

REPORT FROM

OFFICE OF THE CITY ADMINISTRATIVE OFFICER

Date: April 2, 2025

CAO File No. 0220-05151-0651

Council File No. 23-1348

Council District: All

To: The City Council

From: Matthew W. Szabo, City Administrative Officer



Reference: Interim Housing Bed Rates

Subject: **INTERIM HOUSING BED RATES ADJUSTMENT FOR FAMILIES**

SUMMARY

In October 2022, Abt Associates, selected by the Los Angeles Homeless Services Authority (LAHSA), in coordination with the Los Angeles County Chief Executive Office Homeless Initiative (County CEO-HI), began a Cost Analysis of Interim Housing (IH) operations. This effort sought to identify the true operating costs of interim housing in Los Angeles County for projects funded by LAHSA, the County's Department of Health Services, and the County's Department of Mental Health. The analysis was completed in August 2023¹. A collaborative working group of representatives from the City, County, LAHSA, and Abt Associates was formed to discuss and develop the IH bed rate formula to ensure transparency in funding. On December 3, 2024, the IH bed rate formula for single adults was approved by the City Council to go into effect on July 1, 2025. An interim increase effective on January 1, 2025 was later approved by Mayor and Council on December 19, 2024.

This report recommends the approval of the interim housing bed rates for families that are agreed upon by City and County representatives, which if approved would result in IH bed rate increases for family sites to be implemented at the beginning of Fiscal Year 2025-26. These rates were developed with the same components as the single adult bed rates to ensure that the methodology is consistent across all populations. If these rates are approved, this office will report back with funding recommendations and request necessary contract authorities to effectuate the increased bed rates.

¹ Abt Associates, "LA Interim Housing Cost Study Final Report with Executive Summary," <https://www.lahsa.org/documents?id=7730-la-interim-housing-cost-study-final-report-with-executive-summary>

RECOMMENDATION

That the City Council, subject to approval by the Mayor:

1. APPROVE the proposed interim housing bed rates for families, as applicable, to be effectuated July 1, 2025, at the Additional Staffing Model, Wage Tier 1 rates as follows:
 - a. \$135 per unit per night for sites with 15 units or more;
 - b. \$169 per unit per night for sites with 14 units or less;
2. INSTRUCT the City Administrative Officer (CAO) to identify funding and include the necessary authorities to execute new or amend existing contracts to effectuate the increased bed rates effective July 1, 2025, in a future report.

BACKGROUND

Interim Housing (IH) is an intervention within the homeless service system that provides short-term, emergency shelter for people experiencing homelessness (PEH). Homeless service providers have expressed concerns that the IH cost reimbursement rates (i.e. bed rates) have been a challenge in recent years as they do not address their true operating costs. In response to this feedback, the Los Angeles Homeless Services Authority (LAHSA), along with support from the County of Los Angeles, procured a consultant, Abt Associates, to conduct a cost study on the IH portfolio across Los Angeles County.

During this study, 125 IH sites serving diverse populations in different Service Planning Areas (SPAs) across Los Angeles County were identified to participate in a survey to provide detailed information about IH operations and costs that encompassed different expense categories. Costs may include case management, meals, housing navigation, connections to mainstream benefits, referrals to outside services as well as actual site/shelter costs. Sixteen of these providers, representing a diverse set of IH sites, were further selected to be interviewed to further review costs associated with IH. The largest cost associated with providing IH services was reported to be staffing and Abt Associates noted that staffing costs were most likely underreported due to hiring challenges and constant turnover.

As a result of the IH Cost Analysis, Abt Associates made the following recommendations:

- Immediate increase in bed-night rates across the portfolio of IH in Los Angeles County
- Work towards a more defensible and empirically-driven bed rate formula

- Apply an inflation factor for yearly increases to reimbursement rates
- To move toward a more equitable homeless service system, there needs to be a transparent funding formula that creates IH bed rates
- Due to the nature of IH, facilities experience increased wear and tear and other unexpected costs, which public funders need to keep in consideration
- Public funders are encouraged to continue to research and understand staffing issues, including living wages, pay inequities, health and wellness benefits, and burnout and staff retention

LAHSA, the County CEO-HI, and the City, represented by the City Administrative Officer (CAO) and Chief Legislative Analyst (CLA), discussed the feasibility and next steps of adopting the recommendations proposed by Abt Associates. Extensive coordination, discussion, and analyses took place over several months between all representatives. These analyses included items such as staffing ratios and costs, as well as property components, such as leasing/ mortgage costs and property maintenance.

The proposed single adult interim housing bed rates, which serve as the basis for the proposed family rates, were presented to the City's Homeless Strategy Committee (HSC), Housing and Homelessness Committee (H&H), and the City Council, which were adopted on December 3, 2024 (C.F. 23-1348). The adopted adult IH bed rates cover the base level of care expected from all service providers and can be used to then add additional services, such as enhanced care, to build upon the rates as applicable. A supplemental report released by the CAO addressed an interim increase for all single adult beds to be effective on January 1, 2025, in an effort to alleviate some of the complications shared by service providers with the original rates that were approved on January 1, 2024. On December 19, 2024, the Mayor concurred with the Council's approval of an \$80 bed rate effective January 1, 2025. The CAO's Office will release a separate funding report to allocate available funding to support these increased rates.

Approved Single Adult Interim Housing Bed Rates

Effective Date	Site Size	Bed Rate
January 1, 2025	All Adult Interim Housing Beds ¹	\$80
July 1, 2025	50 beds or less	\$116
July 1, 2025	51 beds or more	\$89

¹ This rate is applicable for all adult interim housing sites with a bed rate lower than \$80 as of January 1, 2025. Other adult interim housing sites with higher bed rates are not affected.

DISCUSSION

In the report released by the Office of the City Administrative Officer (CAO) on October 2, 2024 (C.F. 23-1348), the single adult bed rate was broken down by line item and included descriptions and rounded dollar amounts for each component. One component that is not included in the City's adopted interim housing bed rate is leasing/ mortgage costs, as it is the City's current practice is to fund this component separately from the bed rate. It is preferential for the City to hold the lease agreements to ensure timely payments and avoid undue cost burdens to service providers. Therefore, the approved bed rate formula is comprised of the following components:

1. Housing

The housing component includes site costs that are normally covered by the service provider. This may include taxes and insurance for the property, as well as daily site maintenance. Some examples of daily maintenance include, but are not limited to: light bulb replacement, faucet repairs, door knob replacements. Any repairs to major building systems should be addressed by the property owner for privately owned sites, or the Building Maintenance Division within the Department of General Services (GSD) for sites owned by the City.

Rounded Cost for all Site Sizes, Staffing Models, and Wage Tiers: \$12.00/bed/night

2. Food

Funding for food is provided per bed, per night. This includes three meals a day, which is contractually obligated through the approved Scope of Required Services, which is included in Attachment 1 of this report. During Abt Associates's analysis, it was reported that there was a marginal cost difference between on-site prepared food and vendor delivery.

Rounded Cost for all Site Sizes, Staffing Models, and Wage Tiers: \$11.00/bed/night

3. Supplies

The funding component for supplies supports items necessary for the site to operate effectively and efficiently. This may include items that are directly used by participants such as linens, laundry, and furniture. This line item also covers service provider items, such as office supplies and vehicle/ gas reimbursement.

Rounded Cost for all Site Sizes, Staffing Models, and Wage Tiers: \$5.00/bed/night

4. Support Costs

Support costs refer directly to client support services. This funding may cover items such as clothing, public transportation services for appointments, program activities, and education and employment related expenses.

Rounded Cost for all Site Sizes, Staffing Models, and Wage Tiers: \$2.00/bed/night

5. Staff

The line item for staffing costs is the most costly component of the interim housing bed rate. Staffing is broken into two categories, which are referred to as “IH Site Staff” and “Operational Staff”. “IH Site Staff” refers to the staff that provide direct services to program participants, such as case managers and security personnel. “Operational” refers to staff that support the daily maintenance and operations of the program. This includes janitorial staff, kitchen staff, and maintenance staff. These rates account for staffing wages starting at \$20.

Rounded Cost for Staff at sites with 50 beds or less: \$74.00/bed/night

Rounded cost of Staff at sites with 51 beds or more: \$50.00/bed/night

6. Administration Rate

In the CAO report dated October 2, 2024 (C.F. 23-1348; C.A.F. December 3, 2024), an increased 12% administrative rate was approved from the original 10%. This rate was agreed upon by both City and County partners, and also applies to family interim housing service providers.

Methodology and Proposed Rate Components

The IH bed rate formula for single adults was split into two rates separated by the number of the beds available onsite, regardless if the beds were within the same program. The purpose of this differentiation is to account for the economies of scale. The IH bed rate for families is also split into two rates, depending on the number of family units that are onsite. One of the key differences between this proposed rate and the original \$99 rate is that each rate applies to a single unit and not a family. Therefore, if a large family is split into two different units, then the service provider will be paid for each occupied unit, and not the individual family. The average family size used within this formula is 3.5, including one head of household and two and half dependents. This ratio is based on an average of all family sites in LAHSA's portfolio for FY 2023-24.

In an effort to create a bed rate formula that is consistent amongst multiple populations, the proposed interim housing bed rate for families builds upon the single adult bed rate. The base rate for the head of household will be consistent with the single adult bed rate, depending on the number of units available on site. In order to right size the number of

occupants anticipated on-site to align with the economies of scale utilized for the adult IH rates, the number of family units is multiplied by an estimated 3.5 occupants (i.e. family size). The conversion of occupants to units and the site size label is as follows:

Proposed Family Interim Housing Bed Rates

Site Size	No. of Estimated Occupants	No. of Family Units	Proposed Family Rate
Small	50 or less	14 units or less	\$169
Large	51 or more	15 units or more	\$135

In addition to the single adult rate components, the family rate takes into account the same funding components for the 2.5 dependents. The cost for the dependents will be added to the single adult rates as follows:

Cost of Dependents within the Proposed Family Interim Housing Bed Rates

No. of Family Units	Food Costs	Support Costs	Staff	Admin (12%)	Component Sum	Dependent Rate ¹	Single Adult Rate	Proposed Family Rate ²
14 units or less	\$11	\$1	\$7	\$2	\$21	\$53	\$116	\$169
15 units or more	\$11	\$1	\$5	\$1	\$18	\$46	\$89	\$135

¹ The final dependent rate is the rounded sum of all bed rate components multiplied by 2.5.

² The Proposed Family Interim Housing Rate is the Single Adult bed rate plus the rounded dependent rate.

Estimated Funding Impact

The City currently provides funding for seven sites with family units, with the number of funded units ranging from 5 to 26. Two sites, with a total of 33 units, only receive funding for leasing costs, while the remaining five sites, with a total of 66 units, receive funding for services. Therefore, the two leased sites are not included in the funding impact analysis of the proposed family bed rates. In FY 2024-25, the City initially funded services for a total of \$2,324,685 and later provided support for a shortfall of \$379,286 at one site for a total cost of \$2,703,971. If the proposed bed rates for families are approved, the City will anticipate funding an estimated \$3,252,150 for FY 2025-26. This will be an approximate increase of \$548,179 from the initial FY 2024-25 funding.

Proposed Scope of Required Services

During the bed rate review process for the Single Adult Interim Housing portfolio, it was determined that it was necessary to review, revise, and standardize the Scope of Required Services (SRS) for its operations. The Office of the Chief Legislative Analyst (CLA) released a parallel report to the CAO's report on the formula of the new interim

housing bed rate and provided the Council with an overview of the revised SRS (C.F. 23-1348, September 27, 2024). As the SRS was standardized during the Single Adult bed rate review process, the CLA does not deem it necessary to provide a separate report for the Family SRS. The draft Family SRS, shared by LAHSA to the City (Attachment 1), is based on the Single Adult SRS and follows the same template with nearly all of the same requirements as the single adult bed. The Family SRS is different from the Single Adult SRS in that it incorporates programmatic changes and requirements related to the make-up of a family unit. The Family SRS includes additional details on motel voucher coordination that did not exist in the Single Adult SRS. The Family SRS also has additional requirements related to education regulations for families.

According to the CLA, other aspects of the Family SRS include requirements of direct support services, security and safety practices, program intake, and participation and termination policies remain the same. The meal requirements on frequency and distribution also remain the same. The case management services section remains the same, with the same minimum of at least one case management services meeting per week, same case manager ratio, and requirement to document all efforts on Homeless Management Information System, requirement to refer clients to health and behavioral services as necessary, and case managers to assist with document collection. The only change in the case management services section is the inclusion of an additional requirement for case managers to develop a housing services plan with each participant in the facility. The Key Performance Indicators (KPI) section remains the same as the Single Adult SRS with all 11 of the performance metrics remaining intact.

FISCAL IMPACT STATEMENT

Approval of the recommendations in this report will not have an immediate impact on the General Fund as funding recommendations will be provided in a future report. However, should the proposed increases be adopted and funding is needed for the initiatives, there may be an approximate General Fund impact of up to \$689,850 in FY 2025-26.

FINANCIAL POLICIES STATEMENT

Approval of the recommendations contained in this report complies with the City's Financial Policies as there is no General Fund associated with the action at this time.

Attachments:

1. FY 25-26 Family Interim Housing Scope of Required Services (SRS)
2. FY 2025-26 Fiscal Impact for City Funded Family Sites



FY 25-26 Family Interim Housing Scope of Required Services (SRS)

This Scope of Required Services (SRS) contains a written summary of, and links to, detailed information regarding the services that must be provided to eligible participants experiencing homelessness. This SRS and the documents that are linked hereto, in combination with [LAHSA Facility Standards](#), [LAHSA Interim Housing Exit and Termination Standards](#), and Key Performance Indicators (KPIs) comprise the entire Statement of Work for Interim Housing. LAHSA reserves the right to make any necessary changes related to prioritization, matching, and other aspects of the implementation of the complete Coordinated Entry System (CES). Contractors/Interim Housing Contractors will be notified through policies, interim guidance, and other forms of guidance when deemed necessary.

OVERVIEW

Interim Housing provides a safe, Low-barrier, Housing First, and supportive temporary housing solution to persons experiencing homelessness, while they are assessed and connected to a broad range of housing resources to resolve their homeless situation as quickly as possible.

GLOSSARY

Coordinated Entry System (CES): The Los Angeles Coordinated Entry System facilitates the coordination and management of a crisis response system's resources that allows Contractors, participants, and policy makers to make data-informed decisions from available information to connect people efficiently and effectively to interventions that will rapidly end their homelessness. CES ensures that the highest need, most vulnerable individuals in the community are prioritized for services and that the housing and supportive services in the system are used as efficiently and effectively as possible. LAHSA funded System Components are connected and coordinated through the CES in response to end homelessness. All programs operating in the LA CES system must operate with a Housing First, Harm Reduction, Low Barrier, and Trauma-Informed Care approach. Participants are matched to interim housing beds through CES.

Domestic Violence/Intimate Partner Violence: Domestic violence, or intimate partner violence includes any behavior that one intimate partner (current or former) uses to establish power and control over another intimate partner. This may include physical violence, sexual violence, stalking, psychological aggression, and coercive acts.

Family: Households of one or more minor children (17 or under) in physical custody or under the guardianship of one or more adults living together. This includes households with same-sex partners, families with intergenerational or extended family members, unmarried couples with children, families with adults who are not the biological parents of the children, and households without minor children in which one member is pregnant, or a household with a qualified dependent.

Homeless Management Information System (HMIS/Clarity): HMIS is a U.S. Department of Housing and Urban Development (HUD) mandated information technology system that is designed to capture participant-level information over time, on the characteristics and service needs of homeless persons. Participant data is maintained on a central server, which will contain all participant information in an encrypted state. HMIS integrates data from all homeless Contractors and organizations in the community and captures basic descriptive information on every person/household served. Participation in the Los Angeles Continuum of Care (LA CoC) HMIS allows organizations to share information with other participating organizations to create a more coordinated and effective delivery system.

Housing Navigation: Housing Navigation bridges a critical gap in services in the Los Angeles Continuum of Care (LA CoC). Housing Navigation provides housing-focused supportive services for people experiencing homelessness referred from

various LAHSA programs with the immediate goal of helping individuals identify, apply for, secure, and move into permanent housing as quickly as possible.

Interim Housing: A temporary housing solution for persons experiencing homelessness. The intention of this emergency solution is to provide participants with a safe place to stay while they are assessed, work on housing goals, and connect to permanent and supportive housing resources. Resource referral and case management are primary interventions that are available to all participants.

Motel Voucher Slot: An allocated reservation within a motel, where a family is temporarily accommodated through a voucher system on a nightly basis.

Qualified Dependents: An individual over the age of 18 who is: (a) Incapable of self-sustaining employment by reason of mental or physical disability, and (b) is dependent upon a parent or guardian for support.

Site-Based Unit: Temporary living spaces within Family Interim Housing sites, which is Interim Housing that consists of either communal dormitory-style arrangements or individual rooms. Refer to LAHSA's Facility Standards privacy expectation on what would constitute a unit in a communal dormitory-style arrangement for a household.

Time Limited Subsidy Program: is a combination of the programs formerly classified as permanent housing subsidy programs such as: Rapid Re-Housing, Recovery Re-Housing and Shallow Subsidy. Time Limited Subsidy Programs are Housing First, Low Barrier, Harm Reduction, Crisis Response programs focused on quickly resolving the crisis of homelessness for eligible participants and assisting them in moving into a permanent housing situation. Time Limited Subsidy Programs provide case management and financial assistance including rental subsidies for a period of time up to twenty-four (24) months. Case managers use Progressive Assistance to help program participants rapidly obtain and stabilize in permanent housing in either the private rental market or affordable housing market as available. Time Limited Subsidy Programs should design service provision based on the core components of Rapid Re-Housing: Housing Identification, Rent & Move-in Assistance, and Case Management & Supportive Services. Time Limited Subsidy programs are expected to be aligned with the 2019 LA City and County Rapid Re-Housing Minimum Service and Operation Practice Standards approved by all RRH funders in Los Angeles and by the CES Policy Council in 2019.

Transitional Housing: Transitional Housing is a form of interim housing. Transitional Housing (TH) provides safe, client-driven supportive services and access to temporary residence for young people experiencing a housing crisis. Participants may enter and receive services in the TH program without any preconditions or requirements such as treatment or participation in services to receive assistance. TH incorporates client-choice by helping participants find permanent housing based on their unique strengths, needs, preferences, and financial resources while being provided with a short-term residence for up to 24 months. Transition age youth (TAY) TH is up to 36 months. Transitional Housing may be site-based facilities or provided in scattered site apartments.

Unaccompanied Minor: Individual under the age of 18 who is not emancipated.

GOAL

The goal of family interim housing programs is to connect participants to resources that help them improve their safety and well-being and achieve their housing stability goals. Some of these supportive services may include life skills development, as well as connections to employment, education, healthcare, and mental healthcare. Participants will work in close partnership and collaborate with a TH for TAY provider (Contractor) to develop exit plans from TH to permanent housing

ELIGIBILITY FOR INTERIM FAMILY HOUSING

1. **Eligible Population:** Detailed eligibility for Family Interim Housing, as well as Contractor responsibilities to verify eligibility, may be found in Appendix I.
 - a. **Homeless Status.** Participants must be determined to be homeless (Category 1) per HUD's Final Rule on "defining Homeless" (24 CFR parts 91, 576 and 578) or (Category 4) per The McKinney-Vento Homeless Assistance Act (42 U.S.C. 11301 et seq.).
 - 1.a.1. Contractor will be responsible for documenting the determination of the participant's homeless status utilizing LAHSA's documentation standards. These standards ensure consistent and accurate documentation of a program participant's homeless status across all projects, and situations through the use of third-party, observation and self-certifications of homelessness documentation. The following are the documents that can be used to verify homelessness within the LA CoC. They are in the order of preference based on HUD guidance: HMIS CLNT 125 Client Summary Report, HMIS CLNT 127 Homeless Status Timeline Report, and [LA COC Homeless Verification \(Form 6053\)](#). Contractor must ensure staff attend Homeless Verification Training to properly document a person's homeless status at entry.
 - 1.a.2. The [LA COC Homeless Verification \(Form 6053\)](#) can be used to verify prior episodes of homelessness and current homelessness that are not documented in HMIS and the form must be uploaded to HMIS.
 - 1.a.3. All documentation is required to be placed inside the participant's master file and uploaded into the participant's profile in the Homeless Management Information System (HMIS).
 - b. **Family:** Households of one or more minor children (17 or under) in physical custody or under the guardianship of one or more adults living together. This includes households with same-sex partners, families with intergenerational or extended family members, unmarried couples with children, families with adults who are not the biological parents of the children, and households without minor children in which one member is pregnant, or a household with a qualified dependent.
 - c. **Family Solutions Center - Family Referral:** Families must be referred to Family Interim Housing programs by a Family Solutions Center (FSC). However, an Interim Housing Service provider must allow for the intake of new families that have not been referred by an FSC if the family is determined eligible by program service staff. Upon enrolling a family that has not been referred by an FSC, the Interim Housing Service Provider must submit a referral to an FSC within one (1) business day of the enrollment. In addition, Interim Housing Service Provider must conduct screening and enrollment at least five (5) days a week during regular business hours and while units are available.
 - 1.c.1. FSC Service Provider must first verify a family's eligibility for the Los Angeles County Department of Public Social Services (DPSS) CalWORKs-homeless benefits and services program with a DPSS Homeless Case Manager (HCM). If the family is not eligible for CalWORKs benefits, then the FSC Service Provider can use the Los Angeles Coordinated Entry System resources.
 - 1.c.2. If a family qualifies for DPSS CalWORKs or has not utilized all available Temporary Homeless Assistance Program aid, the family should be referred to these interim housing services first.
 - 1.c.3. If a family qualifies for DPSS CalWORKs and has utilized all available Temporary Homeless Assistance Program aid, the FSC Service provider Service Provider should complete an interim housing referral.
 - 1.c.4. FSC Service provider is responsible for providing a family's CalWORKs eligibility verification to the interim Housing provider and upload to HMIS.
 - d. If participants are unable to manage Activities of Daily Living (i.e. ability to transfer in and out of a bed, bathe, dress, and address hygiene needs independently), participants may still be matched to an interim housing site if a higher level of care is not available at the time.

- 1.d.1. Participants in need of hospitalization or skilled nursing care must be referred to and served by a hospital or specialized programs equipped to offer appropriate levels of care by the contractor
 - 1.d.2. Contractor must appropriately coordinate with IHOP to assist with care support within the interim housing setting.
2. Contractors must NOT screen out participants, deny referrals, or delay scheduling an intake appointment based on any of the following criteria:
- a. Past program participation at Contractor's or other facilities
 - b. Lack of COVID-19 vaccination or test documentation
 - c. Lack of tuberculous test (TB) documentation
 - d. Lack of Service Animal/Emotional Support Animal (ESA) documentation
 - e. Lack of sobriety
 - f. Lack of income or employment status
 - g. Lack of identification documentation
 - h. The presence of mental health barriers, disabilities, or other psychosocial challenges
 - i. Participant is pregnant
 - j. Participant is not accompanied by outreach worker or referring agency during intake
 - k. Lack of a commitment to participate in treatment
 - l. Justice system involvement
 - m. Presence of or number of evictions
 - n. Any other criteria thought to predict challenges/barriers to long-term housing stability
3. Contractor must NOT permanently ban participants from re-entering the Interim Housing Program, regardless of reason for participant's exit or termination from previous enrollments in Contractor's programs.
- a. Contractor must have a policy about how to manage the return of participants who were previously exited due to behaviors that impacted or threatened to impact the safety of other participants or staff. Policies should incorporate principles of trauma-informed care, be applied equitably, and may include standardized lengths of time for responses to similar situations (e.g., temporary separation before participants are allowed to re-enroll in the Interim Housing Program based on severity of behavior etc. All Contractors are required to submit their re-entry policy for review and approval by LAHSA.

COORDINATED ENTRY SYSTEM (CES) PARTICIPATION

4. Interim Housing Programs are an integral part of the Coordinated Entry System (CES), which was created to ensure consistent approaches for access to, and delivery of, services in Los Angeles County. Therefore, Interim Housing programs must work in collaboration with the CES.
5. Participation in the Coordinated Entry System includes attendance in SPA-level case coordination and:
- a. Contractor must comply with LAHSA's established protocol for regular, timely reporting on current bed vacancies/availability and provide additional occupancy updates as requested.
 - b. Contractor must utilize LAHSA-established tracking and database mechanisms for making and receiving referrals.
 - c. Contractor must follow any LAHSA-issued guidance and/or procedures issued on referrals or the system of referrals to interim housing.
6. Contractor must establish and maintain relationships with public and community-based service agencies to collaborate and make services available to participants.
- a. Contractor must ensure that appropriate releases of information sharing (consents) are in place prior to case conference meetings.
 - b. Contractor must participate in LAHSA-hosted cross-agency coordination, training, and case conferencing sessions with public and community-based service agencies.

- c. Contractor must utilize and maintain referral networks with the following list of services in addition to those networks created through the CES (this list is not exhaustive):
- Other CES programs in the region
 - CES street and community outreach activities
 - CES Case Conferencing Meetings
 - LA County Department of Health Services Housing for Health, Housing and Jobs Collaborative, and Countywide
 - Benefits Entitlement Services Team Program
 - LA County Department of Mental Health Housing Programs
 - LA County Department of Public Social Services
 - LA County Department of Children and Family Services
 - LA County Department of Probation
 - Domestic Violence Contractors
 - Housing Opportunity for Persons with Aids (HOPWA) Services
 - Ryan White Care Act funded programs
 - Greater Los Angeles and Long Beach Veterans Affairs (VA)
 - Mental and Physical Health Services
 - Substance Use Abuse Services
 - Education Services
 - Life Skills
 - Legal Services
 - Vocational counseling/training
 - First Responders
7. **CES Assessment:** The CES Assessment must be completed as referenced in KPIs listed in this document.
- a. The CES Assessment Tool may only be administered by staff who have completed LAHSA required trainings. Upon LAHSA's adoption of a new or updated CES Assessment Tool, Contractor will be required to complete all necessary training to administer the new or updated CES Assessment Tool(s) at the designated stage of engagement.
 - b. Contractor must comply with any forthcoming guidance regarding updating or replacing existing CES Assessment Tools.
 - c. The new or updated CES Assessment Tool must be administered in a place that allows the participant needed privacy for answering the questions.
 - d. A CES Assessment Tool may still be required to determine eligibility for certain types of permanent supportive housing (PSH) resources. If one is needed, Contractor should conduct the CES Assessment using the CES Assessment Tool they have been trained to complete.

DELIVERABLES & KEY PERFORMANCE INDICATORS

8. The following are the deliverable and Key Performance Indicators (KPI) that Contractor must achieve:
- a. Sufficient Data Quality Score
 - b. 95% of contracted beds must be utilized throughout the contract period
 - c. 50% of all enrolled participants must be assessed within 45 days of enrollment. Assessments should only be completed after sufficient rapport has been built with the participant and in alignment with the CES Assessment Policy & Guidance.
 - d. 95% of all enrolled participants must be assessed within 120 days of enrollment. Assessments should only be completed after sufficient rapport has been built with the participant and in alignment with the CES Assessment Policy & Guidance.
 - e. 85% of enrolled participants must have their ID within 45 days of enrollment

- f. 75% of enrolled participants must have verification of their social security number, within 45 days of enrollment.
- g. 85% of enrolled participants, must obtain their social security card within 90 days of enrollment
- h. 85% of enrolled participants must have a Housing Navigation Referral Assessment completed within 7 days of obtaining their ID
- i. 25% of participants must exit to permanent housing destinations
- j. No more than 30% of participants will be exited to unknown, unsheltered or “not meant for human habitation” destinations.
- k. 95% of participants invited to apply to Permanent Supportive Housing opportunities while enrolled in in this program will complete the PSH housing application within 7 days of match notification or will decline within 2 days of match notification.

SUPPORTIVE SERVICES AND ACTIVITIES

9. Contractor must provide the required Supportive Services and Activities directly or through subcontracted services arrangements. Each participant must be individually assessed for the types of services needed, and Contractor must provide services specifically needed by, and requested by, each participant.
10. **Program Intake:** Contractor must allow same-day site access for matched participants as long as beds are available, including on weekends and evenings.
 - a. At a minimum, Contractors must ensure that program guidelines and appropriate liability waivers are completed with participants when a full intake cannot be completed, such as a participant arriving on site after hours. The full intake should be completed as soon as possible but no later than the next business day.
11. **Bed Inventory Module:** Each interim Housing Program must utilize the bed inventory module and ensure the data reflected is accurate daily. When a participant exits or enters a bed, the inventory module must be updated on the same day by interim housing site staff.
 - a. By 8:30am every morning, each Contractor’s Management team must validate their occupancy data, ensuring occupancy is correctly reflected, and ready for matching to commence.
12. **Direct Support Services:** Contractors providing Interim Housing are funded for and must offer the following services directly to participants in the program:
 - a. Twenty-four (24) hour bed availability seven (7) days a week
 - b. Case Management
 - c. Document Collection
 - d. Resource Coordination Meetings
 - e. Problem-Solving
 - f. Connection to LA County’s Mainstream Benefits/Services
 - g. Connection to Employment Development/Placement Programs
 - h. Harm Reduction Services (e.g., sharps containers, overdose prevention resources, amnesty lockers, safe use supplies, Narcan)
 - i. 24/7 participant supervision
 - j. Crisis Intervention & Conflict De-escalation
 - k. Restrooms & Showers open 24/7
 - l. Laundry facilities or appropriate access to laundering personal items and linens
13. **Problem-Solving Intervention (Diversion):** The first conversation with participant upon entry in program must be to assess the possibility of assisting the individual to quickly self-resolve their housing crisis through connection/reconnection with their social support network, connection to community resources, or a sustainable housing option without ongoing assistance. For additional information, please see Problem-Solving: A Guide for Implementation and Best Practices which can be accessed here: <https://www.lahsa.org/documents?id=3899-problem-solving-a-guide-for-implementation-and-best-practices-3899.pdf>.

- a. Contractor will track all Problem-Solving conversations using the Problem-Solving Tracking Tool (PSTT) under the Assessments tab in HMIS. The PSTT will track the Problem-Solving discussion, encompassing participants' needs, services provided, referrals made, and outcome of the meeting.
 - b. If participant's housing crisis can be resolved without the use of financial assistance, eligibility documentation does not need to be obtained. If financial assistance is needed, or if a participant is diverted into housing and short-term housing retention case management is being provided, eligibility documentation must be gathered, and all documents uploaded into HMIS. Contractor can contact Problem-Solving@lahsa.org for general questions and case conferencing.
 - c. If initial Problem-Solving efforts are unsuccessful during program entry, Contractor must continue Problem-Solving conversations throughout the participant's enrollment period.
14. **Meal Distribution:** All participants must be provided access to three (3) nutritious meals daily (breakfast, lunch, dinner) provided by the Contractor or a subcontracted vendor. Two (2) meals per day must be a hot meal. Contractor must make accommodations for participants with dietary restrictions or who miss the designated mealtime to ensure that they still receive their meals.
15. **Security:** Contractor is required to oversee and promote the safety of Interim Housing participants, staff, and invited guests. The contractor must take a trauma-informed approach to providing security at the site and have standard operating procedures to ensure the safety of all participants and staff.
16. **Emergency Naloxone Administration:** All interim housing Contractor staff must be trained to administer Narcan to participants experiencing an opioid overdose emergency and are responsible for maintaining an inventory of Narcan.
17. **Communicable Disease Prevention and Response Practices:** Contractor is required to abide by all screening, prevention, and response practices designated by the LA County Department of Public Health (DPH), including Tuberculosis testing. Contractor will ensure that staff and participants adhere to any Orders issued by the State or County's Health Officer when in effect.
- a. Contractors must have policies and procedures regarding disease prevention that include standardized Tuberculosis (TB) guidelines, in compliance with LAHSA and Los Angeles County Department of Public Health Guidance.
 - b. Contractor's policies and procedures must address TB screening of staff and volunteers, TB screening of participants as part of program intake, and a Cough Alert Protocol for ongoing monitoring of TB symptoms of staff and/or participants.
 - c. Staff must be trained in early detection of potential symptoms of TB.
 - d. All Contractor staff and volunteers must be screened for symptoms of TB; related issues in connection with TB Prevention Guidelines.
 - e. The Contractor must provide, maintain proof, and keep confidential, the TB screening of all staff, including those of its subcontractors and make these records available to LAHSA at any time.
 - f. All Participants seeking entry to any congregate living program must be screened for symptoms of TB at time of intake.
 - g. Asymptomatic participants, with evidence of TB clearance within the past year, and asymptomatic participants who have no record of TB clearance within the past year, must be permitted to continue intake for the Interim Housing resource.
 - h. For asymptomatic participants, who have no record of TB clearance within the past year, the contractor must refer participant for additional screening upon intake and admission to the program.
 - i. Non-symptomatic Participants must show evidence of TB clearance by a healthcare provider within seven (7) days of initial admission to the program.

- j. The Contractor must immediately refer Participants who show symptoms of TB to an appropriate LA County Department of Public Health or LA County Department of Health Services TB Clinic.
- k. Many LA County TB Clinics are open 24 hours a day, 7 days a week. LA County TB screening clinic locations and hours of operation can be found here: <http://publichealth.lacounty.gov/tb/>
- l. Symptomatic participants who are referred for additional screening may only be allowed entry into the program upon receipt of TB Clearance from healthcare provider.
- m. The Contractor shall comply with LAHSA's reporting requirements regarding TB screening of Program Participants, including the entering of such information into the Los Angeles CoC's HMIS in compliance with the parameters set forth in this Agreement.

18. **Case Management Services:** Case Management Services are provided by Interim Housing staff to assist participants in moving forward in accessing permanent housing. The primary objective of Case Management/Support Services within Interim Housing is to support participants with obtaining any documents needed to become "Document Ready." Additionally, case management shall also include an organized approach to tracking and managing participant progress including referrals and connections to Housing Navigation and permanent housing programs, including appropriate completion of Universal Housing Applications.

- a. Contractor must provide Case Management that is offered in accordance with Housing First and trauma-informed care principles to assist participants to self-resolve their housing crisis and/or be connected to a permanent housing Contractor.
- b. Contractor must refer participants to health and behavioral health services and other mainstream benefits as necessary to meet the participants specific needs
- c. To maintain the momentum of participants' progress towards obtaining permanent housing, the Contractor must engage in case management services to each participant at least one (1) time per week. The frequency of how often case management services is provided to each participant should be increased depending on need.
- d. Contractors must support participants with obtaining documents needed for permanent housing placements including but not limited to: Government Issued Identification Card, Social Security Card, Verification of Disability, and other necessary documents to move swiftly into permanent housing.
 - 1) Support with document collection includes but is not limited to assisting participants with completing applications and accompanying participants to appointments.
- e. Contractor must make every effort to connect a participant to permanent housing, even if the participant is not connected to a Housing Navigator. This includes, but is not limited to:
 - 1) Providing the participant with available housing resources, including master leased units, fair market rate units, etc.
 - 2) Hosting and/or ensuring participant participation in housing fairs
- f. Develop a Housing Services Plan with each participant, in coordination with Housing Navigation and/or other supportive service providers, within the first 14 days of program intake. Housing Services Plans should outline the strengths, needs, goals, and strategies the participant and provider agree to leverage to achieve housing stability for the participant. The Housing Services Plan should include activities that will help participants secure alternate housing within a 90-day goal timeline. A housing assessment is the basis of a Housing Services Plan.
- g. All efforts on behalf of the Contractor to engage a participant in case management services must be documented in HMIS as well as the response from the participant. Case notes in HMIS should be documented in a manner that is succinct, objective, and factual, including timely action steps and goal progress. Please see LAHSA's Program Level Case Note video on how to do this: https://www.youtube.com/watch?v=Hg39kR6ms_s.

19. **Case Management Ratio:** Contractors are required to maintain a ratio of one (1) staff to every twenty-five (25) participants.
20. **Resource Coordination Meetings:** Interim Housing contractors are required to coordinate and support oversight of program placements between Contractors for participants to move swiftly into permanent housing. Contractors will hold regular meetings with Housing Navigation and Time Limited Subsidy Contractors to coordinate care and movement into permanent housing and will have access to overall planning for participants.
 - a. Contractor is responsible for submitting referrals to Housing Navigation in HMIS for eligible participants when Housing Navigation slots are available to them.
 - b. Contractor is expected to follow any prioritization guidance for HN referrals approved by the CES Policy Council.
 - c. Contractor should refer to this Interim Housing to Housing Navigation Implementation Training for additional guidance: <https://www.lahsa.org/documents?id=6975-lahsa-ih-to-hn-implementation-training>.
 - d. Contractor must comply with any forthcoming guidance regarding Resource Coordination Meetings and the referral process linking participants to Housing Navigation services.
21. **Mainstream Benefits:** Contractor must establish procedures for referring eligible and interested participants to mainstream benefit services (e.g., services available through Department of Social Services, Department of Health Services – Countywide Benefits Entitlement Service Team (CBEST), Department of Mental Health, Department of Public Health - Substance Abuse Prevention and Control (SAPC), Office of Immigrant Affairs (OIA), Military and Veterans Affairs (MVA), Department of Aging and Disabilities (AD)). All Contractors are required to submit their mainstream benefit policy for review and approval by LAHSA.
22. **Employment Development/Placement Programs:** Contractor must establish and maintain effective working relationships with employment programs, such as local Work Source Centers to assist participants in engaging in services to prepare for and obtain employment. The goal of these services is to improve the participant's financial situation to increase the participant's ability to live independently.
23. **Educational Regulations/Requirements:** Contractor must, as required by the McKinney-Vento Act and as amended by the HEARTH Act, provide documentation that demonstrates that Contractor has established education-related policies and practices for individuals and families enrolled in Contractor's program. The Contractor must not only document Contractor's education-related Policies and Practices for Contractor's participants, but also document the process by which the Contractor established
24. **Independent Living:** Contractors must also provide services to participants that increase a TAY household member's ability to independently maintain permanent housing, and support their mental health, physical health, employment, education, and additional skills needs while they enrolled in the transitional housing program.
25. **Basic Supply Access:** Contractor should offer toilet paper, towels, wash cloths, soap, shampoo, conditioner, deodorant, toothbrush, toothpaste, hand sanitizer, feminine products, and other hygiene products as needed.
 - a. Contractor shall provide each participant with as much privacy and personal space as possible. Each participant must, at a minimum, be provided with a bed, clean linens, a pillow, blanket, and a personal closet/locker for storing and hanging clothes and other personal effects.
26. **Motel Vouchers:** Motel Vouchers are meant to be utilized as a secondary resource to placement into a site-based Interim Housing resource. Families that are placed into a Motel must be transferred to a site-based option as slots become available.
 - 1.

- a. For motel vouchers used as Interim Housing, Contractor is responsible for voucher coordination, inspection and monitoring of the motel room conditions.
 - b. For motel vouchers used as Interim Housing, Contractor is responsible for the initial inspection and ongoing monitoring of the site's conditions. In addition, Contractor must document the site's conditions no less than one (1) time per year.
 - c. Contractor is responsible for receiving invoices from the motel and making payments to the motel vendors in an agreed upon time frame
 - d. Families placed in motels must be provided with case management services upon enrollment in Family Interim Housing.
 - e. Motel voucher, or other services provided to a family must be recorded in HMIS by Contractor. Services must be recorded under the enrolled Interim-Housing
 - f. Motel Voucher Program in HMIS. Where applicable, these services must accurately reflect the funding stream the provider is utilizing (e.g., DPSS Welfare to Work (WtW), DPSS non-WtW, other non-DPSS source)
27. **Alternative Accommodations for Unplanned Maintenance:** Contractor must prioritize the well-being and accommodation of participants while in Interim Housing. Should interim housing unit or slot become temporarily offline due to maintenance issues or otherwise, Contractor shall explore alternative internal interim housing resources, including but not limited to motel vouchers, to ensure participants have comparable accommodations without disruption to their stay.

LENGTH OF ENROLLMENT

28. Active System Management:

- a. Contractors are required to attend all SPA, program, and site level active system management meetings as directed by LAHSA, where contractors are required to provide participant progress, updates and action steps weekly, for timely throughput from interim housing to permanent housing.
- b. Contractor must assist participants in moving out of Interim Housing and into permanent housing as quickly as possible. The total length of stay can and should be individually determined, based on participant need, utilizing weekly action steps and progress updates through active system management. Progress and engagement towards housing goals must be documented and reviewed weekly by interim housing staff.

CHANGES IN FAMILY HOUSEHOLD COMPOSITION

29. If a family's household composition changes after enrollment in an Interim Housing for Families Program to the extent that the household no longer meets the definition of family, as outlined in this Appendix, Contractor must support the household in connecting to appropriate resources for their new household composition: for example, CES Access Points and/or an Interim Housing for Adults or Transition Age Youth Program. Contractor should continue problem-solving conversations and facilitate a warm hand-off referral to the identified resource(s). Once a warm handoff referral is complete, Contractor must exit the participants from Interim Housing for Families Program within five (5) business days.

PROGRAM PARTICIPATION GUIDELINES

30. Contractor must incorporate as part of their program, a set of program participation guidelines that serve as protocols for ensuring the safety and security of program participants, as well as program staff. These guidelines must be presented to LAHSA staff prior to the start of operations for review and approval by LAHSA.
- a. Program participation guidelines must incorporate language to support a Low-Barrier, Harm Reduction, and Housing First approach required of all programs.
 - b. Program participation guidelines must be participant-centered to minimize barriers to accessing Interim Housing and prevent/minimize exits from program due to Rule violations.
 - c. Program participation guidelines must incorporate housing focused interim housing activities that occur regularly, with the intention of moving participants into permanent housing as quickly as possible

d. Program participation guidelines must not contradict or impose additional requirements on participants

31. Contractor must review the participation agreement form with the participant upon program enrollment. The form must include a participant consent section that is signed and dated by the participant with a witness signature and dated to be signed by the contractor. Upon signature of the Program Participation Guideline Agreement, the participant is consenting to participate in the program and is certifying that they have read (or have been read) the program guidelines, and that they understand and consent to the expectations regarding abiding by the program guidelines.

PARTICIPANT EXITS

32. Contractor must abide by [LAHSA's Interim Housing Exit and Termination Standards](#), and develop and document clear program termination policies and related procedures that align with these expectations for review and approval by LAHSA
- a. Pursuant to AB 2835, participants must be issued a 30-day notice of pending program termination if their behavior is not an imminent safety threat to participants and staff.
33. Contractors must complete all appropriate interventions to prevent negative exits of participants.
- a. Behavioral mitigation plans
 - b. Room/Unit/Bed moves within the same site
 - c. Connection to mental health/physical health/substance use treatment
 - d. Providing and maintaining a welcoming, safe, supportive environment
 - e. Other strategies based in trauma informed, low barrier and harm reduction principles as necessary to prevent negative exits
34. **Demobilization:**
- a. Contractors are responsible for demobilizing participants from a site or program that is terminating
 - b. Contractors must notify participants at least 30 days in advance of the site/program end date
 - c. Contractors must do their due diligence to permanently house or transfer participants to other temporary housing solutions

HMIS DATA COLLECTION AND PARTICIPATION REQUIREMENTS

35. Contractors must utilize HMIS as their primary participant tracking and document storage system, unless prohibited by law, to track all participants served and the services provided.
36. Contractor will ensure that all participants sign the [Consent to Share Protected Personal Information](#) form granting consent for Contractor to enter information into the HMIS database. The Contractor may obtain verbal consent if warranted due to health, safety or other concerns that prohibit the Contractor from getting the document signed. The receipt of verbal consent must be documented in a [Program Level Case Note](#) along with the reason why verbal consent was obtained. If consent is not provided, services are still entitled to the participant.
37. Contractor must adopt and implement the best practices for data entry as follows:
- a. Contractor will search the Clarity HMIS database for an existing profile. If none is found, the Contractor will collect and record the participant's consented information into the database and create a participant record.
 - b. In completing the participant's records, referred to as Profile, the Contractor will fully complete fields based upon participant's responses. When previously undisclosed information is collected, the Contractor will update the participant's profile.
 - c. To enroll a participant in a program, the Contractor must complete a Program Enrollment. The Contractor must complete the [Program Enrollment](#) (program entry/intake) questions in the HMIS database with as much information as the participant can provide. For missing information, mark the appropriate field –

“Participant Doesn’t Know” or “Participant Refused”; if/when a participant/household discloses any missing information, the Contractor must update the participant’s intake in HMIS within 3 days or complete a [Status Update Assessment](#).

- d. With all participants, the Contractor must record the program exit or termination immediately, on the same day of the exit. Contractor shall enter the Exit Date as the date the a) last service was provided (meal service, case management, etc.), or b) the last unit service was provided.

FACILITIES AND OPERATIONS

38. **Harm Reduction and Trauma Informed Program Design**: These principles shall be incorporated into all aspects of the program. Core design components are listed below.

- a. Creating trauma-informed programs requires continual review of policies to see what works and what may be re-traumatizing to trauma survivors. Contractor must have a regular review of policies to update practices and guidelines to make them as relevant as possible to the participants being served.
- b. Contractor must utilize the Trauma-Informed Organizational Toolkit to self-assess its program and facility for fidelity to the trauma-informed model and to develop aligned policies and procedures. (Trauma-Informed Organizational Toolkit – <https://www.lahsa.org/documents?id=1691-trauma-informed-organizational-toolkit.pdf>)
- c. Contractors are permitted to prohibit the possession and/or use of weapons, alcohol, and/or illegal controlled substances on the site. Contractors must, however, establish Harm Reduction policies, practices, and procedures designed to minimize negative consequences resulting from participants use or possession of contraband items as referenced above.
- d. Sharps Container - Contractor must ensure that a sharps container is available on-site and is accessible to participants. Sharps must be disposed of in an appropriate manner.
- e. Amnesty Lockers - Contractors shall provide amnesty lockers for participants to discreetly lock and store personal property before entering the shelter. Contractor is expected to develop Policies and Procedures regarding the use of amnesty lockers.
 - 38.e.1. Items stored in amnesty lockers may not be accessible to program participants while within the grounds of the Interim Housing program.
 - 38.e.2. Contractors must return participant’s items upon participant request, and upon exiting Interim Housing.
- f. Harm Reduction is not intended to prevent the termination of a participant whose actions or behavior constitute a threat to the safety of participants and/or staff.

39. **Pets**: As pets often provide important companionship for participants, Contractors are required to accommodate incoming participants with pets within their capacity to do so. The term “pet” refers to a participant’s animal(s) that is not otherwise identified as a Service Animal or Emotional Support Animal. Contractors must develop policies and procedures for working with participants with pets.

- a. Additionally, Contractors are required to adhere to city, county, state and federal laws regarding providing reasonable accommodation to participants with service animals or emotional support animals.

40. Contractor must allow for twenty-four (24) hour, seven (7) day access to Interim Housing for participants. Contractor may implement quiet hours when needed, such as to address the following:

- a. Community agreements
- b. A desire not to create sleep disturbance if in communal areas
- c. Good neighbor policies

41. Contractor must have, or provide access to, a phone which participants can use within reasonable limits.

42. Contractor must return possessions held on behalf of a participant within twenty-four (24) hours of the participant's request.
 - a. Should a participant abandon their items, Contractor must appropriately store participant's belongings for thirty (30) days, and attempt to contact the participant prior to discarding the items.
43. The facilities used to provide Interim Housing may provide beds or cots in a single-site facility with sleeping accommodations in multiple rooms or a congregate dormitory setting. Bunk beds are acceptable for use; however, Contractor must create policies and procedures addressing accessibility.
44. Contractor shall provide basic furnishings in the rooms/units and common areas of the facility.
45. All shared bedrooms must be in compliance with LAHSA's Equal Access Policy.
46. Contractor must allow participants to be placed in an interim housing setting that best fits their preferred gender identity.
47. Contractor must provide accommodation for mixed-gender and same-gender couples, as able.
48. There must be a minimum of three (3) feet, or thirty-six (36) inches between the long side of adjacent beds or cots. The configuration of beds / cots in a dormitory or large room setting must include aisles that are sufficient in size and placement to facilitate ease of passage in the event that an emergency evacuation of the facility is necessary. Appropriate pandemic mitigation measures must be in place as necessary and consultation with LAHSA staff if bed spacing changes are made or required by the Department of Public Health is required.
49. The facilities must also provide, at a minimum, a laundry facility (or provide participants with assistance connecting to laundromat services) so that they can wash their clothing. See LAHSA Facility Standards for further guidance: <https://www.lahsa.org/documents?id=2767-lahsa-facility-standards.pdf>.
50. On-site storage: Contractor must provide each participant with access to storage for personal possessions which they should have access to during their time in Interim Housing. Minimum storage must be the equivalent of a standard 12" x 12" x 12" locker. Additional storage must be made available as facility capacity allows.
 - a. Participants must have a maximum of 2 (two) 60 gallon bags of items per household member

INCIDENT REPORTING

51. The Contractor must utilize a centralized and organized system of documenting Incident Reports and an Incident Report log to track, monitor, and resolve crises, conflicts, accidents, injuries, illnesses, trauma, etc. that occur within any and all of Contractor's facilities and/or programs.
52. All required Incident Reports must be submitted to LAHSA via ENCRYPTED email at: incidentreporting@lahsa.org within 12 hours of the incident occurrence for incidents that result in injury, any acts of violence, signs of contagious disease, signs of abuse/neglect, death of participants and/or staff, damage/theft to facility and/or property by participants and/or staff or emergency personnel/first responders (police, sheriff, fire department, etc.) being discharged to any and all the Contractor's facilities receiving LAHSA funded homeless services and the resolution to the incident. Contractor must make all Incident Reports available to LAHSA upon request.
53. Contractors are expected to abide by all reporting and timeline requirements of Mandated Reporting for child, elder, and dependent adult abuse. The Contractors' staff are considered Mandated Reporters of suspected child and senior abuse and must report suspicions of child or senior abuse as required by California Law. The Child

Abuse Hotline is (800) 540-4000. The Elder Abuse Hotline is (877) 477-3646. Contractor must then notify LAHSA within 12 hours of the incident that is reported for abuse

54. The Contractor is to provide the name and title of the individual designated by Contractor to handle all Incidents. Contractor must clearly indicate how this individual can be contacted. (Incident Report Coordinator)
55. The Contractor must maintain a written set of Incident Reporting Policies and Procedures that comply with LAHSA requirements. Policies and Procedures must include a training component for staff and subcontractor that comply with LAHSA requirements. Training agendas and sign-in sheets must be made available upon request for review.
56. The Contractor must submit a copy of incident reporting policies and procedures as required by this agreement for review and approval to ensure compliance with the Scope of Required Services (SRS).
57. The Contractor must have a procedure of how incident reports will be documented, and the maintenance of any police reports or other documents associated with the incident. Copies of the incident reporting forms, and policies and procedures must always be made readily available to program staff.
58. **Reporting Alleged Fraud:** LAHSA in collaboration with the Los Angeles County Auditors Department, has established an avenue for employees to report suspected fraudulent activity via a Fraud Hotline. This Hotline is available 24-hours each day. Persons that report suspected fraud may remain anonymous. Issues that can be reported to the Fraud Hotline are theft, bribes, kickbacks, forgery, abuse, embezzlement, conflict of interest, bid rigging, cybercrimes, breaches, collusion, price fixing, and gratuities.
59. The Contractor must include this information within their hiring Policies and Procedures and provide a Fraud Hotline Fact Sheet to their employees during the employee hiring process encouraging them to report allegations to the Fraud Hotline as soon as they believe they have factual information suggestive of financial and/or administrative violations involving LAHSA, funds administered by LAHSA, its employees, sub-recipients and /or participants. This information referenced as Fraud Hotline Poster must also be prominently displayed in common area(s) of the Contractor's facility. Public displays must incorporate the Los Angeles County Auditors Department's contact information as the following:

Los Angeles County Fraud Hotline
 500 W. Temple Street, Suite 515
 Los Angeles, CA 90012
 Phone: (800) 544-6861
 Email: fraud@auditor.lacounty.gov
 Web: www.fraud.lacounty.gov

PARTICIPANT GRIEVANCE AND TERMINATION POLICIES AND PROCEDURES

60. The Contractor must maintain a written set of grievance and termination policies and procedures that are consistent with its Exit and Termination Standards and are:
 - a. Clear;
 - b. Concise;
 - c. Written in plain English;
 - d. Provided participant's due process to have their grievance heard within (3) days;
 - e. Allow participants to appeal the initial Agency's determination of the grievance to an internal body;
 - f. Informs participants of their right to go through LAHSA's Grievance Resolution Review process for LAHSA to assess if the Contractor followed its own Grievance Policies and Procedures and rendered a decision consistent with its contract;

- g. Inform participants that LAHSA Grievance Resolution Review is only intended to assess the processing of their grievance with the agency; and
- h. Have a process to participants to speak with senior management or body if they feel staff has not been responsive to their grievance.

61. The Contractor must:

- a. Train all staff on their grievance and termination policies and procedures;
- b. Display the Contractor's grievance and termination policy and procedures in a location at the facility that is readily available to participants;
- c. Display any form(s) and processes that participants must follow to file a grievance in a location at the facility that is readily available to participants;
- d. Make available upon request its grievance and termination policies and procedures, forms and process to participants and LAHSA;
- e. Provide participants with a copy of the Contractor's Grievance and Termination Policy, forms, and processes at intake and upon exit. Participants must acknowledge receipt of these documents at intake.
- f. Upload all grievance and termination filings to HMIS as soon as possible however, not to exceed three (3) business days.
- g. Designate both a primary and alternate person as a point of contact for grievance and termination situations and have a grievances@agencyname email that is consistently checked;
- h. Have its grievance and termination policies and procedures, forms and processes reviewed by LAHSA at program state, upon substantive changes, or as requested;
- i. Contact participants within three (3) business days of receiving and confirming receipt of the grievance;
- j. Provide participants with information on how to access the Department of Public Health's County-wide grievance line, which will route grievances to the appropriate homeless service funder.
- k. If the participant believes that the agency has not followed their established Grievance Policy and Procedure in responding to their complaint, the participant may choose to contact the Department of Public Health's County-wide grievance line using the information below: **Department of Public Health County-Wide Grievance Contact Information** Phone number: (888) 700-9995 - Email: DPH-IHP@ph.lacounty.gov
- l. To the extent possible and when appropriate, grievance procedures must include a face-to-face meeting with the participant. The grievance investigation must include the gathering of facts, statement(s) from the grievant and/or other participants and staff (if applicable). At the conclusion of the contractors finding, an issuance of a written decision that includes factors and vetted facts that led to the final determination of the grievance, must be given to the participant and copy placed in their file;
- m. Maintain the confidentiality of the participant, including interactions, settings, and documentation.
- n. Maintain a centralized and organized system of documenting grievances including a copy or description of the grievance, date the Contractor met with the participant, the staff that addressed the grievance, the date the Contractor met with the participant, the staff that addressed the grievance and the date the participant received the written determination.
- o. Provide documentation, upon request, to LAHS within five (5) business days of request;
- p. Provide a letter of determination to the participant that consists of facts that led to the decision not to exceed ten (10) business days of receipt of the appeal. The final decision should contain a clear statement of the outcomes that led to the decision of the appeal.
- q. Inform the participant of the following "cost free" resolution service. This resource can be used as the referral to a mediation or dispute resolution service.
- r. Assist participant with a referral to the dispute resolution service upon request.
- s. Explain to the participants filing their grievance, their right to review the written decision with the assistance of mediation or dispute resolution center.
- t. Acknowledge and attend any dispute resolution service summons received from the City Attorney's office if received.

Dispute Resolution Services:

City Hall

Office of the Los Angeles City Attorney Dispute Resolution Program

200 N Spring Street, 14th Floor

Los Angeles, CA 90012

Office: (213) 978-1880

Fax: (213) 978-1312 Email: mediate@lacity.org

LAHSA GRIEVANCE RESOLUTION REVIEW

62. LAHSA maintains a Grievance Resolution Review process for participants to have third-party assess if the Contractor followed their own grievance and termination policies and procedures and rendered a decision consistent with its contract with LAHSA. Participants may file a Grievance Resolution Review form with LAHSA after they have completed the grievance appeal process with the Contractors.
63. The submission of the Grievance Resolution Review Form required the submission of the initial grievance and appeal documentation. The Contractor must provide the participant copies of these documents to the participants upon request.
64. Contractors must aid participants in submitting the Grievance Resolution Review Form and supporting documentation to LAHSA is requested to by the participant.
65. Upon receipt of the Grievance Resolution Review Form, LAHSA staff will review the form, supporting documentation, and HMIS records within 48 hours. LAHSA staff will complete the bottom portion of the Grievance Resolution Review with their assessment and send it back to the Contractor's primary point of contact and back-up for grievances within 72 business hours of receipt of the Grievance Resolution Review Form.
66. Upon receipt of the Grievance Resolution Review Form from LAHSA, the Contractor's grievance primary point of contact, or designee, must complete the portion of the Grievance Resolution Review Form asking the Contractor to document how they will respond to LAHSA assessment and return the form to LAHSA within 48 business hours.
67. The Contractor is required to maintain a copy of the Grievance Resolution Review form and supporting documents in the participant's master file and upload the form to HMIS.
68. LAHSA's Monitoring and Compliance staff may request to see this form and it must be provided upon request.
69. **Reporting Alleged Fraud:** LAHSA in collaboration with the Los Angeles County Auditors Department, has established an avenue for participants to report suspected fraudulent activity via a Fraud Hotline. This Hotline is available 24-hours each day. Persons that report suspected fraud may remain anonymous. Issues that can be reported to the Fraud Hotline are theft, bribes, kickbacks forgery, abuse, embezzlement, conflict of interest, bid rigging, cybercrimes, breaches, collusion, price fixing, and gratuities.
70. The Contractor must include this information within their Grievance Policies and Procedures and provide a Fraud Hotline Fact Sheet to their participants during the intake process encouraging them to report allegations to the Fraud Hotline as soon as they believe they have factual information suggestive of financial and/or administrative violations involving LAHSA, funds administered by LAHSA, its employees, sub-recipients and /or participants. This information referenced as Fraud Hotline Poster must also be prominently displayed in common area(s) of the Contractor's facility. Public displays must incorporate the Los Angeles County Auditors Department's contact information as the following:

Los Angeles, CA 90012

Phone: (800) 544-6861
Email: fraud@auditor.lacounty.gov
Web: www.fraud.lacounty.gov
Los Angeles County Fraud Hotline
500 W. Temple Street, Suite 515

FAIR HOUSING REQUIREMENTS

71. Contractor must ensure they follow all local, state, and federal Fair Housing laws, the Violence Against Women Reauthorization Act of 2013, and the Americans with Disabilities Act (ADA) and the ADA Amendments Act of 2008 (ADAA) standards.

PERFORMANCE, BUDGET, AND EXPENDITURE REPORTING

72. The Contractor shall comply with data collection, analysis, reporting activities, and coordination planning as set by LAHSA. LAHSA will outline a data reporting schedule which will establish the necessary data fields and timelines for input into HMIS. If data is needed on an ad hoc basis, the agency must provide the data within the designated timeframe that is established by LAHSA, which will typically be a five (5) business day turnaround, unless explicitly indicated by upper management. If an agency is consistently (more than 3 times) delinquent in their data collection and reporting requirements, this can move an agency to remedial action.

CONTRACTOR OBLIGATIONS

73. Contractor must submit copies of all Policies and Procedures to LAHSA for approval within ten (10) business days of a site opening OR when new policies/procedures are created OR when changes are made to existing policies and procedures OR as otherwise required by LAHSA.
74. Policies and Procedures that must be submitted to LAHSA for approval include, but are not limited to
- a. Participant guidelines
 - b. Mental health crises and psychiatric emergencies
 - c. On-site substance use and substance use-related emergencies
 - d. Conflict response and de-escalation
 - e. Threats, physical altercations, and incidents of violence
 - f. Participant exits (voluntary and involuntary)
 - g. Re-enrollment of previously exited participants
 - h. Storage, training, and distribution of Narcan

PERSONNEL

75. Contractor must assign staff with background experience and expertise to provide the services required in the Scope of Required Services (SRS).
76. Contractor shall ensure that all staff and volunteers that will work with, or encounter, transition age youth or minors, are fingerprinted and pass a criminal background (Live Scan) check before working with youth in the program.
77. Contractor is required to provide bilingual staff to meet needs of participants accessing their services.
78. Contractor is required to have a minimum of a (1) staff to every twenty-five (25) participants ratio for other direct participant services staff (e.g. participant coordinators, monitors, etc.) seven (7) days a week, twenty-four (24) hours a day.
79. Contractor is required to have dedicated Management level site support 24/7, which includes the implementation of an on call system should there be instances where Management level staff is not physically present on site.

- a. On-call staff must be able to physically arrive at the site within 1 hour should an incident arise that requires on site management support
- b. On-call staff must be trained in how to operate the specific interim housing site(s) they are providing on-call coverage for
- c. On-call staff must be able to cover shifts should there not be the required amount of staff on shift at any given time.

80. The Contractor must:

- a. ensure staff participation in LAHSA mandated trainings, including all sub-contractor staff;
- b. ensure staff participation in LAHSA-organized trainings offered through the Centralized Training Academy; and
- c. show proof that staff have adequately satisfied these requirements.

81. The Contractor must be prepared to provide proof that staff who are mandated reporters have been trained in the legal requirements of being a mandated reporter.

82. The Contractor must ensure that service delivery is not interrupted during periods of personnel change.

Required Staff Trainings - All trainings can be located on LAHSA's Centralized Training Academy website

Required Training	Applicable Staff	Priority Level
HMIS Trainings on intakes, document uploading, services, case notes, and reports	Case Managers, Supervisors, Program Managers, and/or Directors,	Immediate
Case Management and Systems Navigation I	All Staff (Entry level)	Immediate
Case Management and Systems Navigation II	Direct service staff (with minimum of 6 months homeless services experience)	Immediate
Care Coordination and System Navigation III	Supervisors Only	Immediate
Problem Solving	Case Managers	Moderate
Boundaries and Ethics	All Staff	Moderate
De-escalation	All Staff	Immediate
Harm Reduction	All Staff	Immediate
Trauma Informed Care 101 & 102	All Staff	Immediate
Sexually Transmitted Infections	All Staff	Immediate
Family Planning (Including pregnant and postpartum)	All Staff	Immediate
Motivational Interviewing	Case Managers	Moderate
Quality Standards	Supervisors	Moderate
Mandated Reporter Training	Direct Service Staff	Immediate
Overdose Education and Naloxone Use and Distribution	Direct Service Staff	Immediate
Document Acquisition	Case Managers	Immediate
CPR	Direct Service Staff	Immediate

Review and acknowledge SRS with staff signature	All Staff	Immediate
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Contractor must comply with any additional required trainings as directed by LAHSA.

PROGRAM REPORTS

73. Contractors are required to submit performance, HMIS, and finance reports as requested by LAHSA.

CUSTOMER SERVICE

74. Contractor must obtain feedback from participants/clients on the quality of the services and housing they are receiving as part of Customer Services Program and use that feedback to improve the quality of the services/housing it offers.
75. The Contractor must have policies and procedures to ensure feedback from participants in the Customer Services Program are anonymous, confidential and optional. Policies and procedures must include a component identifying the anonymous collection of these surveys and must utilize a centralized and confidential system of storing all participant satisfaction surveys. Surveys must be made readily available to LAHSA for review upon request. In addition, Contractor must distribute LAHSA's Participant Satisfaction Survey at intake, post it at the facility in a public space, and make it available to participants upon request.
76. Participant Satisfaction Surveys must be administered at least twice yearly. Programs that operate less than 6 months must administer Participant Satisfaction Surveys at a minimum of once during the program period. Policies and procedures must include a training component for staff and subcontractors that comply with LAHSA requirements.
77. LAHSA and/or other County Departments reserve the right to monitor the quality of the Contractors' Customer Service. Monitoring may include randomly selecting participants for telephone and/or site surveys. LAHSA and/or the County or City, at its sole discretion, may change the means of measuring this standard via a Change Notice.
78. The Contractors operating housing and/or services for homeless persons out of leased facilities must have in place Landlord Standards of Care policies and procedures. Policies and Procedures for Landlord Standards of Care must be aligned with Standards of Care adopted by LAHSA, in conjunction with County Departments (including Department of Health Services and Department of Mental Health). Guidance to contractors regarding implementation of these policies and procedures will be forthcoming upon adoption of Landlord Standards of Care by LAHSA and partnering Los Angeles County Departments.
79. To assist in the development of the Customer Services Program, LAHSA has developed a [Client Satisfaction Survey](#). LAHSA's Client Satisfaction Survey must: 1) be provided to participants at intake, 2) displayed in public spaces, and 3) made available to participants upon request. Participants must be able to 1) return the survey to the Contractor via a comment box for the Contractor to forward to LAHSA and 2) receive assistance in completing it if requested. Participants will be able to complete the survey online. Instructions are on the survey. LAHSA will periodically analyze the results from the survey and share with Contractors to improve operations.

MATERIALS, EQUIPMENT AND INVENTORY

80. The Contractor must:
- provide all equipment necessary to perform all services required by this contract;
 - provide sufficient telephone lines at its site(s);
 - install, repair, and replacement of telephones and/or lines;
 - purchase of all materials/equipment to provide needed services is the responsibility of the contractors;

- e. provide necessary computer equipment and supplies (e.g., terminals, controller, paper, printer ribbons, etc.) to provide services;
- f. report to LAHSA Contract Specialist, the loss, vandalism, or theft of computer supplies and equipment within twenty-four (24) hours after discovery. For stolen equipment, Contractors must contact the local law enforcement agency and submit a copy of the police report to LAHSA within twenty-four (24) hours of receipt of the police report, excluding weekends and holidays.

CHANGES IN FAMILY HOUSEHOLD COMPOSITION

81. If a family's household composition changes after enrollment in a Crisis-Housing for Families Program to the extent that the household no longer meets the definition of family, as outlined in this Appendix, Contractor must support the household in connecting to appropriate resources for their new household composition: for example, CES Access Points and/or an Interim Housing for Adults or Transition Age Youth Program. Contractor should continue problem-solving conversations and facilitate a warm hand-off referral to the identified resource(s). Once a warm handoff referral is complete, Contractor must exit the participants from the Crisis Housing for Families Program within five (5) business days.

PARTICIPANT FILE

82. The following is the list of documents that must be kept in the participant's HMIS profile (based on population).
- a. Physical files must be available upon request.
 - b. Collection of identification and income verification documents is recommended but **not** required for enrollment into the program. If participant does not have these documents at the time of program entry, Contractor must assist participant with obtaining them. Once obtained, copies of these documents must be uploaded to HMIS.

Document	Guidance	Population
Participant Identification	Government Issued ID: State issued ID/DL; Passport/passport card; US Military ID; Immigration Services ID; Visa issued by department of state; government issued ID Alternative Issued identification: student ID, shelter ID, band/debt/credit card; transportation ID; library card; gym membership card; warehouse membership card Alternative Forms of Acceptable non-photo: Birth certificate; utility bill; lease/rental contract; medical/dental insurance card; legal records/court documentation; Tax Identification Number/Paperwork; Social Security Card; AAA Card; AARP card	All
Program Participation Guideline Agreement Form	Agency created form. Must be dated and signed by the participant and Case Manager.	All
Grievance Procedure form	Agency created form. Must be dated and signed by the participant and Case Manager.	All
Population Appropriate LAC-CoC approved CES Survey	Only included if Assessment is conducted	All
LA CoC Homeless Verification Form and/ or required institutional documentation	Required – The following are the documents that can be used to verify homelessness within the LA CoC. They are in the order of preference based on HUD guidance: HMIS CLNT 125 Client Summary Report, HMIS CLNT 127 Homeless Status Timeline Report, and LA COC Homeless Verification (Form	All

	<p>6053). Contractor must ensure staff attend Homeless Verification Training to properly document a person's homeless status at entry.</p> <p>The LA COC Homeless Verification (Form 6053) can be used to verify prior episodes of homelessness and current homelessness that are not documented in HMIS and the form must be uploaded to HMIS.</p> <p>Use the LA COC Homeless Verification Form (Form 6053) located here: https://www.lahsa.org/documents?id=6053-la-coc-homelessness-verification-form-6053-.pdf.</p>	
DCFS Report	Completed within 24 hours	Families/Unaccompanied Minors
DCFS Investigation Summary Report and/ or Case Number	Required	Families/Unaccompanied Minors
FSC Referral	If a household is placed in Crisis Housing for Families, the FSC referral must be documented in HMIS and/or placed in the file.	Families
DPSS-FSC Consent and Release of Information Form	<i>If utilizing DPSS funding</i> , provider must place signed form in the file.	Families
DPSS-CES for Families Participant Eligibility Request Form A	<i>If utilizing DPSS funding</i> , provider must place a copy of the approval form in the file.	Families
Verification of outreach attempts to the guardian	Required	Unaccompanied Minors
Verification of guardian approval for youth to remain in shelter	Required (if applicable)	Unaccompanied Minors
Housing and Services Plan	Required- LAHSA approved form or Agency equivalent	All
Case Notes	Required- Should be completed for any meaningful or significant interaction in HMIS under the enrolled program	All
Incident Reports, Notice of Noncompliance, Termination Notice	If Applicable. Termination and Non-compliance Notice(s) must be stored in HMIS.	All
Exit and Termination	Required	All
Grievance Policy	Required	All
Participant Satisfaction Survey Notice	Required	All
Proof of Income	Required	All
Proof of Disability	Required	All, if applicable
Social Security Card	Required	All, if available
Birth Certificate	Required	All, if available

ELIGIBLE COSTS

Activities	EGMS Budget Categories
Direct Support services	Supportive Services/Financial Services (Personnel) Supportive Services/Financial Services (non-Personnel)
Twenty-four (24) hour facility availability	Operating Costs (non-Personnel) Operating Costs (Personnel)
Case Management	Supportive Services/Financial Services (Personnel) Supportive Services/Financial Services (non-Personnel)
Document Collection	
Problem-Solving	
Connection to LA County's Mainstream Benefits/Services	
Connection to Employment Development/Placement Programs	
Harm Reduction Services (e.g., sharps containers, overdose prevention resources, amnesty lockers)	
Residential Supervision	
Crisis Intervention & Conflict De-escalation	
Public Transportation (rideshare, taxis, buses, etc.)	Supportive Services/Financial Services (non-Personnel)
Laundry Services	Operating Costs (non-Personnel)
	Supportive Services/Financial Services (non-Personnel)
Restrooms & Showers	Operating Costs (non-Personnel)
Hotel/motel vouchers	Motel/Hotel Vouchers
Meals, hygiene products, supplies	Operating Costs (non-Personnel)
Security	Operating Costs (Personnel)
Admin	Admin - Eligible admin costs to ALL program type with Non-Federal Funding

APPENDIX I. Interim Housing Eligibility

Homelessness Status	<p>Eligible Participants: Participants must be determined to be homeless (Category 1) per HUD’s Final Rule on “defining Homeless” (24 CFR parts 91, 576 and 578) or (Category 4) per The McKinney-Vento Homeless Assistance Act (42 U.S.C. 11301 et seq.).</p> <p><u>Category 1:</u> Literal Homeless- An individual or family who lacks a fixed, regular, and adequate nighttime residence, which includes one of the following:</p> <ul style="list-style-type: none"> i. Has primary nighttime residence that is a public or private place not meant for human habitation. Examples include street, park, vehicle, abandoned building, bus/train station, airport, camping ground); ii. Is living in a publicly or privately-operated shelter designated to provide temporary living arrangements (Emergency shelter, transitional housing, motel/motel paid by government or charitable organization); <u>or</u> iii. Exiting an institution where (s)he has resided for 90 days or less AND were residing in an emergency shelter or place not meant for human habitation immediately before entering institution. Examples of Institutions include a medical hospital, psychiatric hospital, jail, prison, substance abuse treatment facility, and dependent care facility. <p><u>Category 4:</u> Individuals/families experiencing trauma or a lack of safety related to, or fleeing or attempting to flee, domestic violence, dating violence, sexual assault, stalking, human trafficking, or other dangerous, traumatic, or life-threatening conditions related to the violence against the individual or a family member in the individual’s or family’s current housing situation, including where the health and safety of children are jeopardized; and includes all of the following:</p> <ul style="list-style-type: none"> i. Have no identified residence, resources or support networks; AND ii. Lack the resources and support networks needed to obtain other permanent housing.
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APPENDIX I Interim Housing Eligibility (Continued)

Homelessness Status, Continued	<p>Acceptable Verification:</p> <ul style="list-style-type: none">For individuals determined to be homeless (Category 1 or 4), the following are the documents that can be used to verify homelessness within the LA CoC. They are in the order of preference based on HUD guidance: HMIS CLNT 125 Client Summary Report, HMIS CLNT 127 Homeless Status Timeline Report, and LA COC Homeless Verification (Form 6053).<ul style="list-style-type: none"><i>HMIS CLNT 125 Client Summary Report:</i> Contractors seeking to document a participant’s homelessness (Category 1 or Category 4) should first run the participant’s Client Summary report on HMIS. If the Client Summary Report verifies the individual is actively in a homeless program within seven (7) days, the Contractor may print the HMIS Client Summary Report and place in the participant’s file. If the Client Summary does not show the participant met/meets the Category 1 or Category 4 definition within the last seven (7) days, the Contractor will need to use one of the LAHSA-approved forms to document a participant’s homelessness at program entry. <p>The LA COC Homeless Verification (Form 6053) can be used to verify prior episodes of homelessness and current homelessness that are not documented in HMIS and the form must be uploaded to HMIS. Use this form to verify homelessness for Categories 1 & 4. https://www.lahsa.org/documents?id=6053-la-coc-homelessness-verification-form-6053-.pdf.</p> <p>Use the LA COC Homeless Verification Form (Form 6053) located here: https://www.lahsa.org/documents?id=6053-la-coc-homelessness-verification-form-6053-.pdf.</p>				
Geography	Participants must be current residents of the County of Los Angeles. If the person reports that they slept within the County of Los Angeles the night previous to assessment they would be considered a current resident of Los Angeles.				
Participant Identification & age	Participants are required to have a form of identification on file that states who they are and their age. If a participant does not have an identification card at the time of the program screening, Contractor must not deny the participant entry to the program rather assist the participant in obtaining an identification card. Contractor must work to obtain identification of all members in the household and the rights of adults relative to any minors in the household.				
	<p>Category [A] are acceptable forms of government issued photo identification cards. If the participant does not have any of the acceptable identification cards listed in Category [A] they may provide one acceptable form of alternative photo identification in Category [B] along with one acceptable non-photo form of identification in Category [C] to meet the government issue identification requirement. A copy of a social security card is NOT required for the program.</p> <table><tr><td>[Category A] Government issued photo Identification Card (ID)</td><td>[Category B] Alternative Forms of acceptable photo identification Card (ID)</td><td>[Category C] Alternative Forms of acceptable non-photo identification</td></tr></table>			[Category A] Government issued photo Identification Card (ID)	[Category B] Alternative Forms of acceptable photo identification Card (ID)
[Category A] Government issued photo Identification Card (ID)	[Category B] Alternative Forms of acceptable photo identification Card (ID)	[Category C] Alternative Forms of acceptable non-photo identification			

	<ul style="list-style-type: none"> • State-issued DMV ID • State-issued DMV Driver's license • Passport/ Passport Card • US Military ID • Immigration Services (USCIS) ID • Visa issued by department of state • Government issued ID 	<ul style="list-style-type: none"> • Student ID • Shelter ID • Employment ID • Bank/ Debit/ Credit Card • Transportation Card (METRO) • Library Card • Gym Membership Card • Warehouse Membership Card 	<ul style="list-style-type: none"> • Birth certificate • Utility Bill • Lease/ rental contract • School Records • Medical / Dental insurance card • Debit/ bank card • Credit card • Legal records/court documentation • Tax Identification Number/Paperwork (TIN) • Social Security card • American Automobile Association (AAA) card • American Association of Retired Persons (AARP)
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APPENDIX I. Interim Housing Eligibility (Continued)

Length of Stay	Interim Housing has no time limit: the total length of stay can and should be individually determined, based on the participant's need. Progress and engagement towards housing goals must be documented and reviewed through Active System Management targets and when a participant is approaching an initial 90-day length of stay and, so long as participant stays in the program, and every 90 days after.
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Attachment 2: FY 2025-26 Fiscal Impact for City Funded Family Sites

Family Sites with City Funded Services

Council District	Site Address	City Funded Family Units ¹	Proposed City Funded Bed Rate	FY 2024-25 Funding Source	FY 2024-25 Funding ²	FY 2025-26 Funding Source	FY 2025-26 Funding	FY 2025-26 Funding Cost
4	3061 Riverside Dr.	26	\$135	County Roadmap	\$1,318,796	HHAP	\$1,281,150	-\$37,646
4	1701 Camino Palmero St.	21	\$135	County Roadmap	\$758,835	HHAP	\$1,034,775	\$275,940
11	12841 W. Washington Blvd.	7	\$135	General Fund	\$252,945	General Fund	\$344,925	\$91,980
14	207 N Breed St.	7	\$135	General Fund	\$252,945	General Fund	\$344,925	\$91,980
14	1904 Bailey St. ³	5	\$135	County Roadmap	\$120,450	HHAP	\$246,375	\$125,925
Grand Totals		66			\$2,703,971		\$3,252,150	\$548,179

¹ Although the City Funded units are less than 14, the number of occupants meet the criteria to be considered for economies of scale, and are therefore recommended to receive the large site rate of \$135.

² This table and funding impact does not include two sites where the City funds leasing only. The FY 2024-25 grand total of the City funded family portfolio is \$3,811,857.

³ 1904 Bailey St. serves a mix of single adult women and women with children (families). This table only reflects funding related to the family units, which were funded at \$66 per night per unit for FY 2024-25.

Family Sites with City Funded Leasing Only

Council District	Site Address	City Funded Family Units	Proposed City Funded Bed Rate ¹	Funding Source	FY 2024-25 Lease Funding
9	4601 S Figueroa St.	15	N/A	County Roadmap	\$405,942
5	1479 S. La Cienega Blvd.	18	N/A	County Roadmap	\$701,944
Grand Totals		33			\$1,107,886

¹ The City only funds leasing for these family sites, however, their services are subject to an increase that is funded by another entity.