement, public benefits statement, bank statement).
2. **Third Party Verification.** A written statement by the relevant third party (e.g. employer, government benefits administrator, or the written certification by the provider's intake staff

of the oral verification by the relevant third party of the income the program participant received over the most recent period for which representative data is available.

3. Self-Certification. If source documents and third-party verification are unobtainable, a written certification by the program participant of the amount of income the program participant received for the most recent period representative of the most recent period for which representative data would be available.

Rent Calculation

Participants will be required to contribute a portion of their income toward rent, in accordance with section 3(a)(1) of the U.S. Housing Act of 1937 (42 U.S.C. 1437a(a)(1)). This statute states that the household must pay the highest of:

- (a) 30 percent of the households monthly adjusted income (adjustment factors include the number of people in the household, age of family members, medical expenses, and childcare expenses);
- (b) 10 percent of the household's monthly income; or
- (c) If the household is receiving payments for welfare assistance from a public agency and a part of the payments (adjusted in accordance with the household's actual housing costs) is specifically designated by the agency to meet the household's housing costs, the portion of the payments that is designated for housing costs. *(New Mexico residents are not eligible for this form of assistance.)*

CoC-PSH providers are not permitted to provide rental assistance to a program applicant who is already receiving rental assistance, or living in a housing unit receiving rental assistance or operating assistance through other Federal, State, or local sources.

Habitability Standards

CoC-PSH programs must ensure that participants are residing in units that meet HUD minimum habitability standards for permanent housing. Providers must document compliance with this standard by signing and completing a current Housing Quality Standards Inspection Form before the participant or program signs a lease and before the provider administers any CoC rental assistance or services specific to the unit. In addition, providers must inspect all units annually to ensure that the units continue to meet habitability standards.

Lead-Based Paint Requirements

All HUD-funded housing programs occupied by program participants are required to incorporate lead-based paint remediation and disclosure requirements. Generally, these provisions require the

provider to screen for, disclose the existence of, and take reasonable precautions regarding the presence of lead-based paint in leased or assisted units constructed prior to 1978.

CoC-funded programs are required to incorporate the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4821-4846), the Residential Lead-Based Paint Hazard Reduction Act of 1992 (42 U.S.C. 4851-4846), and 24 CFR part 35, subparts A, B, H, J, K, M, and R in the unit.

Support Services

CoC-PSH programs must ensure that participants have access to supportive services, to include meeting with a case manager or support services staff not less than once per month to assist the program participant in ensuring long-term housing stability. Additional case management and support services should be offered on a case-by-case basis based on demonstrated need.

CoC-PSH programs should offer to support participants in developing a plan to assist the participant in retaining permanent housing, taking into account all relevant considerations, such as the program participant's current or expected income and expenses, and other public or private assistance for which the program participant will be eligible and likely to receive. Identification of goals outlined in their plan should be led by the participant, with support and information provided by the case manager. Interactions with participants will be documented in participant files, and include details about progress towards goals and connection to other resources.

Case management assistance will be documented in the participant's file and in NM-HMIS in accordance with the NM-HMIS Standard Operating Procedures, or a comparable database (DV providers). Case management assistance may continue as "after-care," as needed and on a case-by-case basis, for up to 6 months after the participant is no longer receiving rental assistance.

CoC-PSH programs may not require participants to engage in case management or supportive services to remain in the program. If a participant elects not to access supportive services, this must be notified that they have the right to access these services at any time, and their choice to "opt-out" must be documented in the participant file. Regardless of case management participation, providers must maintain the minimum level of contact necessary to ensure that the participant is still occupying the unit funded through the program. All participant interactions should be documented in the participant file, regardless of engagement in supportive services.

Connection to Alternative Housing Options

Though there is no time limit for participation in CoC-PSH, there is no guarantee that funds will be renewed past the current HUD grant term. Annual funding amounts are based on program scoring,

the score received by the Albuquerque Consolidated Application, and congressional appropriations. Providers are expected to educate participants on all available housing options, and assist interested participants in seeking alternative long term rental assistance and mainstream support services.

At a minimum, providers must notify all participants of open enrollment periods for Albuquerque and Bernalillo County Housing Authority Section 8 and Project-Based housing applications. To the maximum extent practical, programs must assist participants who elect to submit applications for these programs in accessing the application, collecting necessary information and documentation, and maintaining confirmation information.

Coordination with Other Targeted Homeless Services

CoC-PSH providers must coordinate and integrate, to the maximum extent practicable, CoC-funded activities with other programs targeted to homeless people in the Albuquerque CoC. Efforts to coordinate with other targeted homeless services must be documented by providers. These programs may include, but are not limited to:

- Emergency Solutions Grant Program (24 CFR 576)
- Section 8 Moderate Rehabilitation Program for Single Room Occupancy Program for Homeless Individuals (24 CFR 882)
- HUD-Veterans Affairs Supportive Housing (HUD-VASH) (division K, title II, Consolidated Appropriations Act, 2008, Pub. L. 110–161 (2007), 73 FR 25026 (May 6, 2008))
- Education for Homeless Children and Youth Grants for State and Local Activities (title VII–B of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11431 et seq.))
- Grants for the Benefit of Homeless Individuals (section 506 of the Public Health Services Act (42 U.S.C. 290aa– 5))
- Healthcare for the Homeless (42 CFR part 51c)
- Programs for Runaway and Homeless Youth (Runaway and Homeless Youth Act (42 U.S.C. 5701 et seq.))
- Projects for Assistance in Transition from Homelessness (part C of title V of the Public Health Service Act (42 U.S.C. 290cc–21 et seq.))
- Services in Supportive Housing Grants (section 520A of the Public Health Service Act)

- Emergency Food and Shelter Program (title III of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11331 et seq.))
- Transitional Housing Assistance Grants for Victims of Sexual Assault, Domestic Violence, Dating Violence, and Stalking Program (section 40299 of the Violent Crime Control and Law Enforcement Act (42 U.S.C. 13975))
- Homeless Veterans Reintegration Program (section 5(a)(1)) of the Homeless Veterans Comprehensive Assistance Act (38 U.S.C. 2021)
- Domiciliary Care for Homeless Veterans Program (38 U.S.C. 2043)
- VA Homeless Providers Grant and Per Diem Program (38 CFR part 61)
- Health Care for Homeless Veterans Program (38 U.S.C. 2031)
- Homeless Veterans Dental Program (38 U.S.C. 2062)
- Supportive Services for Veteran Families Program (38 CFR part 62)
- Veteran Justice Outreach Initiative (38 U.S.C. 2031)

Connection to Other Federal, State, Local, and Private Assistance

CoC-PSH providers must assist each program participant, as needed, to obtain other Federal, State, local, and private assistance available to assist the program participant in obtaining housing stability. Assistance provided to program participants must be documented by the provider. Assistance programs include:

- Medicaid
- Supplemental Nutrition Assistance Program (SNAP)
- Women, Infants and Children (WIC)
- Federal-State Unemployment Insurance Program
- Social Security Disability Insurance (SSDI)
- Supplemental Security Income (SSI)
- Child and Adult Care Food Program
- Public housing programs

- Housing programs receiving tenant-based or project-based assistance
- Supportive Housing for Persons with Disabilities
- HOME Investment Partnerships Program
- Temporary Assistance for Needy Families (TANF)
- Health Center Program
- State Children’s Health Insurance Program
- Mental Health and Substance Abuse Block Grants
- Services funded under the Workforce Investment Act

Child School Enrollment and Connection to Services

Providers will designate a staff person to be responsible for ensuring that children being served in the program are enrolled in school and connected to appropriate services in the community, including Title 1, early childhood programs such as Head Start, and parts B and C of the Individuals with Disabilities Education Act. Providers that serve households with children will post publically, and provide for households with children at intake, notice of education services available within the community, and document efforts to verify that children are enrolled in school and connected to appropriate services at least once annually.

Providers will also take the educational needs of children into account when families are placed in housing and will, to the maximum extent practicable, place families with children as close as possible to their school of origin so as not to disrupt such children's education.

VAWA Emergency Transfer Plan

In accordance with HUD VAWA protections (24 CFR 5.2005), providers will develop a written VAWA Emergency Transfer Plan, based on HUD’s model emergency transfer plan (HUD form 5381), that provides participants who report that they are under actual or imminent threat with the opportunity to secure safe housing. The VAWA Emergency Transfer Plan must include the following:

Unit Transfer

Program participants who have complied with all program requirements during their residence and who have been a victim of domestic violence, dating violence, sexual assault, or stalking, and who

reasonably believe they are imminently threatened by harm from further domestic violence, dating violence, sexual assault, or stalking (which would include threats from a third party, such as a friend or family member of the perpetrator of the violence), if they remain in the assisted unit, and are able to document the violence and basis for their belief, may retain assistance and will be moved, at their request, to another unit as quickly as possible. See recordkeeping requirements to ensure proper documentation of imminent threat of harm (24 CFR 5.2005).

Notice of Occupancy Rights

Program participants must be provided with a “Notice of Occupancy Rights under the Violence Against Women Act” under the following circumstances:

- At the time the applicant is denied assistance or admission to the CoC program; or
- At the time the individual is provided assistance or admission to the CoC program; or
- With any notification of eviction or notification of termination of assistance.

The “Notice of Occupancy Rights under the Violence Against Women Act” must be made available in multiple languages.

Prohibited Basis for Denial or Termination of Assistance or Eviction

An applicant for assistance through a CoC housing program may not be denied admission to, denied assistance under, terminated from participation in, or evicted from the housing on the basis or as a direct result of the fact that the applicant or participant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, if the applicant or participant otherwise qualifies for admission, assistance, participation, or occupancy.

Program participants may not be denied tenancy or occupancy rights solely on the basis of criminal activity directly relating to domestic violence, dating violence, sexual assault, or stalking if:

- The criminal activity is engaged in by a member of the household of the tenant or any guest or other person under the control of the tenant; and
- The tenant or an affiliated individual of the tenant is the victim or threatened victim of such domestic violence, dating violence, sexual assault or stalking.

Termination of Assistance

Providers may terminate assistance to participants who violate program requirements as outlined below, in accordance with 24 CFR 576.402 (a)(b)(c).

If a program participant violates written program requirements, the provider may terminate assistance in accordance with a formal process established by the provider that recognizes the rights of individuals affected. The provider must exercise judgment and examine all extenuating circumstances in determining when violations warrant termination so that a program participant's assistance is terminated only in the most severe cases.

When terminating rental assistance or housing relocation and stabilization services, the required formal process shall minimally consist of:

- A written notice to the program participant containing a clear statement of the reasons for termination; and
- A review of the decision, in which the program participant is given the opportunity to present written or oral objections before a person other than the person (or a subordinate of that person) who made or approved the termination decision; and
- Prompt written notice of the final decision to the program participant.

Termination does not bar the provider from administering further assistance at a later date to the same household.

Participant Grievances

Providers must create a formal standardized grievance process, which they must incorporate in their internal policy and procedures and at a minimum include:

- An established escalation process if no resolution is found through initial efforts; and
- A designated grievance liaison within the agency; and
- A standard grievance form that can be filled out and returned to a grievance liaison; and
- Participants are informed of their right to file a grievance at initial intake; and
- Participants are provided with notice of their right to contact the agency's Director, the CoC Lead and/or HUD to include contact information; and
- Notice that services will not be denied based on complaints or grievances.

Documentation Requirements

CoC-PSH providers are required to keep back up documentation in the participant's hard-copy or electronic file of the following:

- Applicant's CoC Common Application
- Eligibility determination and supporting documentation
- Initial and subsequent participant lease, occupancy agreement, and/or rental agreement
- Initial and subsequent HQS inspection form
- Initial and subsequent income verification and documentation
- Initial and subsequent rent reasonableness verification
- Initial and subsequent rent calculation (using the HUD authorized form)
- Initial and subsequent verification of child school enrollment and connection to appropriate resources (for households with school-aged children only)
- Verification that participant received a copy of notice of Fair Housing Rights, lead-based paint warnings, notice of occupancy rights under VAWA, their lease, and program policies to include grievance and termination procedures at time of program intake
- All supportive service assessments and case management interactions
- All communications and notices related to the landlord or property owner, grievances or incident reports, VAWA transfers, or program graduation/termination

Environmental Review

An annual environmental review will be conducted by all providers to demonstrate there are no hazardous materials present that could affect the health and safety of the occupants. All CoC activities are subject to environmental review under HUD's environmental regulations in 24 CFR part 58. The provider, or any contractor of the provider of CoC-PSH funds, may not acquire, rehabilitate, convert, lease, repair, dispose of, demolish, or construct property for a CoC program, or commit or expend HUD or local funds for CoC eligible activities, until an environmental review under 24 CFR part 58 has been performed.

HUD Compliance

CoC-PSH providers will regularly attend and participate in CoC membership meetings (the Albuquerque Strategic Collaborative), and meet deadlines set by HUD and the CoC Lead to complete all required HUD activities to include, but not limited to, Annual Progress Reports, CoC renewal program applications, requests for documentation or response prompted by monitoring visits or participant complaints, annual Albuquerque CoC renewal program review conducted by the IRC, and any data and narrative needed to complete the CoC Housing Inventory Chart and Point-in-Time Count, the System Performance Measures report, and the CoC Collaborative Application.

Homeless Representation

Providers must ensure that not less than one homeless individual or formerly homeless individual participates on the board of directors or other equivalent policymaking entity of the agency, to the extent that the entity considers and makes policies and decisions regarding any facilities, services, or other assistance that receive funding under the Continuum of Care grant.

If the provider is unable to meet requirements outlined in the above paragraph, it must instead develop and implement a plan, to consult with homeless or formerly homeless individuals in considering and making policies and decisions regarding any facilities, services, or other assistance that receive funding under Continuum of Care grant.

To the maximum extent practicable, the provider must involve homeless individuals and families in constructing, renovating, maintaining, and operating facilities assisted under CoC, in providing services assisted under CoC, and in providing services for occupants of facilities assisted under CoC. This involvement may include employment or volunteer services.