

# Cuyahoga/Cleveland Minimum Standards for CoC Programs (ES, TH, TH-RRH, RRH, PSH)

Version 2.8, May 21, 2026

- ✓ ES standards included herein have been approved by Cuyahoga/Cleveland CoC Advisory Board on May 18, 2023.
- ✓ RRH standards included herein have been approved by Cuyahoga/Cleveland CoC Advisory Board on July 20, 2023.
- ✓ PSH standards included herein have been approved by Cuyahoga/Cleveland CoC Advisory Board on September 21, 2023.
- ✓ TH-RRH standards included herein have been approved by Cuyahoga/Cleveland CoC Advisory Board on July 18, 2024.
- ✓ TH standards included herein have been approved by Cuyahoga/Cleveland CoC Advisory Board on 5/21/26

## Standards Outline

- A. Agency Oversight & Management – universal
- B. Fiscal Administration – universal
- C. Project Operations & Services
- D. Data Collection & Management – universal
- E. Facility Standards
- F. Project Participants' Rights – universal

## Definitions:

### Chronic Homelessness

To be eligible for housing restricted to **chronically homeless** individuals or families under the CoC program, participants must meet the definition of chronically homeless. The definition of chronically homeless is:

- A homeless individual with a disability as defined in section 401(9) of the McKinney-Vento Assistance Act (42 U.S.C. 11360(9)), who:
  - Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter, **and**
  - Has been homeless and living as described for at least 12 months\* or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described.
- An individual who has been residing in an institutional care facility for less, including jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria of this definition before entering that facility; or
- A family with an adult head of household (or, if there is no adult in the family, a minor head of household) who meets all of the criteria of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

### **System Participant**

A system participant is a general term used to describe a person and/or household at any stage of engagement, enrollment, or exit from a CoC project such as emergency shelter, rapid rehousing, and permanent supportive housing. A system participant is distinct from a project participant in that a system participant of the homelessness system need not be enrolled (with an entry date) in a CoC homelessness assistance project, whereas a project participant describes a person's status only while actively enrolled in a homelessness assistance project.

### **Emergency Shelter**

Emergency Shelter (ES) is a place for people who are experiencing homelessness to live temporarily when they cannot live in their previous residence and lack other safe housing options or resources to obtain housing. Emergency shelter facilities provide nighttime accommodations and may include daytime accommodations and services associated with rehousing persons as quickly as possible.

### **Enhanced/Specialized Emergency Shelter**

Enhanced/specialized shelter services are exclusively dedicated to targeted participants, likely delivered in designated shelter quarters (e.g. rooms, dorms, wings separate) and apart from the general population of emergency shelter program participants. **Enhanced/Specialized Emergency Shelter** operate according to participant length of stay requirements as determined by the CoC.

**Enhanced/Specialized Emergency Shelter** services include enhanced navigation services to participants such as more frequent case management encounters, and more intensive support to participants to help them identify, apply, acquire and transition into permanent housing placements. New enrollments in **Enhanced/Specialized Emergency Shelter** services beds/units are based exclusively on eligibility verification and referrals as determined by a designated access provider or Coordinated Entry.

### **Harm Reduction**

Harm reduction, or harm minimization, refers to a range of intentional practices and policies designed to lessen the negative social and/or physical consequences and reduce adverse impacts associated with various human behaviors, both legal and illegal. Harm reduction is used to decrease negative consequences of drug use and sexual activity without requiring abstinence, recognizing that those unable or unwilling to stop can still make positive change to protect themselves and others.

### **Homeless**

#### **1. Category 1: Literally Homeless.** (Paragraph 1 – 24 CFR 578.3)

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

1. Person has a primary nighttime residence that is a public or private place not meant for human habitation;
2. Person is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or
3. Person is existing an institution where s/he has resided for 90 days or less **and** who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.
4. Person left home because of physical, emotional, or financial abuse or threats of abuse and have not secured safe, alternative housing.

2. **Category 2: Imminent Risk of Homelessness** (Paragraph 2-24 CFR 578.3)  
An individual or family that will lose their primary nighttime residence within 14 days, have no subsequent residence identified, and have no other resources or support networks to obtain other permanent housing.
3. **Category 4: Fleeing Domestic Violence.** (Paragraph 4 – 24 CFR 578.3)  
Fleeing/Attempting to flee domestic violence, dating violence, sexual assault, stalking, and other dangerous or life-threatening conditions that relate to violence against the individual or family member, who is either afraid to return to their primary nighttime residence, or is afraid to leave it, or is forced to leave it (including human trafficking). And,
  1. person has no other residence; and
  2. person Lacks the resources or support networks to obtain other permanent housing.

### **Housing First**

Housing First is an evidence-based, consumer-driven approach for people experiencing a housing crisis that seeks to provide immediate access to permanent housing with flexible, individualized service supports and few to no preconditions, behavioral contingencies, or barriers.

### **Permanent Supportive Housing**

Permanent Supportive Housing (PSH) is permanent housing in which housing assistance (e.g., long-term leasing or rental assistance) and **supportive services** are provided to assist households with at least one member (adult or child) with a qualifying disability in achieving housing stability. To be eligible for PSH under the federal Continuum of Care (CoC) Program, project participants must meet Category 1 of the federal homeless definition (below), and any additional eligibility criteria set forth in the Fiscal Year CoC Program NOFA under which the project was funded (e.g., be experiencing chronic homelessness). PSH projects adhere to evidence-based Housing First practices<sup>1</sup>, including minimal preconditions such as sobriety or required participation in treatment. Supportive services are voluntary and offered to maximize housing stability and prevent returns to homelessness, as opposed to addressing predetermined treatment goals prior to permanent housing entry.

### **Rapid Rehousing**

Rapid Rehousing (RRH) is a project for persons experiencing homelessness that includes time-limited rental assistance and services. The goal is to help people obtain safe, adequate housing as quickly as possible and support the long-term retention of housing by building participant self-sufficiency.

### **Transitional Housing**

Transitional housing (TH) is a temporary, supportive housing model designed to bridge the gap between homelessness and permanent housing, typically lasting from a few months up to 24 months. It provides individuals and families with stable, safe accommodation combined with intensive services—such as counseling, job training, and addiction recovery—to foster independence.

### **Trauma-informed**

Trauma-informed care recognizes the presence of trauma symptoms and, when creating a person/family treatment plan, acknowledges the connection between trauma, behaviors, and family interactions.

### **Trauma-responsive**

Trauma-responsive care is the application of being trauma-informed. This “next step” of the treatment process is delivered according to the unique needs of the person who has experienced trauma, as well

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<sup>1</sup> **Housing First in Permanent Supportive Housing Brief**, <https://www.hudexchange.info/resource/3892/housing-first-in-permanent-supportive-housing-brief/>

as the caregivers and family unit. Implementation is the difference between trauma-informed care and trauma-responsive care. A practitioner is being trauma-responsive with the application of trauma-informed knowledge.

A. Agency Structure and Management		
Source	Standard	Applicability
OHS, 2011; adopted by CoC Advisory Board 9/10/14	1. The agency shall be a <b>nonprofit organization</b> , recognized under section 501(c)(3) of the Internal Revenue Code.	All program components
OHS, 2011; adopted by CoC Advisory Board 9/10/14	2. The agency's <b>Board of Directors</b> shall consist of voluntary (unpaid) members, except for the agency's CEO or Director.	All program components
OHS, 2011; adopted by CoC Advisory Board 9/10/14	3. The agency shall include on the Board of Directors or some other policy-making entity, one or more members who are either <b>homeless or formerly homeless</b> . Persons with lived experience who are compensated for Board participation shall not be considered paid employees.	All program components
OHS, 2011; adopted by CoC Advisory Board 9/10/14	4. The agency's Board of Directors shall <b>meet at least on a quarterly</b> basis and set overall policy for the CoC project. Minutes of the meetings shall be maintained for at least three years.	All program components
Adopted by CoC Advisory Board 5/18/23	5. The agency shall have a <b>conflict-of-interest</b> policy for staff, volunteers, and project participants.	All program components
Adopted by CoC Advisory Board 5/18/23	6. The agency shall have a policy establishing that the entire agency and all affiliated projects operate as a <b>drug-free workplace</b> .	All program components
Adopted by CoC Advisory Board 5/18/23	7. The agency shall have a policy governing the use of <b>firearms</b> on agency property. a. There is a policy that addresses firearms and other weapons, as it relates to staff and residents. These policies address the project's stance on the concealed carry law and whether weapons, including firearms, are permissible on the premises of the CoC agency.	All program components
Adopted by CoC Advisory Board 5/18/23	8. The agency shall have a <b>disaster recovery</b> and crisis communications plan.	All program components
Adopted by CoC Advisory Board 5/18/23	9. The agency shall have a <b>sexual harassment</b> policy applicable to all staff, trustees, volunteers, vendors, project participants. a) There is a policy that prohibits sexual harassment which is applicable to staff, trustees, volunteers, and residents.	All program components
Adopted by CoC Advisory Board 5/18/23	10. The agency shall have an <b>annually updated organizational chart</b> of positions and specific individuals with clear lines of authority; personnel policies detailing employee responsibilities, rights, roles, benefits, job description, attendance requirements, grievance procedure, annual performance review process, confidentiality, and compensation policy	All program components
OHS, 2011; Adopted by CoC Advisory Board 5/18/23	11. The agency shall have written policies for the selection of all paid personnel in conformance with the EEO guidelines. a. The project complies with all applicable Equal Employment Opportunity and Affirmative Action laws and regulations. b. The following policies are posted in an area where all employees have access to them. A. Non-Discrimination Policy B. Affirmative Action Plan and/or Equal Employment Opportunity Policy	All program components

<p><b>Adopted by CoC Advisory Board 9/21/23</b></p>	<p><b>12.</b> The project owner, operator and service provider have written personnel policies detailing employee responsibilities, rights, roles, benefits, job requirements, grievance procedures, hiring and termination procedures, annual employee review protocol, hours of operation, confidentiality and the agency’s compensation and benefits plan.</p> <p>a. Each employee receives a copy of the policies, a job description, attendance requirements, and compensation information upon beginning employment and updates are provided upon revision.</p>	<p>All program components</p>
<p><b>Adopted by CoC Advisory Board 9/21/23</b></p>	<p><b>13.</b> There is a written Code of Conduct for employees and volunteers.</p> <p>a. All employees and volunteers receive a written copy of the Code of Conduct and are oriented to the Code upon hire or engagement.</p>	<p>All program components</p>
<p><b>Adopted by CoC Advisory Board 9/21/23</b></p>	<p><b>14.</b> There is a written policy that prohibits requiring, mandating or improperly influencing religious participation as a prerequisite to receive services or housing.</p>	<p>All program components</p>
<p><b>Adopted by CoC Advisory Board 9/21/23</b></p>	<p><b>15.</b> There is a performance and quality improvement plan that guides internal agency monitoring of project performance, participant satisfaction, and achievement of positive participant outcomes.</p>	<p>All program components</p>
<p><b>Adopted by CoC Advisory Board 9/21/23</b></p>	<p><b>16.</b> There is a process for collecting, analyzing and using participant evaluation and feedback as part of the performance and quality improvement plan.</p>	<p>All program components</p>

## B. Fiscal Administration

Source	Standard	Applicability
OHS, 2011; Adopted by CoC Advisory Board 5/18/23	1. There shall be an accounting system which is maintained in accordance with Generally Accepted Accounting Principles (GAAP) and which uses fund accounting methods to ensure clear, accurate and current accounting of all public grant sources. a) Grant expenses and match are consistently and accurately charged to appropriate funding sources b) Expenses are consistently reviewed and approved in compliance with GAAP.	All program components
OHS, 2011; Adopted by CoC Advisory Board 5/18/23	2. The agency shall have a record of accountability for project participants' funds or valuables the project is holding.	All program components
OHS, 2011; Adopted by CoC Advisory Board 5/18/23	3. A project which receives \$300,000 or more of federal funds shall receive an annual independent audit or audit review and submit to OHCP, annually either a letter of "no findings" or a copy of the audit, in conformity with the OHCP financial rules and regulations handbook.	All program components
OHS, 2011; Adopted by CoC Advisory Board 5/18/23	4. The agency shall have internal fiscal control procedures, which are reviewed and approved by the Board of Directors.	All program components
OHS, 2011; Adopted by CoC Advisory Board 5/18/23	5. The agency shall institute and implement an adequate procurement policy in compliance with 24 CFR Part 84, U.S. Department of Housing and Urban Development or other procurement standards required by contract's uniform administrative requirements, covering all project-related small, medium, and large purchases and means of price comparisons to assure purchases at the most reasonable costs and shall make known to women and minority contractors their capability to be vendors.	All program components
OHS, 2011; Adopted by CoC Advisory Board 5/18/23	6. The agency's covered projects shall maintain a system of accountability for time worked through use of timesheets, activity reports, etc. signed by both the employee and the appropriate supervisor. The executive director's timesheet should be signed by a board member. a) Separate accountability of staff time between administrative and programmatic activities are tracked on timesheets	All program components
Adopted by CoC Advisory Board 5/18/23	7. The agency's governing board procures an independent certified public accountant to annually audit the financial statements consistent with GAAP.	All program components
Adopted by CoC Advisory Board 5/18/23	8. The Agency has a finance/accounting policies and procedures manual.	All program components
Adopted by CoC Advisory Board 5/18/23	9. The Agency has current insurance provisions covering worker's compensation, employment practices liability, employer's liability, comprehensive general liability, and directors' and officers' liability (D&O)	All program components
Adopted by CoC Advisory Board 9/21/23	10. The Agency Board of Directors review project financial reports on at least a quarterly basis.	All program components

<p><b>Adopted by CoC Advisory Board 5/18/23</b></p>	<p><b>11.</b> The Agency has the following insurance provisions, notices, and certificates.</p> <ul style="list-style-type: none"> <li>- Worker’s Compensation Certificate</li> <li>- Wage and Hour Notice</li> <li>- Unemployment Liability (if applicable)</li> <li>- Professional Liability</li> <li>- Director and Officer’s Liability is encouraged. Board members are informed of liability.</li> <li>- Property/Casualty</li> <li>- Cyber security liability</li> </ul>	<p>All program components</p>
<p><b>Adopted by CoC Advisory Board 5/18/23</b></p>	<p><b>12.</b> The Agency has an asset management plan that documents the policies, strategies, financing plans and reporting systems that are used to sustain and ensure the continued viability of the project’s capital assets.</p>	<p>All program components</p>

C. Project Operations & Services		
Source	Standard	Applicability
Adopted by CoC Advisory Board 5/18/23	1. <b>Non-discrimination, equal access Policy.</b> The project shall provide equal access to crisis services and project beds/units without regard to a person's actual or perceived sexual orientation, gender, gender identity or gender expression, in compliance with HUD's Equal Access Rule unless the project has received an explicit exemption.	All program components
OHS, 2011; Adopted by CoC Advisory Board 5/18/23	2. The project <b>shall not discriminate</b> on the basis of race, religion, color, sex, sexual orientation, gender identity, national origin, disability, age, marital or family status, military status, status with regard to public assistance, ancestry, or any other legally protected class of persons. Projects serving families with school-aged children shall not discriminate on the basis of the sex or age of the children or the size of the family,	All program components
OHS, 2011; Adopted by CoC Advisory Board 5/18/23	3. The project <b>shall not require project participants to participate in religious services</b> or other forms of religious expression.	All program components
OHS, 2011; Adopted by CoC Advisory Board 5/18/23	4. The project shall have a <b>policy manual</b> , which includes the project's purpose, population served, regulations, rules and procedures.	All program components
Adopted by CoC Advisory Board 5/18/23  Updated 5/21/26	5. All projects shall adopt <b>evidence-based practices</b> such as <b>Trauma-informed Care (TIC) and Trauma-responsive care</b> approaches relevant to the project type, regarding project operations and service delivery. a. Supportive services are designed and provided to meet the specific needs of residents. Minimally, services include low-barrier access (i.e., on-site or support to directly access), individualized case management and services, assistance with accessing income and related supports, non-cash benefits, healthcare services, support for independent living and basic needs, and recreational opportunities. b. Service participation is voluntary for all residents, except when specific funders or project types require a supportive service participant as a condition for continued enrollment. c. Residents are actively involved in the design, development, and implementation of their individualized service plans.	All program components
OHS, 2011; Adopted by CoC Advisory Board 5/18/23	6. The project shall conduct (or participate in) an <b>evaluation of the effectiveness of the services and housing</b> offered, at least annually.	All program components
Adopted by CoC Advisory Board 5/18/23	7. All projects have staff trained in and able to employ <b>Housing Problem Solving</b> strategies to quickly identify project participants who are candidates for resolution of their housing crisis through strategies consistent with a Housing Problem Solving/Diversion/Rapid Exit plan. These strategies may include landlord mediation, creative problem solving, provision of temporary and flexible financial assistance, family/friend re-unification, transfers/relocation support to alternative geographies where project participants have viable housing options and supports, shared housing/roommate coordination, etc.	All program components
Adopted by CoC Advisory Board 7/18/24  Updated 5/21/26	8. Projects providing crisis housing for persons experiencing literal homelessness shall work to engage project participants to <b>resolve their housing crisis as quickly and safely as possible</b> . Projects providing temporary housing shall identify project participants who have received more than <u>90 days</u> of temporary shelter and offer and track efforts at more intensive, focused, and project participant-centered engagement strategies to facilitate transitions to safe, appropriate, and sustainable permanent housing placements.	ES TH TH-RRH

<p>Adopted by CoC Advisory Board 5/18/23</p>	<p>9. A <b>housing plan</b> shall be developed for all project participants who have seven (7) consecutive days of uninterrupted occupancy in the project. The housing plan must describe the strategy the project participant intends to pursue to end their homelessness and/or maintain their permanent housing placement with references to any proposed connections to housing resources the project participant intends to leverage in the community. Housing plans must be updated at least annually for PSH residents.</p>	<p>All program components</p>
<p>Adopted by CoC Advisory Board 5/18/23</p> <p>Updated 5/21/26</p>	<p>10. All projects shall support project participants in <b>building income</b> through employment connections and related supports and facilitating access and connection to public assistance benefits, including connection to a SOAR specialist when indicated.</p> <p>PSH residents are screened for and connected to all mainstream public benefits, services, and resources for which they qualify. Residents with zero income are provided additional support to secure income.</p>	<p>All program components</p>
<p>OHS, 2011; Adopted by CoC Advisory Board 7/18/24</p> <p>Updated 5/21/26</p>	<p>11. In addition to sleeping arrangements and food, the project shall provide the following <b>basic needs</b>:</p> <ul style="list-style-type: none"> <li>• Humane care which preserves individual dignity</li> <li>• Clean environment</li> <li>• Safe environment</li> <li>• Referrals to community resources</li> <li>• For PSH projects: individualized support for residents to ensure unit upkeep and lease compliance (e.g., access to cleaning supplies).</li> </ul>	<p>All program components</p>
<p>OHS, 2011; Adopted by CoC Advisory Board 7/18/24</p>	<p>12. The project shall have written <b>policies for intake of project participants</b> and criteria for admitting persons to the project. The project's intake policy should be available for the project participants to review. Projects cannot require, upon admission, that project participants have IDs, be entered into HMIS or provide Social Security numbers.</p>	<p>ES TH TH-RRH</p>
<p>OHS, 2011; Adopted by CoC Advisory Board 7/18/24</p> <p>Updated 5/21/26</p>	<p>13. Each facility must adhere to the CoC's <b>involuntary discharge policy</b> and have a procedure to collaborate/coordinate with other crisis housing facilities/shelter(s) when involuntary discharges are necessary.</p> <ul style="list-style-type: none"> <li>• At the time of an involuntary discharge, the participant must be provided with 1) a written explanation of the reason(s) for the discharge and 2) written information on how to file a grievance. These discharges must be documented in incident reports and monitored by OHS.</li> </ul>	<p>ES TH TH-RRH</p>
<p>OHS, 2011; Adopted by CoC Advisory Board 7/18/24</p> <p>Updated 5/21/26</p>	<p>14. The project shall maintain an <b>attendance list</b> in HMIS which includes, at least, the name and gender of each person residing in the project.</p>	<p>ES TH TH-RRH</p>
<p>OHS, 2011; Adopted by CoC Advisory Board 5/18/23</p>	<p>15. The project shall post and read, or otherwise make known, the <b>rules, regulations, and procedures of the project</b>.</p>	<p>All program components</p>
<p>Adopted by CoC Advisory Board 7/18/24</p> <p>Updated 5/21/26</p>	<p>16. All projects serving project participants in a crisis housing setting shall provide <b>basic housing search and location support</b>. Basic services shall include information about available housing listings, roommate services, availability of financial assistance resources, and access to the Internet to enable project participants to manage their own housing search, location, and application process.</p>	<p>ES TH TH-RRH</p>
<p>Adopted by CoC Advisory Board 5/18/23</p>	<p>17. Projects shall develop and implement an <b>Emergency Transfer Plan (ETP)</b> for the emergency transfer of victims of domestic violence, dating violence, sexual assault, and stalking. Said victims shall be entitled to an emergency transfer pursuant to each shelter's emergency transfer plan.</p>	<p>All program components</p>

OHS, 2011; Adopted by CoC Advisory Board 5/18/23	18. The project shall <b>report abuse</b> , including child abuse, elder abuse, and endangerment. Requirements for reporting abuse are extending beyond those staff whose clinical licensure obligates them as a mandated reporter or duty to warn.	All program components
OHS, 2011; Adopted by CoC Advisory Board 5/18/23 Updated 5/21/26	19. The project shall only require project participants to perform duties directly related to <b>daily living activities</b> within the project.	ES TH
OHS, 2011; Adopted by CoC Advisory Board 7/18/24  Updated 5/21/26	20. The project shall provide <b>access to a public or private telephone</b> for use by project participants to make and receive calls.	ES TH (project-based) TH-RRH (project-based only) PSH
OHS, 2011; Adopted by CoC Advisory Board 5/18/23	21. The project shall <b>maintain records to document services provided</b> to each project participant. a. Records containing participant information are kept in a secure location and locked (or capable of being locked) to maintain confidentiality.	All program components
OHS, 2011; Adopted by CoC Advisory Board 7/18/24 Updated 5/21/26	22. The project shall provide accommodations for project participants to <b>store personal belongings</b> . a. There is a policy for storage of residents' personal items, where such items are unable to be stored in individual resident units. This includes provision of on-site, individual lockable storage units or information about nearby storage services.	ES TH TH-RRH (project-based only) PSH
OHS, 2011; Adopted by CoC Advisory Board 7/18/24  Updated 5/21/26	23. The project shall provide a <b>Safety Plan</b> that describes the plan to promote a <b>safe, secure environment</b> and have policies to regulate access. <ul style="list-style-type: none"> <li>Each site-based project must have a written <b>entrance, exit, and visitation policy</b> as part of its safety plan ("visitation" refers to non-project project participants seeking to enter the facility). The policy should indicate how check in/entrance to and exit from the facility occurs for project participants, staff, partners, volunteers, and other guests.</li> </ul>	ES TH TH-RRH (project-based only) PSH
OHS, 2011; Adopted by CoC Advisory Board 5/18/23	24. The project shall encourage the <b>involvement of project participants in the decision-making processes</b> of the project. This can be accomplished in a variety of ways, including having project participant advisory councils to provide input into the operations of the project, or having homeless or formerly homeless people on the board, or having homeless or formerly homeless people trained and hired as staff. a. The project seeks to actively obtain resident input in decision-making through a resident advisory council or reasonable efforts to establish a resident advisory council. b. The project assures adequate accommodation for resident meetings and provides staff assistance, as requested, to support resident advisory functions.	All program components

<p>Adopted by CoC Advisory Board 5/18/23</p>	<p>25. The project shall define a written process for resident involvement in performance and quality improvement. Resident input is obtained and incorporated into the project’s performance and quality improvement processes in the following ways:</p> <ul style="list-style-type: none"> <li>• Periodic monitoring of the implementation of grievance and appeal procedures and summary information concerning dispositions of grievances and appeals.</li> <li>• Satisfaction survey and/or documented interview at least annually with current residents regarding the quality of services and the service/housing environment and opportunities for improvement</li> <li>• Exit survey and/or documented interview with residents who leave the project, whether voluntarily or involuntarily, to provide input on the quality of services and the service/housing environment.</li> </ul>	<p>All program components</p>
<p>OHS, 2011; Adopted by CoC Advisory Board 7/18/24 Updated 5/21/26</p>	<p>26. The project shall allow current project participants to use the project’s <b>physical address as a legal residence</b> for the purpose of voter registration and the receipt of public benefits.</p>	<p>ES TH TH-RRH</p>
<p>OHS, 2011; Adopted by CoC Advisory Board 7/18/24 Updated 5/21/26</p>	<p>27. The project shall maintain a <b>daily log</b> to record at a minimum all unusual or significant incidents.</p>	<p>ES TH TH-RRH (project-based only)</p>
<p>OHS, 2011; Adopted by CoC Advisory Board 7/18/24 Updated 5/21/26</p>	<p>28. The project shall have written <b>policies for consensual and non-consensual searches</b>.</p>	<p>ES TH TH-RRH (project-based only)</p>
<p>OHS, 2011; Adopted by CoC Advisory Board 7/18/24 Updated 5/21/26</p>	<p>29. For the safety of the project participants, the project shall have <b>adequate, trained, on-site staff</b> coverage during all hours the project is open to project participants, unless individual secured units are provided.</p>	<p>ES TH TH-RRH (project-based only)</p>
<p>OHS, 2011; Adopted by CoC Advisory Board 7/18/24 Updated 5/21/26</p>	<p>30. Each facility providing overnight accommodation in a congregate setting must have the ability for consultation with a medical provider or group regarding <b>infectious disease management</b> questions and assistance with proper notification with illness outbreaks.</p>	<p>ES TH TH-RRH (project-based only)</p>

<p>Adopted by CoC Advisory Board 5/18/23</p>	<p>31. All project staff with direct project participant contact shall receive <b>training</b> annually, or as indicated, in at least the following:</p> <ul style="list-style-type: none"> <li>• Emergency evacuation procedures,</li> <li>• Agency operating procedures,</li> <li>• CPR and First Aid procedures (must be completed prior to expiration of current certification);</li> <li>• Disease prevention protocols (Universal Precautions);</li> <li>• Ethical practices (every two years);</li> <li>• Cultural competency, inclusive of race, ethnicity, national origin, gender, and LGBTQ+ interests,</li> <li>• Harm Reduction approaches for engagement and service delivery,</li> <li>• Non-violent crisis intervention techniques and de-escalation techniques (every two years),</li> <li>• Referral procedures to relevant community resources,</li> <li>• Compliance with American with Disabilities Act and understanding special needs and challenges associated with the population the project serves</li> <li>• Basic first aid procedures (including general first aid techniques and identification and management of crisis and emergency health situations such as seizures),</li> <li>• Housing resources and application processes</li> </ul> <p>The project encourages and supports planning for staff professional development.</p>	<p>All program components</p>
<p>Adopted by CoC Advisory Board 5/18/23</p>	<p>32. The agency has a policy for ensuring that each new employee, volunteer or service provider receives <b>initial training</b> not later than the end 12-month period following their start date with the project or end of their probationary/ orientation period, whichever comes first.</p>	<p>All program components</p>
<p>Adopted by CoC Advisory Board 5/18/23</p>	<p><b>33. Ongoing Staff Training</b> Project employees, volunteers and service provider staff receive periodic training on the following as applicable for the position:</p> <ul style="list-style-type: none"> <li>○ CPR and First Aid procedures, inclusive of training on identification and management of seizures, (must be completed prior to expiration of current certification);</li> <li>○ Disease prevention protocols (Universal Precautions);</li> <li>○ Non-violent crisis intervention and de-escalation techniques (every two years);</li> <li>○ Ethical participant practices (every two years);</li> <li>○ Cultural awareness (every two years). Race, gender, LGBTQ+, disability, ethnicity, national origin</li> <li>○ Trauma awareness. Obligations to report abuse, neglect</li> </ul> <p>The project encourages and supports planning for staff professional development.</p>	<p>All program components</p>
<p>Adopted by CoC Advisory Board 5/18/23</p>	<p>34. There are clear communication structures, including regular meetings, sharing of written communications and regular interaction among on-site staff and senior staff of the participating organizations. There is a system of <b>staff supervision</b> and regularly scheduled performance evaluations.</p>	<p>All program components</p>
<p>OHS, 2011 Adopted by CoC Advisory Board 5/18/23  Updated 5/21/26</p>	<p>35. Projects must provide or assist with the <b>linkage of participants to services</b> for drug and alcohol treatment, mental health treatment, life skills and job training, as needed and helpful to the participant.</p> <p>For PSH projects, direct access to such services must be provided to residents on-site or via supported access (e.g., point-to-point transportation)</p>	<p>All program components</p>

<p>OHS, 2011  <b>Adopted by CoC Advisory Board</b>  5/18/23</p>	<p>36. School-aged <b>children are required by law to be enrolled</b> in and attend school. Each project serving school-aged children will ensure that parents are aware of the legal requirement and will work with parents and community resources, as needed, to promote daily school attendance. In addition, each project will assist in connecting children with appropriate services within the community.</p>	<p>All program components</p>
<p>OHS, 2011;  <b>Adopted by CoC Advisory Board</b>  7/18/24  Updated 5/21/26</p>	<p>37. Projects providing crisis housing services but not specifically funded as drug and alcohol treatment projects shall <b>not require random or automatic drug or alcohol testing</b> as a condition to receive crisis services. If behavior by a project participant that strongly suggests substance use does not warrant a call to either 911 or 696-kids, project staff should address the disruptive behavior to manage the issue rather than terminate enrollment in the project.</p>	<p>ES  TH  TH-RRH</p>
<p>OHS, 2011;  <b>Adopted by CoC Advisory Board</b>  7/18/24  Updated 5/21/26</p>	<p>38. Each project shall post the <b>Drug Free Workplace Policy</b> (if covered by it) or comparable statement and method for project participants to report a suspected violation.</p>	<p>ES  TH  TH-RRH (project-based only)  PSH</p>
<p>OHS, 2011;  <b>Adopted by CoC Advisory Board</b>  7/18/24  Updated 5/21/26</p>	<p>39. Each facility-based project shall have a policy for addressing <b>maintenance concerns</b>.</p> <ul style="list-style-type: none"> <li>a. Each facility will post the process for reporting maintenance concerns, including specifying what constitutes an emergency maintenance need.</li> <li>b. Each project shall identify the timeframe for a response to maintenance concerns</li> <li>c. Project staff shall acknowledge new issues reported within (2) business days</li> </ul>	<p>ES  TH  TH-RRH (project-based only)  PSH</p>
<p>OHS, 2011;  <b>Adopted by CoC Advisory Board</b>  7/18/24  Updated 5/21/26</p>	<p>40. If the project houses children and uses volunteers and interns, <b>volunteers/interns must have criminal background checks</b> to volunteer. No one with a violent or sexual-based criminal history will be allowed to volunteer at a facility housing children.</p>	<p>ES  TH  TH-RRH (project-based only)  PSH</p>
<p>OHS, 2011;  <b>Adopted by CoC Advisory Board</b>  5/18/23  Updated 5/21/26</p>	<p>41. Projects must make accommodation for <b>persons working second and third shifts</b> and those with verified medical conditions to have access to beds during the day.</p>	<p>ES  TH</p>
<p><b>Adopted by CoC Advisory Board</b>  9/21/23</p>	<p>42. There is a written participant admissions policy within the participant selection plan with clearly delineated criteria that are not intended to unfairly discriminate against participants and that are compliant with applicable <b>Civil Rights</b> and <b>Fair Housing</b> laws and regulations.</p> <ul style="list-style-type: none"> <li>a. The project complies with fair housing laws and regulations in the implementation of the resident selection plan.</li> <li>b. The project has an equal housing opportunity poster and symbols prominently displayed on marketing materials and in places where housing applicants may see them (e.g., front desk or reception area).</li> </ul>	<p>All program components</p>

<p>Adopted by CoC Advisory Board 7/18/24</p> <p>Updated 5/21/26</p>	<p><b>43. Eligibility</b></p> <p>a. All project participants meet the following <b>eligibility criteria upon admission</b> (with exceptions noted):</p> <ol style="list-style-type: none"> <li>1. <b>Literally homeless.</b> This includes persons who are living in <ul style="list-style-type: none"> <li>• places not meant for human habitation, such as cars, parks, sidewalks, and abandoned buildings;</li> <li>• an emergency shelter; or</li> <li>• transitional housing for homeless persons who originally came from the streets or emergency shelter.</li> </ul> </li>   <li>2. <b>(for YYA TH-RRH projects only)</b> Individuals and families who will <i>imminently</i> (within 14 days) lose their primary nighttime residence with no subsequent residence AND no resources or support networks to acquire safe, appropriate housing.</li>   <li>3. <b>Fleeing or attempting to flee DV</b>  Note: If a person is in one of the three categories listed above, but most recently spent less than 30 days in a jail or institution, he/she qualifies as coming from one of these three categories.  Note: For emergency shelter, date of shelter exit must be no more than 7 days prior to HF project entry date.  Note: HUD funded transitional housing for homeless persons is not an eligible living situation for participants who must meet HUD's chronic homeless criteria (i.e., for projects funded by HUD to serve persons who meet the federal definition of chronically homeless).</li>   <li>4. <b>Enhanced/Specialized Emergency Shelter</b>  Enhanced/Specialized shelter service participants include persons with more acute physical and behavioral health conditions, persons recovering from trauma or victimization, and long-term shelter stayers actively pursuing a pathway to exiting shelter and acquiring safe, stable non-shelter housing placements. Enhanced/Specialized ES projects provide enhanced navigation services to participants such as more frequent case management encounters, more intensive support to participants to help them identify, apply, acquire and transition into permanent housing placements. Providers participate in regular care coordination and case conferencing meetings with other system partners.</li>   <li>5. <b>(for PSH project only) Chronically Homeless</b> <ul style="list-style-type: none"> <li>○ A homeless individual with a disability as defined in section 401(9) of the McKinney-Vento Assistance Act (42 U.S.C. 11360(9)), who: <ul style="list-style-type: none"> <li>▪ Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter, and</li> <li>▪ Has been homeless and living as described for at least 12 months* or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described.</li> <li>▪ An individual who has been residing in an institutional care facility for less, including jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria of this definition before entering that facility**; or</li> <li>▪ A family with an adult head of household (or, if there is no adult in the family, a minor head of household) who meets all of the criteria of this definition, including a family whose composition has fluctuated while the head of household has been homeless.</li> </ul> </li> </ul> </li> </ol>	<p>Enhanced/ Specialized ES</p> <p>RRH</p> <p>TH-RRH &amp; PSH (where noted as applicable)</p> <p>PSH</p>
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	<p><b>6. (for PSH projects only) Disabled</b></p> <ul style="list-style-type: none"> <li>○ In general the term “homeless individual with a disability” means an individual who is homeless, as defined in section 11302 of this title, and has a disability that:</li> <li>○ (i)(I)is expected to be long-continuing or of indefinite duration; <ul style="list-style-type: none"> <li>▪ (II)substantially impedes the individual’s ability to live independently;</li> <li>▪ (III)could be improved by the provision of more suitable housing conditions; and</li> <li>▪ (IV)is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury;</li> <li>▪ (ii)is a developmental disability, as defined in section 15002 of this title; or</li> <li>▪ (iii)is the disease of acquired immunodeficiency syndrome or any condition arising from the etiologic agency for acquired immunodeficiency syndrome.</li> </ul> </li> </ul> <p><b>7. (for YYA TH-RRH projects only) Age 18 up to 24 (or otherwise emancipated youth)</b></p> <p>b. The project <b>does not exclude persons with a criminal record</b> unless prohibited by a funding source or if certain exclusions have been negotiated with project neighbors.</p> <p>c. <b>Income is not required</b> to apply for the project, but applicants with no income are expected to work with a case manager to develop a plan for income. <b>(for PSH projects, Family RRH, DV RRH, and Youth RRH only)</b></p> <p>d. Eligibility is <b>verified and documentation</b> is obtained prior to admission.</p>	
<p>Adopted by CoC Advisory Board 9/21/23</p>	<p><b>44. Prioritization</b></p> <ul style="list-style-type: none"> <li>a. The project targets eligible people with the greatest need for PSH according to length of time spent homeless and disability.</li> <li>b. The project plan for targeting is developed in consultation with the PPC and the Office of Homeless Services.</li> </ul>	<p>PSH</p>
<p>Adopted by CoC Advisory Board 9/21/23</p>	<p><b>45. Resident Selection Plan</b></p> <ul style="list-style-type: none"> <li>a. There is a resident selection plan that includes policies and procedures on applicant eligibility, the application process, applicant interviews, applicant notification of acceptance, and applicant appeals.</li> </ul>	<p>PSH</p>
<p>Adopted by CoC Advisory Board 9/21/23</p>	<p><b>46. Affirmative Marketing and Fair Housing</b></p> <ul style="list-style-type: none"> <li>a. Resident selection policies and procedures include clearly delineated criteria that are not intended to unfairly discriminate against participants.</li> <li>b. The project adheres to all applicable fair housing laws and regulations.</li> <li>c. Unit openings are advertised in a manner intended to reach persons who meet project eligibility criteria and have the greatest need for HF supportive housing, as determined by the project sponsor and the Housing First Funding Collaborative. This includes active outreach to and coordination with emergency shelter and homeless outreach providers most likely to have contact with the target population.</li> </ul>	<p>PSH</p>

<p>Adopted by CoC Advisory Board 9/21/23</p>	<p><b>47. Waiting Lists (i.e. By Name List) of Eligible Prospective Participants</b></p> <ul style="list-style-type: none"> <li>a. The Cuyahoga CoC system maintains a waiting list only to the extent the list includes persons who are currently homeless and meet other project eligibility criteria.</li> <li>b. There is a process for regularly updating the waiting list and notifying applicants of their pending status.</li> <li>c. The waiting list does not include more applicants than the number of units/resource slots expected to become available over a six-month period.</li> </ul>	<p>RRH PSH</p>
	<p><b>48. Resident Application</b></p> <ul style="list-style-type: none"> <li>a. Prospective applicants are provided both verbal and written instructions regarding project eligibility and application procedures.</li> <li>b. Prospective applicants are provided assistance with completing applications and obtaining required documentation by project staff or referral sources trained by project staff.</li> <li>c. Referral sources are provided regular training and information regarding the project, including information about project eligibility requirements, application process, required documentation, and other relevant information.</li> <li>d. Applicants who submit incomplete applications are provided a written description of information needed to complete the application, timeframe for completion, and are provided assistance by project staff and/or referral sources as needed.</li> <li>e. The project accepts applications by US post, email or hand delivery.</li> </ul>	<p>RRH PSH</p>
<p>Adopted by CoC Advisory Board 9/21/23</p> <p>Updated 5/21/26</p>	<p><b>49. Participant Orientation</b></p> <ul style="list-style-type: none"> <li>a. New project participants are provided an orientation to the project, including an overview of available services, within 14 days of project enrollment.</li> <li>b. New RRH and PSH project participants are briefed on terms of resident lease terms and rules by a shelter, RRH, or PSH case manager within 14 days of lease signing.</li> <li>c. For new PSH residents, orientation to PSH projects, service supports, lease expectations, and rental subsidy requirements begins prior to move-in and within the first month following move-in.</li> </ul>	<p>All program components</p>
<p>Adopted by CoC Advisory Board 9/21/23</p> <p>Revised 5/21/26</p>	<p><b>50. Resident Housing Costs</b></p> <ul style="list-style-type: none"> <li>a. CMHA-subsidized units only: PSH residents pay no more than 30% of resident income for rent and utilities or a minimum rent of \$50 per month, whichever is more.</li> <li>b. The project has a hardship exemption policy for residents unable to pay the resident portion of rent. The policy is applied consistently and fairly, in conjunction with eviction prevention efforts. The \$50 minimum continues to accrue even if the resident has no income, and this monthly fee is required to be paid back upon obtaining income.</li> <li>c. The project maintains documentation on how resident rent is calculated.</li> <li>d. Resident rent and utility costs are re-assessed and adjusted according to resident income at least annually or when a resident experiences a loss of income.</li> </ul>	<p>PSH</p>

<p>Adopted by CoC Advisory Board 7/18/24</p>	<p><b>51. Appeals Process</b></p> <p>a. Applicants found to be ineligible are informed of their right to appeal, the timeframe for appeal and the process to submit an appeal. With applicant consent, the project also informs the applicant’s referral source of the application denial and appeal procedures. The project accepts appeals made in writing or verbally. The project allows applicants to have a third party assist them with an appeal.</p> <p>b. If an applicant is not accepted into the project the supportive services staff make one or more referrals to an appropriate agency or provide a list of potential alternative housing options.</p>	<p>RRH PSH TH-RRH</p>
<p>Adopted by CoC Advisory Board 7/18/24</p>	<p><b>52. Service Staff Hours of Availability</b></p> <p>a. There is 24 hour per day, 7 days per week on-site staffing availability from social service staff (may include on-call availability).</p>	<p>PSH (project-based sites only)  TH-RRH (project-based sites only)</p>
<p>Adopted by CoC Advisory Board 7/18/24</p> <p>Updated 5/21/26</p>	<p><b>53. Staff Person/Participant Ratio</b></p> <p>a. The maximum PSH on-site direct service staff (e.g., case manager) to resident ratio is generally 1:25. Direct service staff to client ratios may be lower or higher, depending on the resident population. Projects should provide direct service staff ratios that are effectively lower and result in more intensive and/or frequent engagement with residents who are more vulnerable and have greater service support needs, such as residents who are newly leasing up, residents with minor children, residents returning from inpatient treatment, and residents who have difficulty leaving their apartment for support and basic needs. Established projects with lower service-needs residents may have overall ratios higher than 1:25, but must still offer more intensive and/or frequent support as needed to meet service and housing goals.</p> <p>b. Service staff to resident ratio is consistent with the project plan and annual budget approved by project partners, the Co C, and CoC system partners (e.g., Enterprise Community Partners).</p>	<p>RRH PSH  TH-RRH</p>
<p>Adopted by CoC Advisory Board 7/18/24</p> <p>Updated 5/21/26</p>	<p><b>54. Resident Assessment</b></p> <p>a. Staff utilize a standardized, CoC-approved assessment tool to conduct an individualized, housing-focused assessment collaboratively with each resident within 72 hours following move-in, after 6 months following move-in, and at least annually thereafter to ensure an updated service plan.</p> <p>b. Resident assessments examine strengths and deficits relative to the skills needed for independent living and housing stability. This includes daily living skills, self-care, housekeeping, meal preparation and nutrition, accessing and acquiring goods and services in the community, and ability to adhere to lease requirements and resident rules.</p> <p>c. Resident assessments also examine factors related to resident health and well-being, including general physical health, mental health, substance use/abuse, and other relevant issues impacting resident health.</p> <p>d. Assessments are conducted by staff who are appropriately trained and qualified to complete the assessment used by the project.</p> <p>e. Resident re-assessment includes an examination of housing stability, service and care coordination needs and preferences, and ability to live in more independent housing. Residents with unmet needs and/or housing stability concerns are engaged and reassessed when needed to ensure housing stability and resident well-being. In the event that a resident refuses to engage in re-assessment, PSH staff document engagement attempts in the resident's file and consult with the project management team and other service partners to ensure continuity of connection to service supports. Resident re-assessment data and documentation contribute to the annual recertification process.</p> <p>f. Service and property management staff conduct periodic apartment inspections as a means to assess resident well-being, lease compliance, and remediation needs.</p>	<p>TH  TH-RRH  RRH  PSH</p>

<p>Adopted by CoC Advisory Board 7/18/24</p>	<p><b>55. Standard Lease</b></p> <p>a. Residents are provided a standard, written, 12-month lease agreement that complies with landlord-tenant laws.</p>	<p>RRH PSH TH-RRH (when/where applicable)</p>
<p>Adopted by CoC Advisory Board 7/18/24</p>	<p><b>56. Unit Access</b></p> <p>After a participant’s housing unit has passed all applicable inspections and the lease term starts, project participants must have access to their unit within two (2) business days.</p>	<p>RRH PSH TH-RRH (when/where applicable)</p>
	<p><b>56a. Participant Termination from ES and TH</b></p> <p>After a participant is enrolled in a residential-based project with a signed lease and a habitable unit, the participant must exit ES or TH within (2) business days. The HMIS “housing move-in date” must align with the date the participant actually takes occupancy of the unit. [move to the HMIS/Data section?]</p>	<p>RRH TH-RRH PSH</p>
<p>Adopted by CoC Advisory Board 7/18/24</p>	<p><b>57. Resident Rules</b></p> <p>a. Residents are provided with a written and verbal description of rules that residents are expected to follow.</p> <p>b. Resident rules do not impose additional requirements than those identified in the standard lease but may provide additional explanation of unacceptable behavior and rules for common areas that may affect lease compliance.</p>	<p>PSH  TH-RRH</p>
<p>Adopted by CoC Advisory Board 7/18/24</p> <p>Updated 5/21/26</p>	<p><b>58. Project Participant Service Plan (aka housing stability plan)</b></p> <p>a. Service staff works with each project participant to develop an individualized services plan based on the resident assessment and resident-identified needs, preferences, and goals.</p> <p>b. Individual service plans include goals related to the following:</p> <ul style="list-style-type: none"> <li>○ Housing stability, including lease compliance and opportunities to move to more independent living for PSH participants</li> <li>○ Physical and mental health well-being</li> <li>○ Economic well-being, including employment and mainstream benefits</li> </ul> <p>c. Project participant service plans are updated annually if the period of project enrollment exceeds one (1) year.</p> <p>d. Project participant service plans are periodically reviewed by supervisory staff (at a minimum, monthly for RRH participants and annually for PSH residents) to ensure appropriateness relative to individual resident needs, available services, and project goals.</p>	<p>TH TH-RRH RRH PSH</p>
<p>Adopted by CoC Advisory Board 7/18/24</p> <p>Updated 5/21/26</p>	<p><b>59. Resident Move-Up &amp; Housing Transitions</b></p> <p>a. Residents are systematically assessed, either as part of the standard resident re-assessment process or by other means, for their potential to move to more independent housing or maintain existing housing.</p> <p>b. PSH residents who are stably housed and demonstrate an ability to live in more independent housing are encouraged and provided with support to pursue other, more independent living options, as available.</p> <p>c. PSH residents who are not stably housed and/or have need for higher level of ongoing care and housing support are provided individualized assistance to identify and access other residential options that are relevant and responsive to resident needs and preferences.</p> <p>c. RRH residents who have exhausted their subsidy period but require additional support and subsidy will be considered for other permanent housing resources such as public housing, vouchers, or PSH, if eligible.</p>	<p>RRH PSH  TH-RRH</p>

<p>Adopted by CoC Advisory Board 7/18/24</p> <p>Updated 5/21/26</p>	<p><b>60. Coordination of Care</b></p> <p>a. Service staff works with project participants to identify other appropriate community services that can assist in achieving resident goals.</p> <p>b. Service staff provide information and referrals for community services and assist project participants in accessing services.</p> <p>c. When appropriate and with project participant consent, service staff seeks to coordinate services with other community service providers to ensure coordinated, efficient resident care and support, with a focus on unmet service needs.</p> <p>d. The program has clearly defined relationships (e.g., via a written Memorandum of Understanding (MOU)) with healthcare, employment, income, and other mainstream and community programs and resources that it can connect program participants to when appropriate and desired.</p>	<p>TH RRH PSH</p> <p>TH-RRH</p>
<p>Adopted by CoC Advisory Board 7/18/24</p> <p>Updated 5/21/26</p>	<p><b>61. Coordination with Property Management</b></p> <p>a. The roles and responsibilities of service and property management staff are clearly communicated to residents.</p> <p>b. Service and property management staff communicate regularly regarding resident issues related to lease compliance and supportive service needs. This may include regularly scheduled meetings or ad hoc meetings, as needed.</p> <p>c. Service staff is informed of concerns about resident lease compliance and are involved in decisions concerning responses to resident lease compliance and remediation.</p> <p>d. Property management involves service staff in decisions concerning responses to resident lease compliance and remediation.</p>	<p>PSH (project-based)</p> <p>TH-RRH (project-based)</p>
<p>Adopted by CoC Advisory Board 7/18/24</p> <p>Updated 5/21/26</p>	<p><b>62. Non-Emergency Transportation</b></p> <p>a. Project participants are made aware of transportation options, including nearby public transportation and assistance with obtaining bus fare, if available.</p> <p>b. PSH residents with transportation needs related to their service plan or daily living needs receive individualized support from the project to assure immediate and direct access to services when needed.</p>	<p>RRH PSH</p> <p>TH-RRH</p>
<p>Adopted by CoC Advisory Board 7/18/24</p>	<p><b>63. Social, Leisure and Spiritual Opportunities</b></p> <p>a. Project participants are provided with options for a variety of on-site and off-site social and leisure opportunities that promote well-being and enjoyment.</p> <p>b. All activities are voluntary for project participants.</p>	<p>TH TH-RRH (project-based) PSH</p>
<p>Adopted by CoC Advisory Board 7/18/24</p>	<p><b>64. Medical Reminders and/or Medication Assistance</b></p> <p>a. When requested and as appropriate, staff provides medical reminders and/or facilitates access to medical or professionally licensed staff to support medication assistance to participants.</p> <p>b. The project does not keep or administer resident medication, unless such services are an express option provided by the project and are administered by an appropriately licensed professional.</p>	<p>TH TH-RRH PSH</p>

<p>Adopted by CoC Advisory Board 7/18/24</p>	<p><b>65. Eviction Prevention</b></p> <p>a. Supportive service staff works pro-actively with project participants to address issues that may affect resident compliance with lease requirements.</p> <p>b. Project participants at-risk of lease non-compliance, up to and including eviction, are assisted by service staff to establish and achieve an eviction prevention plan. Eviction prevention plans are developed in consultation with property management staff/property owner.</p> <p>c. Project participants at-risk of eviction are assisted with accessing community services appropriate to their needs, including free or low-cost legal representation, mediation services, and emergency financial assistance.</p> <p>d. Project participants who are evicted receive appropriate referrals for ongoing service needs and housing options.</p>	<p>RRH PSH  TH-RRH</p>
<p>Adopted by CoC Advisory Board 9/21/23</p> <p>Updated 5/21/26</p>	<p><b>66. Property Management Coordination with Supportive Services</b></p> <p>a. The roles and responsibilities of service and property management staff are clearly communicated to residents.</p> <p>b. Service and property management staff communicate regularly regarding resident issues related to lease compliance and supportive service needs.</p> <p>c. Property management staff work collaboratively with service staff when making decisions concerning resident lease compliance, response and remediation, including establishing housing success plans.</p> <p>d. Supportive Services and Property Management are expected to keep open and ongoing communication regarding participant concerns in a way consistent with HIPPA. Any concerns shared with social service staff related to the scope of property management (ex. maintenance concerns, infestations, property management personnel concerns, etc..) will be relayed in a timely fashion.</p>	<p>PSH (project based)</p> <p>TH-RRH (project-based)</p>
<p>Adopted by CoC Advisory Board 7/18/24</p> <p>Revised 5/21/26</p>	<p><b>67. Lease Compliance and Termination</b></p> <p>a. There is a publicly posted policy related to appealing lease violations and eviction notices.</p> <p>b. Residents are afforded all legal due process rights if found to be in non-compliance with their lease.</p> <p>c. Property management seeks to proactively prevent eviction by working with service staff, establishing housing success plans.</p> <p>d. Property management seek to proactively prevent eviction by working with service staff, establishing housing success plans.</p>	<p>TH (project-based) PSH (project-based)</p> <p>TH-RRH (project-based)</p>
<p>Adopted by CoC Advisory Board 7/18/24</p>	<p><b>68. Relationships with Peer Agencies, Service Providers, Funders and the General Public</b></p> <p>a. There is an intent and ongoing effort to have positive, collaborative relationships with peer agencies, service providers, funders, property owners/managers, and the general public.</p>	<p>RRH PSH  TH-RRH?</p>

<p>Adopted by CoC Advisory Board 9/21/23</p>	<p><b>69. Neighborhood Relations</b></p> <p>a. Project staff work with neighborhood stakeholders (i.e., residential, commercial, institutional, and industrial and related associations/groups) in a good faith effort to develop and maintain a partnership that fosters open communication, respect and trust.</p> <p>b. The project provides opportunities for neighbors to be involved in planning, decision-making, monitoring, evaluating, and re-negotiating agreements. Involvement may occur through an advisory committee or other periodic meetings and consultation.</p> <p>c. The project is actively involved in neighborhood affairs and participates in neighborhood and civic organizations to identify and address neighborhood concerns.</p>	<p>PSH (project based)</p> <p>TH-RRH (project based)</p>
<p>RRH Service &amp; Operations Manual version 2.3 October 2022</p> <p>Adopted by CoC Advisory Board 7/18/24</p>	<p><b>70. Financial Assistance</b></p> <p>a. Project shall provide financial assistance for housing costs when need, which may include rental deposits, first month’s rent, last month’s rent, and ongoing rent and/or utility assistance for a period defined by operational guidelines for each project and funder.</p>	<p>RRH TH-RRH</p>
<p>Proposed</p>	<p><b>71. Referrals to Enhanced/Specialized ES</b></p> <p>All enrollments in <i>enhanced/specialized shelter services</i> beds/units are based exclusively on participant eligibility verification and referrals as determined by a designated access provider or Coordinated Entry.</p>	<p>ES – Specialized/ Enhanced</p>

## D. Data Collection and Management

Source	Standard	Applicability
OHS, 2011; adopted by CoC Advisory Board 5/18/23	1. The project shall develop and implement procedures to ensure the <b>confidentiality of records</b> pertaining to any individuals provided family violence prevention or treatment services.	All program components
OHS, 2011; adopted by CoC Advisory Board 5/18/23	2. Projects that provide CoC services (outreach, assessment, Coordinated Intake, emergency shelter, transitional housing, RRH, and PSH) <b>and</b> receive funding under any CoC program (CoC Program, ESG, HOME, CDBG) are required to participate in their Continuum of Care's Homeless Management Information System ( <b>HMIS</b> ).	All program components
OHS, 2011; adopted by CoC Advisory Board 5/18/23	3. CoC-funded projects and projects that receive other public funding coordinated through the CoC <b>shall collect Universal Data Elements (UDEs)</b> and other <b>Program Specific Data Elements (PSDEs)</b> , as applicable, on all project participants and enter data into the HMIS. Non-publicly-funded project providers shall collect in HMIS project participant identifiers and entry and exit dates at a minimum. All project providers shall contribute data to the HMIS for the purposes of the annual Point-in-Time (PIT) count and Housing Inventory Count (HIC).	All program components
OHS, 2011; adopted by CoC Advisory Board 5/18/23	4. The facility shall have <b>secure storage space</b> for confidential documents relating to project participants and personnel.	All program components
OHS, 2011; adopted by CoC Advisory Board 5/18/23	5. <b>Documentation and record keeping policy.</b> All projects shall apply HMIS-defined data security and project participant privacy protections to all data collected from project participants, inclusive of intake, screening, assessment, daily census tracking, service engagement transactions, care coordination, and referrals.	All program components
OHS, 2011; adopted by CoC Advisory Board 5/18/23	6. The project shall have or plan for <b>secure storage space</b> for confidential documents relating to project participants and personnel.	All program components

E. Facility Standards (applicable to site-based projects)		
Source	Standard	Applicability
Adopted by CoC Advisory Board 5/18/23 Revised 5/21/26	1. The facility provides the <b>proper number of beds/units</b> in accordance with grant agreements and updates this inventory annually as part of the CoC's HIC documentation process.	ES TH PSH
Adopted by CoC Advisory Board 5/18/23 Revised 5/21/26	2. The facility building is <b>structurally sound</b> to protect the project participants from the elements and not pose any threat to the health and safety of the project participants.	ES TH
Adopted by CoC Advisory Board 5/18/23 Revised 5/21/26	3. Any renovation (including major rehabilitation and conversion) carried out with ESG assistance uses Energy Star and WaterSense products and appliances.	ES TH
Adopted by CoC Advisory Board 5/18/23 Revised 5/21/26	4. <b>Physically accessible access.</b> Where applicable, the facility is physically accessible in accordance with: <ul style="list-style-type: none"> <li>• Section 504 of the Rehabilitation Act (29 U.S.C. 794) and implementing regulations at 24 CFR part 8;</li> <li>• The Fair Housing Act (42 U.S.C. 3601 et seq.) and implementing regulations at 24 CFR part 100; and</li> <li>• Title II of the Americans with Disabilities Act (42 U.S.C. 12131 et seq.) and 28 CFR part 35.</li> </ul>	ES TH
Adopted by CoC Advisory Board 9/21/23 Revised 5/21/26	5. <b>Accessibility, Visibility, and Universal Design</b> <ol style="list-style-type: none"> <li>a. The project complies with applicable provisions of the Americans with Disabilities Act.</li> <li>b. There is a written plan for reasonable accommodation of persons with disabilities.</li> <li>c. All written materials, including marketing materials, leases, building rules, tenant rights statements, and other materials intended to be read by applicants and tenants are provided in languages understood by applicants and tenants with limited English proficiency. All such materials are also explained verbally to persons with limited reading ability.</li> </ol>	TH PSH
Adopted by CoC Advisory Board 9/21/23 Revised 5/21/26	6. <b>Maintenance of Real Property</b> <ol style="list-style-type: none"> <li>a. All indoor and outdoor common areas are clean and well maintained, in compliance with applicable local building codes and requirements.</li> <li>b. Residential units are maintained in compliance with applicable local building codes and requirements and in accordance with HUD Housing Quality Standards (HQS) or NSPIRE.</li> <li>c. Residential units are visually inspected for safety and health concerns at least once every three months.</li> <li>d. Residential units are inspected for compliance with HQS or NSPIRE at least once annually.</li> <li>e. Preventative maintenance is conducted according to an established schedule with the goal of maintaining and extending the useful life of all building components</li> <li>f. Emergency repairs are conducted as soon as possible and practicable to minimize inconvenience and disruption to residents.</li> <li>g. Residents are provided verbal and written instruction regarding the process for requesting routine and emergency maintenance.</li> </ol>	TH PSH
Adopted by CoC Advisory Board 5/18/23 Revised 5/21/26	7. <b>Space and security:</b> Except where the facility is intended for day use only, the shelter provides each project participant in the shelter with an acceptable place to sleep and adequate space and security for themselves and their belongings.	ES TH
Adopted by CoC Advisory Board 5/18/23 Revised 5/21/26	8. <b>Interior air quality:</b> Each room or space within the facility has a natural or mechanical means of ventilation. The interior air is free of pollutants at a level that might threaten or harm the health of a project participant.	ES TH
Adopted by CoC Advisory Board 5/18/23	9. <b>Water Supply:</b> The facility's water supply is free of contamination.	

Adopted by CoC Advisory Board 5/18/23 Revised 5/21/26	10. <b>Sanitary Facilities:</b> Each project participant in the project has access to sanitary facilities that are in proper operating condition, are private, and are adequate for personal cleanliness and the disposal of human waste. <ul style="list-style-type: none"> <li>Participants must be provided with hygiene items needed for personal care.</li> </ul>	ES TH
Adopted by CoC Advisory Board 5/18/23 Revised 5/21/26	11. <b>Thermal environment:</b> The project has any necessary heating/cooling facilities in proper operating condition.	ES TH
Adopted by CoC Advisory Board 5/23/26	12. <b>Illumination and electricity:</b> <ul style="list-style-type: none"> <li>The facility has adequate natural or artificial illumination to permit normal indoor activities and support health and safety.</li> <li>There are sufficient electrical sources to permit the safe use of electrical appliances in the facility.</li> </ul>	ES TH
Adopted by CoC Advisory Board 5/18/23 Revised 5/21/26	13. <b>Sanitary conditions:</b> The facility is maintained in a sanitary condition.	ES TH
Adopted by CoC Advisory Board 5/18/23 Revised 5/21/26	14. <b>Fire safety:</b> The facility shall have a fire safety plan that includes an evacuation plan, fire safety drills, and posted signs indicating exits. The fire safety plan shall ensure the following” <ol style="list-style-type: none"> <li>There is at least one working smoke detector in each occupied unit of the project. Where possible, smoke detectors are located near sleeping areas.</li> <li>All public areas of the project have at least one working smoke detector.</li> <li>The fire alarm system is designed for hearing-impaired project participants.</li> <li>There is a second means of exiting the building in the event of fire or other emergency.</li> <li>Fire drills are conducted at least twice per year.</li> <li>Fire drills are recorded in a fire drill log documenting the date and time of each drill.</li> <li>There is an annual fire prevention inspection.</li> <li>Fire detection and suppression systems are operable and meet all applicable local building and safety codes.</li> <li>All staff are trained on the fire alarm system.</li> <li>All staff and residents are trained on the use of fire extinguishers and evacuation procedures.</li> <li>The project has a written protocol that addresses the special needs of residents who may need more assistance exiting. There is assigned staff and/or residents to assist them.</li> </ol>	ES TH PSH
Adopted by CoC Advisory Board 5/18/23 Revised 5/21/26	15. <b>Local building standards.</b> The project’s facility shall comply with applicable local fire, environmental, health and safety standards and regulations as evidenced by a valid fire safety inspection. If ESG funds were used for renovation or conversion, the facility meets state or local government safety and sanitation standards, as applicable.	ES TH PSH
<b>OHS</b> 2011; adopted by CoC Advisory Board 5/18/23 Revised 5/21/26	16. The facility shall be <b>clean and in good repair</b> .	ES TH PSH
<b>OHS</b> 2011; adopted by CoC Advisory Board 5/18/23 Revised 5/21/26	17. The facility shall have reasonable <b>access to transportation</b> services.	ES TH PSH
<b>OHS</b> 2011; adopted by CoC Advisory Board 5/18/23 Revised 5/21/26	18. The facility shall provide a <b>bed or crib for each guest</b> except in extenuating "overflow" conditions or unless the project has an ODOT exemption based on size and/or type of project. The project shall make provision for clean linens for each project participant. There shall be procedures to provide for the sanitizing of all linens and sleeping surfaces.	ES TH

<p><b>OHS</b> 2011; adopted by CoC Advisory Board 5/18/23 Revised 5/21/26</p>	<p>19. The facility shall provide <b>sufficient showers/baths, wash basins and toilets</b> that are in proper operating condition for personal hygiene. These should be adequate for the number of people served. Clean towels, soap, and toilet tissue shall be available to each project participant.</p>	<p>ES TH</p>
<p><b>OHS</b> 2011; adopted by CoC Advisory Board 5/18/23 Revised 5/21/26</p>	<p>20. The facility shall have <b>private space to meet with project participants</b>. a. There is adequate office and meeting space to support on-site staffing and services, per the Project Plan. b. Office and other meeting spaces used by staff for the delivery of supportive services and/or for staff to meet with residents are clean, comfortable, and well-maintained.</p>	<p>ES TH PSH</p>
<p><b>OHS</b> 2011; adopted by CoC Advisory Board 5/18/23 Revised 5/21/26</p>	<p>21. The facility shall have <b>laundry facilities</b> available to project participants or a system available for the services. a. PSH site-based projects provide a laundry facility with working washers and dryers for residents twenty-four hours a day, seven days a week in a manner consistent with the tenant lease and building rules. Tenant lease and/or building rules may restrict access during certain hours to mitigate reasonable concerns related to safety and property theft.</p>	<p>ES TH PSH</p>
<p><b>OHS</b> 2011; adopted by CoC Advisory Board 5/18/23 Revised 5/21/26</p>	<p>22. The facility shall have adequate provision of the following services:</p> <ul style="list-style-type: none"> <li>• Pest control services</li> <li>• Removal of garbage</li> <li>• Proper ventilation and heating/cooling systems</li> <li>• Means to ensure that entrances, exits, steps and walkways are kept clear of garbage and other debris, ice, snow and other hazards.</li> </ul>	<p>ES TH PSH</p>
<p><b>OHS</b> 2011; adopted by CoC Advisory Board 5/18/23 Revised 5/21/26</p>	<p>23. The facility shall provide adequate natural or artificial <b>illumination</b> to permit normal indoor activities and to support the health and safety of occupants. Sufficient electrical sources shall be provided to permit the use of essential electrical appliances while assuring safety from fire.</p>	<p>ES TH</p>
<p><b>OHS</b> 2011; adopted by CoC Advisory Board 5/18/23 Revised 5/21/26</p>	<p><b>24. Food Service.</b> The facility shall establish policy and make provisions for appropriate handling, food service and storage to meet the nutritional needs of project participants.</p> <ul style="list-style-type: none"> <li>• Projects providing food service shall make adequate provisions for the sanitary storage and preparation of foods.</li> <li>• Projects providing food for infants, young children and pregnant mothers shall make provisions to meet their nutritional needs.</li> <li>• Projects shall provide or arrange for food services to project participants or make known the available services nearby.</li> </ul>	<p>ES TH</p>

<p>OHS 2011; adopted by CoC Advisory Board 5/18/23  Revised 5/21/26</p>	<p><b>25. Health.</b> The facility shall establish a policy and make provisions to address the emergency health needs of project participants.</p> <ul style="list-style-type: none"> <li>• The facility shall always have available a first aid kit and supplies in case of a medical emergency. A First Aid kit is complete and accessible to staff and residents and is stocked with sufficient supplies to handle multiple occurrences.</li> <li>• All staff on duty shall have access to a telephone. Emergency telephone numbers shall be posted conspicuously near the telephone.</li> <li>• The facility shall ensure that at least one staff person on duty is trained in <b><i>standard emergency first aid procedures</i></b>.</li> <li>• The facility shall have a procedure for making referrals to appropriate medical providers.</li> <li>• The facility shall have a written policy regarding the possession and use of controlled substances as well as prescription and over-the-counter medications. The facility shall have a process for the secure storage of prescription medications, where applicable, and for the management of prescribed drugs that require refrigeration.</li> <li>• The facility shall have a written policy regarding the control of infectious diseases, such as HIV, tuberculosis, COVID-19, and Influenza.</li> <li>• The facility shall have Narcan available for use by trained staff for life-saving purposes.</li> <li>• Projects have a written policy and procedure for critical incidents, including expectations related to the timeliness of staff response to critical incidents, incident reporting, and incident review by agency and CoC management for quality assurance purposes. Projects report major and unusual critical incidents (as defined by OHS) to the Office of Homeless Services within 24 hours in a format prescribed by OHS.</li> </ul>	<p>ES TH  PSH (site based)</p>
<p>OHS 2011; adopted by CoC Advisory Board 5/18/23 Revised 5/21/26</p>	<p><b>26. Mail.</b> The facility shall have written policies on collecting, distributing, and storing mail for project participants and former project participants, including notification when packages are left at the front desk or other secure areas.</p> <ol style="list-style-type: none"> <li>a. For PSH site-based projects there are individual mailboxes for residents.</li> <li>b. For PSH site-based projects mailboxes are accessible in common areas and have individual locks.</li> </ol>	<p>ES TH PSH</p>
<p>OHS; adopted by CoC Advisory Board 5/18/23 Revised 5/21/26</p>	<p><b>27.</b> All staff and volunteers at a project should wear <b>identification badges</b> that include the individual's name.</p> <ol style="list-style-type: none"> <li>a. All visitors provide valid identification when entering the building, sign in to a visitors log and leave the identification or a copy of identification at the front desk during their stay.</li> </ol>	<p>ES TH PSH</p>
<p>Adopted by CoC Advisory Board 9/21/23</p>	<p><b>28. Geographic Dispersion &amp; Integration</b></p> <ol style="list-style-type: none"> <li>a. The site is located in a neighborhood distinct from other PSH developments or reasonable efforts have been made to identify and secure a site geographically distinct from other PSH sites.</li> <li>b. The building design complements and/or is consistent with the surrounding community.</li> </ol>	<p>PSH</p>
<p>Adopted by CoC Advisory Board 9/21/23</p>	<p><b>29. Building Design</b></p> <ol style="list-style-type: none"> <li>a. The project meets the standards set forth in the Enterprise Green Communities criteria.</li> <li>b. The building is designed in compliance with the Americans with Disabilities Act and with Section 504 of the Rehabilitation Act (if federally funded), and incorporate Universal Design Standards and Visitability Standards, whenever possible.</li> </ol>	<p>PSH</p>

<p>Adopted by CoC Advisory Board 9/21/23</p> <p>Revised 5/21/26</p>	<p><b>30. Access to Amenities for Site-based Projects</b></p> <p>a. The site is within one-quarter mile walking distance of public transit.</p> <p>b. The site is accessible to social services, medical facilities, shopping, and places of employment.</p> <p>c. Staff provides verbal and written information to tenants regarding amenities that are provided in the building and in the surrounding area, including a map when requested.</p> <p>d. The site is located in an area where fresh, good quality food is easily accessible via walking or a reasonable ride on public transit.</p>	<p>TH</p> <p>PSH</p>
<p>Adopted by CoC Advisory Board 9/21/23</p>	<p><b>31. Apartment Units</b></p> <p>a. Each apartment is at least 350 square feet.</p> <p>b. Apartment units comply with Housing Quality Standards (HQS) or NSPIRE established by the U.S. Department of Housing &amp; Urban Development (HUD).</p> <p>c. Each unit is furnished upon tenant move-in with at least a bed/crib and appropriate linens/bedding for each tenant; dresser, table and chairs; and basic kitchen/bathroom supplies.</p>	<p>PSH</p>
<p>Adopted by CoC Advisory Board 9/21/23</p> <p>5/21/26</p>	<p><b>32. Community Space</b></p> <p>a. Community space, including lobbies, sitting areas, meeting rooms, mail rooms, laundry rooms, and trash collection areas, is easily accessible to all tenants.</p> <p>b. All common rooms and indoor and outdoor public spaces, including any shared furnishings, recreational and entertainment equipment and devices, kitchen supplies, and community laundry machines are clean and in good repair.</p> <p>c. Smoking is not permitted in common areas indoors and only in outdoor spaces not adjacent to building entry or egress points. Areas where smoking is and is not permitted are clearly defined and marked.</p> <p>d. Building rules clearly describe acceptable use and behavior in common and public areas.</p> <p>e. Residents are free to use common and public space twenty-four hours a day, seven days a week, in a manner consistent with the tenant lease and building rules. Tenant leases and/or building rules may restrict access during certain hours to address reasonable concerns about safety and property theft.</p>	<p>TH (site-based)</p> <p>PSH (site-based)</p>
<p>Adopted by CoC Advisory Board 9/21/23</p>	<p><b>33. Exterior Grounds</b></p> <p>a. The exterior of the building and surrounding area are clean and well maintained.</p>	<p>PSH</p>
<p>Adopted by CoC Advisory Board 9/21/23</p> <p>Updated 5/21/26</p>	<p><b>34. Parking for Site-based Projects</b></p> <p>a. There is on-site, free parking for residents with automobiles or motorcycles.</p> <p>b. There are accessible, on-site locations where residents may secure bicycles.</p> <p>c. Project staff have access to safe, on-site or nearby parking. Parking accommodations are made for visiting partners, such as healthcare providers.</p>	<p>TH</p> <p>PSH</p>
<p>Adopted by CoC Advisory Board 9/21/23</p>	<p><b>35. Heating and Ventilation Systems</b></p> <p>a. The facility has heating units for winter and the ability to create airflow in hot weather.</p> <p>b. Furnaces are kept clean and in good operating condition. Filters are changed routinely as evidenced by a building maintenance log. Fans and air conditioning, if available, are in good operating condition.</p>	<p>PSH</p>

<p>Adopted by CoC Advisory Board 9/21/23 Updated 5/21/26</p>	<p><b>36. Emergency Preparedness for Site-based Projects</b></p> <p>a. There are policies and procedures that address emergency procedures related to fires, disasters, behavioral emergencies, and medical emergencies.</p> <p>b. The site has sufficient supplies for emergencies, including access to an AED and emergency medical supplies (e.g., bandages, Naloxone).</p> <p>c. Property management and supportive service staff are trained in how to respond to emergencies and use supplies according to agency policies and procedures.</p>	<p>TH PSH</p>
<p>Adopted by CoC Advisory Board 9/21/23</p>	<p><b>37. Entry and Egress</b></p> <p>a. Entry and exit points to the building are free of debris and not blocked.</p> <p>b. Hallways, stairways, and exits are well lit, and there are back-up batteries for exit lights.</p> <p>c. There are clearly marked exit signs with symbols capable of being understood regardless of the language of residents.</p> <p>d. Exterior doors remain locked and residents must use a key to enter the building or there are other means of controlling building access (e.g., through staff control).</p>	<p>PSH</p>
<p>Adopted by CoC Advisory Board 9/21/23</p>	<p><b>38. Video Monitoring</b></p> <p>a. There is a policy regarding video monitoring in each building.</p> <p>b. Entrances and exits, as well as stairways, are monitored with video surveillance by project staff.</p>	<p>PSH</p>
<p>Adopted by CoC Advisory Board 9/21/23</p>	<p><b>39. Infectious Disease Control and Universal Precautions</b></p> <p>a. Project staff follows Universal Precautions and wear Personal Protective Equipment (PPE) when necessary. PPE includes gloves, shoe covers, goggles, masks, and resuscitation bags.</p>	<p>PSH</p>
<p>Adopted by CoC Advisory Board 9/21/23 5/21/26</p>	<p><b>40. Incident Management</b></p> <p>a. There is an incident management policy and procedure for incident reporting and periodic (e.g., quarterly) management and system review of critical incidents involving staff or resident death or injury or resident housing loss.</p> <p>b. The project must maintain an incident log and make arrangements for staff review of the log prior to each shift change.</p>	<p>TH (site-based)  PSH (site-based)</p>
<p>Adopted by CoC Advisory Board 9/21/23</p>	<p><b>41. Hazardous Materials</b></p> <p>a. The project and its staff do not release, spill, store, or generate any hazardous or toxic substances in, on, or under the facility, except for ordinary and necessary quantities of cleaning materials, which are handled and stored in a safe and lawful manner according to OSHA standards.</p> <p>b. Spill kits and Material Safety Data Sheets (MSDS) are available and used as appropriate.</p>	<p>PSH</p>
<p>Adopted by CoC Advisory Board 9/21/23</p>	<p><b>42. Food Storage</b></p> <p>a. If the project provides food storage, adequate provisions have been made for sanitary handling and safe storage of foods.</p>	<p>PSH</p>

F. Project Participants' Rights		
Source	Standard	Applicability
Adopted by CoC Advisory Board 5/18/23	<p>1. The project has a written document outlining <b>project participants' rights</b> posted in a visible and accessible location, read and otherwise made known to project participants upon admission, with accommodation for literacy and language barriers. All project participants receive a copy of the project participants' rights document upon request.</p> <p>a. There is a written document outlining resident rights (including grievance and appeals) which is provided in writing and explained verbally to residents upon admission.</p> <p>b. Staff is provided written and verbal information and explanation of resident rights upon hire.</p> <p>c. A description of residents' rights is posted in a location visible to residents. Reasonable efforts are made to ensure that all residents understand their responsibilities regardless of language or ability.</p>	All program components
Adopted by CoC Advisory Board 5/18/23	<p>2. Each shelter will have a <b>policy to address search and seizure</b> and warrants to protect individual civil rights.</p>	ES TH
Adopted by CoC Advisory Board 5/18/23	<p>3. When a project participant files a <b>grievance</b> related to a suspension or sanction not covered by the immediate discharge policy, the action is suspended until the grievance process is completed, if immediately implementing it would negatively affect the project participant's</p> <p>a. Ability to stay in crisis housing</p> <p>b. Receive meals</p> <p>c. Eligibility to obtain housing</p> <p>d. Ability to get to work or care for his/her children</p> <p>e. Other health or safety issues</p>	ES TH  TH-RRH
Adopted by CoC Advisory Board 5/18/23	<p><b>4. Resident Rights</b> Resident rights include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• Residents have the right to be treated with dignity and respect;</li> <li>• Residents have the right to privacy;</li> <li>• Residents have the right to be treated with cultural sensitivity;</li> <li>• Residents have the right to self-determination in identifying and setting goals;</li> <li>• Services should be provided to residents only in the context of a professional relationship based on valid, informed consent;</li> <li>• Residents should be clearly informed, in understandable language, about available services and the purpose of the services being delivered, including residents who are not literate and/or are limited-English proficient;</li> <li>• Residents have the right to confidentiality and information about when confidential information will be disclosed, to whom and for what purpose, as well as the right to deny disclosure;</li> <li>• Residents have the right to reasonable access to records concerning their involvement in the project;</li> <li>• Residents have the right to have an advocate present during appeals and grievance processes;</li> <li>• Residents have the right to choose their own housing or reject substandard housing.</li> <li>•</li> </ul>	All program components

<p>Adopted by CoC Advisory Board 5/18/23</p> <p>Updated 5/21/26</p>	<p><b>5. Grievances</b></p> <p>a. There is a written complaint and grievance policy and procedure. The grievance policy and procedures are posted in public areas for site-based projects.</p> <p>b. Residents are given a blank copy of the grievance form upon entry into the project.</p> <p>c. Residents have a right to make grievances known concerning the services provided, residential or service environments, or related issues and may exercise the right to file a grievance at any time.</p>	<p>All program components</p>
<p>Adopted by CoC Advisory Board 5/18/23</p>	<p><b>6. Due Process and Appeals</b></p> <p>a. There is a written appeals policy and procedure that addresses due process rights and procedures related to resident appeals of project staff decisions, including lease non-compliance, eviction actions, and service restrictions.</p>	<p>All program components</p>
<p>Adopted by CoC Advisory Board 5/18/23</p> <p>Updated 5/21/26</p>	<p><b>7. Abuse Against Staff, Residents, and Visitors</b></p> <p>a. There is no tolerance for physical or verbal abuse of any kind.</p> <p>b. There is a written resident/staff abuse and neglect policy and procedure that addresses rights and procedures related to abuse against staff, residents and visitors, negligence related to staff responses to critical resident service needs, and continuity of supportive services for residents who are abusive to staff.</p>	<p>All program components</p>