

II. DETERMINATION OF ELIGIBILITY, OUTREACH AND REFERRALS

A. ELIGIBILITY CRITERIA

Wherever possible the housing first philosophy, attached hereto and incorporated herein as **Addendum D** shall be implemented when determining eligibility for the PSH Rental Assistance Program. CDC will implement and retain Referral/Case management MOUs with agencies who provide supportive services. Any agency with a signed Referral/Case management MOU may refer applicants to CDC. Refer to “Referrals” below for further definition.

As verified and maintained by the participant’s service provider an applicant must meet the definition of homeless or chronically homeless as defined in **Addendum A** and modified by Addendum I, and have one or more of the following three targeted disabilities:

- a. Serious Mental Illness
- b. Chronic alcohol and/or drug abuse;
- c. AIDS or related diseases

Persons with physical disabilities may qualify for the program, even if their disability is not one of the “targeted disabilities”.

Additionally, the applicant must be disabled according to the following HUD definition:

“A person shall be considered to have a disability if such person (1) has a physical, mental or emotional impairment which is expected to be of long-continued and indefinite duration; substantially impedes his or her ability to live independently; **and** is of such nature that such ability could be improved by more suitable housing conditions.”

In the case of a homeless household with more than one member, at least one member of the households must meet the disability criteria.

Disability must be verified by a third party verification and the verifying provider must be licensed in the state to treat that specific disability.

The applicant’s service provider must verify, maintain, and certify the eligibility criteria above have been met and submit the certification to CDC. Preference will be given to Chronically Homeless households. Service providers who refer households to the PSH program must verify homelessness status, and must refer Chronically Homeless households before referring other homeless households.

Income Eligibility

Income for the PSH program will be calculated as stated in 24 CFR 5.609 Annual Income and 24 CFR 5.611 Adjusted Income, attached hereto and incorporated herein as **Addendum F**.

Eligible Households

The following households are eligible to participate in the PSH Rental Assistance Programs:

1. Single person households, defined as an unaccompanied adult (age 18 or over or emancipated minors)
2. Family households; defined as two or more persons whose income and resources are available to meet the household's regular living expenses.

Live In Aides

Program participants with chronic medical needs may qualify for a Live-In Aide if such a Live-In Aide is determined to be essential for the care and well-being of the participant.

Verification must be provided by a knowledgeable professional such as: a doctor, social worker, or case worker, certifying that the participant requires an attendant to live with them in order to safely manage their medical and healthcare needs. The Live-In Aide must complete an application, and sign a Live-In Aide Certification Form.

Additionally, Live-In Aides must meet the HUD criteria outlined in 24 CFR § 5.403. This definition applies to a specific person (PIH 2008-20):

Live-In Aide means a person who resides with one or more elderly persons, or near-elderly persons, or persons with disabilities, and who:

- (1) Is determined to be essential to the care and well-being of the persons;
- (2) Is not obligated for the support of the persons; and
- (3) Would not be living in the unit except to provide the necessary supportive services.

The CDC) must approve a Live-In Aide who meets all of the criteria if necessary as a reasonable accommodation in accordance with 24 CFR Part 8, to make the program accessible to and usable by the family member with disabilities.

The CDC may not approve an unidentified Live-In Aide, nor a larger unit than the family qualifies for under the CDC's subsidy standards for an unidentified Live-In Aide.

Occasional, intermittent, multiple or rotating care givers do not meet the definition of a Live-In Aide pursuant to 24 CFR Section 982.402(b)(7), which implies that Live-In Aides must reside with a family permanently for the family unit size to be adjusted in accordance with the subsidy standards established by the CDC. Therefore, an additional bedroom for a Live-In Aide should not be approved.

The CDC must consider requests for an exception to the established subsidy standards on a case by-case basis and provide an exception, where necessary, as a reasonable accommodation. The CDC shall document the justification for all granted exceptions.

The income of a Live-In Aide is not counted in the calculation of annual income for the participant family pursuant to 24 CFR Section 5.609(c)(5). Relatives may be approved as Live-In Aides if they meet all of the criteria defining a Live-In Aide. Because Live-In Aides are usually not *family* members, a relative who serves as a Live-In Aide would not be considered a remaining member of a tenant family.

CDC Policy Pertaining to Live in Aides

The Live-In Aide, and any family members of the Live-In Aide, must be identified by the family and approved by CDC. The CDC may not approve an unidentified Live-In Aide, nor a larger unit than the family qualifies for under the CDC's subsidy standards for an unidentified Live-In Aide.

CDC presumes that a relative is a household member, not a Live-In Aide. For a relative to qualify as a Live-In Aide, the applicant/participant must show that the care is provided by contract. The family and the Live-In Aide will be required to submit a certification and documentation that shows the Live-In Aide is:

1. Capable of providing the required care for the participant;
2. Not obligated for the support of the person(s) needing the care;
3. Has never been a member of the household while the family was receiving housing assistance, nor has the person made regular financial contributions to the household while the family was receiving housing assistance;
4. There is no other reason for the person to live in the unit other than to provide care for the elderly, near-elderly, or disabled family member. The live in aide declarant should have to demonstrate they have a previous residence they left in good standing;
5. Intends to maintain his or her finances separately and live independently from the disabled tenant's household; and
6. Receives approval from the owner/landlord.

Written verification will be required from a reliable, knowledgeable professional, such as a doctor, social worker, or case worker, that the Live-In Aide is essential for the care and well-being of the elderly, near-elderly, or disabled family member.

For continued approval, the family must submit a new request, subject to CDC's verification every year during the annual re-certification.

CDC will not approve a particular person as a Live-In Aide, and may withdraw such approval consistent with 24 CFR 982.316(b), if:

7. The person commits fraud, bribery or any other corrupt or criminal act in connection with any federal housing program;
8. The person commits drug-related criminal activity or violent criminal activity; or

9. The person currently owes rent or other amounts to CDC or to another CDC in connection with Section 8 or public housing assistance under the 1937 Act.

Other Eligibility Requirements

Applicants who are currently receiving rental assistance from any other program do not qualify for the PSH Rental Assistance Program.

Applicants who have previously participated in the PSH Rental Assistance Program may be re-referred and re-apply for the program. For these households CDC may consider the following in making a determination of eligibility:

1. Completion of rehabilitation for substance abuse, if applicable;
2. Compliance with mental health treatment which eliminates issue for previous program participation termination, if applicable; and
3. Former household members, who caused program non-compliance, are no longer in the home.

Applicants in Debt to CDC

CDC will accept referrals for applicants who are in debt to CDC. However, the applicant/participant must enter into a repayment agreement with CDC before a PSH certificate will be issued.

The Housing Choice Voucher Administrative Plan, Chapter XXIV. Repayment Agreements will be referred to when determining the terms of the repayment agreement.

CDC may consider the financial circumstances of the applicant when determining the terms and duration of the repayment agreement. Failure to meet the obligation of the repayment agreement may result in termination from the program. CDC may consider all circumstances before denying an applicant based on this criteria.

B. INELIGIBLE APPLICANTS

Applicants/participants are not eligible for participation in the PSH program if any member of the family is;

1. A registered sex offender;
2. Has been convicted of manufacturing methamphetamine in an assisted unit;
3. Has a recent history of violent criminal behavior which may have threatened the health and safety of another individual (recent history is defined as more than three documented incidents in the previous 12

month period). This criteria will be evaluated on a case by case basis and completion of an anger management course or other such process may be considered; or

4. Has been convicted of arson.

C. OUTREACH

Outreach Policy

CDC is a member of the Mendocino County Homeless Services Continuum of Care (MCHSCoC). CDC participates on committees as identified in the Governance Charter for the MCHSCoC, attends related meetings, and participates in the Point in time count.

Outreach Procedures

CDC staff will make presentations about the CoC Rental Assistance Program at relevant venues (e.g. quarterly Continuum of Care Board meetings, Case Conferencing meetings and other training venues) upon request.

D. REFERRAL

CDC participates in the coordinated entry process. Referrals will be pulled from the By Name List (BNL) as funding is available. **** Note: Because CDC participates in the CoC Coordinated Entry process, CDC has designed this section to mirror that process. Should that process change, and be approved by the CoC Board, CDC will follow the currently adopted CoC Coordinated Entry Process, as approved by the Executive Director. Nothing in this would allow for changes to be made or implemented that are not in compliance with Federal, State, or local laws, or grant conditions outlined by the funding source (The U.S. Department of Housing and Urban Development)**

Service providers will be required to enter into a case management agreement with CDC. The case management agency must agree to provide support services to the participant during their housing search, and after suitable housing is located and the client is housed. Case management is necessary to keep clients housed, and avoid a return to homelessness.

Referral process:

1. The Front Door agencies for Coordinated Entry will complete a VI-SPIDAT with clients which will determine their placement on the By Name List. When CDC pulls a client from the By Name List, CDC will request the following from the case manager who placed the client on the By Name List (BNL)
 1. VI-SPDAT
 2. Verification of homelessness
 3. Verification of disability

4. Signed release of information/consent
 5. HMIS Informed Release and Consent form
 6. Case plan
2. These documents must be submitted in a sealed envelope marked “confidential” to protect client’s information.
 3. Referrals will be date stamped.
 4. The referral package will be reviewed, and data will be entered into HMIS and the CDC housing software.

Unit Based assistance: SRA units: Case managers will have a maximum of 7 days to bring the referral documents into CDC, signed by the client.

Tenant Based Assistance: TRA Certificates: Case managers will have a maximum of 14 calendar days to bring the referral documents into CDC, signed by the client.

Clients who cannot be located when pulled from the BNL will have three opportunities for housing (name at the top of the BNL) before they are moved to the inactive list

Clients who are contacted, and refuse a housing opportunity three times will have a case conference scheduled to determine what the issues with the presented housing opportunities are for that client. If the issues are resolved, the client can remain at the top of the BNL, however if they are not, the client will be removed from all lists. If the client refuses the next housing opportunity, they will be moved to the inactive list.

Priority Determination

If there are more referrals than funds available the following will be used to determine priority:

1. **Veterans will receive priority.**
2. **Chronically Homeless** will be processed first and, if eligible, issued certificates first.
Order of priority within this category is determined by the VI-SPDAT score. Scoring that indicates the most vulnerable will processed first, and if eligible issued a certificate first. If two referrals with the same priority/vulnerability are received around the same time, length of time homeless will be the determining factor, as to which referral is processed first. The referral that indicates the longest time homeless will be processed first.
3. **Homeless** will be processed once all Chronically Homeless referrals have been processed, and all Chronically Homeless referrals have been either issued a certificate or the referral/application has been denied. Order of priority within this category is determined by the VI-SPDAT score. Scoring that indicates the most

vulnerable will be processed first, and if eligible issued a certificate first. If two referrals with the same priority/vulnerability are received around the same time, length of time homeless will be the determining factor as to which referral is processed first, meaning the person experiencing homelessness the longest will be processed first..

CDC may require verification of homelessness status in addition to that provided from the case manager.

Referrals will only be pulled from the BNL through coordinated entry.

CDC May accept referrals directly from Domestic Violence Service Providers and providers who serve people living with HIV or AIDS for their clients who are experiencing homelessness.

E. APPLICATION PROCESS AND VERIFICATION OF ELIGIBILITY

Application Packet

The service provider will assist the applicant with completing CDC's application, and collecting/supplying all necessary documentation. The application packet will include the following;

1. Cover Sheet: Includes case manager's business card for easy reference, and any comments from the Service Provider that may affect participation in the Program;
2. Program Application;
3. Service Provider Agreement between the service provider and the applicant;
4. Identification for all adults. CDC must view originals, and will make copies;
5. Social Security Cards for all households members- copies will only be accepted if legible, and do not appear to be altered in any way, if either of these conditions are not met, CDC will need to view the originals and make copies for the file.
6. Birth Certificate or government document verifying date of birth for minors- copies will only be accepted if legible, and do not appear to be altered in any way, if either of these conditions are not met, CDC will need to view the originals and make copies for the file ;
7. Current Income/Asset Verification (copy of benefit letter, check stubs, employer verification, bank statements etc.);
8. Chronically Homeless, and preference Verification Form-Must meet current HEARTH act definition;
9. Disability Verification Form;
10. Notice of the expectation of maintaining a clean and sober environment; and
11. Applicant/Participant affirmation that

1. Failure to comply with services may result in termination of rental assistance
2. Arrests for substance abuse related activity or infliction of harm on another may be grounds for termination of rental assistance.

Once an application is submitted, CDC will determine if additional information is required. CDC will contact the applicant and/or the case manager to notify that additional information is needed to make a final determination of eligibility, if necessary.

The participant and case manager will have ten (10) calendar days from the date of the notice to complete and return all documents not received with the original application to CDC. These documents may include, but are not limited to, the following:

1. Third-Party Verification of Income (all household members):
 1. For government assistance: a printout or letter from government assistance programs (e.g. TANF, GA, SSI, unemployment, etc.) Verification must be dated within sixty (60) days prior to application.
 2. For households with earned income: three current consecutive pay stubs or a letter from the employer specifying hourly wage, projected hours worked and monthly earnings
 3. For households with zero income: a signed "affidavit of zero income."
 4. For households with Assets: Two current consecutive statements

Eligibility Determination

Once all required documentation has been supplied, CDC will review the information for completeness, and if necessary verify any additional information. CDC will make a determination of final eligibility based on the following factors:

1. Signed Verification of Homelessness Form **PLUS** supporting information:
 1. For persons living on the streets: signed statement from outreach worker, other organization, or participant attesting to applicant's homeless status
 2. For persons living in emergency shelters: signed statement from shelter provider attesting that applicant is residing there
 3. For persons exiting transitional housing: signed statement from transitional housing provider attesting that applicant is residing there and was homeless upon entry
 4. For persons leaving an institution following short-term stay (30 days or less): signed statement from institution verifying residence of less than 30 days and attesting that applicant was homeless at time of entry
 5. For chronically homeless persons: one of the above documents to verify current status and duration of homelessness, plus, if

- applicable, a signed statement from the applicant attesting to past homeless episodes
6. If applicable, the Verification of Disability Form must be signed by a qualified health care professional trained to make such a determination. Case managers are not qualified to sign the verification unless they are qualified health care professionals.
 7. Verification of income eligibility. Income of program participants must be calculated in accordance with 24 CFR § 5.609 and 24 CFR § 5.611(a)
 8. Signed Service Provider Agreement between participant and eligible service provider

Based on the review of the application packet, CDC will make one of the following determinations:

1. File is complete and applicant is eligible. CDC will schedule a briefing.
2. File is incomplete. If eligibility cannot be determined, CDC will notify the applicant and case manager in writing that additional information is necessary. If the requested information is not supplied within ten (10) calendar days, or an approved extension, CDC will notify the case manager and applicant that the application is denied as outlined in #3 below. (Extensions can be granted on a case by case basis and must be reasonable).
3. Applicant is ineligible. The application will be denied and the reasons for denial will be given in writing to the applicant and case manager. If the applicant disagrees with CDC's decision of denial, the applicant may request an informal review of the denial of eligibility within ten (10) calendar days of the notice. The informal review process can be found in Chapter VII. G. of this policy.

F. BRIEFING AND ISSUANCE OF PSH CERTIFICATE

Once an applicant has been determined to be eligible for the PSH Program, CDC will schedule a briefing by contacting the case manager. The case manager will then contact the applicant to confirm date/time of the meeting. The case manager and applicant must attend the scheduled meeting together. If the applicant fails to appear, he/she may be rescheduled for a second briefing. If the applicant fails to appear a second time, the application will be withdrawn, and the applicant will be notified as outlined in #3 above.

A family selected to participate in the PSH program will be provided an oral briefing.

The briefing shall include, but is not limited to, information on the following subjects:

1. A description of how the program works and review the CoC policies and program requirements, including participant obligations
2. How the applicant's portion of the rent is determined
3. The process for securing a housing unit, including where the family may lease a unit, and an explanation of how to request CDC approval to lease a unit.
4. CoC Program Agreement, Release(s) of information, CoC Housing Certification, and all other necessary documents.

Contents of the Briefing Packet

When a participant is selected to participate in the program, the CDC will provide the participant with a packet that includes the following information:

1. Permanent Supportive Housing Program Participant Obligations
2. Permanent Supportive Housing Program Certificate
3. Contact sheet
4. Security Deposit Assistance maximum calculation sheet
5. Things you should know
6. Permanent Supportive Housing pamphlet
7. Current Fair Market Rents
8. Request for Tenancy Approval (RFTA) form
9. Lead Based Paint in your Home pamphlet
10. A Good Place to Live. Housing Quality Standards
11. Landlord Owner guide
12. Violence Against Women Act protections
13. Housing Discrimination Packet
14. CDC's informal hearing procedures. This information shall describe when the CDC is required to give a participant family the opportunity for an informal hearing, and how to request a hearing.

Certificate Issuance

A certificate will be issued to an applicant after the CDC has determined that the applicant is eligible for the program based on information received within the 60 days prior to issuance. CDC should have sufficient funds to house an applicant before issuing a certificate. If funds are insufficient to house the applicant, CDC will wait until it has adequate funds before CDC issues another certificate.

If it is not likely that funds will be available within 30 days, CDC will send the referral back to the referring agency with an explanation that funds are not anticipated to be available within 30 days. If CDC determines that there is insufficient funding after a certificate has been issued, CDC may rescind the certificate.