

Before Starting the CoC Application

You must submit all three of the following parts in order for us to consider your Consolidated Application complete:

1. the CoC Application,
2. the CoC Priority Listing, and
3. all the CoC's project applications that were either approved and ranked, or rejected.

As the Collaborative Applicant, you are responsible for reviewing the following:

1. The FY 2026 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2026 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It

- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2026 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

1A. Continuum of Care (CoC) Identification

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

1A-1. CoC Name and Number: CA-601 - San Diego City and County CoC

1A-2. Collaborative Applicant Name: Regional Task Force on the Homeless

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Regional Task Force on the Homeless

1B. Coordination and Engagement–Accountable Structure and Participation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

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- Frequently Asked Questions

1B-1.	Accountable Structure and Participation.	
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In the chart below for the period from June 1, 2025 to May 31, 2026:

1.	select 'Yes' or 'No' in the chart below if the entity listed participated in CoC meetings or select 'Nonexistent' if the entity does not exist in your CoC's geographic area, and
2.	enter the number of persons on the board for each category where you answered 'Yes' in the Participated in CoC Meetings column.

You must click Save at the bottom of the form before entering the number of persons for each category where you answered 'Yes'.

	Entity	Participated in CoC Meetings	Number of Board Members
1.	Affordable Housing Developer(s)	Yes	6
2.	CDBG/HOME/ESG Entitlement Jurisdiction(s)	Yes	5
3.	Certified Community Behavioral Health Clinic (CCBHC)	Yes	0
4.	Community Mental Health Center (CMHC)	Yes	0
5.	Disability Advocate(s)	Yes	0
6.	Disability Service Organization(s)	Yes	0
7.	Emergency Medical Services (EMS)/Crisis Response Team(s)	Yes	2
8.	Employment Assistance Program(s) (e.g., Local Workforce Development, American Job Center)	Yes	2
9.	Faith-based Organization(s)	Yes	2
10.	Homeless or Formerly Homeless Person(s)	Yes	4
11.	Hospital(s)	Yes	0
12.	Other Primary Healthcare Provider(s) (e.g., Federally Qualified Health Center, Healthcare for the Homeless)	Yes	2
13.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Yes	0
14.	Law Enforcement	Yes	1
15.	Local Court Systems, Including Specialty Courts (e.g., Mental Health Court, Drug Court, Care Court)	Yes	2
16.	Local Government Staff/Official(s)	Yes	7

17.	State Government Staff/Official(s)	Yes	0
18.	State or Local Elected Public Official(s)	Yes	3
19.	Local Jail(s)	Yes	0
20.	Mental Health Service Organization(s)	Yes	4
21.	Mental Illness Advocate(s)	Yes	0
22.	Organization(s) led by and serving people with disabilities	Yes	0
23.	Other homeless subpopulation advocate(s)	Yes	14
24.	Other nonprofit homeless assistance provider(s)	Yes	12
25.	Other social service provider(s)	Yes	3
26.	Public Housing Agencies	Yes	3
27.	Recovery Housing or Sober Living Provider(s)	Yes	1
28.	School Administrators/Homeless Liaison(s)	Yes	0
29.	School District(s)	Yes	0
30.	Street Outreach Team(s)	Yes	5
31.	Substance Abuse Advocate(s)	Yes	2
32.	Substance Abuse Service Organization(s)	Yes	3
33.	Universities	Yes	0
34.	Veteran Serving Organization(s)	Yes	2
35.	Agencies Serving Survivors of Human Trafficking	Yes	2
36.	Victim Service Provider(s)	Yes	3
37.	Domestic Violence Advocate(s)	Yes	3
38.	Other Victim Service Organization(s)	Yes	0
39.	State Domestic Violence Coalition	Yes	0
40.	State Sexual Assault Coalition	Yes	0
41.	Youth Advocate(s)	Yes	5
42.	Youth Homeless Organization(s)	Yes	5
43.	Youth Service Provider(s)	Yes	5
44.	Other Homeless Assistance Provider(s)	Yes	11
45.	Local Business or Chamber of Commerce or a Member of a Business Improvement District	Yes	2
	Other: (limit 50 characters)		
46.	Affordable Housing Development/Financing	Yes	6
47.	Funder/Philanthropy	Yes	1

1B-2.	Open Invitation for New Members.	
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Describe your CoC's transparent process (e.g., communicated to the public on the CoC's website) to invite new members to join the CoC at least annually.

(limit 2,500 characters)

The Regional Task Force on Homelessness (RTFH), the San Diego City and County CoC lead agency, maintains a public CoC Membership webpage and online application portal that allow individuals and organizations across San Diego County to apply at any time. In the first quarter of each year, RTFH issues a public invitation to join, and recruitment continues throughout the year. Invitations and application links are posted on the RTFH website and shared through CoC email communications, General Membership meetings, regional provider and stakeholder meetings, community presentations, and RTFH social and media communications. Participation is open to public agencies, nonprofit and private organizations, people with lived experience, students, and community members committed to preventing and ending homelessness. The website provides membership requirements, application instructions, fee-waiver information, governance materials, meeting information, and the current Full Membership roster. This transparent, countywide process provides clear and recurring opportunities for new members to join annually and year-round.

1B-3.	CoC's Strategy to Solicit and Consider Opinions on Preventing and Ending Homelessness.	
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Describe your CoC's transparent process (e.g., communicated to the public on the CoC's website) to solicit and consider opinions regarding the CoC's general performance, strategies, and priority setting process from a broad array of individuals and organizations that have knowledge of homelessness or an interest in preventing or ending homelessness in the CoC's geographic area.
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(limit 2,500 characters)

RTFH uses an ongoing, public process to gather and consider input on CoC performance, strategies, and priorities. The CoC posts meeting information, public-comment opportunities, draft governance and planning materials, surveys, and contact information on the RTFH website. Notices are shared through the CoC listserv and email distribution, social media, General Membership meetings, regional provider and stakeholder meetings, public forums, and community presentations. Input is sought from people with lived experience, frontline workers, homeless-service and behavioral-health providers, advocates, local governments, public housing authorities, businesses, funders, and community members. During the annual Governance Charter review, RTFH posts the draft and change summary, accepts online and email comments, and holds a public General Membership meeting. The Governance Advisory Committee reviews public input before making recommendations to the CoC Board. Feedback also informs the annual system gaps analysis, Regional Community Action Plan, performance review, and CoC priority-setting discussions. Decisions and updated materials are communicated through public meetings and the RTFH website.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
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Describe your CoC's transparent process to accept and consider proposals from organizations that have not previously received CoC Program funding including faith-based organizations.
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(limit 2,500 characters)

The CoC conducts an open, public local competition and will accept and consider proposals from any eligible organization, including organizations that have not previously received CoC Program funding and faith-based organizations. When CoC funding is available, RTFH publicly posts an Intent to Submit and a Call for Applications/Local Process on its website and distributes notices through the CoC email listserv, General Membership, Board and committee meetings, social media, and stakeholder networks. Notices identify eligible activities, local priorities, application and submission instructions, deadlines, pre-published rating and ranking criteria, and available technical-assistance opportunities. This advance notice allows new organizations to determine eligibility and prepare a complete proposal. A non-conflicted rating and ranking process evaluates proposals using published standards, including eligibility, project design and need, organizational capacity, fiscal and administrative capacity, alignment with CoC priorities, and contribution to the regional homeless-response system. New and faith-based organizations are evaluated under the same objective criteria as all other applicants and must comply with applicable CoC Program and nondiscrimination requirements. The CoC Board considers the recommendations and communicates final funding decisions through its public process.

1B-5	Plan for Comprehensive Strategies for Reducing Homelessness.
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Describe how your CoC will incorporate comprehensive strategies for reducing homelessness, including interventions in 42 U.S.C. 11386b(d) and other targeted projects for specific subpopulations, by providing a plan to address a gap in the CoC's current homelessness system.

(limit 2,500 characters)

FY2025 performance data and stakeholder feedback identify a need to prevent homelessness, reduce time homeless, and improve access to permanent housing. Barriers include limited affordable units, documentation and lease-up delays, behavioral-health needs, uneven services, and fragmented referrals. The CoC will use a coordinated, data-informed strategy that can adapt to changing needs and resources. The strategy incorporates 42 U.S.C. 11386b(d), including permanent supportive housing for people experiencing chronic homelessness and, for families, rapid rehousing, flexible assistance, income services, and connections to TANF and child welfare. Diversion and Resolution Strategies will identify safe alternatives to shelter. Coordinated Entry, by-name lists, housing navigation, landlord engagement, rental assistance, and the Flexible Housing Pool will accelerate housing connections. Healthcare, behavioral-health, employment, benefits, peer, and tenancy supports will promote stability. Implementation will address families, youth, veterans, domestic-violence survivors, older adults, people with disabilities or significant health needs, and people leaving jails, hospitals, foster care, or treatment. Approaches may include childcare and employment services, youth housing, VASH and SSVF, confidential survivor services, recovery supports, medical care, and discharge planning. Within six months, RTFH will confirm baselines, complete a regional funding and service-gap review, and establish reasonable annual improvement goals. During the following six months, the CoC will strengthen diversion, document readiness, referral follow-up, housing matching, and supportive-service connections. RTFH will conduct at least four quarterly reviews and one annual assessment of first-time homelessness, length of time homeless, permanent-housing exits, housing retention, referral timeliness, and returns to homelessness. Results will be examined by household type, race and ethnicity, age, disability, veteran status, and geography. Findings will guide corrective actions and resource adjustments. Activities will be supported, subject to availability, through CoC, ESG, HHAP, Encampment Resolution Funding, rental subsidies and vouchers, County behavioral-health and Medi-Cal resources, CalWORKs/TANF, child-welfare funding, VASH, SSVF, and philanthropic or local funds. RTFH will oversee implementation with its committees, people with lived experience, providers, and public partners.

1B-5a Confirmation of Plan Coverage.

Select 'Yes' or 'No' in the chart below to indicate whether your narrative in question 1B-5 addresses the following aspects of your plan to address a gap in the CoC's current homelessness system.

1. Identifies the gap, using data or stakeholder feedback	Yes
2. The strategy to address the needs of all relevant subpopulations	Yes
3. Sets quantifiable performance measures	Yes
4. Identifies timelines for the completion of specific tasks	Yes
5. Identifies specific funding sources for planned activities	Yes
6. An individual or body responsible for overseeing implementation of specific strategies	Yes

1C. Coordination and Engagement

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1C-1.	Treatment and Recovery Services—On-site Substance Use Treatment Availability.	
	You must upload the List of TH/RRH/PSH Projects and Treatment Providers with On-Site Substance Use Treatment attachment to the 4A. Attachments Screen.	
	What percent of your TH/RRH/PSH projects have substance use treatment available on site?	33%

If you are a rural CoC, describe what substance use treatment is available in your CoC and how people you serve access those services.

(limit 2,500 characters)

N/A

1C-1a. Treatment and Recovery Services—Outpatient Treatment for Mental Health and Substance Use Disorders.

Describe how your CoC partners with, or has projects that provide, outpatient treatment for mental health and substance use disorders with a range of appropriate levels of care, psychosocial interventions, medication management, suicide prevention, and recovery supports.

(limit 2,500 characters)

The San Diego CoC partners with County Behavioral Health Services (BHS), federally qualified health centers, and licensed providers to connect people in CoC-funded housing to outpatient mental health and substance use disorder (SUD) treatment and the level of care appropriate to their needs. County-operated clinics provide screening and assessment, individual and group therapy, medication management, crisis intervention, case management, and recovery services for mental health, SUD, and co-occurring conditions. Project staff incorporate treatment needs into individualized plans and coordinate warm referrals to intensive outpatient treatment, medication-assisted treatment (MAT), Assertive Community Treatment (ACT), crisis stabilization, residential/inpatient care, and aftercare.

PATH Connections partners with Family Health Centers of San Diego (FHCS), which operates an on-site health center. FHCS provides counseling and psychiatric care, individual SUD counseling, outpatient treatment, MAT, patient navigation, peer support, and intensive case management. PATH's on-site licensed clinical social worker also provides one-to-one behavioral health and SUD counseling and support groups. Living Hope and Recovery, operated with TURN BHS and County funding, conducts clinical assessments and delivers on-site individual and group therapy, crisis management, relapse-prevention treatment, recovery services, and AA meetings; certified SUD staff evaluate participants for MAT and refer them to qualified medical providers. Participants step down from intensive outpatient treatment to outpatient care and aftercare as clinically appropriate. MHS S+C I and II leverage County BHS CalAIM funding for ACT and provide mental health and SUD services for persons with serious mental illness and co-occurring disorders.

For suicide prevention and urgent needs, projects connect participants 24/7 to the County's 988/Access and Crisis Line for suicide prevention, crisis intervention, and behavioral-health referrals. The line can dispatch Mobile Crisis Response Teams—clinician, case manager, and peer specialist teams that assess, de-escalate, stabilize, transport, and connect participants to care. Together, these partnerships provide a continuum from outpatient care through crisis response and higher levels of treatment, with recovery supports that promote engagement and housing stability.

1C-1b. Treatment and Recovery Services—Peer Support and Recovery Navigation.

Describe how your CoC partners with, or has projects that provide access to, peer recovery specialists or other forms of peer support and recovery navigation.

(limit 2,500 characters)

The San Diego CoC provides peer recovery support through dedicated staff in CoC-funded projects and partnerships with health and behavioral health providers. Peer services are integrated with treatment, case management, and housing navigation to provide ongoing engagement rather than a stand-alone referral.

The Door of Hope transitional housing project funds a full-time, State-Certified Medi-Cal Peer Support and Recovery Worker with lived experience of mental health or substance use recovery, homelessness, or systems of care. The specialist provides mentoring and facilitates recovery-focused groups with clinicians. Participants also access Seeking Safety and on-site NA, AA, Al-Anon, and Celebrate Recovery groups at least three times weekly. Peer and clinical staff join case managers in reviewing recovery goals, addressing barriers, and adjusting service plans.

East County Transitional Living Center employs two full-time Peer Support Specialists assigned entirely to its transitional housing project. They provide peer mentoring, recovery support, wellness coaching, group facilitation, participant engagement, and support during transitions to permanent housing. Peer specialists work with case managers, housing navigators, employment specialists, family-support staff, and behavioral health providers. Many ECTLC staff are program graduates who bring lived experience and credibility.

At PATH Connections, Family Health Centers of San Diego's written commitment includes peer support, patient navigation, and intensive case management to ensure initial and continued engagement in care. These services connect residents to mental health and SUD counseling, outpatient treatment, and medication-assisted treatment.

The CoC's partnership with County Behavioral Health Services provides countywide access. Through 988 and the Access and Crisis Line, Mobile Crisis Response Teams are available 24/7 and include a peer support specialist, clinician, and case manager. Teams use lived-experience support to build trust, stabilize participants, provide transportation when needed, and connect them to housing, mental health, and SUD services, with follow-up for up to 30 days.

Together, these resources provide peer engagement, recovery navigation, and continuity from crisis through treatment and permanent housing.

1C-1c. Treatment and Recovery Services—Connecting Individuals Experiencing Serious Mental Illness with the Services Necessary to Promote Stability.

Describe how your CoC identifies individuals experiencing Serious Mental Illness and connects them with the services necessary to promote stability, such as Assertive Community Treatment teams and other models that combine intensive care coordination and assertive outreach with comprehensive treatment.

(limit 2,500 characters)

The San Diego CoC identifies people who may be experiencing Serious Mental Illness (SMI) through coordinated entry, street outreach, project intake and reassessment, crisis-system contacts, and coordination with first responders and behavioral health providers. HMIS and the Community Information Exchange help identify people with repeated homelessness or high use of crisis services. Project staff use trauma-informed screening and clinical assessments to evaluate symptoms, functional impairment, co-occurring substance use, treatment history, and housing barriers. Individualized service plans are updated as needs and acuity change.

The High-Needs Households PSH project serves high users of crisis systems with severe mental illness, debilitating SUD, or co-occurring conditions. Its multidisciplinary outreach team includes outreach, peer and housing specialists, mental health clinicians, a nurse practitioner, medical triage staff, and an SUD counselor. The team provides assertive outreach, case management, care coordination, system navigation, treatment connections, and post-placement stabilization.

MHS S+C I and MHS S+C II, operated by TURN Behavioral Health Services, serve people experiencing homelessness with SMI and co-occurring substance use or medical conditions. Both provide assessment, case management, outreach, mental health, and SUD services and leverage County BHS CalAIM funding under Contract 569672 for Assertive Community Treatment in North County. This connects permanent housing with intensive community-based treatment.

When a participant needs ACT-level care, CoC and behavioral health providers use County BHS's Optum Single Point of Access referral process. County ACT programs serve adults with SMI, including people experiencing or at risk of homelessness and those who have difficulty engaging in traditional outpatient care. Multidisciplinary teams include a prescriber, licensed clinicians, peer specialists, and other practitioners. Services include psychiatry, nursing, intensive case management, rehabilitation, SUD-treatment linkage, supported employment, housing support, and transportation. ACT operates seven days a week with 24/7 crisis support. CoC housing and case-management staff remain engaged during referral and treatment, coordinate follow-up, and adjust plans to support recovery and long-term housing stability.

1C-1d. Treatment and Recovery Services—Coordination with Providers in Connection with Drug or Other Specialty Courts.

Identify at least one partnership the CoC has with a provider or entity providing services in connection with Drug Courts and other specialty courts serving individuals with mental and substance use disorders, Assisted Outpatient Treatment (AOT) programs, and inpatient civil commitment.

(limit 500 characters)

The CoC partners with County of San Diego Behavioral Health Services (BHS), the umbrella entity coordinating San Diego Superior Court Collaborative Courts and court-linked care. BHS contracts with Telecare for Behavioral Health Court ACT and Laura's Law Assisted Outpatient Treatment, coordinates Adult Drug and Reentry Courts, operates the County Psychiatric Hospital, and administers LPS civil-commitment referrals through the Public Conservator.

Describe how your CoC coordinates with the provider or entity identified above to support housing stability and movement towards independence, including by leveraging court orders.

(limit 2,500 characters)

The CoC's housing and service providers coordinate with San Diego Superior Court's Behavioral Health Court and CARE Court, County Behavioral Health Services (BHS), Probation, and Telecare Behavioral Health Court ACT to connect court-involved people with serious mental illness or co-occurring SUD to housing and treatment. Behavioral Health Court combines judicial oversight with ACT; CARE Court creates a voluntary civil process in which an eligible person may receive a court-approved plan that includes treatment, medication, housing, and supportive services.

At referral, the Court, Probation, BHS, and treatment providers identify clinical, housing, income, and daily-living needs. With appropriate consent and privacy protections, the team coordinates assessment, housing placement, treatment, benefits, transportation, and crisis planning. Telecare's ACT team provides mental health care, medication support, SUD services, peer support, intensive case management, and 24-hour crisis response. CoC housing providers help obtain benefits, locate appropriate units, prepare participants for tenancy, address landlord concerns, and provide stabilization services after placement. Court orders and review hearings provide an accountability and coordination framework. In Behavioral Health Court, the treatment and supervision plan prioritizes stable housing and medication adherence, and the Court reviews progress with Probation and the treatment team. In CARE Court, a judge may approve and order an individualized CARE plan after BHS investigation and engagement, allowing housing and treatment partners to work from one plan. For Drug or Reentry Court participants, ordered treatment, testing, counseling, and supervision are coordinated with housing and recovery goals. When setbacks occur, the team adjusts treatment intensity, supports, or placement to prevent a return to homelessness, jail, or avoidable hospitalization.

Court orders align partners and promote engagement; CoC projects do not use them as grounds to terminate housing or deny assistance. As participants stabilize, teams step services down and emphasize benefits, employment or education, independent-living skills, community connections, and permanent housing. This approach combines court accountability with BHS and Telecare treatment capacity while preserving person-centered housing supports and a path toward independence.

1C-1e. Treatment and Recovery Services—Partnership with Local Crisis System of Care.

Identify at least one partnership the CoC has with the local crisis system of care including 988 and crisis contact centers, mobile crisis and outreach services, and crisis stabilization services.

(limit 500 characters)

The CoC partners with County of San Diego BHS, which integrates the local 988/Access and Crisis Line, 24/7 Mobile Crisis Response Teams operated by Telecare and Exodus Recovery, crisis outreach and transportation, and six 24/7 Crisis Stabilization Units. CoC outreach and housing providers use the ACL to request mobile response and coordinate warm handoffs from crisis stabilization to behavioral health treatment, shelter, and housing services.

1C-1f.	Treatment and Recovery Services—Availability of Units for Persons Reporting Chronic Substance Use.	
	You must upload the List of CoC Program Projects and the Number of Units that require Substance Abuse Treatment attachment to the 4A. Attachments Screen.	
	Identify the number of CoC Program-funded units that require program participant engagement in substance abuse treatment services as a condition of continued participation in the program in accordance with 24 CFR 578.75.	59

1C-1g.	Treatment and Recovery Services—24/7 Access to Detox, Residential, or Inpatient Treatment.	
Is there 24/7 access to detox, residential, and inpatient behavioral health treatment within the geographic area of your CoC?		Yes

1C-1h. Treatment and Recovery Services—Formal Partnership with Behavioral and Mental Health Facilities.

Identify at least one formal partnership the CoC has with a Certified Community Behavioral Health Clinic (CCBHC), Community Mental Health Center (CMHC), SAMHSA Projects for Assistance in Transition from Homelessness (PATH) provider, Grants for the Benefit of Homeless Individuals (GBHI) provider, or a similar facility if none of the above are located in the geographic area.

(limit 500 characters)

San Diego County Behavioral Health Services (BHS), the County's public behavioral health system and a SAMHSA PATH-funded partner, is formally integrated with the CoC; the BHS Director serves on the CoC Board. RTFH and BHS coordinate countywide permanent supportive housing and behavioral health services through HMIS, including referrals, client matching, housing placement, and ongoing supports for people experiencing homelessness.

1C-1i. Treatment and Recovery Services—Sober Housing Availability.

Identify at least one new or existing CoC Program-funded project that operates sober housing in accordance with 24 CFR 578.93(b)(5).

(limit 500 characters)

New Chapter Recovery, operated by the San Diego Housing Commission, is a new CoC Program-funded transitional-housing project with 18 units and 54 beds for adults with alcohol or substance-use disorders. Participants sign an occupancy agreement that prohibits possession, use, or being under the influence of alcohol or illegal substances on the premises, consistent with 24 CFR 578.93(b)(5).

1C-1j. Treatment and Recovery Services—Warm Hand-Offs to Stable Housing Providers.

Describe how your CoC coordinates with the programs named in questions 1C-1a through 1C-1i to facilitate warm hand-offs to stable housing providers and prevent entry into homelessness.

(limit 2,500 characters)

The CoC coordinates the treatment, peer, ACT, court, crisis, residential, facility, and sober-housing partners named in 1C-1a through 1C-1i through Coordinated Entry, case conferencing, HMIS, and the Community Information Exchange. When 988/Access and Crisis Line, Mobile Crisis Response Teams, Crisis Stabilization Units, County BHS/Telecare, courts, hospitals, treatment programs, FHCS, or a CoC project identifies someone who is homeless or at risk, staff connect the person directly to a housing navigator or Coordinated Entry access point rather than provide a referral list.

With consent and privacy protections, the referring provider shares the assessment, housing history, risks, accommodations, treatment plan, and eligibility documents. The housing navigator updates the housing assessment, helps obtain identification and benefits, identifies the appropriate intervention, and brings the case to matching or case conferencing. The receiving provider confirms eligibility, availability, and a named contact. Before transition, partners establish the intake or move date, transportation, medications and safety plan, and responsibility for continuing treatment and housing services. Peer specialists may accompany participants. The referring provider remains involved until enrollment is confirmed.

Interventions are matched to need and choice: prevention, diversion, landlord mediation, or family reunification for people who can safely remain housed; shelter or bridge housing when permanent housing is not immediately available; recovery-oriented transitional or sober housing for eligible participants who choose it; and RRH, PSH, or other permanent housing for longer-term stability. Court, AOT, CARE, or conservatorship orders are incorporated when applicable but are not used to deny or terminate CoC housing.

PATH Connections/FHCS, MHS S+C/TURN ACT, Door of Hope, ECTLC, and Living Hope and Recovery integrate clinical, peer, case-management, and housing-navigation services. After placement, providers continue treatment, peer support, benefits assistance, tenancy coaching, landlord problem-solving, and crisis planning. HMIS and CIE support continuity and identify disengagement or returns to homelessness. Confirmed hand-offs, stabilization, and step-down to community care reduce discharges to homelessness and avoidable institutional use.

1C-2.	Supportive Services Investment.	
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	Number
1. Enter your CoC's FY 2026 Annual Renewal Demand (ARD).	\$44,845,725
2. Of projects your CoC proposed to be funded in the FY 2026 CoC Program Competition, enter the total amount of funding for the supportive services budget line items.	\$22,901,889
3. Percent of your CoC's FY 2026 ARD (from element 1 above) that is supportive services funding (from element 2 above).	51%
4. Enter the amount of funding, leverage, match, and funding commitment from other formal partnerships in supportive services for the projects included in your CoC's FY 2026 ARD.	\$3,276,852
5. Percent of your CoC's FY 2026 ARD (from element 1 above) that is the supportive services funding in proposed projects (from element 2 above) plus the amount of funding, leverage, match, and funding commitment from other formal partnerships in supportive services (from element 4 above).	58%

1C-3.	Participation Requirements for Supportive Services.
	You must upload the Language from Project Supportive Service Agreements attachment to the 4A. Attachments Screen.
	What percent of your housing projects (TH, PH-PSH, PH-RRH, and Joint projects) require program participants to take part in supportive services (e.g. case management, employment training, substance use disorder treatment) in line with 24 CFR 578.75(h)?
	79.00%

1C-4. Consulting with ESG Recipients.

Describe how your CoC has and will continue to consult with ESG recipients in the planning and allocation of ESG funds.

(limit 2,500 characters)

The Regional Task Force on Homelessness (RTFH), lead agency for the San Diego City and County CoC, consults with the City of San Diego and County Housing and Community Development Services, the local ESG recipients. The San Diego Housing Commission administers City ESG funds on the City's behalf; the County also administers the State ESG allocation in the region. Consultation is with the recipients, not limited to ESG subrecipients. The CoC and ESG recipients meet throughout the year, including monthly regional planning meetings, to identify system gaps, establish funding priorities, and align ESG with CoC, state, local, and other federal resources. Before each Consolidated Plan and Annual Action Plan cycle, they review PIT and HIC results, HMIS and Coordinated Entry data, system-performance measures, racial and geographic disparities, project outcomes, community surveys, and provider and public input. This guides the balance among street outreach, emergency shelter, homelessness prevention, rapid rehousing, HMIS, and allowable administration while avoiding duplication and targeting unmet needs. RTFH advises the City, County, and SDHC on CoC written standards, coordinated-entry requirements, HMIS participation and data quality, performance measures, and expected outcomes. ESG recipients translate the jointly established priorities into Annual Action Plans, funding notices, procurement documents, and subrecipient agreements. Draft plans and proposed allocations are shared through public notices, comment periods, community forums, and hearings; comments are considered before approval. Final funding decisions remain with the ESG recipients and their governing bodies.

1C-4a. Coordination with Emergency Shelter Providers.

Describe how your CoC coordinates with shelter providers to connect individuals and families with CoC assistance.

(limit 2,500 characters)

At entry, shelter staff first explore safe diversion or prevention options. When shelter is needed, staff enroll the household in HMIS, document eligibility and housing history, obtain consent, complete or update the CES assessment, and identify safety, accessibility, family, veteran, youth, health, and service needs. Case managers help obtain identification, benefits, disability verification, and documents needed for referral. They keep household information current so a household does not lose an opportunity when circumstances change.

Shelters bring unresolved or high-acuity cases to case conferencing and coordinate with outreach, health, behavioral health, veteran, youth, and domestic-violence partners. CES uses standardized information and CoC priorities to match households to appropriate transitional housing, rapid rehousing, permanent supportive housing, youth, or survivor resources. The referral and eligibility documents are sent through CES to a trained receiving provider.

A referral is not complete when sent. Shelter and housing-provider staff communicate directly, resolve missing information, arrange interviews or unit viewings, and establish a move-in plan. Shelter staff assist with transportation, documents, benefits, medications, safety planning, and belongings. Shelter case management continues until the receiving provider confirms acceptance and transition, to the extent program rules and capacity permit. If a referral cannot proceed, the household returns promptly to matching without restarting the process.

RTFH monitors HMIS/CES participation, data quality, referral timeliness, acceptance and denial patterns, permanent-housing exits, and returns to homelessness. Provider feedback informs training, workflow changes, and Community Standards updates. This process provides equitable access to CoC assistance, reduces duplicative assessments, shortens shelter stays, and supports stable housing for individuals and families.

1C-5. Data Sharing to Inform the Homelessness Response System.

Describe how your CoC has or will share PIT, HIC, HMIS, and System Performance data with state and local government as permitted by law in order to inform the homelessness response system.

(limit 2,500 characters)

RTFH, as the CoC and HMIS Lead, collects, validates, and shares PIT, HIC, HMIS, and System Performance data with local jurisdictions, housing authorities, and California agencies to support planning, funding, and system improvement. RTFH publishes jurisdiction-level PIT results, HIC inventories, System Performance Measures, annual reports, public dashboards, and monthly HMIS reports. These products provide aggregate information on system flow, utilization, housing placements, length of time homeless, permanent-housing exits and returns to homelessness.

RTFH also provides government partners with presentations, jurisdiction summaries, and aggregate analyses. Local governments and housing authorities use these data for action plans, funding decisions, shelter and housing-capacity planning, geographic targeting of services, and program monitoring. Joint reviews identify service gaps, duplication, and areas requiring improvement or investment.

At the state level, RTFH securely submits required HMIS data to the California Interagency Council on Homelessness and performance information required for state-funded programs, including HHAP. These submissions help state and local partners align investments and monitor outcomes.

All sharing is governed by the CoC's HMIS Notice of Privacy Practices, Privacy and Security Plans, participation agreements, HUD requirements, and applicable law. Consistent with the Notice, information may be used for housing and service coordination, preventing duplication, evaluating operations and identifying needed services. Public reports and planning products use aggregate or de-identified data. Personally identifiable information is disclosed only when permitted or required by law, authorized by the Notice, or supported by written client authorization, and is limited to what is necessary for the approved purpose. Other disclosures require written authorization. Victim service provider data remain outside HMIS and are reported only in aggregate from comparable databases, consistent with VAWA confidentiality requirements.

RTFH will continue required submissions, public reporting, data-quality review, and briefings with government partners. Findings will inform funding priorities and system improvements, and later reporting will assess whether those actions reduce homelessness and improve equitable housing outcomes.

1C-5a. Using Other Data Sources Alongside HMIS to Improve Care.

Describe how your CoC utilizes other data sources alongside HMIS to improve care (e.g., health care utilization and claims data, electronic health care record data; admission, discharge, and transfer data; and law enforcement and corrections system data).

(limit 2,500 characters)

RTFH uses HMIS alongside 2-1-1 San Diego's Community Information Exchange (CIE), health information, and authorized justice information to improve care and identify system gaps. HMIS provides housing history, enrollment, services, and outcomes. HMIS-CIE integration provides an authorized view of participants' housing, health, and social-service needs. CIE connects health plans and providers, homeless-service agencies, first responders, government programs, and community organizations. It supports longitudinal records, closed-loop referrals, and shared care planning. With consent and lawful authority, health utilization, claims, care-management, benefits, referral, and social-needs information informs case conferencing and service plans. Partners can avoid duplication, confirm referrals, and connect people to housing, health care, benefits, and other supports. RTFH shares authorized HMIS information directly with managed care plans and through CIE. Behavioral health, hospital, FQHC, health plan, and CalAIM partners use information to identify crisis use, care gaps, and eligibility for Enhanced Care Management or Community Supports. Programs including PATH Connections/FHCSD, High-Needs Households, Living Hope and Recovery, and New Chapter Recovery combine HMIS and CIE information with clinical assessments to coordinate treatment, benefits, and housing stabilization. Hospitals, crisis programs, and correctional partners provide authorized admission, discharge, release, and follow-up information through referrals and case conferencing. Navigators use it to plan before discharge or release and connect people to housing, medications, transportation, and services. The CoC's health and justice-focused committees strengthen coordination with health, law-enforcement, corrections, and reentry partners. The CoC does not assume unrestricted access to clinical or justice databases. RTFH compares de-identified HMIS trends with available health, crisis, mortality, and justice information to identify disparities, discharge-to-homelessness patterns, unmet behavioral-health needs, and populations requiring targeted resources. All exchanges follow applicable privacy laws, consent requirements, data-use agreements, and HMIS and partner policies. Only minimum-necessary information is shared. RTFH will continue improving HMIS-CIE coordination, cross-system analysis, and discharge partnerships to improve care, target resources, and reduce crisis use and homelessness.

1C-6. Employment and Workforce Development Partnership.

Identify at least one partnership the CoC has with employment and workforce development programs and organizations such as the Local Workforce Development Board, State Workforce Agency, American Job Center (also known as One-Stop Career Centers), registered apprenticeship program, community and technical college, union training program, adult education provider, or State Vocational Rehabilitation agency.

(limit 2,500 characters)

The CoC maintains an ongoing partnership with the San Diego Workforce Partnership (SDWP), the region's Local Workforce Development Board and federally designated WIOA Title I administrator. SDWP holds an appointed seat on the CoC Board, embedding the workforce system in CoC governance, planning, and coordination. Through this partnership, the CoC and its provider network connect people experiencing homelessness to SDWP's no-cost employment and training system. SDWP operates America's Job Center of California career centers in Central, South, East, and North County. Participants can access career navigation, skills assessment, job-search assistance, occupational training, paid work experience, and connections to employers. Career-center partners include the California Employment Development Department, California Department of Rehabilitation, Job Corps, Access, Inc., SER Jobs for Progress, and TURN Behavioral Health Services, allowing participants to connect with workforce, disability, youth, and behavioral-health employment resources in coordinated locations. The partnership supports access for adults and young adults experiencing homelessness, veterans, people with disabilities, and people facing behavioral-health or other employment barriers. SDWP's current WIOA-funded youth investments expressly include youth experiencing homelessness among the populations served. The CoC will continue using SDWP's Board participation, regional career-center network, and provider referral pathways to align housing stabilization with employment, training, and income growth.

1C-7. Street Outreach—Cooperation with First Responders and Law Enforcement.

Describe in the field below how your CoC's street outreach projects (including co-response) cooperate with first responders and law enforcement to increase positive interactions in order to increase housing and service engagement and promote use of CoC services.

(limit 2,500 characters)

Clear role separation promotes trust. Outreach workers lead voluntary, trauma-informed engagement and do not conduct or communicate enforcement activities. Before encampment actions, advance notice allows teams to conduct intensive outreach, offer housing and service options, and make connections. Staff may accompany Homeless Outreach Teams when it will not jeopardize rapport, but remain focused on assisting the person and protect identifying information unless consent or mandatory-reporting requirements apply. Co-response expands available interventions. SDPD's Homeless Outreach Team is an alternative-to-enforcement liaison that builds trust, offers services, and connects people to shelter. The Intervention Services Team and PERT add clinical expertise for complex behavioral-health needs. When there is no violence or medical emergency, outreach and first responders can use 988 to request the County's 24/7 Mobile Crisis Response Team. Its clinician, case manager, and peer specialist de-escalate crises, provide transportation, and link people to care, reducing unnecessary hospital and jail use. When safe, outreach staff remain with people in distress until responders arrive, relay information, and follow up afterward. Alpha Project demonstrates this cooperation. Its teams have worked with Homeless Outreach Teams in San Diego, National City, the Port, Oceanside, Chula Vista, and the Sheriff's Department; supported encampment outreach and emergency responses; and connected people to shelter, treatment, and housing. Its Newton shelter reserves 50 beds for SDPD referrals. Alpha uses repeated engagement, motivational interviewing, Coordinated Entry assessments, transportation, and warm handoffs. Its Outreach Diversion program reported 34 households moving from unsheltered locations to housing in 2024 and 45 in 2025. RTFH and providers review HMIS and destination outcomes, including Metric 7a.1, to identify gaps, adjust deployment, and strengthen paths from first-responder contact to sustained service engagement and housing.

1C-8. Family or Support Network Reunification.

Describe how your CoC, or your recipients, assist with family or support-network reunification efforts for individuals experiencing homelessness or living in CoC Program-funded housing (e.g., case management, travel costs, arrangement of assistance in another geographic area).

(limit 2,500 characters)

Before arranging travel, staff verify the receiving person's identity, willingness, address, and ability to provide a stable home. They assess safety, household expectations, and continued access to benefits, medications, health care, employment, and education. For youth and domestic violence survivors, reunification is participant-driven and proceeds only when the placement is safe.

Case managers develop a transition plan with the participant and receiving support. Recipients and partners may obtain identification and medications, coordinate benefits, contact destination providers, and arrange a warm handoff. Flexible assistance can cover travel tickets and local transportation. For destinations outside the CoC, staff coordinate with family and service agencies in the receiving area, confirm arrival, and follow up to reduce the risk of renewed homelessness.

The City-supported Family Reunification Program, operated by the Downtown San Diego Partnership, is a key referral resource for CoC providers. A case manager assesses housing options, confirms a stable placement with family or loved ones, provides transportation, and checks housing stability at 3, 6, and 12 months. The program reports connecting 253 participants with support systems in 2025.

CoC-funded youth programming also documents this approach. The YHDP Transitional Housing project assesses social supports and housing resources; a participant's housing-stability plan may include family reunification or financial assistance. Monthly or more frequent case management, bus passes, family engagement, and strengthening each youth's support network help make the placement sustainable.

Providers document services and destinations in HMIS when permitted and continue case management after reconnection. If no safe, stable option is verified, they continue housing navigation and services rather than treating reunification as a simple exit.

1C-9	Partnering with Public Housing Agencies—Agreement to Enable Transition to HUD Assisted Housing.		
	Does your CoC have an agreement with at least one public housing agency to enable participants to transition from Transitional Housing, Rapid Re-Housing, and Permanent Supportive Housing to HUD assisted housing?	Yes	

1C-10. Protecting Public Safety—Cooperation with Law Enforcement.

You must upload the Evidence of Coordination and Non-Interference with Local Efforts to Advance Protecting Public Safety attachment to the 4A. Attachments Screen.

Describe how your CoC cooperates and does not interfere with or impede local efforts to advance the objectives below, and assists first responders in providing services to homeless individuals.

(limit 2,500 characters)

The San Diego City and County CoC cooperates with law enforcement, fire/EMS, crisis responders, and local jurisdictions while maintaining clear roles. RTFH coordinates regional outreach under the CoC Street Outreach Standards. Outreach staff lead voluntary, trauma-informed engagement; law enforcement manages enforcement and scene safety. Providers do not interfere with or obstruct lawful public-safety activity.

Before encampment actions, advance notice allows outreach teams to make repeated contacts, assess needs, offer shelter and treatment, and arrange transportation and warm handoffs. During an action, staff assist affected individuals and make referrals but do not perform enforcement. They protect confidential information unless disclosure is authorized or required and do not provide materials that impede cleanup. Alpha Project demonstrates this cooperation with the Sheriff's Department and Homeless Outreach Teams across the region. Its application documents encampment outreach, shelter and housing placements, and 50 Newton shelter beds reserved for SDPD referrals. The Sheriff's support letter confirms Alpha has not impeded enforcement.

For public illicit-drug use, outreach cooperates with officers while offering services. SDPD's PLEADS program connects drug-involved individuals to services as an alternative to prosecution. The Serial Inebriate Program coordinates police, EMS, hospitals, courts, treatment, case management, and housing resources. Providers use motivational engagement, overdose-response training, transportation, and warm handoffs to treatment and recovery support. When someone may be a danger to self or others, staff de-escalate, call 988/MCRT when a non-law-enforcement response is appropriate, and activate 911/PERT for violence, a medical emergency, or possible involuntary evaluation. When safe, staff remain until responders arrive, relay pertinent information, and help connect the person to crisis stabilization, treatment, shelter, or housing.

For SORNA, when requested, the CoC and recipients cooperate with law enforcement in checking or mapping homeless registrants' locations and do not impede registration or notification duties. RTFH routes requests through designated staff so authorized information is shared consistent with SORNA, legal process, HMIS privacy, and victim-confidentiality requirements and the response is documented.

1C-10a. Protecting Public Safety—Plan to Quickly Clear Tents and Encampments.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to quickly clear tents and encampments on public property and connect individuals who are camping in public with appropriate services and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

The CoC covers 18 cities, Carlsbad, Chula Vista, Coronado, Del Mar, El Cajon, Encinitas, Escondido, Imperial Beach, La Mesa, Lemon Grove, National City, Oceanside, Poway, San Diego, San Marcos, Santee, Solana Beach, and Vista, and unincorporated County areas. Carlsbad, Chula Vista, Encinitas, Escondido, National City, Oceanside, Poway, San Diego, San Marcos, and Santee have express camping/encampment restrictions. The other eight use location-specific laws. County Code §73.108 applies to County property. Helpful policies include San Diego's progressive enforcement and shelter offers, Chula Vista's 72-hour notice and 90-day property storage, and CoC Street Outreach Standards requiring voluntary, trauma-informed engagement and warm handoffs. RTFH receives Caltrans District 11's removal schedule and coordinates it with jurisdictions and providers for pre-removal outreach and placement planning. Hindrances include differing procedures, short or inconsistent notice, and enforcement in specified areas when shelter is unavailable. These can limit placement time, interrupt outreach, disperse residents, and impede follow-up. On June 28, 2024, City of Grants Pass v. Johnson removed Martin v. Boise's federal shelter-availability limitation. Chula Vista, National City, Oceanside, and San Marcos then adopted or expanded rules. Notice, property, disability, and due-process requirements remain. The CoC will use a regional protocol. Except for imminent hazards, jurisdictions will notify outreach early. Teams will create a by-name list, repeat engagement, confirm shelter, housing, or treatment placements, and arrange transportation, storage, document recovery, benefits, behavioral-health connections, and warm handoffs. If removal occurs without placement, teams will provide same-day outreach, retrieval instructions, continued HMIS enrollment, and follow-up. ERF supports this plan. California awarded Oceanside/Carlsbad \$11.4 million in 2024 for State Route 78/Buena Vista Creek. By August 2025, Zone 1 served 76 residents, housed 54, over 90% of its by-name list, and removed 24 tents and 30 tons of debris. In February 2025, California HCD awarded RTFH \$8.4 million for three State Route 94 phases in Lemon Grove. Phase 1 housed 31 of 32 participants; Phase 2 housed 40 of 46, with others receiving services. The model combines phased outreach, rapid rehousing, the Flexible Housing Pool, landlord engagement, and stabilization services.

1C-10b. Protecting Public Safety—Current Status of Tents and Encampments.

Describe the current status of tents and encampments in the CoC's geographic area.

(limit 2,500 characters)

Addressing tents and encampments remains a CoC focus, and Encampment Resolution Funding (ERF) has begun to show measurable results. The January 2026 PIT counted 5,108 people living unsheltered, 606 fewer than in 2025 (-10.6%), while the sheltered/transitional count increased 12% to 4,695. Of surveyed unsheltered residents, 30% stayed in outdoor encampments. The City of San Diego accounted for 3,132 unsheltered people. Counts declined in most regions but increased 5.1% in North Coastal. Encampments continue along waterways, transportation corridors, parks, sidewalks, underpasses, canyons, and other public property. During the past three years, the region has invested in moving people from unsafe, high-risk locations into shelter, treatment, or housing. At least \$41.7 million in State ERF awards targets the San Diego and Sweetwater riverbeds, State Route 78/Buena Vista Creek, and three State Route 94 areas. Results include over 200 interim- and nearly 170 permanent-housing placements from the riverbed projects; 54 people housed and over 90% of the Zone 1 by-name list housed by closure in Oceanside/Carlsbad; and 31 of 32 Phase 1 and 40 of 46 Phase 2 participants housed in Lemon Grove. RTFH receives Caltrans District 11's removal schedule for advance outreach coordination. In July 2026, San Diego and Caltrans renewed and expanded their agreement covering five freeway miles near Downtown. During its first year, 115 people entered shelter, at least 19 entered permanent housing, and crews removed over 413 tons of waste; outreach occurs before and separately from cleanup. The City intentionally expanded designated alternatives to unsanctioned encampments. Two Safe Sleeping sites provide 767 tent spaces; Safe Parking provides 436 vehicle spaces and 19 family trailers. On July 29, 2026, 509 people were enrolled in Safe Sleeping and 258 in Safe Parking. These settings move people from public locations while providing sanitation, security, case management, housing navigation, and behavioral-health connections. Work is ongoing. Later ERF phases include more people with long-term homelessness, serious mental illness, co-occurring substance use disorders, and higher stabilization needs. More detoxification, residential, inpatient, and crisis beds would enable direct clinical placements, reduce delays and returns to unsheltered locations, and support housing stability.

1C-10c. Protecting Public Safety—Plan to Decrease the Public Use of Illicit Drugs.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to decrease the public use of illicit drugs and quickly connect individuals who are using illicit drug in public with appropriate services and/or law enforcement and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

San Diego combines enforcement, diversion, courts, harm reduction, and treatment. Municipal Code §52.66 prohibits being under the influence of dangerous drugs. PLEADS lets police offer eligible drug-involved people services instead of enforcement. When public drug use is associated with behavioral-health conditions or low-level offenses, CoC partners use court pathways instead of only citations. Homeless Court removes eligible legal barriers after participation in approved recovery services. Behavioral Health Court provides eligible adults with serious mental illness, including co-occurring SUD, treatment and supervision. CARE Court connects eligible people with specified psychotic disorders to County services and housing planning. These pathways support treatment engagement but have eligibility limits. Enforcement targets distribution, violence, and repeat offending. The DA, City Attorney, and SDPD formed the San Diego Accountability Renewal and Community Health (SD ARCH) Task Force in late 2023 to address repeated drug sales, drug use, theft, and vandalism affecting unhoused people. In July 2026, an FBI-led operation targeting an alleged open-air crack market at 2900 Imperial Avenue resulted in 30 federal charges, 28 arrests, and 21 search warrants. This targeted supply, while outreach, diversion, courts, and treatment address individual needs. Eligibility requirements and unavailable treatment placements can hinder connections. Enforcement does not create treatment capacity, and release without a coordinated handoff can interrupt care. Effective March 1, 2026, the County awarded Father Joe's Villages a contract for a 44-bed withdrawal-management program serving unhoused people. The CoC will use a regional protocol: 911/EMS for overdose or medical danger; 988, mobile crisis, PERT, or harm-reduction teams for behavioral-health needs; diversion or court pathways when eligible; and law enforcement for trafficking, violence, or threats. Outreach or a peer navigator will assess the person, verify placement, arrange transportation, and make a warm handoff to withdrawal management, treatment, shelter, or housing. Those not placed will receive overdose-prevention supplies and follow-up within 24 hours, 72 hours, and seven days. Results will be reviewed monthly to adjust deployment and capacity.

1C-10d. Protecting Public Safety—Current Status of Overdoses and Illicit Drug Use in Public Spaces.

Describe the current status of overdoses and illicit drug use in public spaces in the CoC's geographic area.

(limit 2,500 characters)

San Diego County is demonstrating measurable progress in reducing overdose deaths. The County's August 2025 Drug Overdose Dashboard reported 945 overdose deaths in 2024—258 fewer than in 2023, a 21% reduction and the second consecutive annual decline. Fentanyl and methamphetamine remained the leading causes, and people experiencing homelessness accounted for approximately 30% of overdose deaths, identifying a priority population for focused outreach and treatment. The quarterly dashboard improves regional coordination by combining mortality, emergency-department, hospitalization, EMS, poison-control, and naloxone data by region, age, race/ethnicity, and substance. OSAR partners—including Public Health, Behavioral Health Services, the Medical Examiner, EMS, community organizations, and law enforcement—use the data to identify emerging spikes and geographic clusters and direct naloxone, test strips, outreach, and treatment referrals where they are most needed. The region does not maintain one unduplicated public-use count across its 18 cities and unincorporated areas because agencies record different types of events. The 2026 PIT provides context, not a direct measure: 5,108 people were unsheltered; 43% stayed on streets, in parks, at transit locations, or under bridges, 30% stayed in encampments, and 25% of surveyed unsheltered adults reported an SUD. These data help focus engagement but do not establish that every person reporting an SUD uses drugs publicly. Coordinated enforcement is also reducing public distribution. The DA, City Attorney, and SDPD's SD ARCH Task Force targets repeated drug sales and use affecting unhoused people while promoting treatment and services. In July 2026, an FBI-led investigation of an alleged open-air crack market at 2900 Imperial Avenue resulted in 30 federal charges, 28 arrests, and 21 search warrants, disrupting a supply network serving multiple neighborhoods. Across the region, jurisdictions combine police or Sheriff responses with diversion, outreach, crisis intervention, and treatment connections. The current status reflects declining overdose deaths, improved regional surveillance, targeted disruption of public drug markets, and more focused deployment of prevention and treatment resources. The CoC will continue using dashboard and partner data to direct outreach, treatment navigation, enforcement against distribution and violence, and warm handoffs to withdrawal management, residential treatment, shelter, and housing.

1C-10e. Protecting Public Safety—Standards to Address Danger to Self or Others.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to utilize standards that address homeless individuals who are a danger to themselves or others (e.g., involuntary commitment) and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

California Welfare and Institutions Code §5150 permits authorized professionals to detain a person for up to 72 hours when a behavioral-health disorder makes the person a danger to self or others or gravely disabled. Effective locally January 1, 2025, SB 43 expanded “gravely disabled” to include severe substance use disorder and inability to provide for basic needs or personal safety. Less-restrictive alternatives must be considered; homelessness alone does not meet the standard. The County’s toll-free Access and Crisis Line, 888-724-7240, operates 24/7 and routes nonviolent crises to Mobile Crisis Response Teams; imminent risks may involve 911/EMS or PERT. Crisis Stabilization Units accept voluntary and §5150 admissions. Multidisciplinary outreach includes PATH and Father Joe’s Villages clinical and housing staff, with health-plan coordination. Homeless Court addresses legal barriers, Behavioral Health Court combines treatment and supervision, and CARE Court connects eligible people to behavioral-health services and housing planning. AOT offers another pathway. SD ARCH focuses on chronic offenders within the unhoused population who commit repeated drug, property, or violent crimes, including crimes against unhoused people. It distinguishes people needing care from those presenting continuing safety risks and supports lawful removal of dangerous repeat offenders while connecting eligible people to services. CoC leadership and the DA’s Office review homelessness, victimization, and human-trafficking data to coordinate outreach, survivor services, shelter, investigation, and prosecution while protecting confidentiality. Barriers include uncertainty applying SB 43, limited crisis and treatment capacity, emergency-department boarding, fragmented discharge planning, and distrust after coercive encounters. Expanded authority alone does not create care capacity. The CoC will use a regional protocol: 911/EMS/PERT for imminent danger or violence and 988/MCRT for nonviolent crises. Responders will document statutory facts and select the least-restrictive appropriate option: voluntary care, a CSU, court pathway, AOT, or lawful detention. Navigators will begin discharge planning at admission and coordinate benefits, medication, transportation, placement, a warm handoff, and scheduled follow-up. Monthly reviews will track repeat crises, discharge destinations, treatment and housing connections, and disparities while protecting due process and confidentiality.

1C-10f. Protecting Public Safety—Share Information in Accordance with SORNA.

Identify local laws, policies, or other practices that help or hinder the CoC's ability to comprehensively share information, including location information, in accordance with the Sex Offender Registry and Notification Act (SORNA) and provide a plan explaining how the CoC will leverage beneficial policies while overcoming the harmful effects of restrictive ones. If you cannot provide any mitigating steps, please explain why.

(limit 2,500 characters)

The U.S. Department of Justice determined in April 2024 that California had not substantially implemented SORNA. Locally, sharing operates through Penal Code §290 and the California Sex and Arson Registry. Section 290.011 requires registrants without a residence to report every 30 days and identify places they sleep, eat, work, or frequent; §290.46 authorizes public information through the Megan's Law website. The County District Attorney reports about 4,500 registrants, 96% compliant and 10% registered as homeless. The County also operates an opt-in Registered Sex Offender Email Notification System that alerts residents when a publicly disclosed registrant moves into or out of a selected ZIP code. As a local safety practice, family and mixed-population shelters use same-day screening: adult entrants attest to registration status, and staff check each new entrant against public registries on admission. Shelters screen each night's new admissions. Matches are verified with the registering agency before placement decisions. Barriers include frequent location changes among registrants without housing, nonpublic records, incompatible systems, and legal limits on use. Section 290.46 restricts disclosure, protects victim information, and generally prohibits using Megan's Law information to deny housing. HMIS is limited to service coordination, and VAWA protects survivor identities and shelter locations. The CoC will adopt a protocol with registration agencies, SAFE, Probation, Parole, shelters, victim-service providers, and housing partners. Law enforcement will verify records and determine lawful disclosure; providers will not create a parallel public list or allow routine law-enforcement access to HMIS. Staff will explain §290 duties, obtain the attestation, complete the same-day check, and make a warm handoff to the registration unit when needed. With informed, time-limited consent, providers will share only information needed for registration, supervision, or placement. Without consent, location or identifying information will be released only when legally required or under an emergency exception. Victim identities and confidential shelter locations will remain protected. Verified restrictions will guide individualized placement, not categorical exclusion. Quarterly review and annual training will address missed updates, discrepancies, placements, and privacy incidents. The CoC will consult SMART Office guidance.

1C-11. Outreach Strategy.

Describe your CoC's strategy to outreach to all individuals and families experiencing homelessness across your geographic area.

(limit 2,500 characters)

The San Diego CoC uses coordinated, housing-focused outreach across unincorporated communities and cities. RTFH aligns teams through Community Outreach Standards, the Regional Homeless Outreach Meeting, HMIS, and Coordinated Entry (CES). Teams coordinate routes and handoffs so people are not excluded when they move. Deployment combines canvassing with referrals from 2-1-1, 988, first responders, jurisdictions, hospitals, libraries, transit staff, and residents. Teams visit streets, parks, riverbeds, canyons, vehicles, transit corridors, encampments, and rural areas. The 2026 PIT Count guides coverage: 5,108 people were unsheltered; 43% were on streets, in parks, at bus locations, or under bridges; 30% were in outdoor encampments; and 16% were in vehicles, boats, or RVs. HMIS and service calls identify emerging locations. Outreach is voluntary, trauma-informed, culturally responsive, and accessible regardless of disability, language, household type, immigration status, sobriety, income, or readiness for shelter. No person receives a permanent service restriction. Teams repeatedly engage people who decline assistance, return at varied times, and use problem-solving rather than require shelter entry. Generalist teams coordinate with specialists serving families, youth, veterans, domestic-violence survivors, older adults, people with disabilities, vehicle residents, and people with behavioral-health conditions. Victim service providers use confidential CES. Healthcare, behavioral-health, harm-reduction, veteran, youth, and justice partners join outreach or accept warm handoffs. Staff address safety and basic needs, assess diversion or reunification, offer transportation, and connect households to identification, benefits, healthcare, shelter, treatment, and housing. If homelessness cannot be resolved immediately, staff enroll consenting participants in outreach and CES, establish next actions, and retain responsibility until a documented warm handoff. Housing matches reflect need and vulnerability. Monthly review will examine coverage and outcomes by region, location, time, household type, race and ethnicity, age, disability, and referral source. Measures include contacts, repeat engagements, CES enrollment, service connections, housing exits, declined offers, and unresolved referrals. Teams and people with lived experience will adjust routes, hours, staffing, language capacity, and partnerships so people least connected to services remain a priority.

1C-12.	Collaboration Related to Children and Youth–Written Agreements with Early Childhood Services Providers.	
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Select 'Yes' or 'No' in the chart below to indicate whether your CoC or HUD-funded projects in the CoC have written agreements with the listed providers of educational supports and services for children ages 0-5:

		Written Agreement
1.	Child Care (including Child Care and Development Fund)	Yes
2.	Early Childhood Providers	Yes
3.	Early Head Start	Yes
4.	Home Visiting Program (including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	Yes
5.	Head Start	Yes
6.	Healthy Start	Yes
7.	Public Pre-K	Yes

8.	Tribal Home Visiting Program	No
	Other (limit 150 characters)	
9.		

1C-12a.	Collaboration Related to Children and Youth—Formal Partnerships with Schools and Youth Education Providers.	
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Select 'Yes' or 'No' in the chart below to indicate the youth education providers your CoC has a formal partnership with:

1.	McKinney-Vento Liaison(s) (including State Education Agency (SEA) or Local Education Agency (LEA))	Yes
2.	School District(s)	Yes
3.	General Education Development (GED) Program(s)	Yes
4.	Community College(s)	Yes
5.	Technical College(s)	Yes
6.	Other Post-Secondary Education Provider(s)	Yes

1C-12b.Collaboration Related to Children and Youth—Informing Individuals and Families who Become Homeless about Eligibility for Educational Services.

Describe your CoC's written policies and procedures to inform individuals and families who become homeless of their eligibility for educational services.

(limit 2,500 characters)

The CoC's written requirements are contained in the San Diego CoC Educational Assurances Policy (EAP), established in 2013, and incorporated into CoC project monitoring. Every CoC-funded project serving households with children must adopt the EAP, keep a signed copy on file, post it where participants can see it, and identify the staff member responsible for educational coordination. Under the EAP, staff screen each household at intake and during case-plan reviews to identify children and unaccompanied youth. Staff orally review educational eligibility and rights with the parent, guardian, or youth and provide written information explaining that children and youth experiencing homelessness may qualify for protections under the McKinney-Vento Homeless Assistance Act and the Elementary and Secondary Education Act. The posted EAP reinforces this notice. Staff provide the applicable Local Educational Agency homeless-liaison contact and, when needed, a letter verifying homelessness and eligibility. Notification and referrals are documented in the participant file and service plan. The policy requires designated staff to help families contact the school district or San Diego County Office of Education liaison when questions or disputes arise. Staff review rights, support family choice regarding school and housing location, advocate when rights are denied, and protect student information under FERPA. For domestic-violence survivors, notification and referral use safety and confidentiality protections. Written YHDP provider requirements supplement the EAP for unaccompanied youth. YHDP providers screen every participant for education and employment opportunities, inform youth of their rights and traditional and nontraditional pathways, document referrals, and assist with connection to the appropriate provider. The requirements include a performance standard that 90% of participating youth are successfully linked to education or employment resources. RTFH reinforces the policy through CoC membership communications, annual training, technical assistance, and project monitoring. Monitoring verifies that the EAP is posted and on file, a responsible staff person is designated, households receive notice, and referrals are documented. RTFH requires corrective action when a project cannot demonstrate compliance. This ensures notification occurs at entry, during case planning, and before exit rather than depending on a family or youth to request help.

1C-12c. Collaboration Related to Children and Youth—Coordination with Foster Care or Child Welfare Services.

Describe how your CoC coordinates with foster care or child welfare services to assist youth transitioning from public systems of care.

(limit 2,500 characters)

The San Diego City and County CoC coordinates with the County's Child and Family Well-Being Department (CFWB), youth housing and service providers, the Youth Action Board (YAB), and the San Diego County Office of Education (SDCOE) to prevent youth from exiting foster care into homelessness. CFWB is a formal partner in the CoC's 2025 Youth Homelessness Demonstration Program (YHDP) Coordinated Community Plan: it participated in system mapping, project selection, and budget development and reviewed and approved the final plan. Public-welfare representatives also participate through the CoC's Youth Services Committee, which identifies system gaps and recommends youth-focused policy and practice improvements. Coordination begins before discharge. County social workers work with each youth on a Transitional Independent Living Plan and connect eligible youth at age 16 to Independent Living Skills (ILS) services. At the youth's transition meeting, CFWB connects the youth to an ILS contracted-agency case manager and completes a warm handoff at age 18. The case manager then provides ongoing case management and coordinates housing, education, employment, transportation, health care, and community supports with the assigned social worker, Extended Foster Care worker, probation officer when applicable, and THP-NMD provider. Housing planning uses the least restrictive option that can safely prevent homelessness. Partners first preserve family, kin, or other permanent connections when appropriate; then use Extended Foster Care placements, Supervised Independent Living Placements, THP-NMD/THP-Plus, and other youth transitional housing. If a youth is homeless or cannot safely remain in a child-welfare placement, the youth is connected to the CoC's Coordinated Entry System for assessment and referral to youth-dedicated YHDP resources, including TH-RRH, RRH, kinship assistance, drop-in/therapeutic services, and flexible wraparound supports. SDCOE educational liaisons, many co-located with Child Welfare social workers, receive referrals and help maintain educational continuity. The YAB and Youth Services Committee review youth feedback and system data to identify barriers and improve practice. During FY2026, RTFH and CFWB will monitor warm handoffs, exits to homelessness, housing placement and retention, returns to homelessness and system involvement, using findings for continuous improvement.

1C-12d. Collaboration Related to Children and Youth—Coordination with Runaway and Homeless Youth (RHY)-funded Providers.

Describe how your CoC coordinates with RHY-funded providers including Street Outreach Programs, Basic Center Programs, Transitional Living Programs, and Maternity Group Homes where such providers exist.

(limit 2,500 characters)

The San Diego City and County CoC coordinates with RHY providers San Diego Youth Services (SDYS), YMCA of San Diego County, and Home Start. HHS records identify current Transitional Living Program awards to YMCA and Maternity Group Home awards to Home Start and SDYS. SDYS's most recent federal Street Outreach and Basic Center awards ended September 29, 2025; SDYS continues countywide youth street outreach and operates the region's youth emergency shelter and drop-in center. The CoC coordinates these services with RHY housing programs so youth retain access to the full continuum. Coordination occurs through the Youth Action Board, CoC Youth Services Committee, youth-specific Coordinated Entry, HMIS, and provider collaboration. SDYS, YMCA, and Home Start participated as RHY providers in the CoC's 2025 YHDP Coordinated Community Plan, including system mapping, project selection, budget development, review, and approval. This gives RHY providers a direct role in identifying gaps and shaping CoC policy and funding. Outreach and drop-in staff engage youth, address immediate safety and basic needs, and assess family reunification, shelter, housing, behavioral-health, trafficking, and child-welfare needs. With the youth's consent, staff make a warm handoff to the best resource: SDYS's youth emergency shelter for minors; YMCA Transitional Living Programs for eligible older youth; Home Start or SDYS maternity housing for pregnant or parenting youth; or YHDP TH-RRH, RRH, kinship assistance, and other youth housing. Youth fleeing violence or exploitation receive confidential, survivor-centered referrals. RHY providers enter required program data in HMIS and coordinate with youth navigators to avoid repeated assessments. Before a youth leaves emergency or transitional housing, the provider and navigator develop a housing-focused transition plan addressing identification, benefits, education, employment, health care, transportation, permanent connections, and the next housing destination. The referring provider retains responsibility until the receiving program confirms the connection. RTFH and youth partners review referrals, time to safe placement, permanent-housing exits, exits to homelessness, returns to homelessness, and outcomes by parenting status, disability, and system involvement. The YAB and RHY providers use results to correct access gaps and improve handoffs across program and age-eligibility boundaries.

1C-13. Collaboration Related to Families with Children—TH or RRH Project Dedicated to Serving Families with Children.

Identify at least one Rapid Rehousing (RRH) or Transitional Housing (TH) project in the CoC that primarily or exclusively serves families with children experiencing homelessness in accordance with 24 CFR 578.93(b).

(limit 500 characters)

Operation HOPE North County's Steps to Independence TH project, 12 units and 45 beds; all 150 anticipated participants will be in households with at least one adult and one child. Father Joe's Villages' Family Living Center (FLC) proposes 47 units/222 beds; 400 of 412 anticipated participants (97.1%) are in households with at least one adult and one child.

1C-13a. Collaboration Related to Families with Children—Supportive Services to Improve Income to Pay Rent.

Describe how the project(s) identified in 1C-13 provides supportive services focused on improving incomes to pay rent, such as workforce development, job training, or registered apprenticeship programs.

(limit 2,500 characters)

Father Joe's Villages' Family Living Center (FLC) will pair transitional housing with individualized case management and its on-campus Employment and Education Services (EES) program so parents can increase income, build savings, and prepare to pay rent in permanent housing. At intake, an Employment Specialist will assess each adult's work history, skills, interests, employment goals, income, and barriers. The specialist and case manager will incorporate employment, benefits, savings, and housing goals into the family's action plan and review progress regularly. EES will provide one-to-one employment counseling, job-search and placement assistance, résumé and interview preparation, job fairs, computer access, career clothing, transportation, budgeting, credit repair, and life-skills instruction. Its Skills Training and Enhancement Program (STEPS) offers occupational training in culinary arts, retail, maintenance, housekeeping, warehouse operations, and forklift certification. External partners provide training or credentials in automotive technology, property management, food handling, security, in-home supportive services, and peer support. EES staff maintain employer relationships and connect participants to jobs and training. FLC will address barriers that prevent parents from obtaining or retaining work. Its Therapeutic Childcare Center will provide childcare and connect children to school and developmental services. The project will provide transportation to employment, training, and benefit appointments. Homeless Court will help resolve legal barriers, while the Village Health Center will address health and recovery needs that may interfere with employment. For adults unable to work or needing additional income, the SOAR team will help eligible participants obtain SSI/SSDI and case managers will connect families to other mainstream benefits. Case managers will connect income gains to housing stability through Home Club, housing-search assistance, and household budgeting. Families will receive budgeting and credit-repair instruction, build savings, and may receive diversion funds for application fees, deposits, initial rent, and furnishings. FJV expects 50 percent of adults exiting FLC to have employment, disability, or other cash income. Staff will record income at intake, monthly, and exit in CSTAR and HMIS. Leadership will review income, service-use, and housing-exit reports monthly and adjust services when progress falls below family goals.

1C-13b. Collaboration Related to Families with Children—Leveraging Funding from Mainstream Family Service Systems.

Describe how the project(s) identified in 1C-13 leverages funding from mainstream family service systems, such as Temporary Assistance for Needy Families (TANF).

(limit 2,500 characters)

Steps to Independence, the Operation HOPE North County Transitional Housing project identified in 1C-13, leverages mainstream family-service funding by using individualized case management to connect eligible families to CalWORKs, California's Temporary Assistance for Needy Families (TANF) program, as well as CalFresh/SNAP, WIC, Medi-Cal, and SSI/SSDI. CalWORKs cash aid and these complementary benefits help families meet housing, food, health care, and other essential expenses, allowing CoC funds to remain focused on transitional housing and housing-focused supportive services. The project further braids these household benefits with locally funded and partner-supported resources, including City of Vista, City of Escondido, and County of San Diego CDBG funds; health care through TrueCare and Vista Community Clinic; legal and family supports through Legal Aid Society of San Diego and North County Lifeline; workforce services through Equus Workforce Solutions; and school-district partnerships. Operation HOPE also contributes its facility and infrastructure, while private foundations, faith communities, businesses, donors, volunteers, and in-kind contributions support meals and other services. The application estimates that these non-CoC/non-ESG housing and health care resources benefit all 12 proposed units and exceed \$200,000 annually. Together, these resources reduce household expenses, expand families' income and service supports, and strengthen their ability to transition to and sustain permanent housing.

1C-13c. Collaboration Related to Families with Children—Combining Housing Assistance with Parental Support.

Describe how the project(s) identified in 1C-13 combines housing assistance with childcare, parenting support, pregnancy-related and child healthcare, and education.

(limit 2,500 characters)

Steps to Independence combines 12 units of site-based transitional housing for families with coordinated, family-centered services through each household's individualized housing stability plan. A dedicated case manager integrates housing navigation, landlord engagement, budgeting, benefits enrollment, and move-in planning with services that address the needs of parents and children, rather than requiring families to obtain each service separately. Childcare is available through a partner Monday through Friday. The project budgets \$41,600 for two Youth Coordinators and provides HOPE for Kids, a year-round after-school program offering approximately 260 classes and more than 520 hours of programming annually. Children receive homework assistance, multicultural education, recreation, arts activities, and social-emotional learning while parents attend case-management, employment, financial-education, benefit, and housing appointments. Staff also develop childcare plans and connect families to Head Start and other community childcare resources. Parents receive parenting education, life-skills instruction, financial coaching, and individualized family-stability planning. For pregnant participants and children, case managers assist with Medi-Cal and WIC applications and renewals and coordinate healthcare through TrueCare, Vista Community Clinic, and other partners. TrueCare provides prenatal and women's health care, WIC nutrition and breastfeeding support, well-baby care, and pediatric services, including well- and sick-child visits, immunizations, developmental and behavioral-health screening, vision and hearing screening, and referrals. Transportation assistance helps families attend medical and benefit appointments. The project coordinates with local school districts so children receive McKinney-Vento protections, school transportation, and educational stability. HOPE for Kids reinforces school success, supplemented by education services from Operation HOPE and its partners. Case managers coordinate these housing, childcare, parenting, healthcare, and education supports through regular meetings, referrals, and case conferences. This integrated model enables parents to pursue employment and permanent housing while their children remain safely housed, healthy, and connected to school, strengthening the entire family's ability to transition successfully to permanent housing.

1C-14. Collaboration with Veteran Serving Organizations—Partnership with the U.S. Department of Veterans Affairs or Veteran Serving Organization.

Identify at least one partnership the CoC has with the Department of Veterans Affairs or other Veteran Serving Organizations.

(limit 500 characters)

RTFH partners with VA San Diego Healthcare System and VA-funded SSVF providers through Coordinated Entry and biweekly Veteran Case Conferencing. Partners coordinate HUD-VASH, SSVF, Grant and Per Diem, VA healthcare, and CoC housing referrals and resolve placement barriers. RTFH also publishes a monthly Veteran Housing Inflow and Outflow Report on its website, using shared HMIS data to track veterans entering homelessness and being housed and measure progress toward functional zero.

1C-14a	Collaboration with Veteran Serving Organizations.	
	Select 'Yes' or 'No' in the chart below to indicate whether the partnership(s) identified in 1C-14 does the following:	

1.	Refers veterans identified by the CoC to VA or other Veteran Serving Organizations for assistance?	Yes
2.	Coordinates the provision of emergency shelter, supportive services, and housing for veterans?	Yes
3.	Ensures access to a full spectrum of employment and career pathway opportunities?	Yes
4.	Shares data with the Department of Veterans Affairs as appropriate?	Yes
5.	Identifies service gaps for veterans?	Yes
6.	Fills service gaps for veterans?	Yes

1C-15. Collaboration with Organizations who Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.

Identify at least one partnership your CoC has with victim service providers, state domestic violence coalitions, state sexual assault coalitions, anti-trafficking service providers or other organizations who help provide shelter, housing, and services to individuals and families of persons experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, and stalking.

(limit 500 characters)

RTFH partners with CoC-funded victim service providers SBCS and Community Resource Center (CRC). SBCS's Casas de Luz+ provides transitional housing, counseling, childcare, parenting, and employment supports to families fleeing domestic violence. CRC's DV Transitional Housing and SSO Mobile Advocacy provide confidential housing, safety planning, counseling, legal advocacy, children's services, and financial assistance. Both use the CoC's confidential DV Coordinated Entry process.

1C-16. Collaboration with Justice System Re-entry Partners.

Identify at least one partnership your CoC has to prevent homelessness among people transitioning from prisons, jails, or court-ordered programs.

(limit 500 characters)

RTFH partners with the County Public Safety Executive Office, Sheriff's Office, and health and housing agencies through the Alternatives to Incarceration Housing Workgroup and Community Care Coordination Reentry Support (C3RES). C3RES begins jail in-reach before release and provides housing placement, behavioral healthcare, benefits and employment connections, and wraparound case management. Through September 2025, 207 of 213 enrolled participants released from custody were housed immediately.

1C-17. Collaboration with Partners to Address High Utilizers of Healthcare Systems.

Identify at least one partnership or project your CoC has to provide specialized supportive services for homeless individuals with a high level of medical needs.

(limit 500 characters)

The CoC's High-Needs Households project, a partnership between SDHC and PATH, provides 20 scattered-site PSH units for people with disabilities who frequently use crisis systems and have significant physical, behavioral-health, or co-occurring conditions. A multidisciplinary team including a nurse practitioner, medical triage staff, clinicians, peer specialists, housing staff, and an SUD counselor provides medical care, care coordination, system navigation, and post-placement stabilization.

1C-18. Collaboration with Partners to Address the Needs of Aging and Elderly Individuals Experiencing Homelessness.

Identify at least one partnership or project your CoC has to serve aging and elderly individuals experiencing homelessness, such as with a provider of residential care, assisted living, or medical respite services.

(limit 500 characters)

The CoC's SDHC Seniors PSH project partners SDHC with Serving Seniors to provide 30 units for chronically homeless adults age 55+ with disabilities. Serving Seniors coordinates age-responsive services addressing fixed incomes, declining health, and mobility, including meals, transportation, benefits, and medical, dental, mental-health, and SUD care. The project leverages Sharp Psychiatric RN services, FHCS older-adult case managers, and the Gary and Mary West Senior Wellness Center.

1C-19. Permanent Supportive Housing for Chronically Homeless Individuals and Families—Project that Prioritizes Individuals Experiencing Chronic Homelessness.

Identify at least one Rapid Rehousing (RRH) or Permanent Supportive Housing (PSH) project that prioritizes individuals experiencing chronic homelessness.

(limit 500 characters)

PATH Connections Housing is a 66-unit CoC-funded PSH project operated by PATH. All 66 beds are dedicated to individuals experiencing chronic homelessness. Referrals are made through Coordinated Entry, which prioritizes eligible households based on vulnerability and service needs. The project combines permanent housing with intensive case management, onsite behavioral healthcare, primary care through FHCS, benefits assistance, employment supports, and housing-stability services.

1C-19a. Permanent Supportive Housing for Chronically Homeless Individuals and Families—On-site Behavioral Healthcare.

Describe how the project(s) identified in 1C-19 provides on-site behavioral healthcare.

(limit 2,500 characters)

PATH Connections Housing provides on-site behavioral healthcare through two integrated clinical resources within its 66-unit permanent supportive housing program: the Downtown Family Health Center, operated on site by Family Health Centers of San Diego (FHCS), and PATH's on-site licensed clinical social worker (LCSW). This arrangement allows residents with serious mental illness, substance use disorders, chronic health conditions, or co-occurring needs to receive care where they live. FHCS has made a written \$382,070 non-CoC/ESG healthcare commitment for the grant term. Its services include mental-health counseling and psychiatric care; individual substance use counseling, outpatient treatment, and medication-assisted treatment; peer support and intensive case management; and patient navigation to support initial and continued engagement in care. The clinic also treats acute and chronic medical conditions and assists residents with Medi-Cal, Medicare, SNAP, and other benefit enrollment. FHCS anticipates providing 720 mental-health visits, 300 SUD-treatment visits, and 240 patient-navigation and support visits annually. Services are available to residents who qualify and choose to participate, without additional eligibility requirements. PATH's on-site LCSW supplements the clinic by providing one-to-one behavioral-health counseling, substance use treatment, and on-site support groups. PATH case managers meet with participants at least weekly, use trauma-informed care and motivational interviewing, and incorporate behavioral-health goals and participant preferences into individualized service plans. When a resident needs care beyond the on-site services, PATH coordinates with County Behavioral Health Services for mental-health and substance use treatment. Locating behavioral healthcare in the housing removes transportation and access barriers, supports continuity of care, and permits early intervention when symptoms threaten tenancy. Behavioral-health staff, case managers, healthcare providers, and housing staff coordinate care while PATH's Housing Retention Plan addresses conflicts and other risks before they result in eviction. This integration of voluntary clinical care, peer navigation, case management, and housing-retention services helps residents maintain both health and permanent housing stability.

1C-19b. Permanent Supportive Housing for Chronically Homeless Individuals and Families—Assesses Need for Higher Level of Care.

Describe how the project(s) identified in 1C-19 has a policy for assessing program participant need for higher level of care (i.e., assisted living, residential treatment).

(limit 2,500 characters)

PATH Connections Housing applies the CoC's requirement for documented, ongoing assessment of service needs. At enrollment, PATH case managers develop an individualized service plan with each resident addressing physical health, mental health, substance use, daily-living skills, medication and benefit needs, safety, and factors affecting housing stability. Case managers meet with residents at least weekly and reassess after a significant health or functional change, hospitalization, behavioral-health crisis, repeated emergency-system use, or concern that the resident cannot safely maintain the current setting. Assessment is multidisciplinary. PATH's on-site licensed clinical social worker evaluates behavioral-health and substance use needs, while clinicians at the on-site FHCSO clinic assess medical, psychiatric, functional, and medication needs. The team uses participant choice, clinical judgment, and the least restrictive appropriate setting to determine whether enhanced on-site or outpatient supports are sufficient or a higher level of care should be considered. Options may include medical respite, residential substance use treatment, inpatient psychiatric or medical care, assisted living, or skilled nursing. When higher-level care may be necessary, PATH discusses the recommendation and alternatives with the resident, obtains consent for information sharing, and coordinates with FHCSO, County Behavioral Health Services, hospitals, health plans, and the receiving provider. Staff assist with eligibility and benefits, records, medication continuity, transportation, and a documented warm handoff; the referral remains open until admission is confirmed or another plan is established. For temporary treatment, PATH maintains contact and coordinates return to housing when appropriate. When a permanent transition is clinically indicated and chosen by the resident, staff develop a person-centered transition plan and avoid discharge to homelessness. The assessment, participant preferences, clinical recommendation, referrals, disposition, and follow-up are documented in the participant record and reviewed through case conferencing. A need for more intensive care does not by itself result in termination of PSH assistance. PATH continues voluntary services, reasonable accommodations, and housing-retention efforts while the safest appropriate placement is arranged.

1C-19c. Permanent Supportive Housing for Chronically Homeless Individuals and Families—Assesses Readiness for Moving On.

Describe how the project(s) identified in 1C-19 has a policy for assessing program participant readiness for moving on to unsubsidized or other permanent housing.

(limit 2,500 characters)

PATH Connections Housing uses person-centered case management and individualized service planning to assess whether a participant is interested in and ready to move from permanent supportive housing (PSH) to unsubsidized housing or another permanent housing resource. PSH participation is not time limited, and moving on is voluntary; a participant is not pressured to leave or penalized for choosing to remain. During weekly case-management meetings and periodic service-plan reviews, the participant and case manager evaluate housing stability; lease compliance; income and benefits; ability to pay rent and utilities; budgeting and daily-living skills; health and behavioral health stability; current need for intensive services; natural and community supports; and the affordability and accessibility of potential housing. With the participant's consent, the case manager obtains input from PATH's onsite licensed clinical social worker, Family Health Centers of San Diego, property management, and other providers. No single clinical diagnosis or income threshold determines readiness; the assessment centers on participant choice and whether housing can remain stable with less-intensive, community-based support. For participants who are interested and assessed as ready, PATH develops an individualized transition plan. Staff compare feasible options—including an unsubsidized unit, a tenant-based voucher, other affordable permanent housing, or, if eligible, referral to SDHC's Moving On Program—and confirm that rent and utilities are sustainable. PATH assists with housing search and counseling, applications, landlord coordination, moving costs, benefits and employment supports, reasonable accommodations, healthcare and behavioral-health handoffs, and connections to ongoing community services. A move does not occur until the participant has accepted the plan and permanent housing is secured. PATH documents the assessment, participant choice, referrals, transition plan, and outcome, and provides post-move follow-up. If the participant is not ready or declines, PATH continues PSH and reassesses readiness through the regular service-planning process.

1D. Project Capacity, Review, and Ranking–Local Competition

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- Frequently Asked Questions

1D-1.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question along with the required attachment as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
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You must upload the Local Competition Scoring Tool attachment to the 4A. Attachments Screen.

Select 'Yes' or 'No' in the chart below to indicate how your CoC reviewed, rated, and ranked project applications during your local competition:

1.	Established total points available for each project application type.	Yes
2.	At least 50 percent of the total available points were based on objective criteria to review, rate, and rank project applications.	Yes
3.	At least 25 percent of the total available points were based on system performance measures to review, select and rate project applications.	Yes
4.	Considered returns to homelessness in reviewing, rating, and ranking housing projects (TH, PH-PSH, PH-RRH).	Yes
5.	Considered employment income in reviewing, rating, and ranking housing projects (TH, PH-PSH, PH-RRH).	Yes
6.	Considered supportive service participation requirements in reviewing, rating, and ranking housing projects (TH, PH-PSH, PH-RRH).	Yes

1D-2.	New Proposals.	
	Does your CoC invite new proposals from entities that have not previously received funding, if such eligible entities exist?	Yes

1D-2a.	Web Posting of CoC-Approved Consolidated Application Before the CoC Program Competition Application Submission Deadline.	
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	Enter the date your CoC posted all parts of the CoC-approved Consolidated Application on the CoC's website or partner's website—which included: 1. the CoC Application, and 2. Project Priority Listings.	09/29/2026
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1D-2b.	Notification to Community Members and Key Stakeholders by Email that the CoC-Approved Consolidated Application is Posted on the Website.	
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	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	09/29/2026
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1D-2c.	Local Competition Selection Results for All Projects.	
	You must upload the Local Competition Selection Results attachment to the 4A. Attachments Screen.	

	Does your attachment include: 1. Project Names, 2. Project Scores, 3. Project Rank, 4. Project Status—Accepted, Rejected, Reduced Reallocated, Fully Reallocated, 5. Amount Requested from HUD, and 6. Reallocated Funds +/-.	Yes
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1D-2d.	Projects Rejected/Reduced—Notification Outside of e-snaps.	
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1.	Did your CoC reject or reduce any project application(s) submitted for funding during its local competition?	Yes
2.	If you selected 'Yes' for element 1 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps.	08/05/2026
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes

1D-2e.	Projects Accepted—Notification Outside of e-snaps.	
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	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps.	08/05/2026
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1D-3.	Reallocation—Reviewing Performance of Existing Projects.	
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	Describe:
1.	your CoC's reallocation process to reallocate from lower performing projects to create new high performing projects, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed,
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC's local competition this year,
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

(limit 2,500 characters)

1.Reallocation process. RTFH uses ongoing monitoring and the annual local competition to determine whether CoC Program funds should be reallocated. Ongoing review includes APR and HMIS outcomes, monitoring and audit findings, HUD/eLOCCS expenditure data, compliance, fiscal and administrative capacity, achievement of project goals, cost-effectiveness, and continued system need. Agencies receive findings, technical assistance, and an opportunity to correct weaknesses. A project that misses an established performance benchmark must submit a Performance Improvement Plan (PIP), and progress is considered in the next funding cycle. During the annual competition, applicants submit an Intent to Submit with audits, Housing First evidence, and other threshold documents. The NOFO Team and Rating and Ranking Group review eligibility and thresholds, then score, rank, and recommend renewal and new projects using the published tools. Reallocation candidates include projects voluntarily relinquished by recipients; projects that fail organizational or project thresholds or the terms of a PIP; projects that no longer meet a priority system need; and projects with chronic underspending. Chronic underspending is at least 7 percent in each of the three most recently closed grant years. No reallocation is made when the underspent amount is less than \$10,000; otherwise, the adjustment is the lesser of the three-year average or the most recent applicable eLOCCS closeout measure. Reallocated funds are made available for eligible new or expanded projects. Applicants are notified and may appeal procedural, policy, conflict-of-interest, regulatory, or calculation errors to a conflict-free Appeals Committee.

2.Projects identified. Yes. During the FY2026 local competition, the CoC identified Mental Health Systems, Inc.'s Safe Haven renewal as a lower-performing project. It received a score of 41.

3.Reallocation completed. Yes. The CoC reallocated the Safe Haven project in full and removed its \$219,299 renewal request from the selected project list, making the funds available for higher-performing eligible uses.

4.Reason if funds were not reallocated. The CoC did reallocate the identified lower-performing project. Therefore, no identified lower-performing or less-needed project was retained without reallocation during the FY2026 local competition.

1D-3a.	Reallocation Between FY 2021 and FY 2026.	
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	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2021 and FY 2026?	Yes
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2A. Homeless Management Information System (HMIS) and System Performance

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

2A-1.	HMIS Vendor.	
	Not Scored—For Information Only	

	Enter the name of the HMIS Vendor your CoC is currently using.(limit 75 characters)	Bitfocus
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored—For Information Only	

	Select from dropdown menu your CoC's HMIS coverage area.	Single CoC
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2A-3.	PIT Count—Methodology Change.	
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	Describe:
1.	any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2025 and 2026, if applicable, and
2.	how the changes affected your CoC's PIT count results.

(limit 2,500 characters)

N/A

2A-4. Reduce Encampments—Actions to Reduce Encampments.

Describe in the field below the actions your CoC took to reduce the number of encampments or the number of people residing in encampments during your evaluation period.

(limit 2,500 characters)

Evaluation period: January 1–December 31, 2025. The San Diego CoC used a shared regional framework to reduce encampments through coordinated, housing-focused resolution rather than displacement alone. The CoC worked with jurisdictions, Caltrans, outreach, healthcare, housing, and other partners to map targeted sites, establish By-Name Lists (BNLs), coordinate resources through case conferencing, and resolve encampments in defined phases. This work was operationalized through regional street outreach standards, training and technical assistance, HMIS, Coordinated Entry, and cross-jurisdictional coordination.

Housing placements were paired with intensive stabilization services to address barriers contributing to prolonged homelessness and support long-term housing stability and self-sufficiency. Partners connected participants to behavioral health and substance use services, street medicine and healthcare, employment and income supports, benefits, identification and vital documents, legal and expungement assistance, transportation, and other flexible supports. Services and case management continued after housing placement.

In Oceanside and Carlsbad, an \$11.3 million State Encampment Resolution Fund (ERF) initiative targeted encampments along State Route 78 and Buena Vista Creek. Teams used intensive outreach, BNL case conferencing, housing navigation, Rapid Rehousing, rental subsidies, and flexible resources. The first targeted zone served 76 people and ended homelessness for 54 by August, with more than 90% of people on the BNL housed by closure. From April through July, unsheltered homelessness in the targeted area decreased 17%, and 30 tons of debris were removed.

RTFH launched an \$8.4 million ERF initiative with the City of Lemon Grove in August 2025 targeting long-standing encampments along State Route 94. RTFH coordinated the City, County, Caltrans, Crisis House, Think Dignity, street medicine and healthcare providers, outreach teams, and housing partners around a shared BNL and phased street-to-housing strategy. The first phase was resolved in about nine weeks, three weeks early, with all but one resident housed and the remaining resident engaged in services. Phase 2 began November 3 and was 50% complete by December 1.

The CoC also continued ERF-funded work along the San Diego River and I-15 corridors, combining intensive engagement, housing resources, comprehensive services, and ongoing stabilization to reduce encampments and returns to homeless

2A-4a.	Reduce Encampments—Number of Encampments.	
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1. Enter the estimated number of encampments in the beginning of your evaluation period.	331
2. Enter the reduction in the number of encampments during your evaluation period.	35

2A-4b.	Reduce Encampments—Number of People in Encampments.	
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1. Enter the estimated number of people in encampments in the beginning of your evaluation period.	3,582
2. Enter the reduction in the number of people in encampments during your evaluation period.	380

 nbsp;nbsp;

2A-4c. Reduce Encampments—Plans to Reduce Encampments.

If there has been no reduction in encampments or persons in encampments in your CoC, describe the plans your CoC has to participate in efforts to reduce these numbers.

(limit 2,500 characters)

N/A

2A-5. Reducing the Number of First Time Homeless—CoC's Plan.

Describe your CoC's plan to decrease the number of individuals and families becoming homeless for the first time.

(limit 2,500 characters)

The San Diego CoC will reduce first-time homelessness by continuing to make Diversion and Resolution Strategies a countywide front door to the homeless response system. The initiative intervenes when a household first reports a housing crisis before shelter entry or unsheltered homelessness when possible and rapidly resolves a new episode when homelessness has begun. Staff at 2-1-1, Coordinated Entry access points, shelters, outreach centers, schools, and youth and victim-service programs screen for imminent housing loss and begin a strengths-based problem-solving conversation. Staff identify the precipitating issue, income and benefits, safe supports, landlord options, and the least assistance needed for a sustainable solution. Responses may include mediation; housing search or shared housing; rent or utility arrears; application or security deposits; temporary lodging; transportation, vehicle repair, relocation, or employment costs; legal and benefits referrals; and brief case management. Assistance is flexible and individualized, without requiring shelter entry or a lengthy assessment. Specialized partners use confidential pathways for survivors and tailor assistance for families, youth, veterans, older adults, and people leaving institutions. When diversion is not safe or feasible, staff make a warm handoff to shelter. RTFH will expand consistent practice through regional training in active listening, mediation, conflict resolution, and housing problem-solving and common standards. The CoC braided the County's investment of up to \$1.1 million with City, State, philanthropic, and mainstream resources, creating a \$2 million flexible pool. A prior \$1.5 million investment served 489 households through 28 organizations; average assistance was \$3,150, and 96% retain stable housing and not returned to the system after 12 months. RTFH uses HMIS to review HUD System Performance Measure 5, diversion screenings, successful resolutions, shelter entries avoided, returns to homelessness, cost per resolution, and outcomes by household type. Quarterly reviews with providers and people with lived experience will identify gaps, redirect funds, and adjust training. Success will be measured by fewer people entering homelessness for the first time and sustained housing at 3, 6, and 12 months.

2A-6. Reducing Length of Time Homeless—CoC's Plan.

Describe your CoC's plan to reduce the length of time individuals and families remain homeless.

(limit 2,500 characters)

The CoC's plan establishes a FY2025 System Performance Measure 1.2 baseline of 195 average days homeless in emergency shelter, safe haven, and transitional housing and focuses resources on shortening every stage between first contact and permanent housing. Adult-only households averaged 202 days and adults age 55 and older averaged 234 days, informing targeted action for people experiencing longer episodes. Diversion and Resolution Strategies will provide immediate problem-solving and flexible assistance for reunification, shared housing, deposits, arrears, transportation, and other barriers so households can avoid or quickly exit shelter. At enrollment, providers will begin housing planning; verify identity, income, disability, and homeless-history documentation; and enroll eligible households in benefits without waiting for a housing referral. RTFH's Client-Level System Use and Length of Time Homeless report will support documentation and identification of people with the longest episodes. Coordinated Entry will use by-name lists and case conferencing to prioritize long-stayers and resolve stalled referrals. System partners will assign a navigator and track each household through referral, eligibility, document readiness, housing match, inspection, and lease-up. Referrals will remain open until the receiving provider confirms the warm handoff. Specialized case conferencing will focus on older adults, people with disabilities, and households with the longest histories. RTFH will expand the Flexible Housing Pool's landlord engagement, unit acquisition, matching, deposits, utility assistance, incentives, and risk mitigation. CoC and ESG resources will support RRH, PSH, and housing navigation that produce timely housing exits, while housing authorities will work to accelerate voucher issuance, inspections, and lease-up. RTFH's data team and CoC Evaluation Advisory Committee will review monthly SPM 1.2 average and median days; time from entry to referral, match, and move-in; cases stalled over 90 and 180 days; and permanent-housing exits, disaggregated by project, household type, age, disability, and geography. Providers outside benchmarks will receive technical assistance and corrective action. The CoC's goal is to reduce Metric 1.2 by at least 10 percent, from the FY2025 baseline of 195 to no more than 176 average days by FY2027, with quarterly reporting and resource adjustments based on results.

2A-7.	Successful Permanent Housing Placement—Exits to Unsubsidized Housing.	
	Based on HMIS data, what percent of program participants exited from TH/RRH/PSH collectively to unsubsidized housing?	42.55%

Describe how you calculated the data for this response.

(limit 2,500 characters)

CA-601 used HMIS data for the most recent eligible 12-month period, January 1, 2025, through December 31, 2025. The project universe was limited to Transitional Housing (TH), Rapid Re-Housing (RRH), and Permanent Supportive Housing (PSH) projects.

The APR identified 3,990 persons who exited these projects during the reporting period. Using HMIS Data Element 3.12, Exit Destination, CA-601 summed the following unsubsidized permanent housing destinations: 237 exits to staying or living with family, permanent tenure; 54 exits to staying or living with friends, permanent tenure; 1,261 exits to rental by client, with no ongoing housing subsidy; and 34 exits to housing owned by the client, with no ongoing housing subsidy. These categories totaled 1,586 exits to unsubsidized permanent housing.

Consistent with APR calculation guidance, 263 exits were excluded from the denominator: 200 deceased, 4 to foster care, 34 to a hospital or other residential non-psychiatric medical facility, and 25 to a long-term care facility or nursing home. This resulted in an adjusted universe of 3,727 eligible exits. Therefore, 42.55% of eligible exits were to unsubsidized permanent housing ($1,586 \div 3,727$), exceeding the NOFO's 20% threshold. If all 3,990 exits are retained without these exclusions, the result is 39.75%, which also exceeds the threshold.

2A-8.	Housing Inventory Count (HIC) and Point-in-Time (PIT) Count Date.	
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	Enter the date your CoC conducted its 2026 Housing Inventory Count (HIC) and Point-in-Time (PIT) count.	04/30/2026
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2A-8a.	HIC and PIT Count Data—HDX 2.0 Submission Date.	
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	Did your CoC submit its 2026 Housing Inventory Count (HIC) and Point-in-Time (PIT) count data in HDX 2.0 by April 30, 2026, 8:00 p.m. EDT?	Yes
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2A-8b.	Longitudinal System Analysis (LSA) Data—HDX 2.0 Submission Date.	
	You must upload your CoC's FY 2026 HDX Competition Report to the 4A. Attachments Screen.	

	Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by January 16, 2026, 11:59 p.m. EST?	Yes
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2A-8c.	System Performance Measures (SPM) Data—HDX 2.0 Submission Date.	
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	Did your CoC submit its FY 2025 System Performance Measures data in HDX 2.0 by March 4, 2026, 8:00 p.m. EDT?	Yes
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2A-9.	HMIS and Comparable Database Participation—Bed Coverage Rate.	
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Using the FY 2026 HDX Competition Report we issued your CoC, enter data in the chart below by project type:

Project Type	Adjusted Total Year-Round, Current Non-VSP Beds	Adjusted Total Year-Round, Current VSP Beds	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
1. Emergency Shelter (ES) beds	3,956	45	3,996	99.88%
2. Safe Haven (SH) beds	98	0	98	100.00%
3. Transitional Housing (TH) beds	1,028	234	1,223	96.91%
4. Rapid Re-Housing (RRH) beds	1,932	192	2,124	100.00%
5. Permanent Supportive Housing (PSH) beds	7,688	0	7,688	100.00%
6. Other Permanent Housing (OPH) beds	1,802	0	1,721	95.50%

2A-9a.	Partial Credit for Bed Coverage Rates of 84.99 Percent or Lower for Any Project Type in Question 2A-9.	
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For each project type with a bed coverage rate that is 84.99 percent or lower in question 2A-9, describe:

1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type, and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,500 characters)

1. N/A All six types of project bed coverage is more than 85%
2. N/A All six types of project bed coverage is more than 85%

3A. Policy Initiatives

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- Frequently Asked Questions

3A-1.	Supporting Activities within an Opportunity Zone.	
	You must upload the HUD-2996 Certification for Opportunity Zone Preference Points attachment to the 4A. Attachments Screen.	

1.	Will the proposed activities/projects occur within Opportunity Zone Census Tracts?	Yes
2.	Do you expect to use at least 50% of the proposed activities/projects in Opportunity Zones Census Tracts?	No

3A-2	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.
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Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?

No

4A. Attachments Screen For All Application Questions

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; and
- Frequently Asked Questions

We have provided the following guidance to help you successfully upload attachments and get maximum points:

1. You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.
2. You must upload an attachment for each document listed where 'Required?' is 'Yes'.
3. We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.
4. Attachments must match the questions they are associated with.
5. Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.
6. If you cannot read the attachment, it is likely we cannot read it either.
 - . We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).
 - . We must be able to read everything you want us to consider in any attachment.
7. After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.
8. Only use the 'Other' attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.

Document Type	Required?	Document Description	Date Attached
01. 1C-1. List of TH/RRH/PSH Projects and Treatment Providers with On-Site Substance Use Treatment	Yes	List of On-Site S...	09/28/2026
02. 1C-1f. List of CoC Program Projects and Number of Units that require Substance Abuse Treatment	Yes	List of CoC Progr...	09/28/2026
03. 1C-3. Language from Project Supportive Service Agreements	Yes	Language form 34 ...	09/26/2026
04. 1C-10. Evidence of Coordination and Non-Interference with Local Efforts to Advance Public Safety	Yes	1C-10 Evidence of...	09/28/2026
05. 1D-1. Local Competition Scoring Tool	Yes	Local Competition...	09/27/2026

06. 1D-2c. Local Competition Selection Results	Yes	Local Competition...	09/29/2026
07. 2A-8b. FY 2026 HDX Competition Report	Yes	CA-601 FY2026 HD...	09/26/2026
08. 3A-1. HUD-2996 Certification for Opportunity Zone Preference Points	No		
09. 3A-2a. Project List for Other Federal Statutes	No		
10. 3A-DP. Your CoC's Policy or Statement to Advance Recovery	No		
11. Other	No	FY 2026 CoC NOFO ...	09/29/2026

Attachment Details

Document Description: List of On-Site Substance Use Treatment Projects

Attachment Details

Document Description: List of CoC Program Projects and Number of Units that Require Substance Abuse Treatment

Attachment Details

Document Description: Language form 34 Programs: Service Participation Agreements

Attachment Details

Document Description: 1C-10 Evidence of Coordination and Non-Interference

Attachment Details

Document Description: Local Competition Scoring Tools

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description: CA-601 FY2026 HDX Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: FY 2026 CoC NOFO Public Notice Screenshots
Combined

Submission Summary

Ensure that the Project Priority List is complete prior to submitting.

Page	Last Updated
1A. CoC Identification	09/24/2026
1B. Coordination and Engagement–Accountable Structure and Participation	09/28/2026
1C. Coordination and Engagement	09/29/2026
1D. Project Review/Ranking	09/29/2026
2A. HMIS Implementation	09/29/2026
3A. Policy Initiatives	09/29/2026
4A. Attachments Screen	09/29/2026
Submission Summary	No Input Required

TH, RRH, and PSH Projects with On-Site Substance Use Treatment

The project applications, service agreements, signed provider verifications, and CoC confirmations reviewed for this attachment document on-site substance-use treatment at **14 of 43 eligible projects (32.6%)**. Treatment available only by referral or solely at a separate location is not counted.

Project	Type	Applicant / Recipient	On-Site Treatment Provider	Application or Verification Evidence
SDHC Merged Grant	PSH	San Diego Housing Commission	Community Research Foundation and Clarvida ACT teams / Substance Abuse Specialists	Application and ACT service agreements document on-site and off-site ACT services, including outpatient SUD treatment.
PRIZM	PSH	Housing Innovation Partners	San Diego County BHS-contracted Full Service Partnership providers	Application states FSP service-delivery partners provide comprehensive on-site substance-use services.
TACHS HIP Operations	PSH	Housing Innovation Partners	San Diego County BHS-contracted Full Service Partnership providers	Application states FSP service-delivery partners provide comprehensive on-site substance-use services.
PATH Connections Housing	PSH	PATH	PATH licensed clinical social worker; Family Health Centers of San Diego	Application identifies an on-site LCSW providing substance-use treatment and an on-site FHCS clinic.
2026 Renewal S+C I (CA0693)	PSH	Mental Health Systems Inc.	Interfaith Community Services	CoC-confirmed on-site service; application lists substance-abuse treatment provided by the project subrecipient as needed.
2026 MHS S+C II Renewal (CA0689)	PSH	Mental Health Systems Inc.	Mental Health Systems Inc. / TURN Behavioral Health Services	CoC-confirmed on-site service; application lists applicant-provided substance-abuse treatment monthly.
2026 MHS - Next Steps Renewal (CA1698)	PSH	Mental Health Systems Inc.	Mental Health Systems Inc. / TURN Behavioral Health Services	CoC-confirmed on-site service; application lists applicant-provided substance-abuse treatment as needed.
New Chapter Recovery	TH	San Diego Housing Commission	Father Joe's Villages SUD Counselor	Application budgets a 1.0 FTE SUD counselor and identifies weekly substance-use treatment services.
Door of Hope Transitional Housing	TH	The Salvation Army	Door of Hope licensed counselors and Peer Support/Recovery Worker	Application documents on-site assessment, counseling, relapse prevention, and recovery groups.
RISE Program - Services and Transitional Housing	TH	Father Joe's Villages	Village Health Center - Transformative Recovery Services	Application identifies on-site FQHC SUD counselors, treatment planning, outpatient treatment, and MAT.
WIN House Transitional Living for Domestic Violence Survivors	TH	Green Oak Ranch Ministries	Green Oak Ranch Ministries - Celebrate Recovery / trained counseling staff	Application identifies weekly applicant-provided substance-abuse treatment and on-site recovery programming.
Living Hope and Recovery	TH	San Diego Housing Commission	TURN to Recovery	Signed verification documents weekly on-site AA, on-site crisis stabilization by certified SUD counselors, and additional on-site SUD services.
ECTLC Family and Individual Transitional Housing Program	TH	East County Transitional Living Center	Rhombus Counseling	Signed verification documents daily on-site assessment, counseling, recovery support, and relapse-prevention services.
VVSD Transitional Housing (FY26 New Project)	TH	Vietnam Veterans of San Diego dba Veterans Village of San Diego	Veterans Village of San Diego	Signed verification documents on-site peer recovery support and behavioral-health counseling 1 to 3 times weekly.

CoC Program Projects and Units Requiring Substance Abuse Treatment

This list includes CoC Program projects for which the project application or CoC confirmation establishes required participant engagement in substance-abuse treatment as a condition of continued participation, consistent with 24 CFR 578.75. Availability, referral, sober-housing status, or a general supportive-services requirement alone is not counted.

Project	Type	Applicant	Project Operator / Treatment Provider	Units	Beds	Evidence of Required Treatment Engagement
New Chapter Recovery	TH	San Diego Housing Commission	Father Joe's Villages	18	54	Application states that participants must complete at least 20 hours of supportive services weekly; minimum required services include substance-use treatment; participation is monitored and enforced; noncompliance may result in removal from project participation.
Living Hope and Recovery	TH	San Diego Housing Commission	TURN Behavioral Health Services / TURN to Recovery	16	56	Application states access to housing is contingent on treatment participation; minimum required services include substance-use treatment; participation is monitored and enforced; noncompliance may result in removal from project participation.
2026 Renewal S+C I (CA0693)	PSH	Mental Health Systems Inc.	Interfaith Community Services	17	26	CoC confirmation identifies treatment engagement as required for the project's units; the application lists substance-abuse treatment delivered by the subrecipient as needed.
2026 MHS S+C II Renewal (CA0689)	PSH	Mental Health Systems Inc.	Mental Health Systems Inc. / TURN Behavioral Health Services	4	8	CoC confirmation identifies treatment engagement as required for the project's units; the application lists applicant-provided substance-abuse treatment monthly.
2026 MHS - Next Steps Renewal (CA1698)	PSH	Mental Health Systems Inc.	Mental Health Systems Inc. / TURN Behavioral Health Services	4	16	CoC confirmation identifies treatment engagement as required for the project's units; the application lists applicant-provided substance-abuse treatment as needed.

Total qualifying projects	Total units	Total beds
5	59	160

Source: FY26 project applications and CoC confirmation. New Chapter Recovery and Living Hope and Recovery contain explicit required-treatment narratives. The three MHS projects are included based on CoC confirmation together with their application unit tables and treatment-service entries.

CoC Projects Service Agreements: Language from Project Supportive Service Agreements

34 Programs represented in this agreement packet

Program names follow the FY2026 HUD Continuum of Care Final Priority Listing dated September 21, 2026.

Interfaith Shelter Network

- El Nido Transitional Housing Program

SBCS Corporation

- Casas de Luz +

Home Start, Inc.

- FY 26 DV Transitional Housing
- FY26 Transitional Housing

Alpha Project for the Homeless

- Alpha Square
- Alpha Lofts

East County Transitional Living Center

- ECTLC Family and Individual Transitional Housing Program

Housing Innovation Partners

- TACHS HIP Operations
- PRIZM

San Diego Housing Commission

- SDHC Seniors
- SDHC Merged Grant
- High-Needs Households
- New Chapter Recovery
- Living Hope & Recovery
- Next Step South

Crisis House

- Crisis House Domestic Violence Transitional Housing & Stabilization Program

City of Vista

- Buena Creek Navigation Center (BCNC)

Green Oak Ranch Ministries, Inc.

- WIN House Transitional Living for Domestic Violence Survivors

Additional program names are listed on the following page.

FY 2026 CoC Service Agreements

Programs Represented in This Agreement Packet - Continued

Program names follow the FY2026 HUD Continuum of Care Final Priority Listing dated September 21, 2026.

The Salvation Army

- Door of Hope Transitional Housing

YMCA of San Diego County

- Turning Point
- Turning Point Expansion

Catholic Charities, Diocese of San Diego

- Ninth & F St

Mental Health Systems Inc.

- MHS S+C I
- MHS - Next Steps
- MHS S+C II

PATH

- PATH Connections Housing

Community Resource Center

- CRC DV Transitional Housing
- CRC Social Services Transitional Housing

We See You Inc.

- We See You Transitional Housing

Community HousingWorks

- El Norte Permanent Supportive Housing
- Manzanita PSH
- Las Casitas Permanent Supportive Housing

City of Carlsbad

- Carlsbad PSH

Regional Task Force on the Homeless Inc.

- YHDP R2 TH Project



INTERFAITH
SHELTER
NETWORK

ISN Case Plan

Client Name: _____ **Date:** _____ **Case Manager:** _____

Goal Type (circle one per goal)	Client Specified Goals	Resources/Options to Meet Goals	Target Date
Housing Employment Inc Benefits Med Insurance Phys Health Mental Health Subs Use	Life Skills/ Basic Needs Social Support Transport Education Financial Legal Volunteer		
Housing Employment Inc Benefits Med Insurance Phys Health Mental Health Subs Use	Life Skills/ Basic Needs Social Support Transport Education Financial Legal Volunteer		
Housing Employment Inc Benefits Med Insurance Phys Health Mental Health Subs Use	Life Skills/ Basic Needs Social Support Transport Education Financial Legal Volunteer		

I agree to accept services (including referrals) from ISN & my case manager to meet my needs as stated above.

Client Signature: _____ **Date:** _____ **ISN Staff/ Case Manager:** _____ **Date:** _____



Service Plan

Client _____

Date _____

Case # _____ Phase _____

Next Meeting Date _____ Time: ☐ a.m. ☐ p.m.

Tasks articulated in this Service Plan need to align with ISN Case Plan Goals as well as the program requirements and expectations outlined and agreed to in the Program Participant Memorandum of Understanding.

TASKS	OUTCOME
Increased Self Sufficiency	
1. _____ 2. _____ 3. _____	
Income / Budgeting	
1. _____ 2. _____ 3. _____	
Housing	
1. _____ 2. _____ 3. _____	

*Legend: A = fully accomplished

P = pending

NA = not accomplished

By signing below, I acknowledge my agreement to accomplish the tasks stated on this form by the date and time of the meeting stated above.

Client's Signature

Date

Case Manager's Signature

Date



El Nido Transitional Living Program

Program Participant's Memorandum of Understanding

As a participant in the Interfaith Shelter Network/El Nido Transitional Living Program, I agree to the following policies and rules as a condition of participation in the program and occupancy of rental housing on the property owned and operated by Interfaith Shelter Network.

Rental Agreement

_____ I understand that I must adhere to the rental agreement provided by ISN. I understand that a breach of the rental agreement will be a program violation. I understand that I must have income to participate in the program. I agree to report any changes in my income to my case manager. I agree to pay ISN a monthly rent of \$_____ (30% of all income received during the month), \$_____ for utilities, and a one-time security deposit of \$_____ upon move-in.

_____ I understand that if I complete the program successfully (which means I move into permanent housing, increased my income and have completed all goals) I will get a refund of 10% of the total amount paid for rent. This refund will be divided into two checks – the first 5% will be received during my graduation ceremony, and the second 5% check at the year-end holiday event after my official graduation. I will receive graduation guidelines on my exit date.

_____ I understand that the program is a transitional housing program and NOT permanent housing. I understand that I will continue to be eligible for participation in the program for up to one (1) year from the date of entry only if my family and I do not violate any major violations, such as disclose location, contact with abuser or violent behavior towards staff, volunteers, and other families on site, or other compelling reasons, such as not meeting program goals 1. Employment, 2. Case management 3. Life Skills classes 4. Therapy or counseling 5. Searching for permanent housing

Program Requirements

_____ I agree to work for a minimum of 35 hours per week, attend weekly meetings with my case manager, attend a weekly on-site support group, attend weekly therapy, and attend scheduled resident meetings. My family and I also agree to attend all program meetings, classes, workshops, therapy, group counseling, off-site activities, and self-help meetings as outlined in my case plan.

_____ I agree to be an active participant in developing and adhering to an individualized case plan. I understand that my case plan is designed specifically for me and is confidential. I agree to maintain an open, honest, and respectful working relationship with my Case Manager.

_____ I agree to complete a monthly budget calculation and regularly provide bank statements or other types of proof of income forms (HHSA, employment, SSI, etc.) to my Case Manager. I agree to open a savings account within 3 months of being part of the program, deposit 25% of my monthly income, and not withdraw from my savings while a participant in the program. I understand that I will notify my Case

Manager if I need to withdraw money only in case of an emergency. I understand that I will repay any amount borrowed back to my savings account.

_____ I agree to provide my Case Manager with a copy of my current driver's license, automobile insurance, and registration if I possess a vehicle. I understand that ISN cannot warrant parking during my stay in the program and that ISN is not responsible for theft or damage in the parking area.

_____ I agree to notify my Case Manager before any planned or emergency overnight or day-long absence.

Confidentiality

_____ My family and I understand that we must keep the address of the program site and the purpose of the program confidential. My family and I understand that revealing the address to my former abuser or any partner is grounds for immediate termination from the program and removal from the program site. Disclosing location to anyone is also grounds for immediate termination from the program, and I will be removed/exited from the program site.

_____ My family and I agree to use the provided PO BOX to receive mail.

_____ My family and I understand that to protect the security and safety of us, the program participants and the staff, my family and I agree to not disclose where we are currently residing at or have any visitors as visitors are not allowed due to safety and confidentiality of our family and the families who reside in the program.

_____ My family and I agree not to be picked up or dropped off in front or behind the program site, must be further than 5 blocks of the program site and with **approval** drop/off pick up can be at the El Nido office depending on scenario, discuss with your case manager.

_____ No Uber or Lyft or any other type of type of personal transportation can be used on site for pick up or drop off, must order pick up or drop off to be at least 5 blocks from site

_____ Absolutely no food or grocery deliveries allowed.

_____ Absolutely no mail or packages of any sort may be delivered on site.

_____ I understand that using the address at any time, breaks safety and confidentiality

Supervision of other children

_____ Babysitting is allowed among tenants – policy signed individually. I understand that I can only babysit other children after I have completed all my responsibilities in the program. I can only babysit after work or school and for a limited amount of time – such as running errands or going to the store. I understand that ISN cannot be responsible for babysitting arrangements. I understand that if I am Child & Family Well-Being (C&FWB) involved or become C&FWB involved during my stay in the program, I cannot babysit other children.

Mandated Reporting

_____ I understand that if there is any reason to suspect that my children are being abused or neglected, the program staff are required to report this to Child & Family Well-Being (C&FWB) If that happens, I

understand that I will be required to cooperate with C&FWB as part of my care plan. If my children are removed from my custody, I will consult with my case manager during case management about new program goals.

Drugs/Alcohol

_____ I understand that possession of drugs, drug paraphernalia, or alcoholic beverages is prohibited while living at the program site. I understand that my family and I will be screened for substance abuse and for issues related to substance abuse. I agree to attend meetings related to substance abuse as required by my case plan. I agree to random testing for drug and alcohol use. If initial tests are inconclusive, I agree to further testing. The use of drugs and/or alcohol will not be condoned, and I agree to leave the program.

Violence and Illegal Activity

_____ I agree to notify my Case Manager by phone immediately in the event of an incident or investigation of me, my family residing in my unit or another resident by law enforcement or fire officials.

_____ I understand violence of any kind is prohibited. My family and I agree to refrain from verbal abuse, violence, or threats of violence to family members, program participants, program staff, program volunteers, neighbors, friends, or others I may come in contact with.

_____ I understand that hitting or spanking a child is prohibited.

_____ I understand that no weapons, including guns, knives or ammunition are allowed anywhere on the property. I understand that taking part in any illegal activity is grounds for immediate termination from the program and removal from my housing unit.

_____ I understand that only the smoking of cigarettes is allowed in designated outdoor spaces as defined by the program guidelines. No smoking or vaping of any kind is allowed inside the unit or complex or any of the family's communal areas. I also understand that I will pick up any trash, cigarette butts ect and smoking is only allowed outside of the complex, example, sidewalks, back alley, away from apartment program windows and doors to not have smoke enter the premises. If smoking inside the unit, it will be a violation and possible termination from the program.

_____ I understand that my family and I must be respectful of our neighbors at the apartment complex and in the surrounding neighborhood. I agree to refrain from loud noises such as television, radio, stereos, parties, and conversations outside my unit between the hours of 10 p.m. and 8 a.m.

Visitors / Transportation

_____ I understand that visitors are NOT allowed on site at any time. family, friends, or others, former abusers, or partners, NOT allowed to know the program site address, visit the program site, or come within five (5) blocks of the program site. I agree when meeting with any of the above to make arrangements for myself and my children to be picked up or dropped off at a location other than the five (5) block area. I understand that my family members, my friends, or family members or friends of my former abuser or any partner are not allowed to know the program site address or be permitted to enter the program site.

_____ -If being picked up by a family member, friend, Uber, Lyft or other type of transportation, it cannot be on site, nor the front, back on the same street, it needs to be within five (5) blocks of the program site.

Conflict Resolution

_____ I am aware of the ISN conflict resolution process. I have received the ISN Grievance Policy and Procedures. I agree to follow the process if I have a conflict with another participant or any of the program staff.

Transitional Housing Misconduct Act

_____ I understand that my participation in the program subjects me to the Transitional Participant Misconduct Act of the Cal Health & Safety Code § 50580 *et. seq.* The Act provides that if I conduct myself in a manner that substantially interferes with the orderly operation of the program, the program staff may seek an injunction prohibiting any further disorderly conduct or may seek a restraining order or injunction barring me and my family and me from further access to the program site. I understand that willful disobedience or a restraining order or injunction is a misdemeanor. In addition, I understand that if an order excluding me from the program site is issued, my family and I will be immediately removed from the program.

Violation Warning Process

_____ I understand that failure to honor any of the conditions in this Memorandum of Understanding (MOU) may result in the following:

- Written warning
- Contract (MOU) violation
- Breach of rental agreement, or I may be asked to leave the program immediately

_____ I understand that abusive or hostile behavior towards staff, residents or program volunteers, are violations that may cause for my and my family's termination from the program and eviction from the program site. ISN may have any remedy available to it by law or in equity as a result of a breach of this MOU.

_____ I understand that after three (3) violations, I do not qualify for any type of possible extension.

This MOU, rental agreement, and addendum to the rental agreement are the entire agreement between ISN and me. These documents can only be modified in writing and signed by both parties. Oral agreements and modifications shall have no effect.

I have read and initialed each provision of this MOU. I agree to inform my children of the provisions in this agreement. I understand that I am responsible if my children or I violate any provisions in this agreement.

My signature below acknowledges that I have read, understand, and agree to the policies and rules listed above as a requirement for participation in the program and occupancy of a unit at the program site. I understand that failure to comply with these policies could result in immediate termination from the program and loss of my housing.

Participant Signature

Date

Case Manager Signature

Date

Program Manager Signature

Date



El Nido Transitional Housing
Monthly Lodging Agreement

This agreement is made on _____ (date), between ISN- El Nido Transitional Housing Program and _____, the participant.

ISN - El Nido Transitional Housing Program agrees to provide the participant transitional living quarters at _____ (address) for the use of the client and her child(ren), consisting of _____ child(ren), beginning on _____ (date).

Said agreement is from _____ to _____. This agreement is not valid for more than 30 days. The participant agrees to vacate the premises at the end of this agreement. The license granted to the participant by this agreement may be revoked at any time upon written notice by ISN - El Nido or the participant.

In consideration of this agreement, the participant agrees to pay, \$_____ per month as is determined to be appropriate by HUD rent guidelines and \$_____ for utilities. The rent payment shall be made by money order and is due and payable on the 5th of each month, unless otherwise agreed to in writing by the case worker. Rent not paid by the agreed-upon due date will incur a \$10.00 daily late fee. Failure to pay rent will be grounds for termination of services provided through this Transitional Housing Program. Participant agrees to abide by this lodging agreement and ISN - El Nido Transitional housing policies and conditions contained in Program Participant's Memorandum of Understanding and incorporated herein by reference.

Signature of Lodger/Participant

Date

Signature of El Nido Case Manager

Date

Notes: _____



SBCS Corporation
CASAS DE LUZ - TRANSITIONAL HOUSING PROGRAM
PARTICIPANT CONTRACT

Program Participant(s): _____

Date of Contract: _____ **Date of Exit:** _____

PROGRAM RULES

PARTICIPANT MUST COMPLY WITH EACH OF THE FOLLOWING RULES (“PROGRAM RULES”) AS A CONDITION TO THE OCCUPANCY OF THE PREMISES PROVIDED UNDER THE TRANSITIONAL HOUSING PARTICIPANT OCCUPANCY AGREEMENT.

A. General Program Rules:

1. NO GUESTS OR VISITORS IN THE PREMISES OR ON OR AROUND PROGRAM SITE. Program Site includes the apartment and/or condominium complex as well as surrounding grounds and parking lot.
2. Participant must, in partnership with the Associate, complete an assessment and develop an individualized service plan.
3. Participant must participate in regular case management sessions with their SBCS Associate.
4. Participant must participate in, and provide verification of, a minimum of 20 hours per week of eligible services, activities, or employment. This requirement does not apply to participants who are over the age of 62, individuals with documented handicaps as defined in 24 CFR 8.3, or individuals with a documented developmental disability as defined under 24 CFR 578.3. Eligible services and activities include, but are not limited to, case management sessions, counseling, parenting classes, educational workshops, work readiness classes, independent living skills training, and financial literacy.
5. Participant must attend and participate in an orientation session with an SBCS Counselor within fourteen (14) days of entry into the Program.
6. All members of Participant’s family must receive a tuberculosis test within two weeks of entering the Program.
7. Participant must attend all resident meetings.
8. Participant must provide their most recent proof of income documentation within 5 days of written request.
9. Participant understands that the Program is designed to provide a clean and sober living environment and agree to abstain completely from the consumption of alcohol and illegal drugs during his or her participation in the Program.

B. Prohibited Activities:

1. Participant must not physically assault or threaten to physically assault any individual, including without limitation, household members, other participants, neighbors, guests or SBCS staff.
2. Participant must not verbally abuse any individuals, including without limitation, household members, other participants, neighbors, guests or SBCS staff.
3. Sexual harassment of any kind is prohibited.
4. Participant must not possess, use or be under the influence of alcohol, illegal drugs, or unlawfully possess, use or be under the influence of prescription drugs, or allow her household members to engage in such activities.
5. Participant must not steal, borrow or lend out any property of SBCS or of other participants.
6. Participant must not make excessive noise or annoy, disturb, inconvenience, or interfere with the quiet enjoyment of any other participant or any nearby resident. Excessive noise is any noise (stereos, television, conversations) which might intrude upon and disturb neighbors and other participants.
7. The possession of weapons of any sort by Participant or his or her guests is strictly prohibited.
8. Participant must not willfully destruct any property of SBCS or other Program participants.
9. Participant must not engage in any illegal activities, including but not limited to, possession and selling of drugs, prostitution, pimping, or trafficking in stolen property, or illegal gang activity. The term "illegal gang" refers to a group of people involved in organized illegal activity.
10. Participant must not engage in any other behavior which threatens the lives, safety, or well being of staff or other program participants.
12. No smoking on or about premises.

C. Safety/Supervision of Children:

1. Children up to age 13 must be attended by an adult at all times, unless otherwise expressly authorized in writing by the case management Associate.
2. Children ages 5 - 18 must be enrolled in school within 48 hours of entry into the Program and attend regularly.
3. Children are not permitted to play on stairs, in halls, walkways or parking lots.
4. No rollerblading, skateboarding, bicycle riding or ball playing is allowed on the Program Site.
5. Participants must wear shoes when outside of their unit.
6. Participants are prohibited from giving out the gate code or apartment code to anyone.

D. Unit Cleanliness:

1. There will be monthly inspections on the Premises. If any damage is found during the inspections, Participant may be charged for the cost of repairs.
2. Participant shall report any damage, leaks, plumbing problems, broken appliances to the Resident Manager, during regular business hours (Monday-Friday, 8:00 a.m. to 5:00 p.m.) For after-hours emergency repairs, Participant must call the SBCS hotline (1-800-640-2933) which will refer Participant to the appropriate contact person.
3. Participant must keep the unit clean; use all appliances, fixtures, and equipment in a safe and proper manner; not litter the grounds or common areas; and must not destroy, deface, damage, or remove any part of the Premises. Check with your case management Associate or Resident Manager for instructions on the proper use of your appliances if needed.
4. All trash must be disposed of properly in the provided trash bins.
5. There is a \$10.00 fee to replace keys.

PROGRAM TERMINATION:

Participant may be terminated from the Program and evicted from the Premises for serious or repeated violations of the terms and conditions of these Program Rules and the Occupancy Agreement, violation of applicable Federal, State or local law, or for other good cause. Violations that may result in program termination include, without limitation, the violations set forth below:

- a. Use of alcohol or illegal drugs/illegal use of drugs on the property.
- b. Possession of alcohol and/or drugs on Program Site.
- c. Conduct resulting in damages to the Premises or any other portion of the Program Site.
- d. Conduct which adversely affects the health, safety or quiet enjoyment of any other Participant or staff member or conduct which interferes with SBCS's management, maintenance and operation of the Program Site.
- e. Allowing guests in or about the Premises or on the Program Site.
- f. Any attempt at lease or assignment of the Premises.
- g. Ineligibility to participate in the Program based on income or other Participant selection criteria adopted by SBCS.
- h. Failure to comply with the minimum requirement of 20 hours per week of participation in eligible services, activities or employment.

Grievances

SBCS' Grievance procedure is described in your SBCS Agency Welcome packet. Note, all complaints and grievances must be made in writing. The grievance procedure will not prevent SBCS from concurrently proceeding with any eviction procedures or stop the running of any time set forth in a notice of termination or unlawful detainer (eviction) summons.

Additional Provisions:

BEFORE YOU INITIAL AND SIGN THIS DOCUMENT, PLEASE BE SURE THAT ANY QUESTIONS YOU MAY HAVE ARE COMPLETELY ANSWERED. PARTICIPANT'S SIGNATURE ACKNOWLEDGES PARTICIPANT'S UNDERSTANDING AND AGREEMENT TO COMPLY WITH EACH OF THE PROGRAM RULES.

I and my household members have read, discussed and understand the above Program Rules. We have asked a staff member of SBCS for clarification of the Program Rules, if any, which we did not understand. We agree to comply with these provisions as well as with terms set forth in the Transitional Housing Program Participant Occupancy Agreement. We understand and agree that any violation of the Program Rules may subject us to eviction from the Transitional Housing Program and termination of our rights to occupy the Premises.

Agency Representative Name

Agency Representative Signature

Date

Participant(s) Name

Participant(s) Signature

Date



Program Name: _____

Participant Name: _____

Date: _____

PROGRAM REQUIREMENTS

The Transitional Housing Program or DV Transitional Housing Program, in which you are enrolled is funded by the U.S. Department of Housing and Urban Development. As a condition of participation in this program, you are required to comply with all program requirements, including mandatory participation in supportive services that are important for you to achieve self-sufficiency. We believe in you and are ready to partner so that you can meet your goals.

CUSTOMIZED SERVICE PLAN REQUIREMENT

In order to be successful in this program, your participation in the development of a Service Plan is important. We want to understand your needs and goals and make sure that they are a part of our work together. Within seven days of entry, your case manager will work with you to develop a Customized Service Plan. This plan will identify:

1. Your specific barriers to housing stability and self-sufficiency
2. Supportive services needed to address those barriers
3. Measurable goals and timelines for achieving self-sufficiency
4. Your responsibilities for completing required activities
5. Your personal goals and objectives for continued success

Once you have completed your Customized Service Plan, you must sign it. It's important to review this periodically with your case manager to make sure you are on track for success. Failure to follow your Customized Service Plan may result in your exit from the program.

20-HOUR WEEKLY PARTICIPATION REQUIREMENT

We believe in you, and we think you can be independent and self-sufficient. To help you meet these goals, you are required to complete a minimum of 20 hours per week working toward the goals outlined in your Customized Service Plan. These 20 hours may include any combination of the following activities:

- Case management meetings
- Employment search and job training activities
- Educational programs or vocational training
- Substance use treatment or mental health services
- Life skills workshops

- Financial literacy and budgeting classes
- Medical appointments related to identified needs
- Housing search activities
- Other supportive services identified in your Service Plan

Exceptions to the 20-Hour Requirement:

- If you are employed: Your required hours will be reduced proportionately based on your work hours.
- If you are age 62 or older: The 20-hour requirement does not apply.
- If you have a physical disability/impairment or developmental disability (as defined in 24 CFR 582.5, not including substance use disorder): The 20-hour requirement does not apply.

If you qualify for an exception, you must provide documentation to program staff.

WHAT WE EXPECT FROM YOU

To be successful in this program, you must:

- **Show up:** Attend all scheduled case management meetings and appointments on time.
- **Participate actively:** Engage fully in all required supportive services.
- **Complete your hours:** Work toward your goals for the required number of hours each week.
- **Communicate:** Let your case manager know in advance if you cannot attend a scheduled activity.
- **Track your progress:** Keep records of your participation hours **and be prepared to share this with your case manager.**
- **Be open:** Tell us what you need to be successful.
- **Stay engaged:** Tell us right away if anything changes that affects your ability to participate.

PARTICIPANT RESPONSIBILITIES

I understand and agree to:

- Participate actively and in good faith in all required supportive services.
- Complete a minimum of 20 hours per week toward my Customized Service Plan goals (unless I qualify for an exception).
- Work collaboratively with program staff to achieve the goals outlined in my Service Plan.
- Provide accurate information and required documentation.
- Notify program staff immediately of any changes in my circumstances that affect my ability to participate.
- Follow all program rules and do my best.

PARTICIPANT ACKNOWLEDGMENT

I have read and understand this Supportive Services Agreement. I understand that participating in supportive services is required—not optional. I understand that if I do not follow this agreement, I may be removed from the program. I am committed to doing my part to achieve success.

Participant Signature:

Date:

Participant Printed Name: _____

Program Staff Signature: _____ Date: _____

Program Staff Printed Name: _____

Title: _____

FOR PROGRAM USE ONLY:

☐ Participant qualifies for exception to 20-hour requirement

Reason: ☐ Age 62+ ☐ Physical/developmental disability ☐ Employed (____ hours/week)

☐ Exception documentation attached to the file



Alpha Project Permanent Supportive Housing

Service Participation Agreement

Resident Name: _____

Unit Number: _____

Program: _____

Date: _____

Purpose

The Purpose of this Service Participation Agreement is to ensure that residents of Alpha Project's Permanent Supportive Housing programs actively engage in supportive services designed to promote housing stability, overall well-being, and long-term independence.

Resident Responsibilities

As a resident of Alpha Project Permanent Supportive Housing, including Alpha Square and Alpha Lofts, I agree to:

1. Engage in case management services, including meeting with my case manager at a minimum once a month and actively participating in discussions to identify personal goals, needs, and steps towards housing stability and self-sufficiency.
2. Utilize supportive services through participation in available programs and services, including employment and vocational programs, behavioral health services, treatment and recovery, and other services that support independence and self-sufficiency.
3. Notify my case manager of any changes in contact information, health status, income status, or other circumstances that may affect my housing stability.
4. Respect program policies and follow the lease agreement.

Program Responsibilities

Alpha Project agrees to:

1. Provide access to a dedicated case manager.
2. Offer case management and supportive services, including referrals and support to help residents achieve their housing, health, and self-sufficiency goals.

Acknowledgement

I have read and understand this Service Participation Agreement. I understand that active participation in case management services, including meeting with my case manager at least once per month, is a requirement of my residency in the program. I understand participation in services is designed to support my housing stability and long-term independence.

Resident Signature: _____ **Date:** _____

Case Manager Signature: _____ **Date:** _____



Housing Innovation Partners
5151 Murphy Canyon Road Suite #120
San Diego, CA 92123

September 25, 2026

To Whom It May Concern,

Please see the attached model Lease Agreement and Continuum of Care Rental Assistance Agreement which are included as part of the renewal application for The Association for Community Housing Solutions (TACHS) dba: Housing Innovation Partners for the 2026 Continuum of Care Program competition.

These documents are models that will apply to the renewals of the following Continuum of Care programs at all project locations:

Project Name	Contract/Grant Number
TACHS PRIZM	CA0803L9D012517
TACHS HIP Operations	CA0926L9D012516

Please contact with any questions at jon@hipsandiego.org or kim@hipsandiego.org.

Sincerely,

Jon Walters

Jon Walters
Associate Director

Housing Innovation Partners Continuum Of Care Rental Assistance Program Agreement

(Updated January, 2026)

RECITALS

- A. The Association for Community Housing Solutions ("TACHS" doing business as "Housing Innovation Partners (HIP)", a California non-profit corporation, operates a Continuum of Care Rental Assistance Program (the "Program") at the property located at _____, known as _____ (the "Program Site").
- B. The Continuum of Care Rental Assistance Program (formerly Shelter Plus Care), funded by the U.S. Department of Housing and Urban Development (HUD), is a performance-based program to provide affordable housing with supportive services to persons with disabilities and a history of homelessness. Rental Assistance provided ensures that Participants will not pay more than 30% of their adjusted gross monthly income towards rent. This Rental Assistance Program is currently set on competitive, one-year renewal terms based on performance relating to HUD-mandated outcomes. The Resident Services Program is responsible to achieve these outcomes and must show success to HUD on an annual basis in order to receive continued funding. The housing stability of Participants, their increase in income, skills, and establishment/ maintenance of earned income are the primary objectives
- C. The Program is designed to provide long-term housing and connection to supportive services to very low and low-income, homeless persons with permanent disabilities using current best practices. As implemented at the housing site, this target population are individuals or families with a head-of-household with qualifying histories of homelessness with a serious mental illness diagnosis. In furtherance of this objective, the Program provides individualized Resident Services support, which may include the referral and participation of case management services, behavioral health services, mental health services, assessment services, other permanent housing placement, domestic violence counseling, substance abuse treatment and counseling, personal assistance, nutritional services, employment assistance, independent living skills development, assistance in gaining access to local, state and federal government benefits and services, and other such supportive services as may be appropriate. The focus of The Program is to maintain Participant's stability in housing while working towards increasing their skills and income while in the program.
- D. Pursuant to this Agreement, the Program provides a housing unit ("Premises") to Participant (used interchangeably with "Tenant") with a structured setting and rules with which each Participant must comply to remain eligible for the subsidy for the Premises.
- E. Housing Innovation Partners' Resident Services Department provides supportive services as a required component of the Program. Participant receives a Rental Subsidy from the Program and is required to participate in the services made available by Resident Services including monthly meetings with the on-site Resident Services Coordinator and fulfilling other objectives. Participant agrees to report to the Resident Services Coordinator all other services and/or programs that he/she uses each month or to complete other assignments or tasks as directed, as failure to do so endangers the Program as a whole.

AGREEMENT

1. **Occupancy Payments** Pursuant to the terms of the Program established by HUD, Tenant shall make monthly payments of \$_____ for the occupancy of the Premises on the first day of each month in the sum of thirty (30%) percent of Tenant's family's adjusted gross monthly income. Tenant acknowledges that this payment is less than market rent attributable to the Premises. This reduced rent is available because the Department of Housing and Urban Development ("HUD") subsidizes this housing development under the Continuum of Care Rental Assistance Program. The HIP Resident Manager will verify the gross family income and assets through check stubs, government income forms, and other verifiable documentation. The amount of the monthly payments is based on total household gross income. Tenant agrees to report his/her household income and assets from all sources on an annual basis, within 10 days of any change including increases and decreases, or as otherwise directed by Housing Innovation Partners or its agent. All income reports provided by Participant are signed under penalty of perjury and any false, omitted, or misleading information may result in termination from the Program. The monthly payments may be increased or decreased with a change in total household gross income to be calculated by the Resident Manager using guidelines established by Program funding sources. In the event that subsequent changes are made to

Tenant Initials _____

Tenant's monthly portion, the lease amendment which documents the change shall prevail over the amounts stated in this agreement. Tenants are advised that certain, verifiable medical expenses may reduce their effective income and as a result reduce their portion of rent. Tenant Rent portion may also be reduced due to the presence of dependent children with appropriate verification. Tenant acknowledges that all payment calculations may be subject to review and approval by The San Diego Housing Commission, The California Dept. of Housing and Community Development, or any other funding source used at the housing site. The payments shall be made payable to The Cove Apartments in the form of a money order paid directly at the Resident Manager's office.

2. **Changes in the Occupancy Payments** Tenant agrees that the amount of the occupancy payments and/or the amount of assistance that HUD pays on behalf of the Tenant may be changed during the term of this Agreement if: (a) HUD or the contract administrator (such as a public housing agency) determines, in accordance with HUD procedures that an increase or decrease in rent is needed, (b) HUD or the contract administrator changes any allowance for utilities or services considered in computing the Tenant's share of the rent; (c) the income, the number of persons in the Tenant's household or other factors considered in calculating the Tenant's rent changes and/or HUD procedures provide that the Tenant's rent or assistance payments be adjusted to reflect the change; (d) changes in the Tenant's rent or assistance payments are required by HUD's re-certification or subsidy termination procedure; (e) HUD's procedures for computing the Tenant's assistance payment or rent change; or, (f) the Tenant's failure to provide information on income, family composition or other factors as required by Housing Innovation Partners.

3. **Authorized Occupants** Tenant shall use the Premises only for the purposes of shelter for himself or herself and authorized family members, a total of no more than _____ occupant(s), identified as follows:

Relationship Head of Household

Relationship _____

No other occupants shall have the right of tenancy under this agreement. The Premises must be used as the Primary Residence for the Household at all times, with the only exception being a maximum 90-day absence from the site for medical or psychiatric hospitalization or other institutional stay per HUD Rules. In the event the qualifying Head of Household is absent from the site for over 90-days, the Rental Subsidy will be suspended until such a time as the Head of Household returns to residing at the site. The tenant household will be responsible for the full Contract Rent on the unit during this period. Household composition must be reviewed annually, and/or as needed if family members leave or join the household. It is the responsibility of the Tenant to notify Housing Innovation Partners of any possible changes in household composition in advance. Failure to notify Housing Innovation Partners prior to household composition changes may result in termination from the Program and eviction from the Premises.

4. **Program Participation** Participation in the Program is a requirement of continued rental assistance. Supportive services are set according to the Participant's needs and objectives, with varying levels of participation being based on Participants' goals and input from Resident Services staff and with recovery, financial stability and housing stability being central goals. Resident Services has developed a structured program that is established with the HUD-mandated goals of substance abuse recovery, housing stability and increasing skills and income in mind and will educate all Participants on the level of participation that is required to achieve said goals. Progress towards goals is required for continued assistance. Participant is advised that the CoC Rental Assistance program is a performance-based, competitively funded program in which participation is essential in order for the program to remain fully funded by HUD, benefiting the entire program site and Participant. Participant hereby voluntarily agrees to meet with Resident Services at a frequency and duration to be determined by the Resident Services program but not less than once per month. HUD requires the program to complete initial and annual assessments of Participant service needs in order to provide effective services. Those services are evidenced by a Service Plan signed by Participant. Participant agrees to complete initial/intermittent assessment of service needs, monthly reporting of service utilization rates and activities, and an annual review of service/ treatment goals in an accurate and timely manner as these activities are required by HUD. After an initial adjustment period to the Program, Tenant will be required to maintain participation in a gainful activity, such as treatment, employment, education, vocational training, or volunteerism and to provide written verification of participation as directed by the Resident Services Coordinator. Participant will be assigned to complete concrete, measurable, and achievable tasks and goals including but not limited to mental health treatment, substance abuse treatment, healthcare, employment, entitlement benefits, legal assistance, and education and progress towards those assignments will be required for continued assistance. Participant agrees to complete a urine drug screen (UDS) if required by Resident Services with refusal to comply being considered a "positive" test result and a violation of this agreement. Participant is advised that failure to participate in supportive services as defined above may result in the suspension or termination of rental assistance at the sole discretion of Housing Innovation Partners and its agents.

Tenant Initials _____

5. **Misrepresentation in Program Documentation** Tenant's application for the Program and all documentation to be completed by Tenant for the Program are incorporated in this Agreement. Any false or misleading statement or omission made by Tenant in the application or other documentation shall constitute grounds for immediate termination from the Program up to and including eviction from the Premises.
6. **Drug and Alcohol Use Prohibited** The onsite use and/or possession of illegal substances and/or paraphernalia by Tenant or by individuals present in the Participant's home is strictly prohibited by HUD and Landlord. This extends to the use/abuse of legally obtainable, physically impairing substances, including marijuana. This includes all common areas, inside units, on sidewalks or in the general radius of the building. Failure to adhere to this policy may result in loss or suspension of the Rental Subsidy up to and including eviction from the Premises. Participants or individuals present in the Participant's home are not permitted to possess or consume alcohol on Premises or to possess empty alcohol containers. Housing Innovation Partners highly discourages the use of alcohol or drugs off-site for any Program Participant. However, sobriety is not a condition of tenancy or continued assistance. Tenants who are found to be in violation of the above will receive a Lease Violation Up to and including eviction from the site if problematic behavior continues.
7. **Annual Housing Quality Standards (HQS) Inspections** Each dwelling unit under HUD Regulations must meet minimum safety/quality standards. Each unit must be inspected prior to initial move-in and once a year thereafter. Landlord is responsible for notifying Tenant of the date and time the unit will be inspected. Tenant is responsible for maintaining the unit to HQS and/ or current standards at all times. Authorized San Diego Housing Commission HQS staff or their agents conduct the inspections. Tenant may be present at the time of the inspection. Failure to comply with the inspection process or failing inspection results will result in the Tenant being given a three-day notice to cure the violation(s) or quit the Premises. Landlord may conduct its own inspections of units with a 24-hour notice to Tenant and Tenant is hereby notified that Landlord intends to complete its own inspections at 90-day intervals. Tenant agrees to provide Landlord or its agents with unrestricted access to the apartment with appropriate notice. Refusal to permit a scheduled inspection will result in a "failed" inspection. Landlord and inspection staff follow HUD requirements but determine in their sole discretion what condition(s) constitutes a "pass" or "fail" inspection grade. Tenant is advised that a failed inspection is a material violation of the lease, that failing two (2) inspections will result in a warning of subsidy suspension (abatement), and failing three (3) inspections will result in rental subsidy suspension. In the event that a subsidy is suspended, the suspension will begin on the date of the third failed inspection and will remain suspended until the date the rental unit receives a passing grade.
8. **Termination/Eviction** Tenant is expected to fully comply with the provision of this Agreement, Lease Agreement and the House Rules and Regulations and all attachments/addendums. Failure to comply with the provision of this Agreement, Lease Agreement, the House Rules and Regulations, and all attachments may result in termination from the Program and eviction from the Premises. Some of the grounds for suspension or termination from the Program and eviction from the Premises are set forth below. The reasons set forth below are intended to provide Tenant with notice of what is expected. Necessarily, however, such a list cannot identify every type of unacceptable conduct and performance. Therefore, Tenant should be aware that conduct and events not specifically listed below but which adversely affects or is otherwise detrimental to the Program, other participants, Housing Innovation Partners and its staff, may also result in suspension, termination from the Program and/or eviction from the Premises.
- a)- Failure to inhabit apartment as primary residence.
 - b)- Failure to maintain apartment/unit in a safe and/or sanitary manner or having repeatedly (2 occasions or more) failed housing quality inspections or as directed by the Program grantee.
 - c)- Institutionalization: hospitalization, incarceration, or absence for over 90 days.
 - d)- Non-payment of occupancy payments, late fees, or any financial obligation to Housing Innovation Partners, including repeated late payment of rent.
 - e)- Income exceeding limits set by funding requirements for specific property/unit.
 - f)- Failure for guests/lodgers exceeding overnight maximum stay as stated in lease.
 - g)- Possession/use/sales onsite of illegal drugs/paraphernalia or alcohol, empty containers, abuse of prescription drugs on-site or possession of prescription drugs prescribed to a person other than a household member.
 - h)- Conduct that poses a health and safety threat to Tenant, staff, or others.

Tenant Initials _____

i)- Conduct resulting in damages to the Premises or any other portion of the Premises.

j)- Conduct that adversely affects the health, safety or quiet enjoyment of any other Tenant or visitor to the Premises and its surrounding neighborhood or conduct which interferes with Housing Innovation Partners' management, maintenance and operation of the Premises.

k)-Harassment of Tenants, Staff, or Vendors based on race, color, national origin, ancestry, religion, gender, sexual orientation, gender identity, disability, marital status, source of income or familial status. This includes inappropriate, romantic, sexual advances or other behavior determined to be offensive by the recipient.

l)-Failure to provide income, asset or other certification/ verification required by this Agreement or intentionally providing false or incomplete information to Landlord.

m)-Any attempt to sublease or assignment of the Premises.

n)-Death of Tenant, subject to a reasonable grace period with respect to surviving family members to be established by Housing Innovation Partners in its sole and absolute discretion.

o) Failure to participate in supportive services as defined in section 4 of this agreement or as otherwise determined by Resident Services and Housing Innovation Partners.

9. **Entire Agreement** This Agreement together with the Lease, the House Rules and Regulations, and other specified attachments contains all agreements of parties hereto with respect to Tenant's occupancy of the Premises and supersedes any prior agreements or negotiations concerning Tenant's occupancy of the Premises. There have been no representations made by Housing Innovation Partners or understandings made between the parties concerning Tenant's occupancy of the Premises other than those set forth in this Agreement and its attachments. This Agreement may not be modified except by a written instrument duly executed by the parties hereto. The Parties further intend that this Agreement and the referenced attachments constitute the complete and exclusive statement of its terms and conditions and that no extrinsic evidence whatsoever may be introduced in any judicial or other proceeding, if any, involving this Agreement.

10. **Definitions** Terms not specially defined in this Housing Innovation Partners Continuum of Care Agreement shall have the meaning stated in the lease agreement to which this is made an addendum.

11. **Security Deposits** \$ _____ has been received by Housing Innovation Partners from the Continuum of Care Rental Assistance program for the apartment unit. Tenant acknowledges that upon vacating the unit, this amount will be returned to the Continuum of Care Rental Assistance program, less any costs incurred by Housing Innovation Partners due to damage, abnormal wear and tear, or other items that must be cured in order to ready the unit for the next tenant. The tenant will receive an itemized Disposition of Security Deposit within twenty one (21) days upon vacating the unit advising how such funds were used, but will not receive any monies in return since no Security Deposit funds were paid by the tenant. Tenant further acknowledges that Tenant is liable for damages and other costs incurred by Housing Innovation Partners that exceed the amount of the Security Deposit paid by The Continuum of Care Rental Assistance program.

(Signature/Date)

(Signature/Date)

(Tenant(s) print name)

(Resident Manager print name)

Tenant Initials _____



SAN DIEGO
HOUSING
COMMISSION

We're About People

San Diego Housing Commission Continuum of Care Housing Projects Supportive Services Participation Agreement DRAFT

San Diego Housing Commission
1122 Broadway, Suite 300
San Diego, CA 92101
www.sdhc.org



Program Name: *[This agreement may apply to the following transitional housing and permanent supportive housing projects funded with federal Continuum of Care Program funds: Living Hope and Recovery, New Chapter Recovery, Next Step South, High-Needs Households, SDHC Merged Grant, and/or SDHC Seniors.]* _____

Participant Name: _____

Date: _____

PROGRAM SERVICE PARTICIPATION REQUIREMENTS

This project is funded by the U.S. Department of Housing and Urban Development (HUD). In accordance with 24 CFR 578.75(h), HUD encourages supportive service agreements that meet individual needs and advance individual progress towards self-sufficiency and independent living goals set forth in 42 U.S.C. 11386a(b)(1)(F).

As a condition of participation in this program, you are required to comply with all program requirements, including mandatory participation in supportive services based on individual need. These services are important for you to achieve self-sufficiency. We believe in you and are ready to partner so that you can meet your goals.

Consistent with 24 CFR 5.2005(b)(1), assistance may not be denied on the basis or as a direct result of the fact that the participant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, if the participant otherwise qualifies for admission, assistance, participation, or occupancy.

EXEMPTION FROM SERVICE PARTICIPATION

Program participants aged 62 or older and/or who have a handicap(s) as defined in 24 CFR 8.3 or a with a developmental disability as defined under 24 CFR 578.3 are exempt from service participation requirements. If you qualify for an exemption, you must provide documentation to program staff.

CUSTOMIZED SERVICE PLAN

In order to be successful in this program, your participation in the development of a customized service plan is important. We want to understand your needs and goals and make sure that they are a part of our work together. Upon entry into the program, your case manager will work with you to develop a customized service plan. This plan is collaboratively developed with you to ensure that housing and service decisions are guided by your choices and aligned with your unique needs, and will be updated regularly as needed. Customized service plans will include:

- The types of services to be provided, when and how often services will be provided, and by whom all services will be provided.
- Your individual goals, strategies for achieving those goals, and target dates for achievement to focus on improved health and wellness, housing stability, and increased employment income leading to financial stability and self-sufficiency.

20-HOUR WEEKLY PARTICIPATION REQUIREMENT

To help you to meet your housing and self-sufficiency goals and objectives, you are required to participate in a minimum of 20 hours per week of supportive services and activities as outlined in your customized service plan. Employment may contribute to this 20-hours-per-week requirements. of engagement. Examples of additional services or activities may include:

- Case management
- Counseling
- Treatment
- Volunteering

- Work therapy
- Education
- Job training
- Community-building activities
- Other activities in your customized service plan

PARTICIPANT RESPONSIBILITIES

I understand and agree to:

- Participate actively and in good faith in all required supportive services.
- Complete a minimum of 20 hours per week toward my customized service plan goals and objectives.
- Work collaboratively with program staff to achieve the goals outlined in my Service Plan.
- Provide accurate information and required documentation.
- Notify program staff immediately of any changes in my circumstances that affect my ability to participate.
- Follow all program rules and do my best.

Additional expectations:

- Show up: Attend all scheduled case management meetings and appointments on time.
- Participate actively: Engage fully in all required supportive services.
- Complete your hours: Work toward your goals for the required number of hours each week.
- Communicate: Let your case manager know in advance if you cannot attend a scheduled activity.
- Track your progress: Keep records of your participation hours when asked.
- Be open: Tell us what you need to be successful.
- Stay engaged: Tell us right away if anything changes that affects your ability to participate.

PARTICIPANT ACKNOWLEDGMENT

☐ I have read and understand this Supportive Services Participation Agreement. I understand that participating in supportive services is required and is not optional. I understand that if I do not follow this agreement, I may be removed from the program. I am committed to doing my part to achieve success.

☐ I meet the requirements for exemption to this Supportive Services Participation Agreement and have provided the necessary documentation to demonstrate this.

Participant Printed Full Name

Participant Signature

Date

Program Staff Printed Full Name and Title

Program Staff Signature

Date

FOR PROGRAM STAFF USE ONLY

☐ Participant qualifies for exemption to 20-hour requirement

Reason: ☐ Age 62+ | ☐ Handicap(s) as defined in 24 CFR 8.3 and/or developmental disability as defined under 24 CFR 578.3

☐ Exemption documentation included in participant file

Program Name:

Participant Name: _____

Date: _____



PROGRAM REQUIREMENTS

This project is funded by the U.S. Department of Housing and Urban Development. As a condition of participation in this program, you are required to comply with all program requirements, including mandatory participation in supportive services that are important for you to achieve self-sufficiency. We believe in you and are ready to partner so that you can meet your goals.

CUSTOMIZED SERVICE PLAN REQUIREMENT

In order to be successful in this program your participation in the development of a Service Plan is important. We want to understand your needs and goals and make sure that they are a part of our work together. Within seven days of entry, your case manager will work with you to develop a Customized Service Plan. This plan will identify:

1. Your specific barriers to housing stability and self-sufficiency
2. Supportive services needed to address those barriers
3. Measurable goals and timelines for achieving self-sufficiency
4. Your responsibilities for completing required activities
5. Your personal goals and objectives for continued success.

Once you have completed your Customized Service Plan you must sign it. It's important to review this periodically with your case manager to make sure you are on track for success. Failure to follow your Customized Service Plan may result in your exit from the program.

40-HOUR WEEKLY PARTICIPATION REQUIREMENT

We believe in you and we think you can be independent and self-sufficient. To help you meet these goals, you are required to complete a minimum of 40 hours per week working toward the goals outlined in your Customized Service Plan. These 40 hours may include any combination of the following activities:

- Case management meetings
- Employment search and job training activities
- Educational programs or vocational training
- Substance use treatment or mental health services
- Life skills workshops
- Financial literacy and budgeting classes
- Medical appointments related to identified needs
- Housing search activities



- Other supportive services identified in your Service Plan

Exceptions to the 40-Hour Requirement:

- If you are employed: Your required hours will be reduced proportionately based on your work hours.
- If you are age 62 or older: The 40-hour requirement does not apply.
- If you have a physical disability/impairment or developmental disability (as defined in 24 CFR 582.5, not including substance use disorder): The 40-hour requirement does not apply.

If you qualify for an exception, you must provide documentation to program staff.

WHAT WE EXPECT FROM YOU

To be successful in this program, you must:

- **Show up:** Attend all scheduled case management meetings and appointments on time.
- **Participate actively:** Engage fully in all required supportive services.
- **Complete your hours:** Work toward your goals for the required number of hours each week.
- **Communicate:** Let your case manager know in advance if you cannot attend a scheduled activity.
- **Track your progress:** Keep records of your participation hours when asked.
- **Be open:** Tell us what you need to be successful.
- **Stay engaged:** Tell us right away if anything changes that affects your ability to participate.

PARTICIPANT RESPONSIBILITIES

I understand and agree to:

- Participate actively and in good faith in all required supportive services.
- Complete a minimum of 40 hours per week toward my Customized Service Plan goals (unless I qualify for an exception).
- Work collaboratively with program staff to achieve the goals outlined in my Service Plan.
- Provide accurate information and required documentation.
- Notify program staff immediately of any changes in my circumstances that affect my ability to participate.
- Follow all program rules and do my best.

PARTICIPANT ACKNOWLEDGMENT

I have read and understand this Supportive Services Agreement. I understand that participating in supportive services is required—not optional. I understand that if I do not follow this

agreement, I may be removed from the program. I am committed to doing my part to achieve success.



Participant Signature: _____ Date: _____

Participant Printed Name: _____

Program Staff Signature: _____ Date: _____

Program Staff Printed Name: _____

Title: _____

FOR PROGRAM USE ONLY:

☐ Participant qualifies for exception to 40-hour requirement

Reason: ☐ Age 62+ ☐ Physical/developmental disability ☐ Employed (____ hours/week)

☐ Exception documentation attached to the file

Buena Creek Navigation Center Supportive Services Agreement

Participants who are under the age of 62 and who do not have a documented physical disability or impairment (excluding substance use disorder) are required to participate in a minimum of 20 hours per week of approved activities designed to promote housing stability and self-sufficiency.

Participants are required to attend scheduled case management appointments and actively participate in the supportive services and approved activities identified in their Individual Service Plan which may include one or more of the following:

- Employment (full-time or part-time)
- Education or vocational training
- BCNC programming, including:
 - o Individual case management
 - o Housing navigation
 - o Supportive classes and workshops
 - o Life skills development
 - o Employment preparation and job search activities
 - o Financial literacy or budgeting education
 - o Other supportive services or approved activities identified in the participant's Individual Service Plan (ISP)

Failure to participate in required supportive services or approved activities, without good cause or prior approval from program staff, may result in a review of program eligibility and continued participation in accordance with BCNC program policies.

As a participant in the Buena Creek Navigation Center, I, _____, understand that active participation in supportive services is a condition of continued program participation.

- ☐ Participant is exempt from the 20-hour participation requirement because they are (62 years of age or older / have a documented physical disability or impairment).

By signing below, I acknowledge that I have read, understand, and agree to comply with the requirements of this Supportive Services Agreement.

Signature: _____ Date: _____



**GREEN OAK
RANCH**
MINISTRIES INC

WIN House Supportive Services Agreement

As a resident of the WIN House transitional living program for domestic violence survivors, I agree to participate in twenty hours of work, school, and/or WIN House programming. Eligible activities include but are not limited to the following:

Online or In-person College Courses
Job Certification Courses or Coaching
Case Management
Onsite Classes
Supportive Services, Onsite or Through Partner Organizations
GED Preparation Courses
Behavioral Health Services, Onsite or Through Partner Organizations
Practical Life Skills
Well Parent Coaching
Volunteer Work
Employment

_____ I agree to complete and record 20 participation hours on a weekly basis.

_____ I am over the age of 62 and exempt from the 20 hour requirement.

_____ I have a documented disability and am exempt from the 20 hour requirement.

Printed Name

Signature

Date



THE SALVATION ARMY DOOR OF HOPE

Transitional Housing Agreement

Attachment G: Supportive Services Agreement and Individualized Service Plan

The Supportive Services Agreement and Individualized Service Plan are provided as a separate attachment. They are signed at the first case management meeting and within seven days of entry, respectively.



The Salvation Army
Door of Hope Transitional Living Center
2799 Health Center Drive, San Diego CA 92123

Participant Name: _____

Date: _____

PROGRAM REQUIREMENTS

This project is funded by the U.S. Department of Housing and Urban Development. As a condition of participation in this program, you are required to comply with all program requirements, including mandatory participation in supportive services that are important to you to achieve self-sufficiency. We believe in you and are ready to partner so that you can meet your goals.

INDIVIDUALIZED SERVICE PLAN REQUIREMENT

In order to be successful in this program your participation in the development of a Service Plan is important. We want to understand your needs and goals and make sure that they are a part of our work together. Within seven days of entry, your case manager will work with you to develop an Individualized Service Plan. This plan will identify:

1. Your specific barriers to housing stability and self-sufficiency
2. Supportive services needed to address those barriers
3. Measurable goals and timelines for achieving self-sufficiency
4. Your responsibilities for completing required activities
5. Your personal goals and objectives for continued success.

Once you have completed your Individualized Service Plan you must sign it. It's important to review this periodically with your case manager to make sure you are on track for success. Failure to follow your Individualized Service Plan may result in your exit from the program.

20-HOUR WEEKLY PARTICIPATION REQUIREMENT

We believe in you and we think you can be independent and self-sufficient. To help you meet these goals, you are required to complete a minimum of 20 hours per week working toward the goals outlined in your Individualized Service Plan. These 20 hours may include any combination of the following activities:

- Case management meetings
- Employment search and job training activities
- Educational programs or vocational training
- Substance use treatment or mental health services
- Life skills workshops
- Financial literacy and budgeting classes
- Medical appointments related to identified needs
- Housing search activities

- Other supportive services identified in your Service Plan

Exceptions to the 20-Hour Requirement:

- If you are employed: Your required hours will be reduced proportionately based on your work hours.
- If you are age 62 or older: The 20-hour requirement does not apply.
- If you have a physical disability/impairment or developmental disability (as defined in 24 CFR 582.5, not including substance use disorder): The 20-hour requirement does not apply.

If you qualify for an exception, you must provide documentation to program staff.

WHAT WE EXPECT FROM YOU

To be successful in this program, you must:

- **Show up:** Attend all scheduled case management meetings and appointments on time.
- **Participate actively:** Engage fully in all required supportive services.
- **Complete your hours:** Work toward your goals for the required number of hours each week.
- **Communicate:** Let your case manager know in advance if you cannot attend a scheduled activity.
- **Track your progress:** Keep records of your participation hours when asked.
- **Be open:** Tell us what you need to be successful.
- **Stay engaged:** Tell us right away if anything changes that affects your ability to participate.

PARTICIPANT RESPONSIBILITIES

I understand and agree to:

- Participate actively and in good faith in all required supportive services.
- Complete a minimum of 20 hours per week toward my Individualized Service Plan goals (unless I qualify for an exception).
- Work collaboratively with program staff to achieve the goals outlined in my Service Plan.
- Provide accurate information and required documentation. I will not provide fraudulent or altered documents.
- Notify program staff immediately of any changes in my circumstances that affect my ability to participate.
- Follow all program rules and do my best.

PARTICIPANT ACKNOWLEDGMENT

I have read and understand this Supportive Services Agreement. I understand that participating in supportive services is required—not optional. I understand that not following this agreement may lead to termination of services. I am committed to doing my part to achieve success.

Participant Signature: _____ Date: _____

Participant Printed Name: _____

Program Staff Signature: _____ Date: _____

Program Staff Printed Name: _____

Title: _____

FOR PROGRAM USE ONLY:

☐ Participant qualifies for exception to 20-hour requirement

Reason: ☐ Age 62+ ☐ Physical/developmental disability ☐ Employed (____ hours/week)

☐ Exception documentation attached to the file



YMCA Turning Point | YMCA Turning Point Expansion Transitional Living Program

Occupancy Agreement

Program (check one):

☐ YMCA Turning Point TLP

☐ YMCA Turning Point Expansion TLP

The program checked above is referred to in this agreement as the "Program."

This Agreement is made and entered into as of _____, 20____, between _____ ("Resident") and the YMCA Turning Point or YMCA Turning Point Expansion Transitional Living Program checked above ("Program"). Subject to the terms and conditions of this Agreement and the terms and conditions of Attachment A (Participant Agreement), Program rents to Resident and Resident rents from Program for the residential use of the premises located at:

_____ ("the Unit").

Please read each item carefully and write your initials in the box to the right to show that you understand and agree.

Terms of Occupancy	Initials
1. Limits on Use and Occupancy The Unit is to be used for no other purpose than as a private residence for the Resident and the following minor children: _____ Occupancy by overnight guests is prohibited without the Program's prior written consent and shall be considered a breach of this Agreement.	_____
2. Month-to-Month Term The term of this Agreement shall commence on _____, 20____, and the initial term ends on _____, 20____. After the initial term ends, the Agreement shall continue on a month-to-month basis until terminated as provided in this Agreement. Resident may end this Agreement by giving the Program at least 14 days' written notice (30 days' notice is preferred). The Program may end this Agreement only as provided in the Termination section below. Resident's total stay in the Program may not exceed 24 months.	_____
3. Resident Rules and Regulations Resident acknowledges receipt of, and has read a copy of, the Program's Participant Agreement, which is labeled as Attachment A and attached to and incorporated into this Agreement by reference.	_____



YMCA Turning Point | YMCA Turning Point Expansion

Transitional Living Program

Terms of Occupancy	Initials
4. Rent Rent shall be paid monthly and is due in advance on the 1st day of each month. Monthly rent shall be paid via Buildium or to the Program at 4145 Swift Avenue, #1, San Diego, CA 92104 in the form of a personal check, cashier's check or money order made payable to YMCA of San Diego County. Cash is not accepted. If rent is paid after the 5th day of the month, a late charge of 10% will apply. If a personal check is returned for insufficient funds, the Program may refuse a personal check as payment for rent for a period not to exceed 3 months per returned check. Pursuant to California law, the Resident is liable for the amount of the check plus the assessed late charge for a personal check returned for insufficient funds. Attachment A defines the rent obligation.	
5. Keys Resident will be given one (1) set of keys to the premises including an entry gate/laundry room key, unit key, bedroom key, and mailbox key as applicable.	
6. Utilities Resident shall be responsible for arranging and paying for utility services, except the following, which shall be paid by the Program: SDG&E, Water and Sewer Service, Trash Service.	
7. Prohibition of Subletting and Assignment Resident shall not sublet any part of the Unit or assign this Agreement.	
8. Entry and Inspections The Program may enter the Unit after giving Resident at least 24 hours' written notice, or without notice in an emergency, for purposes including maintenance, cleanliness and safety checks, and required inspections. Resident agrees to cooperate with required HUD physical inspections.	

Resident Rights and Required Disclosures	Initials
9. VAWA Protections The Violence Against Women Act (VAWA) protects victims of domestic violence, dating violence, sexual assault, and stalking. At admission, the Program provides the Resident with the Notice of Occupancy Rights under VAWA and the certification form and will provide both again with any notice of termination. a. The Program may not consider incidents of domestic violence, dating violence, sexual assault, or stalking as serious or repeated violations of the lease or other "good cause" for termination of assistance, tenancy or occupancy rights of the victim of abuse.	



YMCA Turning Point | YMCA Turning Point Expansion

Transitional Living Program

Resident Rights and Required Disclosures	Initials
b. The Program may not consider criminal activity directly relating to abuse, engaged in by a member of a tenant's household or any guest or other person under the tenant's control, cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim or threatened victim of that abuse. c. The Program may request in writing that the victim, or a family member on the victim's behalf, certify that the individual is a victim of abuse and that the Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking, or other documentation as noted on the certification form, be completed and submitted within 14 business days, or an agreed-upon extension date, to receive protection under the VAWA. Failure to provide the certification or other supporting documentation within the specified timeframe may result in eviction. d. Resident may request an emergency transfer under the Program's Emergency Transfer Plan by submitting Form HUD-5383 or another written request. e. Information Resident provides about domestic violence, dating violence, sexual assault, or stalking will be kept confidential and will not be entered into any shared database or disclosed except as permitted by VAWA. f. The Program may bifurcate (divide) this Agreement to remove a household member who engages in criminal activity directly relating to domestic violence, dating violence, sexual assault, or stalking, without penalizing the victim.	
10. Receipt of VAWA Forms Resident acknowledges receipt of Forms HUD-5380 (Notice of Occupancy Rights) and HUD-5382 (Certification Form).	
11. State Database Disclosure Pursuant to Section 290.46 of the Penal Code, information about specified registered sex offenders is made available to the public via an internet website maintained by the Department of Justice at www.meganslaw.ca.gov. Depending on an offender's criminal history, this information will include either the address at which the offender resides or the community of residence and zip code in which he or she resides.	



YMCA Turning Point | YMCA Turning Point Expansion

Transitional Living Program

Resident Rights and Required Disclosures	Initials
12. Termination The Resident or Resident's guests shall not violate any criminal or civil law, ordinance or statute in the use or occupancy of the premises, commit waste or nuisance or interfere with any other person, neighbor or housemate. Such actions may result in the termination of this Agreement as provided herein and by law. The failure of the Resident or Resident's guests to comply with any terms of this Agreement, or any misrepresentation of any material fact on the Resident's Application, are grounds for termination of residency, with appropriate notice to Resident and procedures as required by law.	_____
13. Termination Process Before terminating this Agreement or Resident's participation, the Program will: (1) give Resident written notice clearly stating the reasons for termination, together with Forms HUD-5380 and HUD-5382; (2) give Resident an opportunity to present written or oral objections to a person other than the person who made or approved the termination decision, or that person's subordinate; and (3) give Resident prompt written notice of the final decision. Termination does not bar the Program from providing further assistance to Resident at a later date.	_____
14. No Self-Help Eviction The Program will not use self-help measures such as changing locks, removing Resident's belongings, or shutting off utilities. If Resident does not vacate after termination, the Program will pursue removal only through the legal process required by California law.	_____
15. Nondiscrimination and Reasonable Accommodation The Program does not discriminate on the basis of race, color, national origin, religion, sex, disability, familial status, or any other characteristic protected by federal, state, or local law. Resident may request a reasonable accommodation or modification of any rule, policy, or practice because of a disability by contacting Program staff.	_____

By signing below, Resident and Program agree to the terms of this Occupancy Agreement, including Attachment A (Participant Agreement).

Resident Printed Name: _____

Resident Signature: _____ Date: _____

Staff Signature: _____ Date: _____



Participant Agreement

I. Program Guidelines

- a. I have read and understand the guidelines outlined in the Program Handbook. _____
- b. I am also aware that the Program Handbook is subject to change at any time and I will be notified of these changes. _____
- c. I understand that YMCA Program staff will work with me to individualize my services, and that my services may appear to look different than others in the program. _____
- d. I understand that this is a transitional housing program and that my total stay may not exceed 24 months.

II. Deposit

- a. A one-time refundable deposit of \$150 will be expected. This deposit will cover costs associated with damage to program or apartment complex property, including expenses incurred in replacing damaged furniture, carpet, window screens or doors and unpaid fees owed to the program. I will be required to have paid my deposit by the second consecutive month within the program, or as otherwise arranged with staff, and if I cannot pay by then, staff will work with me on a payment arrangement. _____
- b. I agree to reimburse the program for any property damage caused in excess of the \$150 deposit. _____
- c. I am aware that my deposit, or any portion thereof, will be processed by the YMCA of San Diego County by check and will be ready for me to pick up or sent to me within 21 days after my departure from the program. _____



III. Rent & Fees

- a. Rent must be paid through Buildium or to YMCA program staff (Housing Operations Manager). I agree to pay total program rent on a monthly basis, by the 5th of every month. If I pay after the 5th, a 10% late fee may be applied. I may also request a temporary payment arrangement. If I need to make accommodations to pay rent after the 5th, a request can be made with the HOM or PD. To lessen barriers and hardships, flexibility with payment plans will always be an available option. _____
- b. My monthly occupancy charge (rent) will be calculated and will not exceed the highest of: 30% of my monthly adjusted income, 10% of my monthly income, or the portion of any public welfare assistance specifically designated for housing costs. I will provide documentation of all income (such as pay stubs, benefit letters, or a written self-certification if I have no income or no documents) within my first week of enrollment and whenever my income changes. _____
- c. I understand that my total participant rent may change (increase or decrease) when my income changes, following a recalculation by YMCA program staff. _____
- d. I understand that if/when I become unemployed at any time during my stay in the program, I am required to immediately notify my case manager so that my rent can be recalculated. _____
- e. Monthly rent must be paid through Buildium or by personal check, cashier's check, or money order, never cash. Rent covers the use of an apartment along with the utilities listed in my Occupancy Agreement (SDG&E, water and sewer, and trash). _____
- f. I understand that if I write a check that is returned due to NSF (non-sufficient funds) I must obtain a money order to cover the NSF check and all fees associated with it. I further understand that the program may refuse personal checks for up to 3 months per returned check, as stated in my Occupancy Agreement. _____



- g. I understand that non-payment of program rent is a breach of the program's guidelines, which can lead to my discharge from the program. If I fail to make my rent payment by a second consecutive month I may be discharged from the program. Before any discharge for nonpayment, staff will offer me a payment plan. _____
- h. **OTHER FEES:** I understand that I may be charged a fee for things such as, but not limited to replacement of keys and property damage. _____

IV. General Program Guidelines and Expectations

- a. I understand that participation in supportive services is a requirement of this program. This includes meeting with my case manager and working on the individualized service plan I create with my case manager, which may also include program events, activities, and groups. _____
- b. I understand that information shared with YMCA program staff has limits of confidentiality. Case information will be shared among all YMCA Turning Point TLP program staff to ensure coordinated case management. My information will be entered into the San Diego Homeless Management Information System (HMIS) as described in the HMIS consent I sign, and may be shared without my consent only where required by law (for example, mandated reporting). Information about domestic violence, dating violence, sexual assault, or stalking will be kept confidential as required by the Violence Against Women Act (VAWA). _____
- c. I understand that I am required to engage in at least 20 hours per week of services, activities, education, or employment, as outlined in my service plan. The program goal is full-time productivity by the 60th day of my enrollment. This includes any combination of employment, attending school, volunteering, and working on other self-sufficiency goals. I will work toward a goal of 40 hours a week. _____
- d. I understand that a goal will be to participate in community service/service learning during my stay. _____



- e. I understand that I am required to keep my apartment clean at all times and will need to pass the program's monthly/bi-monthly cleanliness checks. _____
- f. I understand that I am expected to stay every night in my apartment unless I notify YMCA program staff of a previous arrangement. I understand that I will make a formal request for time away exceeding 2 days. 14 days away from the program with no communication may result in an "abandonment of program" exit. _____
- g. I understand that I must meet with the on-site counselor to complete the intake process. Counseling is available to me on a voluntary basis after completing the initial sessions with the counselor. _____
- h. If staff or I identify a substance use or mental health concern that affects my housing stability, I agree to complete an assessment. If treatment or support is recommended, I will work with my case manager and/or therapist to choose treatment options and add them to my service plan. _____
- i. I agree to work with my case manager on a move-on plan for permanent housing, beginning within my first 90 days, with the goal of moving into housing I can sustain on my own income whenever possible. _____

V. Program and Participant Property

- a. I understand that the YMCA Turning Point Transitional Living Program owns all the furnishings provided in the assigned apartment unit. _____
- b. I understand that YMCA program staff may enter my unit and/or bedroom after giving reasonable advance notice (at least 24 hours in writing), or without notice in an emergency. Reasons for entry include but are not limited to: maintenance issues, cleanliness checks, general apartment checks, guest checks, safety checks, and required HUD physical inspections. _____
- c. I agree not to borrow, damage, or rearrange program property or replace program property with my own. _____



d. I understand that the program has the ability to deny or require removal of any item/furniture that poses a safety concern.

e. I understand that I must obtain permission from YMCA program staff to bring in any personal furnishings such as beds, dressers, T.V.'s, etc. **If approved by YMCA program staff, I have brought:**

f. I understand that the program is not responsible for reimbursing any lost, stolen, or damaged personal property.

g. I have been advised of the risks involved in shared apartment living and agree to accept the risks as a condition of entry.

h. I understand that using an apartment mate's food or beverages without his/her permission is not allowed.

i. I understand that it is against program rules to tamper with the unit smoke detectors and fire safety equipment. I agree to immediately notify YMCA program staff of any malfunction.

j. I understand that smoking, drinking alcohol, and drug use is not allowed on the program's property or within a block of program's property. I am also not allowed to have alcohol or drug paraphernalia on the property.

k. I understand that my invited guests and I are forbidden to remove or tamper with window or patio door screens. I understand that the only acceptable means of entry into the apartment is through the front door.

l. I understand that I am not allowed to have weapons on program property.

VI. Guests

a. I understand that my guests cannot be on the property within my first 30-days in the program.



- b. I understand I cannot have guests until I am full-time productive and cleared by my Case Manager. _____
- c. All guests must leave the apartment by 10:00pm. Guests will not be allowed in the apartment until 8:00am. _____
- d. I understand that YMCA program staff reserves the right to limit visitations of my guests at any time. _____
- e. I understand that I am responsible for the behavior of my guests and will be held accountable for their behavior. _____
- f. I understand that guests are not allowed in my apartment or on the premises while unattended. _____

VII. Savings

- a. It is a goal to save a part of my gross monthly income. _____
- b. I agree to establish a savings plan/account within the first 3 months of my residency. _____
- c. I agree to provide proof of my savings to YMCA program staff. _____

VIII. Voluntary Notice of Move-Out

- a. I understand that the program prefers a 30-day notice of my intent to move-out, but that I may submit a 14-day notice of termination to YMCA program staff. _____
- b. I understand that all fees are due and payable prior to departure. _____
- c. I agree to notify staff of my future placement, including address and telephone number (if known), and an emergency contact number. _____
- d. I understand that the entry deposit will be refunded if the following conditions are met:
 - 1. All program rent and outstanding charges are paid.
 - 2. Bedroom and shared space is clean and free of damage.
 - 3. Discharge procedure is followed, including the surrender of program keys, and program property.



4. Walkthrough with YMCA program staff is completed during assigned date and time.

e. I understand that I must follow this procedure in order to receive the refundable deposit.

IX. Grounds for Termination

a. Violent acts or Threats.

b. Health and Safety concern.

c. Breaking the law.

d. Failure to create and/or follow through with rent payment/payment plans.

e. I understand that I am responsible for my guests, therefore any acts of violence or illegal activity by my guests can lead to my program termination. Guest issues and concerns include, but are not limited to, unauthorized guests on-site and safety concerns.

f. Consistent with the Violence Against Women Act (VAWA), I will not be denied assistance or terminated because I am or have been a victim of domestic violence, dating violence, sexual assault, or stalking, or because of criminal activity directly related to that abuse in which I or a member of my household is the victim.

X. Notice to Discharge

a. I understand that in the event of a breach of program guidelines, I may receive a Notice to Discharge from YMCA program staff. The Notice to Discharge will be in writing, will clearly state the reasons for discharge, and will indicate my program discharge date. It will include the HUD-5380 Notice of Occupancy Rights under VAWA and form HUD-5382. I may request a review of the decision by presenting written or oral objections to a staff person other than the person who made or approved the decision (or that person's subordinate). I will receive a prompt written final decision.

b. I agree to abide by the notification and vacate the premises within the period of time outlined on my discharge paperwork.



- c. Once notified of the Notice to Discharge, I agree to leave the program in an orderly and cooperative manner. _____
- d. I agree to surrender all program keys upon receipt of the notification or as requested by YMCA program staff. _____
- e. I understand that failure to return program property, including keys, will result in the loss of the entry deposit, possible theft charges, as well as accruing charges associated with property replacement. _____
- f. I understand that if I do not vacate by the date on my final written decision, the program may pursue my removal only through the legal process required by California law. Personal property left behind after I vacate will be handled as required by California Civil Code. _____
- g. I understand that any outstanding fees (including cleaning fees), damage or theft of program property will be deducted from my \$150 deposit. _____

Nondiscrimination and Reasonable Accommodation

YMCA Turning Point Transitional Living Program does not discriminate on the basis of race, color, national origin, religion, sex, disability, familial status, or any other characteristic protected by federal, state, or local law. I may request a reasonable accommodation or modification of any rule, policy, or practice because of a disability by contacting program staff.

I acknowledge that I received the HUD-5380 Notice of Occupancy Rights under the Violence Against Women Act and form HUD-5382 at the time I signed this agreement.

I understand the guidelines of **YMCA Turning Point Transitional Living Program**. I agree to follow these rules as a condition of participation in the program.

Participant Printed Name: _____



YMCA of San Diego County
Youth & Family Services
Transitional Housing & Youth Development

Participant Signature: _____

Date: _____

Staff Signature: _____

Date: _____

Individual Service Plan

Client Name:

Date:

The overarching goal of Service Coordination is to support residents in maintaining their safe, stable permanent housing.

	Goal	Steps	Completion date	Results
Health (Mental & Physical)		1.	1.	☐ 30 Days
		2.	2.	☐ 60 Days
		3.	3.	☐ 90 Days
	Anticipated Completion Date:			
Finances (Benefits)		1.	1.	☐ 30 Days
		2.	2.	☐ 60 Days
		3.	3.	☐ 90 Days
	Anticipated Completion Date:			
Employment Education & Training		1.	1.	☐ 30 Days
		2.	2.	☐ 60 Days
		3.	3.	☐ 90 Days
	Anticipated Completion Date:			



Transportation	Anticipated Completion Date:	1. 2. 3.	1. 2. 3.	☐ 30 Days ☐ 60 Days ☐ 90 Days ☐ Incomplete
Community Social Enrichment / Other	Anticipated Completion Date:	1. 2. 3.	1. 2. 3.	☐ 30 Days ☐ 60 Days ☐ 90 Days ☐ Incomplete

Client Signature

Client Name (Print)

Date

Staff Signature

Date



Client Intake and Supportive Services Acknowledgment

Permanent supportive housing and tenant-based rental assistance

Client Name:

Intake Date:

Household Members:

Assigned Staff:

1. Program Overview

The program provides long-term rental assistance connected to supportive services funded outside the rental assistance grant. Housing staff assist with eligibility, housing placement, move-in, housing stabilization, and coordination with community services.

Who the program serves: Eligible individuals and families experiencing homelessness who include a household member with a qualifying disability, consistent with the program's current eligibility requirements.

2. What the Program Provides

- Rental assistance and help understanding program rent responsibilities
- Housing search, landlord coordination, and move-in support
- Monthly assessment of service needs and case management
- Regular housing-stability check-ins and an individualized service plan, if desired
- Referrals to behavioral health, medical care, benefits, employment, education, and other community resources
- Help addressing tenancy concerns and maintaining long-term housing stability
- Coordination with the subrecipient, landlord, and community providers as authorized by the client

3. Supportive Services and Client Choice

Supportive services are offered to help you maintain housing and work toward goals you choose. Staff will explain available services, make referrals when requested, and work with you



to develop or update a housing stabilization or service plan. You may accept or decline optional supportive services. Declining an optional service will not, by itself, end your housing assistance.

Certain administrative activities are required to operate your housing assistance. These include providing accurate eligibility and household information, completing required recertifications, reporting required changes, following the lease or occupancy agreement, and cooperating with required housing inspections. Staff will explain any required activity and why it is needed.

4. Client Responsibilities

- Provide complete and accurate information and documents needed to confirm eligibility and administer rental assistance.
- Keep scheduled appointments for required program administration or contact staff to reschedule.
- Work with staff to address housing concerns that could place the tenancy or assistance at risk.
- Tell program staff about changes in income, household composition, contact information, housing status, or other information required for program administration.
- Follow the lease or occupancy agreement, including rent, utility, guest, safety, and property-care requirements that apply to the household.
- Treat staff, property personnel, neighbors, and other clients respectfully and communicate concerns as early as possible.
- Participate in required eligibility, recertification, inspection, and documentation activities needed to continue housing assistance.

5. Service Interests at Intake

Check any areas where you would like information, assistance, or a referral. Checking a box is not a promise to participate.

- | | |
|--|---|
| ☐ Housing stabilization or landlord support | ☐ Benefits and health coverage |
| ☐ Physical health care | ☐ Mental health services |
| ☐ Substance use services | ☐ Employment or education |
| ☐ Transportation | ☐ Food or basic needs |
| ☐ Childcare or parenting support | ☐ Legal services |



☐ Life skills or budgeting

☐ Safety planning or domestic violence services

☐ Other: _____

☐ No services requested today

6. Rights, Accessibility, and Questions

- I may request a reasonable accommodation or communication assistance, including interpretation or accessible formats.
- I may ask questions, receive an explanation of program decisions, and use the program grievance or appeal process.
- My information will be handled according to applicable privacy rules and the forms I authorize.
- I will receive or may request a copy of this signed acknowledgment.

7. Client Acknowledgment and Signatures

By signing below, I confirm that program staff reviewed this form with me in a way I could understand. I had an opportunity to ask questions. I understand the distinction between optional supportive services and required activities needed to administer housing assistance. My signature confirms receipt and review of this information and does not waive any rights under my lease, program rules, or applicable law.

Client Signature

Date

Client Printed Name

Preferred Language

Staff Signature

Date

Staff Printed Name and Title

Interpreter or Accommodation Used, if any



Behavioral Health Services

Staff use only: ☐ Copy provided to client ☐ Filed in client record ☐ Follow-up/referrals documented



Client Intake and Supportive Services Acknowledgment

Permanent supportive housing for women and families

Client Name:

Intake Date:

Household Members:

Assigned Staff:

1. Program Overview

Next Steps provides permanent supportive housing for women and families affected by homelessness and barriers such as substance use, domestic violence, serious mental illness, and poverty. Staff coordinate housing, service planning, benefits access, and connections to onsite and community resources.

Who the program serves: Eligible women and families referred through approved sources, including households that meet the project's current homelessness, disability, and program eligibility requirements.

2. What the Program Provides

- Permanent supportive housing in the Next Steps program
- Monthly assessment of service needs and case management
- Housing search, counseling, move-in, and utility-deposit assistance as applicable
- Childcare and family support, as available
- Education, employment, transportation, food, legal, life-skills, and health-service referrals
- Assistance applying for Medi-Cal and other eligible mainstream benefits

3. Supportive Services and Client Choice

Supportive services are offered to help you maintain housing and work toward goals you choose. Staff will explain available services, make referrals when requested, and work with you to develop or update a housing stabilization or service plan. You may accept or decline optional



supportive services. Declining an optional service will not, by itself, end your housing assistance.

Certain administrative activities are required to operate your housing assistance. These include providing accurate eligibility and household information, completing required recertifications, reporting required changes, following the lease or occupancy agreement, and cooperating with required housing inspections. Staff will explain any required activity and why it is needed.

4. Client Responsibilities

- Provide complete and accurate information and documents needed to confirm eligibility and administer rental assistance.
- Keep scheduled appointments for required program administration or contact staff to reschedule.
- Work with staff to address housing concerns that could place the tenancy or assistance at risk.
- Provide information needed for HMIS and program reporting, subject to applicable consent and privacy requirements.
- Tell program staff about changes in income, household composition, contact information, housing status, or other information required for program administration.
- Follow the lease or occupancy agreement, including rent, utility, guest, safety, and property-care requirements that apply to the household.
- Treat staff, property personnel, neighbors, and other clients respectfully and communicate concerns as early as possible.
- Participate in required eligibility, recertification, inspection, and documentation activities needed to continue housing assistance.

5. Service Interests at Intake

Check any areas where you would like information, assistance, or a referral. Checking a box is not a promise to participate.

- | | |
|--|---|
| ☐ Housing stabilization or landlord support | ☐ Benefits and health coverage |
| ☐ Physical health care | ☐ Mental health services |
| ☐ Substance use services | ☐ Employment or education |
| ☐ Transportation | ☐ Food or basic needs |



☐ Childcare or parenting support

☐ Life skills or budgeting

☐ Other: _____

☐ Legal services

☐ Safety planning or domestic violence services

☐ No services requested today

6. Rights, Accessibility, and Questions

- I may request a reasonable accommodation or communication assistance, including interpretation or accessible formats.
- I may ask questions, receive an explanation of program decisions, and use the program grievance or appeal process.
- My information will be handled according to applicable privacy rules and the forms I authorize.
- I will receive or may request a copy of this signed acknowledgment.

7. Client Acknowledgment and Signatures

By signing below, I confirm that program staff reviewed this form with me in a way I could understand. I had an opportunity to ask questions. I understand the distinction between optional supportive services and required activities needed to administer housing assistance. My signature confirms receipt and review of this information and does not waive any rights under my lease, program rules, or applicable law.

Client Signature

Date

Client Printed Name

Preferred Language

Staff Signature

Date

Staff Printed Name and Title

Interpreter or Accommodation Used, if



any

Staff use only: ☐ Copy provided to client ☐ Filed in client record ☐ Follow-up/referrals documented

Participation Agreement

I, _____ am requesting participation in the Intensive Case Management Services (ICMS) program operated and administered by PATH, in collaboration with the Public Housing Authorities & Property Management. My signature below confirms the following:

1. My participation in the Program is voluntary for me and my household. In connection with my request for services, I agree to:
 - a. Complete a comprehensive psychosocial assessment. (Initials _____)
 - b. Complete and follow a treatment plan. (Initials _____)
 - c. Notify my case manager within one (1) week of any changes to my housing status or income (including my receipt of other benefits or assistance). (Initials _____)
 - d. I agree to provide documentation for voucher/subsidy recertification. (Initials _____)
2. I acknowledge that my housing voucher/subsidy requires me to participate in supportive services. (Initials _____)
3. I understand that the information that I provide to PATH must be complete and accurate to the best of my knowledge. I also understand that I have a continuing obligation to promptly add, complete or correct such information – and that my failure to do so will be considered to be a failure to cooperate that could result in my loss of services.
4. I understand that inappropriate behavior towards PATH staff could also result in my loss of service.
5. I understand that I am not automatically entitled to services. My eligibility for services depends on a variety of factors, some of which are subjective and in the discretion of the DHS, Housing Authorities, etc.
6. My continued eligibility for ICMS services requires that my circumstances be reviewed on a regular basis for no less than one (1) year.
7. If I am ineligible for services, or am dissatisfied with the services I receive, I understand that I can seek review of PATH's decision by following the steps outlined in the PATH Grievance Policy & Procedure. I will begin the Grievance process by discussing my dissatisfaction with my assigned PATH staff member.
8. I understand that the information I share with PATH is confidential and will not be released to any third party without written authorization from me, except when PATH is bound by the law to report cases of suspected or actual child abuse, elder abuse or dependent adult abuse, or serious threat of violence towards myself or others.
9. All records and files are the property of PATH. I have the right to access of information in my service file under the parameters outlined in Rights of Persons Served Policy and Procedure. I will begin this process by making my request in writing to my assigned staff member.

By signing this agreement, I certify that the above information has been explained to me and I am in full understanding of the terms set forth by this agreement.

_____ HOH Participant Name	_____ HOH Participant Signature	_____ Date
_____ Secondary Adult Name	_____ Secondary Adult Signature	_____ Date
Malik Ali	_____ Staff Signature	_____ Date



SERVICE PARTICIPATION AGREEMENT

Program(s):

CRC DV TRANSITIONAL HOUSING

CRC SOCIAL SERVICES TRANSITIONAL HOUSING

Carlsbad PSH

Participant Name: _____

Date: _____

PROGRAM REQUIREMENTS

The housing and services you are choosing to participate in are funded by the U.S. Department of Housing and Urban Development. To be part of this program, you will need to help to create an agreement that you will actively follow while in the program. The goals and actions in your plans are support and achieve self sufficiency you will need to continue to work on and make progress on your plan in order to stay housed in this program.

CUSTOMIZED SERVICE PLAN REQUIREMENT

In order to be successful in this program your participation in the development of a Customized Service Plan is important. Understanding your needs and goals and make sure that they are a part of our work together. Your case manager/ agency staff will work with you to develop a Customized Service Plan. This plan will identify:

1. Your specific barriers to housing stability and self-sufficiency
2. Supportive services needed to address those barriers
3. Measurable goals and timelines for achieving self-sufficiency
4. Your responsibilities for completing required activities
5. Your personal goals and objectives for continued success

Once you have completed your Customized Service Plan you must sign it. It's important to review this periodically with your case manager to make sure you are on track for success. If you do not follow your Customized Service Plan could result in your exit from the program.

40-HOUR WEEKLY PARTICIPATION REQUIREMENT

We believe in you and we think you can be independent and self-sufficient. To help you meet these goals, you are required to complete a minimum of 40 hours per week working toward the goals outlined in your Customized Service Plan. These 40 hours may include any combination many activities:

- Case management meetings
- Employment search and job training activities
- Educational programs or vocational training
- Substance use treatment or mental health services
- Life skills workshops
- Financial literacy and budgeting classes



- Medical appointments related to identified needs
- Housing search activities
- Other supportive services identified in your Service Plan

Exceptions to the 40-Hour Requirement:

- If you are employed: Your required hours will be reduced proportionately based on your work hours.
- If you are age 62 or older: The 40-hour requirement does not apply.
- If you have a physical disability/impairment or developmental disability (as defined in 24 CFR 582.5, not including substance use disorder): The 40-hour requirement does not apply.

If you qualify for an exception, you must provide documentation to program staff.

HOW YOU CAN BE SUCCESSFUL

To be successful in this program, you should:

- **Show up:** Attend all scheduled case management meetings and appointments on time.
- **Participate actively:** Engage fully in all required supportive services.
- **Complete your hours:** Work toward your goals for the required number of hours each week.
- **Communicate:** Let your case manager know in advance if you cannot attend a scheduled activity.
- **Track your progress:** Keep records of your participation hours when asked.
- **Be open:** Tell us what you need to be successful.
- **Stay engaged:** Tell us right away if anything changes that affects your ability to participate.

PARTICIPANT RESPONSIBILITIES

I understand and agree to:

- Participate actively and in good faith in all required supportive services.
- Complete a minimum of 40 hours per week toward my Customized Service Plan goals (unless I qualify for an exception).
- Work collaboratively with program staff to achieve the goals outlined in my Service Plan.
- Provide accurate information and required documentation.
- Notify program staff immediately of any changes in my circumstances that affect my ability to participate.
- Follow all program rules and do my best.

PARTICIPANT ACKNOWLEDGMENT

I have read and understand this Supportive Services Agreement. I understand that participating in supportive services is required—not optional. I understand that if I do not follow this agreement, I may be removed from the program. I am committed to doing my part to achieve success.

Participant Signature: _____ Date: _____

Participant Printed Name: _____



Program Staff Signature: _____ Date: _____

Program Staff Printed Name: _____

Title: _____

FOR PROGRAM USE ONLY:

☐ Participant qualifies for exception to 40-hour requirement

Reason: ☐ Age 62+ ☐ Physical/developmental disability ☐ Employed (____ hours/week)

☐ Exception documentation attached to file



WE SEE YOU INC. (d/b/a We See You San Diego)
PARTICIPANT OCCUPANCY & SUPPORTIVE SERVICES AGREEMENT

Applies to Project: We See You Transitional Housing (operating name: We See You Recovery Home) — HUD CoC Transitional Housing (TH) Program | Blank Template — No Participant or Client Data

1. Parties and Purpose

This Agreement is between We See You Inc. ("We See You" or the "Program") and the undersigned participant ("Participant"). It sets the terms under which the Participant occupies transitional housing at the We See You Recovery Home and participates in the Program's supportive services. This Agreement is an occupancy agreement for participation in a transitional housing program funded in part by the HUD Continuum of Care (CoC) Program (24 CFR Part 578); it is not a lease and does not create a tenancy.

2. Program Description and Term

The We See You Recovery Home is a structured, phased, 12-month transitional housing program for adults recovering from substance use disorder: Phase 1 (months 1–5, intensive residential), Phase 2 (months 6–8, step-down with employment focus), and Phase 3 (months 9–12, semi-independent sober living), followed by 12 months of voluntary Post Program Mentorship aftercare. Occupancy begins on the date below and continues while the Participant remains enrolled and in compliance with this Agreement, up to the CoC Program's 24-month maximum for transitional housing.

Bed Assignment and Occupancy Charge. Beds and rooms are assigned by the Program Director at intake. As Participants advance through the Program, they move to the living areas designated for each phase — Phase 1 (intensive residential), Phase 2 (step-down), and Phase 3 (semi-independent sober living) — so that housing placement reflects and reinforces program progression. The Program Director may reassign a bed or room at their reasonable discretion for operational, health, or safety reasons, with notice to the Participant. Housing at the Recovery Home is provided at NO COST to the Participant: We See You charges no occupancy charge, program fee, or rent of any kind during enrollment, consistent with 24 CFR 578.77.

3. Mandatory Participation in Supportive Services

Transitional housing at the Recovery Home is conditioned on active engagement in the Program's supportive services. By signing, the Participant agrees to:

- Complete an intake assessment and, within 14 days of entry, develop an Individualized Program Plan (IPP) with Program staff, reviewed and updated at least monthly across the Program's ten tracked domains (sobriety, emotional health, physical health, relationship health, life skills, employment, education, legal/financial stability, aftercare readiness, and personal growth).
- Participate in at least 20 hours per week of structured, customized services and program activities (case management, life-skills and financial-literacy training, employment readiness, recovery support, health appointments, and related services), documented

weekly by Program staff. Reduced schedules apply to Participants who are employed, are over age 62, or have a documented physical or developmental disability.

- Meet with their case manager at least weekly.
- Participate in employment readiness and vocational development beginning in Phase 2, with the goal of employment income at exit.
- Work with staff on mainstream benefit enrollment for which they qualify (e.g., Medi-Cal, CalFresh/SNAP, SSI) and accept referrals to community health, behavioral health, and legal resources.
- Develop an aftercare plan before graduation, including housing, income, and recovery supports, and be offered enrollment in Post Program Mentorship.

4. Religious Activities Are Voluntary (24 CFR 5.109)

We See You is a faith-based organization. Some Program community activities — including Awaken Restored meetings, Soul Care, and church attendance — are explicitly religious. Participation in any religious activity is completely voluntary. Housing and all HUD-funded supportive services under this Agreement are never conditioned on attending or participating in any religious practice, and a Participant's decision not to participate will not affect their housing, services, or standing in the Program in any way. Secular alternatives for recovery support meetings are available upon request.

5. Community Standards

The Recovery Home is a sober living environment. The Participant agrees to maintain sobriety on the premises, submit to the Program's drug and alcohol testing policy, follow posted house rules (quiet hours, chores, guest policy, curfew), and treat residents and staff with respect. A relapse is addressed first as a treatment event under the Program's Relapse Support Protocol rather than automatic termination, subject to the safety of the community.

House rules, daily structure, drug and alcohol testing, medication management, and search procedures are governed by the WE SEE YOU Recovery Program Operations Manual, including SOP 4.1 (random 12-panel urinalysis 1–2x per week in Phase 1 and weekly/bi-weekly in Phases 2–3, with breathalyzer testing; refused or diluted samples treated as presumptive positive), SOP 4.3 (house rules and behavioral expectations), the Drug & Alcohol Testing Protocol & Consent, the Medication Management policy (staff-secured medications with a signed administration log), and the Search & Seizure Policy. The Participant receives and signs each applicable policy at intake. Consistent with the Program's testing consent, a positive test result does not automatically result in dismissal: it triggers a same-day meeting, a safety and honesty assessment, and a clinical response with a relapse action plan; exit occurs only where community safety or repeated, dishonest use requires it, followed by a 30-day re-entry review.

6. Data and Privacy

The Participant consents to the collection of intake, service, and outcome information required for Program operation and CoC reporting, including entry into the San Diego Homeless Management Information System (HMIS) under RTFH's privacy standards. A separate HMIS consent form will be provided. Participant records are kept confidential and shared only as authorized or required.

7. Termination, Grievances, and Transfers

This Agreement may be terminated for material, repeated noncompliance after documented warnings and an opportunity to correct, following the Program's written grievance and appeal procedure (a copy is provided at intake). We See You follows due process consistent with 24 CFR 578.91: written notice of the reasons, an opportunity to respond before a neutral decision-maker, and prompt written decision. Participants who are survivors of domestic violence retain all protections under the Violence Against Women Act (VAWA), including emergency transfer rights.

Grievance procedure: a Participant may raise any concern — including complaints about searches, testing, discipline, or services — by submitting a written complaint to the Program Director within 72 hours of the incident; the Program Director responds in writing within 7 business days. If the grievance concerns the Program Director or the Participant disagrees with the response, it may be appealed to the Executive Director, whose review is independent of the original decision-maker. Termination decisions follow the due-process protections described above, and a Participant may be accompanied by a person of their choosing at any grievance meeting.

8. Acknowledgment and Signatures

The Participant acknowledges receiving a copy of this Agreement, the house rules, and the grievance procedure, and agrees to the terms above.

Participant — Signature and Date

Date: _____

Program Director, We See You Recovery Home — Signature and Date

Date: _____

Commitment for Case Management

While engaged in services with Interfaith Community Services, staff will support all participants in navigating difficult medical social services and housing systems; and help with developing personal and social resources.

It is important to build a relationship of trust and cooperation with your case manager. She/he will help you set realistic goals and develop your plan for becoming self-sufficient. She/he will also monitor your program and stay informed on what is happening in your life; this will help you identify obstacles to success and overcome them.

All program participants have the option to engage with case management, and it is highly recommended that you participate. The aforementioned systems in the region are difficult to navigating alone, so the more people supporting you and your family on this journey the better. The case managers are deeply invested in your success and will schedule weekly visits to accomplish your goals. Case management includes such topics as reviewing your budget, your future housing plans, housing search, leasing up procedure, food and clothing, transportation, family relations, social engagement, methods of obtaining vital documentation and life skills.

The services you will receive is designed to help you acquire the skills and resources you need to continue building and maintaining your independence and self-sufficiency.

☐ I do not wish to participate in case management services. I understand that I will not be terminated from housing for failure to participate in supportive services. I also understand case management will remain available during the life of my involvement in this program, and there will remain periodic inspections of the unit.

☐ I do wish to receive case management to best assist me in accomplishing my goals. I understand the roles and commitment of the staff. I understand that I will not be terminated for failure to make progress on a service plan

Comments: _____

 Client Signature

 Date

 Staff Signature

 Date



Housing Program Agreement

Welcome to your new home with Interfaith's Permanent Supportive Housing Program! This program is designed to provide you with the support necessary to maintain your housing and achieve your future goals. One of the benefits of this program is that you are connected with Interfaith Community Services and can take advantage of basic needs, mental health, social services, employment, and Veteran services. You have been assigned a case manager who will be able to connect you with any of these services as well as those which are available in the community.

As a participant in the permanent supportive housing program please be aware that you must:

- ___ Meet with your case manager weekly unless otherwise dictated by your client plan.
- ___ Notify case manager if you will not be able to meet at designated time.
- ___ Participate in the creation of an individualized case plan and update as needed.
- ___ Complete an annual assessments and recertification.
- ___ Report change of income at the time they occur with proof like check stubs, award letters etc.
- ___ Report any changes in telephone and contact information.

I, _____, certify that I have read and understand the above statements. I agree to follow the requirements of the Interfaith Community Services Permanent Supportive Housing Program and know that if I do not it will cause a lapse in additional supportive services.

Client Signature Date

Case Manager Signature Date

CONAM RENTAL CRITERIA TAX CREDIT/HOME/BOND COMMUNITIES

Thank you for choosing **Avocado Court - Transitional** as your potential new home. We are pleased that you have taken an interest in our community, and the following Rental Criteria identify the criteria through which we will process your application. All applicants must meet the following rental criteria for tenancy consideration.

It is the policy of CONAM Management to comply with all applicable federal, state, and local fair housing laws and not discriminate against any person based on race, color, religion, sex, family status, national origin, handicap/disability, or any other basis protected by state or local law.

CONAM Management will consider all reasonable accommodations, modifications, accessible apartments, and auxiliary aid and service requests when necessary to provide a person with a disability an equal opportunity to use and enjoy their apartment home and the common community areas. If you or a member of your household has a disability and requires an accommodation or modification, please contact the leasing office and ask to speak with the Community Manager.

The acceptance of the rental application and associated fees or deposits does not constitute a guarantee of acceptance for housing. All documentation requested during the application process must be submitted immediately. Missing information or an applicant's failure to supply requested documentation within forty-eight (48) hours of the request may result in a rejection of the application. Application processing times vary and can take up to ten (10) business days or longer to process.

Application Fee/Reservation Deposit

An application fee of **\$25.00** is required for each application processed, and cash is **never** accepted. Application fees are non-refundable and cover the costs of obtaining information about you, including but not limited to the cost of using a resident screening/consumer credit service and the reasonable time spent to validate, review, or otherwise process your application.

Credit and background screening is performed instantly upon submission of an application. If an applicant's credit and background screening result in approval or conditional approval, the community will proceed with the remainder verifications to fully approve the application.

Upon notification of credit screening approval and, if applicable, criminal background screening approval, a Reservation Deposit of **\$100.00** is due within twenty-four hours, and a Reservation Deposit and Agreement is executed. Reservation Deposits are non-refundable and retained as liquidated damages when:

- Seventy-two (72) hours have expired since the initial Reservation Deposit Agreement was executed, and the applicant's file is approved

Reservation Deposits are refundable when:

- An applicant's application is pending
- An applicant rejects the security deposit increase based on results found in the application process that would require an increase
- An applicant's application is rejected

Applicants whose application fee or reservation deposit payment is returned as non-sufficient funds will be assessed an NSF fee of **\$20.00**.

Rental Application

All persons eighteen (18) years of age or older and those deemed to be an adult under applicable law with respect to the execution of contracts will be required to complete an application. Only completed and signed applications are processed for consideration.

An applicant's incomplete application submission, intentional misrepresentation, or intentional omission of any information on the application will be a sufficient reason for the rejection of the application.

Occupancy Standards

The occupancy standard per floorplan is as follows:

Bedroom Size	Minimum Persons	Maximum Persons
1 Bedroom	1	3
2 Bedroom	2	5
3 Bedroom	3	7

If you have a special need that you would like us to consider, please contact the leasing office to discuss an accommodation.

Households who do not meet the minimum or maximum occupancy requirement during tenancy may be allowed to remain in the apartment until the lease expires or for a reasonable period after that. This scenario does not apply to a change in occupancy where the household allows unauthorized occupants to reside in the leased premises. All changes in occupancy require applicants to meet the community's rental criteria for tenancy consideration.

Applicant Identification

All applicants will be required to confirm their identity. An applicant whose identity cannot be verified is grounds for rejection.

Credit Screening

Credit screening is performed instantly upon submission of an application. However, the approval of an applicant's credit does not constitute a guarantee of acceptance for housing. All processes identified in this rental criteria outline are performed before application approval is determined.

This community uses a credit screening service to evaluate your consumer credit report. If credit screening is considered, credit scoring is based on actual data and statistics, so all applicants are treated objectively. Your credit report contains information about you and your credit experiences, including your bill-paying history, the number and type of accounts you have, late payments, collection actions, outstanding debt, bankruptcy, and the age of your accounts. Our credit screening provider also checks data sources, including the OFAC Specially Designated Nationals and Blocked Persons List (SDN) Sanctions Search list. Your application will be compared to our predetermined acceptable ranges based on your credit score and related data source information, which are the same for all applications.

Community associates are not permitted to access or discuss the details of an applicant's credit report. If an application results in less than a full approval, applicants are provided the name, address, and telephone number of the consumer reporting agency that provided the consumer information.

Reusable resident screening reports **are not** accepted.

Criminal Background Screening

This community **does** conduct criminal background screening.

If the community conducts criminal background screening, it will be conducted on all persons eighteen (18) years of age or older. Criminal background screening is performed instantly upon the approval or conditional approval of an applicant's credit screening.

Criminal background is only considered when the applicant passes credit screening and meets all other rental criteria for the community. If an applicant does not meet the credit or other rental criteria, the applicant is denied on that basis without consideration of the criminal background.

Criminal background screening results may take up to seventy-two (72) hours. The grounds for which a rental application may be denied include convictions for crimes committed by any applicant or by other occupants (including family members) who plan to live in the community for:

- the manufacture or distribution of controlled substances
- criminal conduct that indicates a demonstrable risk to resident safety and/or property, including felony convictions for violence, assault, sex offenses, kidnapping, terrorism, weapons, and property destruction

Applicants denied based solely on their criminal background screening may submit an appeal within thirty (30) days from receipt of the adverse action notification. CONAM's appeal process includes an individualized assessment where applicants are offered the opportunity to provide information that produces a complete understanding of how past conviction(s) relate to current circumstances. The individualized assessment will take into account relevant mitigating information such as (1) the facts or circumstances surrounding the criminal conduct; (2) the age of the individual at the time the conduct occurred; (3) evidence that the individual has maintained a good tenant history before and after the conviction or conduct; and (4) evidence of rehabilitation efforts. If the individualized assessment results in an approved application, the denied applicant status is reversed.

Credit and Criminal Screening Results/Screening Warnings

- Approve – This means the applicant's credit screening and, if applicable criminal background screening is accepted at the community's established security deposit level. The community will continue with the application process, such as income and other verifications.
- Approve With Conditions – Although the applicant's credit screening and, if applicable criminal background screening is approved, the applicant will be required to pay a higher security deposit based on the results found. Applicants must accept the increase to the security deposit for the community to continue with the application process. Applicants are provided an Adverse Action Notice outlining the reason for the conditional approval.
- Decline – The community may not proceed with the application. Applicants are provided an Adverse Action Notice outlining the reason for the decline. Consideration may be given for extenuating circumstances where this would be required by federal or state law. There may also be a grievance procedure in accordance with applicable state or federal program regulations.
- Screening Warnings – Applicants whose screening returns a security statement or identity warnings, such as name, date of birth, or age warnings, may be required to submit specific documentation to clear the warning. Failure to submit sufficient documentation to clear a warning may result in a rejection of the application.

Household Income/Assets

Residency at this community is limited to households with moderate income and requires that households meet certain income qualifying standards established by the affordable program this community participates in. Household annual gross income must not exceed the affordable program income limits of the apartment home the household is applying for.

All sources of income, including income from assets, must be verified. Every applicant shall provide proof of all income and assets during the application process, which a third party may verify. Gross earned, and unearned annual income for all adult household members and unearned income for all household members is counted.

Rental application documents are valid for 120 days prior to move-in. If any verification is dated 120 days or older and the move-in has not occurred, a new verification must be obtained before the move-in can occur.

Income must be legal and verifiable, and households must meet the income-to-rent ratio of at least **1.5** times the monthly rent amount.

Adding unauthorized household occupants without first obtaining management approval is considered a violation of the lease. Additions to an existing household require full third-party recertification of all existing household members in addition to the income certification for the new member of the household.

If there are any changes to a household's composition or income prior to move-in, management must be informed immediately.

All households will be required to recertify their income and assets annually before their move-in anniversary date. If a household fails to comply, a notice to terminate tenancy will be issued, and the household will be required to move.

Student Eligibility

This community is subject to certain student limitations. If applicable, the student status of each applicant for the current calendar year must be certified and verified. Some students may not qualify for housing under one or more of the programs unless certain exemptions are met. Please check with the leasing office staff for more detail regarding student status program requirements.

Rental History

The affordable program in this community requires that each applicant provide a minimum of **24 months** of rental history on their application.

If an applicant is identified through the screening process as a current or former resident at another CONAM-managed community, the rental history at the CONAM-managed community will be verified. If there is a substantial history of late payments, excluding COVID-related rental debt as that term is defined under Federal or State law, an unlawful detainer judgment in the community owner's favor, or substantial lease violations resulting in the service of a notice, the application will be denied.

Additionally, applications may be denied for the following reason:

- 1) An outstanding debt to a previous landlord
- 2) A public record of an unlawful detainer action or an eviction

3) A breach of a prior lease, including failure to pay rent timely and non-compliance with rules, laws, and regulations

Rent Subsidy Applicants

The application screening for applicants with rent subsidies is processed in adherence with federal, state, and local laws.

Guarantors

This community **does not** accept guarantors.

If the community accepts guarantors, they may be accepted for applicants with income or credit-related failures. A guarantor is added only after determining that the applicant does not qualify on their own. One guarantor per household is permissible unless the community is a student housing community and is required to complete an application and pay an application processing fee.

Guarantors must meet a higher financial standard which includes demonstrating the ability to meet the income-to-rent of the household they are guaranteeing, in addition to their mortgage or rent payment. Guarantor income must exceed **2.5** times the rent. Income must be legal and verifiable to be considered. Guarantor income will be verified in the same manner as an applicant.

Guarantor applications are processed the same as applicants as outlined in this rental criteria. An exception is criminal background screening, where it is not considered as guarantors are not granted tenancy rights.

As a guarantor is a person selected to guarantee the applicant's debt should they default, they are required to execute the Residential Lease Contract and Lease Guaranty Addendum.

Waitlist

The waitlist is maintained according to apartment type based on the number of bedrooms. The waitlist will remain open with the understanding that those who are listed are informed of its length, the policies and procedures for selecting individuals, and how individuals are added to the waitlist.

1. If no apartment homes are available, an eligible individual will be placed on the waitlist.
2. In order to maintain a balanced waitlist, the community may restrict or suspend acceptance and close the waitlist. The community will also update the waitlist by removing those who are no longer interested in or no longer qualify for housing.
3. If the waitlist contains enough names to result in a wait of more than approximately two years' worth of demand, the waitlist is closed. The waitlist may remain closed until it is reduced to half the maximum number of waitlist names.
4. When the waitlist is closed, the community will not maintain a list of names who wish to be notified when the waitlist is reopened.
5. The waitlist is updated approximately every six (6) months.

Waitlist Preferences:

- a) Current residents who need to transfer to a different apartment due to disability
- b) Outside applicants wishing to move into the community
- c) Date of availability for move-in

Liability Insurance Requirements

This community does not require liability insurance. It is encouraged that applicant's purchase a renter's personal liability insurance policy so that personal property is covered if unexpectedly damaged or ruined during the tenancy.

Pets

This community **does not** allow pets. In a community that allows pets, applicants must complete a Pet Application and follow the Pet Acceptance Criteria established for the community. Assistive animals for persons with disabilities are not considered pets but require advanced written approval from management.

Smoking Restrictions

This community **is** a smoke-free community.

This community **offers** smoke-free apartment homes.

If any part or all of the community is smoke-free, the resident, members of the resident's household, and resident guests shall not smoke anywhere designated as smoke-free.

Liquid Filled Furniture

Liquid-filled furniture over thirty (30) gallons must have a \$100,000.00 liability insurance policy in place.

Liquid-filled furniture over one hundred (100) gallons will be restricted to the ground floor.

Reapplying

- A rejected applicant may not reapply for ninety (90) days.
- An applicant who cancels their application may change their mind and reapply, subject to the community's waitlist policy. If more than thirty (30) days pass from the cancelation date, the community will not reinstate the rental application or credit/criminal screening report. A new application and application screening fee will be required, and a new credit/criminal screening report will be generated.

Conduct

An applicant may be rejected for conduct displayed during the tour or application process that would violate the lease policies. Examples are but are not limited to offensive conduct or language on or about the premises, threats or physical injury to another person, or any activity that impairs the physical or social environment of the premises.

Violence Against Women Act (VAWA)

The Violence Against Women Act (VAWA) provides protections for victims of domestic violence, dating violence, sexual assault, or stalking. VAWA protections are available equally to all individuals regardless of sex, gender identity, or sexual orientation. The U.S. Department of Housing and Urban Development (HUD) is the Federal agency that oversees the Multifamily Project-Based Section 8, LIHTC, and HOME Program compliance with VAWA. This notice explains your rights under VAWA.

Protections for Applicants

If you otherwise qualify under the Multifamily Project-Based Section 8, USDA, LIHTC, or HOME program, you cannot be denied admission or assistance because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking. VAWA ensures that victims are not denied housing and housing assistance solely because the person is a victim of a VAWA crime. However, being a victim of a VAWA crime is not a reason to change the eligibility or applicant screening requirements.

Under the Violence Against Women Act, the Notice of Occupancy Rights will be provided to applicants and residents, outlining their rights and obligations under VAWA protection from domestic violence, dating violence, stalking, and sexual assault under the following circumstances:

1. When an individual is denied residency,
2. When an individual is admitted to an apartment, and
3. With any notification of eviction or termination of assistance.

Applicant Consent and Acknowledgement:

I/We acknowledge that the details of our application will be reviewed, and a consumer credit report, public search, and an investigative consumer report that discloses the consumer's character, general reputation, personal characteristics, and mode of living will be obtained. A copy of any such report(s) will be provided upon request.

I/we, the applicant(s), acknowledge that I/we have received a copy of the rental criteria and consent to allow this community, through its designated agents or associates, to collect my information in accordance with state law and the Federal Fair Credit Reporting Act.

(Applicant Signature)Date

(Applicant Signature)Date

(Applicant Signature)Date

(Applicant Signature)Date

The Fair Housing Act prohibits discrimination in the sale, rental, or financing of housing on the basis of race, color, religion, sex, handicap, familial status, or national origin. Federal law also prohibits discrimination on the basis of age. This institution is an equal opportunity provider and employer.



CONAM RENTAL CRITERIA TAX CREDIT/HOME/BOND COMMUNITIES

Thank you for choosing **Las Casitas - Maple** as your potential new home. We are pleased that you have taken an interest in our community, and the following Rental Criteria identify the criteria through which we will process your application. All applicants must meet the following rental criteria for tenancy consideration.

It is the policy of CONAM Management to comply with all applicable federal, state, and local fair housing laws and not discriminate against any person based on race, color, religion, sex, family status, national origin, handicap/disability, or any other basis protected by state or local law.

CONAM Management will consider all reasonable accommodations, modifications, accessible apartments, and auxiliary aid and service requests when necessary to provide a person with a disability an equal opportunity to use and enjoy their apartment home and the common community areas. If you or a member of your household has a disability and requires an accommodation or modification, please contact the leasing office and ask to speak with the Community Manager.

The acceptance of the rental application and associated fees or deposits does not constitute a guarantee of acceptance for housing. All documentation requested during the application process must be submitted immediately. Missing information or an applicant's failure to supply requested documentation within forty-eight (48) hours of the request may result in a rejection of the application. Application processing times vary and can take up to ten (10) business days or longer to process.

Application Fee/Reservation Deposit

An application fee of **\$29.60** is required for each application processed, and cash is **never** accepted. Application fees are non-refundable and cover the costs of obtaining information about you, including but not limited to the cost of using a resident screening/consumer credit service and the reasonable time spent to validate, review, or otherwise process your application.

Credit and background screening is performed instantly upon submission of an application. If an applicant's credit and background screening result in approval or conditional approval, the community will proceed with the remainder verifications to fully approve the application.

Upon notification of credit screening approval and, if applicable, criminal background screening approval, a Reservation Deposit of **\$100.00** is due within twenty-four hours, and a Reservation Deposit and Agreement is executed. Reservation Deposits are non-refundable and retained as liquidated damages when:

- Seventy-two (72) hours have expired since the initial Reservation Deposit Agreement was executed, and the applicant's file is approved

Reservation Deposits are refundable when:

- An applicant's application is pending
- An applicant rejects the security deposit increase based on results found in the application process that would require an increase
- An applicant's application is rejected

Applicants whose application fee or reservation deposit payment is returned as non-sufficient funds will be assessed an NSF fee of **\$25.00**.

Rental Application

All persons eighteen (18) years of age or older and those deemed to be an adult under applicable law with respect to the execution of contracts will be required to complete an application. Only completed and signed applications are processed for consideration.

An applicant's incomplete application submission, intentional misrepresentation, or intentional omission of any information on the application will be a sufficient reason for the rejection of the application.

Occupancy Standards

The occupancy standard per floorplan is as follows:

Bedroom Size	Minimum Persons	Maximum Persons
1 Bedroom	1	3
2 Bedroom	2	5

If you have a special need that you would like us to consider, please contact the leasing office to discuss an accommodation.

Households who do not meet the minimum or maximum occupancy requirement during tenancy may be allowed to remain in

the apartment until the lease expires or for a reasonable period after that. This scenario does not apply to a change in occupancy where the household allows unauthorized occupants to reside in the leased premises. All changes in occupancy require applicants to meet the community's rental criteria for tenancy consideration.

Applicant Identification

All applicants will be required to confirm their identity. An applicant whose identity cannot be verified is grounds for rejection.

Credit Screening

Credit screening is performed instantly upon submission of an application. However, the approval of an applicant's credit does not constitute a guarantee of acceptance for housing. All processes identified in this rental criteria outline are performed before application approval is determined.

This community uses a credit screening service to evaluate your consumer credit report. If credit screening is considered, credit scoring is based on actual data and statistics, so all applicants are treated objectively. Your credit report contains information about you and your credit experiences, including your bill-paying history, the number and type of accounts you have, late payments, collection actions, outstanding debt, bankruptcy, and the age of your accounts. Our credit screening provider also checks data sources, including the OFAC Specially Designated Nationals and Blocked Persons List (SDN) Sanctions Search list. Your application will be compared to our predetermined acceptable ranges based on your credit score and related data source information, which are the same for all applications.

Community associates are not permitted to access or discuss the details of an applicant's credit report. If an application results in less than a full approval, applicants are provided the name, address, and telephone number of the consumer reporting agency that provided the consumer information.

Reusable resident screening reports **are not** accepted.

Criminal Background Screening

This community **does** conduct criminal background screening.

If the community conducts criminal background screening, it will be conducted on all persons eighteen (18) years of age or older. Criminal background screening is performed instantly upon the approval or conditional approval of an applicant's credit screening.

Criminal background is only considered when the applicant passes credit screening and meets all other rental criteria for the community. If an applicant does not meet the credit or other rental criteria, the applicant is denied on that basis without consideration of the criminal background.

Criminal background screening results may take up to seventy-two (72) hours. The grounds for which a rental application may be denied include convictions for crimes committed by any applicant or by other occupants (including family members) who plan to live in the community for:

- the manufacture or distribution of controlled substances
- criminal conduct that indicates a demonstrable risk to resident safety and/or property, including felony convictions for violence, assault, sex offenses, kidnapping, terrorism, weapons, and property destruction

Applicants denied based solely on their criminal background screening may submit an appeal within thirty (30) days from receipt of the adverse action notification. CONAM's appeal process includes an individualized assessment where applicants are offered the opportunity to provide information that produces a complete understanding of how past conviction(s) relate to current circumstances. The individualized assessment will take into account relevant mitigating information such as (1) the facts or circumstances surrounding the criminal conduct; (2) the age of the individual at the time the conduct occurred; (3) evidence that the individual has maintained a good tenant history before and after the conviction or conduct; and (4) evidence of rehabilitation efforts. If the individualized assessment results in an approved application, the denied applicant status is reversed.

Credit and Criminal Screening Results/Screening Warnings

- Approve – This means the applicant's credit screening and, if applicable criminal background screening is accepted at the community's established security deposit level. The community will continue with the application process, such as income and other verifications.
- Approve With Conditions – Although the applicant's credit screening and, if applicable criminal background screening is approved, the applicant will be required to pay a higher security deposit based on the results found. Applicants must accept the increase to the security deposit for the community to continue with the application process. Applicants are provided an Adverse Action Notice outlining the reason for the conditional approval.
- Decline – The community may not proceed with the application. Applicants are provided an Adverse Action Notice outlining the reason for the decline. Consideration may be given for extenuating circumstances where this would be required by federal or state law. There may also be a grievance procedure in accordance with applicable state or federal program regulations.
- Screening Warnings – Applicants whose screening returns a security statement or identity warnings, such as name, date of birth, or age warnings, may be required to submit specific documentation to clear the warning. Failure to submit sufficient documentation to clear a warning may result in a rejection of the application.

Household Income/Assets

Residency at this community is limited to households with moderate income and requires that households meet certain income qualifying standards established by the affordable program this community participates in. Household annual gross income must not exceed the affordable program income limits of the apartment home the household is applying for.

All sources of income, including income from assets, must be verified. Every applicant shall provide proof of all income and assets during the application process, which a third party may verify. Gross earned, and unearned annual income for all adult household members and unearned income for all household members is counted.

Rental application documents are valid for 120 days prior to move-in. If any verification is dated 120 days or older and the move-in has not occurred, a new verification must be obtained before the move-in can occur.

Income must be legal and verifiable, and households must meet the income-to-rent ratio of at least **2.0** times the monthly rent amount.

Adding unauthorized household occupants without first obtaining management approval is considered a violation of the lease. Additions to an existing household require full third-party recertification of all existing household members in addition to the income certification for the new member of the household.

If there are any changes to a household's composition or income prior to move-in, management must be informed immediately.

All households will be required to recertify their income and assets annually before their move-in anniversary date. If a household fails to comply, a notice to terminate tenancy will be issued, and the household will be required to move.

Student Eligibility

This community is subject to certain student limitations. If applicable, the student status of each applicant for the current calendar year must be certified and verified. Some students may not qualify for housing under one or more of the programs unless certain exemptions are met. Please check with the leasing office staff for more detail regarding student status program requirements.

Rental History

The affordable program in this community requires that each applicant provide a minimum of **24 months** of rental history on their application.

If an applicant is identified through the screening process as a current or former resident at another CONAM-managed community, the rental history at the CONAM-managed community will be verified. If there is a substantial history of late payments, excluding COVID-related rental debt as that term is defined under Federal or State law, an unlawful detainer judgment in the community owner's favor, or substantial lease violations resulting in the service of a notice, the application will be denied.

Additionally, applications may be denied for the following reason:

- 1) An outstanding debt to a previous landlord
- 2) A public record of an unlawful detainer action or an eviction

3) A breach of a prior lease, including failure to pay rent timely and non-compliance with rules, laws, and regulations

Rent Subsidy Applicants

The application screening for applicants with rent subsidies is processed in adherence with federal, state, and local laws.

Guarantors

This community **does not** accept guarantors.

If the community accepts guarantors, they may be accepted for applicants with income or credit-related failures. A guarantor is added only after determining that the applicant does not qualify on their own. One guarantor per household is permissible unless the community is a student housing community and is required to complete an application and pay an application processing fee.

Guarantors must meet a higher financial standard which includes demonstrating the ability to meet the income-to-rent of the household they are guaranteeing, in addition to their mortgage or rent payment. Guarantor income must exceed **5.0** times the rent. Income must be legal and verifiable to be considered. Guarantor income will be verified in the same manner as an applicant.

Guarantor applications are processed the same as applicants as outlined in this rental criteria. An exception is criminal background screening, where it is not considered as guarantors are not granted tenancy rights.

As a guarantor is a person selected to guarantee the applicant's debt should they default, they are required to execute the Residential Lease Contract and Lease Guaranty Addendum.

Waitlist

The waitlist is maintained according to apartment type based on the number of bedrooms. The waitlist will remain open with the understanding that those who are listed are informed of its length, the policies and procedures for selecting individuals, and how individuals are added to the waitlist.

1. If no apartment homes are available, an eligible individual will be placed on the waitlist.
2. In order to maintain a balanced waitlist, the community may restrict or suspend acceptance and close the waitlist. The community will also update the waitlist by removing those who are no longer interested in or no longer qualify for housing.
3. If the waitlist contains enough names to result in a wait of more than approximately two years' worth of demand, the waitlist is closed. The waitlist may remain closed until it is reduced to half the maximum number of waitlist names.
4. When the waitlist is closed, the community will not maintain a list of names who wish to be notified when the waitlist is reopened.
5. The waitlist is updated approximately every six (6) months.

Waitlist Preferences:

- a) Current residents who need to transfer to a different apartment due to disability
- b) Outside applicants wishing to move into the community
- c) Date of availability for move-in

Liability Insurance Requirements

This community does not require liability insurance. It is encouraged that applicant's purchase a renter's personal liability insurance policy so that personal property is covered if unexpectedly damaged or ruined during the tenancy.

Pets

This community **does not** allow pets. In a community that allows pets, applicants must complete a Pet Application and follow the Pet Acceptance Criteria established for the community. Assistive animals for persons with disabilities are not considered pets but require advanced written approval from management.

Smoking Restrictions

This community **is** a smoke-free community.

This community **offers** smoke-free apartment homes.

If any part or all of the community is smoke-free, the resident, members of the resident's household, and resident guests shall not smoke anywhere designated as smoke-free.

Liquid Filled Furniture

Liquid-filled furniture over thirty (30) gallons must have a \$100,000.00 liability insurance policy in place.

Liquid-filled furniture over one hundred (100) gallons will be restricted to the ground floor.

Reapplying

- A rejected applicant may not reapply for ninety (90) days.
- An applicant who cancels their application may change their mind and reapply, subject to the community's waitlist policy. If more than thirty (30) days pass from the cancelation date, the community will not reinstate the rental application or credit/criminal screening report. A new application and application screening fee will be required, and a new credit/criminal screening report will be generated.

Conduct

An applicant may be rejected for conduct displayed during the tour or application process that would violate the lease policies. Examples are but are not limited to offensive conduct or language on or about the premises, threats or physical injury to another person, or any activity that impairs the physical or social environment of the premises.

Violence Against Women Act (VAWA)

The Violence Against Women Act (VAWA) provides protections for victims of domestic violence, dating violence, sexual assault, or stalking. VAWA protections are available equally to all individuals regardless of sex, gender identity, or sexual orientation. The U.S. Department of Housing and Urban Development (HUD) is the Federal agency that oversees the Multifamily Project-Based Section 8, LIHTC, and HOME Program compliance with VAWA. This notice explains your rights under VAWA.

Protections for Applicants

If you otherwise qualify under the Multifamily Project-Based Section 8, USDA, LIHTC, or HOME program, you cannot be denied admission or assistance because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking. VAWA ensures that victims are not denied housing and housing assistance solely because the person is a victim of a VAWA crime. However, being a victim of a VAWA crime is not a reason to change the eligibility or applicant screening requirements.

Under the Violence Against Women Act, the Notice of Occupancy Rights will be provided to applicants and residents, outlining their rights and obligations under VAWA protection from domestic violence, dating violence, stalking, and sexual assault under the following circumstances:

1. When an individual is denied residency,
2. When an individual is admitted to an apartment, and
3. With any notification of eviction or termination of assistance.

Applicant Consent and Acknowledgement:

I/We acknowledge that the details of our application will be reviewed, and a consumer credit report, public search, and an investigative consumer report that discloses the consumer's character, general reputation, personal characteristics, and mode of living will be obtained. A copy of any such report(s) will be provided upon request.

I/we, the applicant(s), acknowledge that I/we have received a copy of the rental criteria and consent to allow this community, through its designated agents or associates, to collect my information in accordance with state law and the Federal Fair Credit Reporting Act.

_____	_____	_____	_____
(Applicant Signature)	Date	(Applicant Signature)	Date

_____	_____	_____	_____
(Applicant Signature)	Date	(Applicant Signature)	Date

The Fair Housing Act prohibits discrimination in the sale, rental, or financing of housing on the basis of race, color, religion, sex, handicap, familial status, or national origin. Federal law also prohibits discrimination on the basis of age. This institution is an equal opportunity provider and employer.



CONAM RENTAL CRITERIA TAX CREDIT/HOME/BOND COMMUNITIES

Thank you for choosing **Manzanita - Transitional** as your potential new home. We are pleased that you have taken an interest in our community, and the following Rental Criteria identify the criteria through which we will process your application. All applicants must meet the following rental criteria for tenancy consideration.

It is the policy of CONAM Management to comply with all applicable federal, state, and local fair housing laws and not discriminate against any person based on race, color, religion, sex, family status, national origin, handicap/disability, or any other basis protected by state or local law.

CONAM Management will consider all reasonable accommodations, modifications, accessible apartments, and auxiliary aid and service requests when necessary to provide a person with a disability an equal opportunity to use and enjoy their apartment home and the common community areas. If you or a member of your household has a disability and requires an accommodation or modification, please contact the leasing office and ask to speak with the Community Manager.

The acceptance of the rental application and associated fees or deposits does not constitute a guarantee of acceptance for housing. All documentation requested during the application process must be submitted immediately. Missing information or an applicant's failure to supply requested documentation within forty-eight (48) hours of the request may result in a rejection of the application. Application processing times vary and can take up to ten (10) business days or longer to process.

Application Fee/Reservation Deposit

An application fee of **\$25.00** is required for each application processed, and cash is **never** accepted. Application fees are non-refundable and cover the costs of obtaining information about you, including but not limited to the cost of using a resident screening/consumer credit service and the reasonable time spent to validate, review, or otherwise process your application.

Credit and background screening is performed instantly upon submission of an application. If an applicant's credit and background screening result in approval or conditional approval, the community will proceed with the remainder verifications to fully approve the application.

Upon notification of credit screening approval and, if applicable, criminal background screening approval, a Reservation Deposit of **\$100.00** is due within twenty-four hours, and a Reservation Deposit and Agreement is executed. Reservation Deposits are non-refundable and retained as liquidated damages when:

- Seventy-two (72) hours have expired since the initial Reservation Deposit Agreement was executed, and the applicant's file is approved

Reservation Deposits are refundable when:

- An applicant's application is pending
- An applicant rejects the security deposit increase based on results found in the application process that would require an increase
- An applicant's application is rejected

Applicants whose application fee or reservation deposit payment is returned as non-sufficient funds will be assessed an NSF fee of **\$20.00**.

Rental Application

All persons eighteen (18) years of age or older and those deemed to be an adult under applicable law with respect to the execution of contracts will be required to complete an application. Only completed and signed applications are processed for consideration.

An applicant's incomplete application submission, intentional misrepresentation, or intentional omission of any information on the application will be a sufficient reason for the rejection of the application.

Occupancy Standards

The occupancy standard per floorplan is as follows:

Bedroom Size	Minimum Persons	Maximum Persons
1 Bedroom	1	3
2 Bedroom	2	5
3 Bedroom	3	7

If you have a special need that you would like us to consider, please contact the leasing office to discuss an accommodation.

Households who do not meet the minimum or maximum occupancy requirement during tenancy may be allowed to remain in the apartment until the lease expires or for a reasonable period after that. This scenario does not apply to a change in occupancy where the household allows unauthorized occupants to reside in the leased premises. All changes in occupancy require applicants to meet the community's rental criteria for tenancy consideration.

Applicant Identification

All applicants will be required to confirm their identity. An applicant whose identity cannot be verified is grounds for rejection.

Credit Screening

Credit screening is performed instantly upon submission of an application. However, the approval of an applicant's credit does not constitute a guarantee of acceptance for housing. All processes identified in this rental criteria outline are performed before application approval is determined.

This community uses a credit screening service to evaluate your consumer credit report. If credit screening is considered, credit scoring is based on actual data and statistics, so all applicants are treated objectively. Your credit report contains information about you and your credit experiences, including your bill-paying history, the number and type of accounts you have, late payments, collection actions, outstanding debt, bankruptcy, and the age of your accounts. Our credit screening provider also checks data sources, including the OFAC Specially Designated Nationals and Blocked Persons List (SDN) Sanctions Search list. Your application will be compared to our predetermined acceptable ranges based on your credit score and related data source information, which are the same for all applications.

Community associates are not permitted to access or discuss the details of an applicant's credit report. If an application results in less than a full approval, applicants are provided the name, address, and telephone number of the consumer reporting agency that provided the consumer information.

Reusable resident screening reports **are not** accepted.

Criminal Background Screening

This community **does** conduct criminal background screening.

If the community conducts criminal background screening, it will be conducted on all persons eighteen (18) years of age or older. Criminal background screening is performed instantly upon the approval or conditional approval of an applicant's credit screening.

Criminal background is only considered when the applicant passes credit screening and meets all other rental criteria for the community. If an applicant does not meet the credit or other rental criteria, the applicant is denied on that basis without consideration of the criminal background.

Criminal background screening results may take up to seventy-two (72) hours. The grounds for which a rental application may be denied include convictions for crimes committed by any applicant or by other occupants (including family members) who plan to live in the community for:

- the manufacture or distribution of controlled substances
- criminal conduct that indicates a demonstrable risk to resident safety and/or property, including felony convictions for violence, assault, sex offenses, kidnapping, terrorism, weapons, and property destruction

Applicants denied based solely on their criminal background screening may submit an appeal within thirty (30) days from receipt of the adverse action notification. CONAM's appeal process includes an individualized assessment where applicants are offered the opportunity to provide information that produces a complete understanding of how past conviction(s) relate to current circumstances. The individualized assessment will take into account relevant mitigating information such as (1) the facts or circumstances surrounding the criminal conduct; (2) the age of the individual at the time the conduct occurred; (3) evidence that the individual has maintained a good tenant history before and after the conviction or conduct; and (4) evidence of rehabilitation efforts. If the individualized assessment results in an approved application, the denied applicant status is reversed.

Credit and Criminal Screening Results/Screening Warnings

- Approve – This means the applicant's credit screening and, if applicable criminal background screening is accepted at the community's established security deposit level. The community will continue with the application process, such as income and other verifications.
- Approve With Conditions – Although the applicant's credit screening and, if applicable criminal background screening is approved, the applicant will be required to pay a higher security deposit based on the results found. Applicants must accept the increase to the security deposit for the community to continue with the application process. Applicants are provided an Adverse Action Notice outlining the reason for the conditional approval.
- Decline – The community may not proceed with the application. Applicants are provided an Adverse Action Notice outlining the reason for the decline. Consideration may be given for extenuating circumstances where this would be required by federal or state law. There may also be a grievance procedure in accordance with applicable state or federal program regulations.
- Screening Warnings – Applicants whose screening returns a security statement or identity warnings, such as name, date of birth, or age warnings, may be required to submit specific documentation to clear the warning. Failure to submit sufficient documentation to clear a warning may result in a rejection of the application.

Household Income/Assets

Residency at this community is limited to households with moderate income and requires that households meet certain income qualifying standards established by the affordable program this community participates in. Household annual gross income must not exceed the affordable program income limits of the apartment home the household is applying for.

All sources of income, including income from assets, must be verified. Every applicant shall provide proof of all income and assets during the application process, which a third party may verify. Gross earned, and unearned annual income for all adult household members and unearned income for all household members is counted.

Rental application documents are valid for 120 days prior to move-in. If any verification is dated 120 days or older and the move-in has not occurred, a new verification must be obtained before the move-in can occur.

Income must be legal and verifiable, and households must meet the income-to-rent ratio of at least **1.5** times the monthly rent amount.

Adding unauthorized household occupants without first obtaining management approval is considered a violation of the lease. Additions to an existing household require full third-party recertification of all existing household members in addition to the income certification for the new member of the household.

If there are any changes to a household's composition or income prior to move-in, management must be informed immediately.

All households will be required to recertify their income and assets annually before their move-in anniversary date. If a household fails to comply, a notice to terminate tenancy will be issued, and the household will be required to move.

Student Eligibility

This community is subject to certain student limitations. If applicable, the student status of each applicant for the current calendar year must be certified and verified. Some students may not qualify for housing under one or more of the programs unless certain exemptions are met. Please check with the leasing office staff for more detail regarding student status program requirements.

Rental History

The affordable program in this community requires that each applicant provide a minimum of **24 months** of rental history on their application.

If an applicant is identified through the screening process as a current or former resident at another CONAM-managed community, the rental history at the CONAM-managed community will be verified. If there is a substantial history of late payments, excluding COVID-related rental debt as that term is defined under Federal or State law, an unlawful detainer judgment in the community owner's favor, or substantial lease violations resulting in the service of a notice, the application will be denied.

Additionally, applications may be denied for the following reason:

- 1) An outstanding debt to a previous landlord
- 2) A public record of an unlawful detainer action or an eviction

3) A breach of a prior lease, including failure to pay rent timely and non-compliance with rules, laws, and regulations

Rent Subsidy Applicants

The application screening for applicants with rent subsidies is processed in adherence with federal, state, and local laws.

Guarantors

This community **does not** accept guarantors.

If the community accepts guarantors, they may be accepted for applicants with income or credit-related failures. A guarantor is added only after determining that the applicant does not qualify on their own. One guarantor per household is permissible unless the community is a student housing community and is required to complete an application and pay an application processing fee.

Guarantors must meet a higher financial standard which includes demonstrating the ability to meet the income-to-rent of the household they are guaranteeing, in addition to their mortgage or rent payment. Guarantor income must exceed **5.0** times the rent. Income must be legal and verifiable to be considered. Guarantor income will be verified in the same manner as an applicant.

Guarantor applications are processed the same as applicants as outlined in this rental criteria. An exception is criminal background screening, where it is not considered as guarantors are not granted tenancy rights.

As a guarantor is a person selected to guarantee the applicant's debt should they default, they are required to execute the Residential Lease Contract and Lease Guaranty Addendum.

Waitlist

The waitlist is maintained according to apartment type based on the number of bedrooms. The waitlist will remain open with the understanding that those who are listed are informed of its length, the policies and procedures for selecting individuals, and how individuals are added to the waitlist.

1. If no apartment homes are available, an eligible individual will be placed on the waitlist.
2. In order to maintain a balanced waitlist, the community may restrict or suspend acceptance and close the waitlist. The community will also update the waitlist by removing those who are no longer interested in or no longer qualify for housing.
3. If the waitlist contains enough names to result in a wait of more than approximately two years' worth of demand, the waitlist is closed. The waitlist may remain closed until it is reduced to half the maximum number of waitlist names.
4. When the waitlist is closed, the community will not maintain a list of names who wish to be notified when the waitlist is reopened.
5. The waitlist is updated approximately every six (6) months.

Waitlist Preferences:

- a) Current residents who need to transfer to a different apartment due to disability
- b) Outside applicants wishing to move into the community
- c) Date of availability for move-in

Liability Insurance Requirements

This community does not require liability insurance. It is encouraged that applicant's purchase a renter's personal liability insurance policy so that personal property is covered if unexpectedly damaged or ruined during the tenancy.

Pets

This community **does not** allow pets. In a community that allows pets, applicants must complete a Pet Application and follow the Pet Acceptance Criteria established for the community. Assistive animals for persons with disabilities are not considered pets but require advanced written approval from management.

Smoking Restrictions

This community **is** a smoke-free community.

This community **offers** smoke-free apartment homes.

If any part or all of the community is smoke-free, the resident, members of the resident's household, and resident guests shall not smoke anywhere designated as smoke-free.

Liquid Filled Furniture

Liquid-filled furniture over thirty (30) gallons must have a \$100,000.00 liability insurance policy in place.

Liquid-filled furniture over one hundred (100) gallons will be restricted to the ground floor.

Reapplying

- A rejected applicant may not reapply for ninety (90) days.
- An applicant who cancels their application may change their mind and reapply, subject to the community's waitlist policy. If more than thirty (30) days pass from the cancelation date, the community will not reinstate the rental application or credit/criminal screening report. A new application and application screening fee will be required, and a new credit/criminal screening report will be generated.

Conduct

An applicant may be rejected for conduct displayed during the tour or application process that would violate the lease policies. Examples are but are not limited to offensive conduct or language on or about the premises, threats or physical injury to another person, or any activity that impairs the physical or social environment of the premises.

Violence Against Women Act (VAWA)

The Violence Against Women Act (VAWA) provides protections for victims of domestic violence, dating violence, sexual assault, or stalking. VAWA protections are available equally to all individuals regardless of sex, gender identity, or sexual orientation. The U.S. Department of Housing and Urban Development (HUD) is the Federal agency that oversees the Multifamily Project-Based Section 8, LIHTC, and HOME Program compliance with VAWA. This notice explains your rights under VAWA.

Protections for Applicants

If you otherwise qualify under the Multifamily Project-Based Section 8, USDA, LIHTC, or HOME program, you cannot be denied admission or assistance because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking. VAWA ensures that victims are not denied housing and housing assistance solely because the person is a victim of a VAWA crime. However, being a victim of a VAWA crime is not a reason to change the eligibility or applicant screening requirements.

Under the Violence Against Women Act, the Notice of Occupancy Rights will be provided to applicants and residents, outlining their rights and obligations under VAWA protection from domestic violence, dating violence, stalking, and sexual assault under the following circumstances:

1. When an individual is denied residency,
2. When an individual is admitted to an apartment, and
3. With any notification of eviction or termination of assistance.

Applicant Consent and Acknowledgement:

I/We acknowledge that the details of our application will be reviewed, and a consumer credit report, public search, and an investigative consumer report that discloses the consumer's character, general reputation, personal characteristics, and mode of living will be obtained. A copy of any such report(s) will be provided upon request.

I/we, the applicant(s), acknowledge that I/we have received a copy of the rental criteria and consent to allow this community, through its designated agents or associates, to collect my information in accordance with state law and the Federal Fair Credit Reporting Act.

(Applicant Signature)

Date

(Applicant Signature)

Date

(Applicant Signature)

Date

(Applicant Signature)

Date

The Fair Housing Act prohibits discrimination in the sale, rental, or financing of housing on the basis of race, color, religion, sex, handicap, familial status, or national origin. Federal law also prohibits discrimination on the basis of age. This institution is an equal opportunity provider and employer.



YHDP R2 Transitional Housing

Participant Supportive Services Agreement Template

Complete and review against current program policies before use.

Participant and Program Information

Preferred name / pronouns (optional):

Program / subrecipient:

Case manager:

Enrollment date:

Preferred contact method and safe times:

Purpose

This agreement describes the participant-centered supportive services available through the YHDP R2 Transitional Housing project. The project provides safe, time-limited transitional housing and tailored services intended to help youth and young adults stabilize, increase income, build independent-living skills, strengthen permanent connections, and move to permanent housing.

This agreement is a service-planning tool. It does not replace a lease, occupancy agreement, participant handbook, privacy notice, or any other program document that may apply.

Our Shared Approach

Services will be youth-centered, trauma-informed, strengths-based, culturally responsive, and guided by participant choice. The participant is an active partner in identifying goals, selecting supports, and updating the plan as needs, preferences, or circumstances change.

The program will provide clear information about available options, respect confidentiality and informed consent, and use supportive, nonpunitive communication. The program will not require a participant to disclose personal information beyond what is necessary for eligibility, safety, program operations, or services the participant chooses to receive.

Participant Service and Housing Stability Plan

Use this page to identify the participant's goals and the supports selected together with program staff.

Assessment and Plan

At enrollment, the participant and case manager will complete a strengths-based assessment. The plan will address the participant's priorities, strengths, immediate needs, barriers to housing stability, and goals. The plan will be reviewed at least every 90 days and sooner when circumstances change.

Priority area	Participant goal / next step	Selected support or referral	Target review date
Housing and permanent-housing transition			
Income, benefits, education, or employment			
Health, wellness, and recovery			
Life skills, transportation, or basic needs			
Family, community, and permanent connections			

If an appointment is missed or a participant needs a change, the program will use supportive outreach and offer reasonable alternatives such as another time, location, communication method, or provider when available

Usual case-management contact cadence

(normally weekly; adjust as appropriate):



Preferred meeting location / remote option: _____

Alternative contact person or communication

Available Supportive Services

Supports are selected based on the participant's needs and preferences. Availability may depend on eligibility, funding, partner capacity, and participant consent.

Services the Participant May Choose or Request

Housing and stability	Case management; housing stability planning; housing navigation; landlord engagement; housing search and counseling; moving-cost assistance; deposits and utility assistance; transition planning.
Education and economic mobility	Education services; employment assistance and job training; vocational support; benefits advocacy; financial literacy; budgeting and tenancy skills.
Health and well-being	Mental-health referrals; outpatient-health referrals; substance-use treatment referrals; childcare referrals; food and transportation assistance; support connecting to community resources.
Connections and safety	Family counseling; conflict resolution; parenting supports; relative or kinship-caregiver resources; legal-service referrals; mediation; support building positive permanent connections.

Participant and Program Commitments

The participant agrees to:

- Participate in developing and updating an individualized Service and Housing Stability Plan.
- Share preferences, goals, concerns, and changes that may affect housing stability, to the extent the participant is comfortable doing so.
- Meet with the case manager according to the contact plan and communicate when a different arrangement is needed.
- Work with staff on goals and selected services that support a safe transition to permanent housing.

The program agrees to:

- Provide or coordinate the supports selected in the participant's plan, subject to availability and eligibility.



- Review service needs at least every 90 days and adjust the plan when needs, goals, or circumstances change.
- Offer referrals, warm handoffs, and follow-up to help connect the participant with outside services.
- Use trauma-informed, respectful, strengths-based, and culturally responsive practices.

Participation Requirement and VAWA Protection

This page is part of the Participant Supportive Services Agreement and should be reviewed before the acknowledgment and signature page.

Required Participation in Supportive Services

As a condition of participation in the YHDP R2 Transitional Housing project, the participant agrees to take part in the supportive services identified in the participant's individualized Service and Housing Stability Plan. These services include regular case management, normally weekly unless the individual plan identifies a different cadence, and other services or referrals selected to support housing stability and a transition to permanent housing.

The participant and case manager will develop the plan together. The plan will identify goals, selected services, anticipated contact frequency, and next steps toward permanent housing. It will be reviewed at least every 90 days and earlier when the participant's housing, income, employment, education, health, safety, or other needs change.

Participation requirements will be applied through a youth-centered, trauma-informed, strengths-based, and culturally responsive approach. Program staff will make reasonable efforts to address barriers to participation and offer alternative meeting times, locations, communication methods, or supports when available.

VAWA Protection

Consistent with 24 CFR 5.2005(b)(1), assistance may not be denied to an applicant or participant on the basis of, or as a direct result of, the fact that the applicant or participant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, if the applicant or participant otherwise qualifies for admission, assistance, participation, or occupancy.

Program staff will follow applicable confidentiality, safety, reasonable-accommodation, and emergency-transfer procedures when responding to a participant's safety needs. This agreement does not replace

any separate VAWA notice, emergency-transfer plan, lease, occupancy agreement, privacy notice, or grievance process.

Acknowledgment: By signing the following page, the participant acknowledges receipt of this Participation Requirement and VAWA Protection page as part of the agreement.

Rights, Plan Review, and Acknowledgment

Participant Rights and Privacy

- To receive information about available services, program expectations, and referral options in clear and understandable language.
- To participate in service-planning decisions and express preferences about services, providers, meeting formats, and goals.
- To be treated with dignity and respect, without discrimination or harassment.
- To ask questions, request reasonable accommodations, raise concerns, and receive information about the program's grievance or complaint process.
- To receive information about confidentiality, HMIS, releases of information, and any limits to privacy before signing separate consent forms.

This template does not itself authorize sharing of protected information. Any HMIS participation, release of information, or communication with an outside provider must follow the applicable consent and privacy process.

Plan Review and Transition

The participant and case manager will review this agreement and the Service and Housing Stability Plan at least every 90 days, and sooner if there is a significant change in housing, income, employment, education, health, safety, family circumstances, or other needs. As the participant prepares for permanent housing, the plan will include transition steps, housing search or navigation support, connections to ongoing resources, and warm handoffs when appropriate.

Next plan review date:

Transition / permanent-housing steps identified today:



Acknowledgment

By signing below, the participant confirms that they have reviewed this agreement, had an opportunity to ask questions, and participated in developing the initial Service and Housing Stability Plan. The participant understands that this document may be updated as needs and goals change.

Participant signature

Date

Participant printed name

Case manager signature

Case manager printed name

Date

September 25, 2026

FY2026 CoC Application Attachment 1C 10

Evidence of Coordination and Non-Interference with Local Public Safety Efforts

San Diego City and County Continuum of Care

This packet provides the Collaborative Applicant's certified statement, a concise evidence matrix, and supporting records demonstrating how the CoC cooperates with and does not impede lawful local efforts related to encampments, public illicit drug use, danger to self or others, and information sharing consistent with applicable sex-offender registration and notification requirements.

Certification

On behalf of the Regional Task Force on Homelessness (RTFH), the Collaborative Applicant for the San Diego City and County Continuum of Care (CoC), I certify that the CoC cooperates with local jurisdictions, Caltrans, law enforcement, fire and emergency medical services, behavioral-health crisis responders, courts, public-health agencies, and other first responders to advance public safety and connect individuals experiencing homelessness with appropriate services.

The CoC coordinates regional outreach through written Street Outreach Standards and regional unsheltered-homelessness policies. Outreach providers conduct voluntary, trauma-informed, housing-focused engagement and support referrals and warm handoffs. RTFH and the County co-facilitate the quarterly Regional Homeless Outreach Meeting (RHOM), which brings together outreach teams, local jurisdictions, County programs, housing providers, and health and behavioral-health partners to share operational information and align regional efforts. Records retained for the prior 12 months document meetings on November 4, 2025, March 3, 2026, June 9, 2026, and September 8, 2026; recorded attendance was 111 participants at each of the March and June meetings and 113 at the September meeting. Law enforcement and other authorized agencies retain responsibility for lawful enforcement, scene safety, emergency response, involuntary evaluation decisions, criminal investigations, and sex-offender registration and public notification. CoC providers do not direct or obstruct those lawful functions.

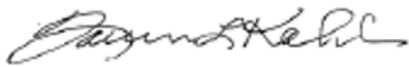
The CoC also coordinates implementation of State Encampment Resolution Funding initiatives. This includes the State Route 94 initiative with the City of Lemon Grove and Caltrans and the joint State Route 78 and Buena Vista Creek initiative with the Cities of Oceanside and Carlsbad. These efforts use phased by-name-list outreach, service coordination, housing navigation, rental assistance, site resolution, and continued stabilization support.



Certification Continued

CoC providers protect HMIS, clinical, and survivor information and disclose personally identifying or location information only with valid consent or when disclosure is authorized or required by law. This privacy practice does not prevent required reporting, emergency response, lawful registration, or verification through authorized public-safety systems.

I certify, to the best of my knowledge after reasonable inquiry, that this statement and the accompanying matrix accurately describe current CoC coordination practices as of the date signed.



Tamera Kohler, Chief Executive Officer

September 28, 2026

Date

Evidence Matrix

Public safety objective	CoC cooperation and non-interference	Evidence
Clearing tents and encampments	RTFH receives advance Caltrans District 11 schedules and distributes or uses them for coordinated outreach. Street Outreach Standards §§10 and 33 separate outreach from enforcement, direct intensive outreach before planned closures, and support referrals when people are displaced. The regional policy uses a Clearance with Support framework while recognizing law enforcement's authority to close unsafe sites. ERF partnerships with Lemon Grove and with Oceanside/Carlsbad operationalize this coordination through phased by-name-list outreach, housing placement, stabilization, and site resolution. RHOM provides a recurring regional forum for outreach teams, jurisdictions, County programs, housing providers, and health and behavioral-health partners to coordinate field practice and share operational updates.	Included Exhibits A-G, including the Lemon Grove State Route 94 certified annual report and the February 2026 Oceanside/Carlsbad ERF presentation. Oceanside official ERF page Lemon Grove official ERF update Exhibit H documents quarterly RHOM meetings during the prior 12 months, including an agenda item on the Lemon Grove ERF initiative and recorded attendance at the March, June, and September 2026 meetings.
Decreasing public illicit drug use	The CoC supports outreach, assessment, treatment referral, overdose response, and diversion while police and prosecutors address trafficking, violence, and other unlawful conduct. County OSAR combines public-health, behavioral-health, EMS, medical-examiner, law-enforcement, and community information to detect clusters and deploy outreach, naloxone, test strips, and referrals.	County OSAR program County OSAR community resources Exhibit C §30 documents activation of first responders when needed.
Addressing danger to self or others	Outreach staff activate first responders for physical, emotional, or mental distress and remain when safe to relay pertinent information. The regional system uses 911 and PERT when violence or medical danger is present and 988/MCRT for eligible behavioral-health crises. The County's SB 43 implementation establishes the legal standards and operational roles for 5150 evaluations.	County 24/7 Mobile Crisis Response Teams County SB 43 implementation Included Exhibit C §30.
Sharing information consistent with SORNA and California law	RTFH does not maintain a parallel sex-offender registry. Authorized law-enforcement, probation, and parole agencies maintain and verify registration information and determine lawful public disclosure. CoC providers do not impede registration or notification requirements and make required or legally authorized disclosures, while protecting HMIS and survivor information from unauthorized release.	San Diego County DA sex-offender monitoring and notification Included Exhibit C §§10 and 24 address mandated reporting, consent, confidentiality, and legal disclosure.

Public links were selected from official RTFH, County, or District Attorney sources and are included as supplemental evidence. The core encampment-coordination records are reproduced in this packet so HUD review does not depend on access to RTFH email or shared drives.

Exhibit Index

Exhibit	Record	Purpose
A	Caltrans email dated August 31, 2026	Documents advance notice and direct distribution to RTFH, law enforcement, County, cities, CHP, and outreach partners.
B	Caltrans September 2026 Encampment Removal Schedule	Documents planned dates, routes, post miles, locations, encampment levels, and estimated numbers of unsheltered individuals.
C	San Diego CoC Street Outreach Standards Version 4 May 2025 excerpts	Documents separation of outreach and enforcement, pre-closure outreach, first-responder activation, mandated reporting, and confidentiality.
D	Regional Unsheltered Policy Guidelines excerpts	Documents cross-sector coordination and the Clearance with Support framework.
E	RTFH Carlsbad ERF Round 5 Letter of Support dated June 9, 2026	Documents recent CoC support for a coordinated, person-centered encampment-resolution effort.
F	Oceanside and Carlsbad ERF update presented to the CoC in February 2026	Documents the joint \$11.3 million SR-78/Buena Vista Creek initiative and reports that more than 90% of Zone 1's by-name list was housed by closure.
G	Certified State Route 94 ERF annual report through December 31, 2025	Documents RTFH's coordination with Lemon Grove, Caltrans, the County and service partners, including phased outreach, housing placements, site resolution and stabilization.
H	Regional Homeless Outreach Meeting (RHOM) prior 12-month meeting record	Documents recurring regional coordination through agendas, meeting notes, follow-up records, and deidentified attendance totals.

Exhibit A

Caltrans Advance Coordination Email

From	Daniel C. Johnson, Caltrans District 11 Encampment Specialist, daniel.johnson@dot.ca.gov
Sent	August 31, 2026 at 3:16 p.m. Pacific Time
Subject	Monthly Encampments Schedule for September 2026
Recipients	RTFH; San Diego County Sheriff; San Diego Police Department; CHP; County of San Diego; Caltrans; and representatives of Chula Vista, Vista, National City, Lemon Grove, Oceanside, Escondido, La Mesa, El Cajon, and regional outreach and river partners.
Attachment	Monthly Encampment Schedule September 2026.xlsx

Email body

Hello All,

Caltrans Monthly Encampment Removal Schedule for September 2026.

To avoid confusion, please note that the tabs on the spreadsheet are the Caltrans crew's name/yard responding to encampments; they are not the cities/jurisdictions being served. **The schedule is subject to change.** An example of changes is a level 1 removal that will take precedence over a level 2 removal. Click on the map link to verify the location of the encampment within your city/jurisdiction.

Thank you,

Daniel Johnson

Encampment Specialist

East, Imperial and North County

Caltrans District 11 Maintenance

Evidence note: This page reproduces the material headers and body from the authenticated message received by RTFH. The original email and attached workbook are retained in RTFH's records.

Exhibit B

Caltrans September 2026 Encampment Removal Schedule

Carlsbad Crew

Date	Route	Post mile	Location	Level	Estimated UI	Map
9/01-03/2026	76	0.074	WB BIKE PATH	2	5	Map
9/01-03/2026	78	6.2	VISTA VILLAGE EB/WB	2	4	Map
9/01-03/2026	78	3.33	EB COLLEGE BLVD PARK AND RIDE, HAYMAR	2	2	Map
9/08-11/2026	76	4.73	EB OLD GROVE, LOWES FENCELINE AREA	2	2	Map
9/08-11/2026	5	40.4	SANTA FE BASEBALL FIELDS	2	3	Map
9/08-11/2026	76	1.18	EB 76 JEO CANYON DRIVE	2	3	Map
9/14-18/2026	5	50.87	NB LAS FLORES ON RAMP, JEFFERSON OVERCROSS	2	4	Map
9/14-18/2026	78	6.18	WB VISTA VILLAGE ON RAMP, CREEK AREA	2	4	Map
9/14-18/2026	5	40.33	JSO OF SANTA FE DR COMMUNITY PARK	2	5	Map
9/21-25/2026	5	52.3	SB OCEANSIDE BLVD	2	4	Map
9/21-25/2026	5	41.49	NB ENCINITAS OFF RAMP ADJACENT TO OGGIES	2	4	Map
9/21-25/2026	5	41.3	NB ENCINITAS	2	2	Map
9/28-30/2026	78	11.15	EB LAS POSAS OFF, BY THE STORAGE BUSINESS AREA	2	3	Map
9/28-30/2026	5	41.33	NB ENCINITAS	2	2	Map
9/28-30/2026	5	52.25	NB OCEANSIDE BLVD OFF, LOMA ALTA CREEK AREA	2	3	Map

Source: Monthly Encampment Schedule September 2026.xlsx attached to Caltrans District 11 email dated August 31, 2026. UI means unsheltered individuals as labeled in the source workbook.

Chula Vista Crew

Date	Route	Post mile	Location	Level	Estimated UI	Map
9/01-03/2026	805	16.303	SB Orange Avenue on ramp	1	1	Map
9/01-03/2026	805	9.155	SB Sweetwater road behind Hertz	4	7	Map
9/01-03/2026	005	12.254	NB Birch Street	3	6	Map
9/01-03/2026	005	6.053	SB Palomar Street O/C	2	1	Map
9/08-11/2026	805	11.372	SB 43rd Street on ramp left side	2	3	Map
9/08-11/2026	015	3.794	NB Redwood Street and 38th Street	1	1	Map
9/08-11/2026	015	1.899	NB Market Street on ramp	2	4	Map
9/08-11/2026	805	8.42	WB 054 transtion to SB 805	2	6	Map
9/14-18/2026	005	12.561	SB transtion to NB 015 right side	2	1	Map
9/14-18/2026	005	12.713	SB 015 Main Street off ramp	4	8	Map
9/14-18/2026	005	11.036	SB W.8th Street on ramp	2	4	Map
9/14-18/2026	094	4.114	NB 015 transtion to EB 094	2	1	Map
9/14-18/2026	805	16.631	SB Boundry Street and Meade Avenue	3	5	Map
9/21-25/2026	005	9.141	NB 005 transtion to EB 054	2	10	Map
9/21-25/2026	805	15.426	SB Adjacent to Vancouver Avenue	3	4	Map
9/21-25/2026	094	3.264	EB Ash Street	2	1	Map
9/21-25/2026	005	12.559	SB Transtion to NB 015	1	1	Map
9/21-25/2026	005	7.504	SB J Street off ramp	6	10	Map
9/21-25/2026	015	3.937	SB transtion to SB 805	2	2	Map

9/28-30/2026	005	4.091	SB Coronado Avenue on ramp right side	2	1	Map
9/28-30/2026	805	15.917	NB University Avenue on ramp	1	1	Map
9/28-30/2026	805	1.153	NB JNO Byer Boulevard	2	2	Map
9/28-30/2026	005	3.756	SB Coronado Avenue O/C	1	1	Map

Source: Monthly Encampment Schedule September 2026.xlsx attached to Caltrans District 11 email dated August 31, 2026. UI means unsheltered individuals as labeled in the source workbook.

Escondido Crew

Date	Route	Post mile	Location	Level	Estimated UI	Map
9/01-03/2026	78	17.3	BEHIND GOLDEN EGG OMELET	2	3	Map
9/01-03/2026	78	17.2	78 EB IN FRONT OF MOTEL 6	2	5	Map
9/01-03/2026	78	16.9	78 EB AT ROCKSPRINGS BRIDGE	2	2	Map
9/01-03/2026	78	17.3	N.CCP TO 78 WB ONR LHS	2	3	Map
9/08-11/2026	78	17.2	S.CCP TO 78WB ONR LHS	2	2	Map
9/08-11/2026	78	17.4	BEHIND 961 N. ESCO BLVD	2	3	Map
9/14-18/2026	15	33.3	LOMA LN	2	5	Map
9/14-18/2026	78	16.9	78 WB AT ROCKSPRINGS BRIDGE	2	2	Map
9/21-25/2026	78	17.3	S.CCP TO 78WB ONR RHS	2	1	Map
9/21-25/2026	15	32.2	15 SB AT MONTIEL AND ROCKSPRINGS	2	2	Map
9/28-30/2026	15	32.9	NUTMEG CIRCLE FIRE STATION	2	3	Map

Source: Monthly Encampment Schedule September 2026.xlsx attached to Caltrans District 11 email dated August 31, 2026. UI means unsheltered individuals as labeled in the source workbook.

Kearny Mesa Crew

Date	Route	Post mile	Location	Level	Estimated UI	Map
9/01-03/2026	163	3.2	SB 163 JNO Sixth Ave. (palm, aranda)	2	4	Map
9/01-03/2026	8	0.3	WB 8 U/C Next to Morena Bike path(Behind D.O.)	2	10	Map
9/08-11/2026	163	4.2	NB 163 Just South of Friars Rd. Offramp	2	4	Map
9/08-11/2026	008	3	WB 008 Camino del Rio North (Lazy Dog)	2	2	Map
9/08-11/2026	008	6.3	EB 008 North Fairmount Ave. adj to the bike path	2	2	Map
9/14-18/2026	008	6.4	WB 008 Alvarado Canyon Rd. (Grotto Climb, yoga)	2	2	Map
9/14-18/2026	005	20.2	SB 5 U/C Just South of San Diego Riverbed	2	4	Map
9/14-18/2026	052	2.8	EB 52 Just East of Genesee Onramp	2	2	Map
9/14-18/2026	015	15.8	NB 015 East on Mira Mesa Blvd. circle ONR	2	3	Map
9/21-25/2026	805	23.1	SB 805 JNO Clairemont Mesa Blvd.	2	1	Map
9/21-25/2026	163	4.4	NB 163 Friars Rd. ONR (water channel)	2	2	Map
9/21-25/2026	005	20.6	SB 005 JNO Pacific Hwy.	2	5	Map
9/21-25/2026	005	22.1	NB 005 Clairemont Dr. OFR (overhead sign)	2	2	Map
9/28-30/2026	15	6.7	SB 15 Just South of Friars RD.	2	1	Map
9/28-30/2026	163	2.8	NB 163 At West Washington ST.	2	6	Map

Source: Monthly Encampment Schedule September 2026.xlsx attached to Caltrans District 11 email dated August 31, 2026. UI means unsheltered individuals as labeled in the source workbook.

Santee Crew

Date	Route	Post mile	Location	Level	Estimated UI	Map
9/01-03/2026	008	10.9	Spring Street	2	2	Map

9/01-03/2026	094	11.99	Kenwood Dr.	2	2	Map
9/01-03/2026	125	9.8	Jamacha bike path	4	6	Map
9/01-03/2026	008	0.0272	8 WB 2nd St Off-Ramp	2	1	Map
9/01-03/2026	SR-67	5.44	San Diego River	2	4	Map
9/01-03/2026	125	10.8	Sweetwater Rd	2	2	Map
9/08-11/2026	008	15.7	WB 8 to SB Magnolia	2	1	Map
9/08-11/2026	94	8.76	West St.	2	5	Map
9/08-11/2026	125	9.65	Jamacha bike path	2	5	Map
9/08-11/2026	SR-125	10	Jamacha P&R	2	8	Map
9/08-11/2026	125	12.6	Sweetwater road	2	4	Map
9/14-18/2026	67	14.158	Vine Street to Mapleview riverbed	2	2	Map
9/14-18/2026	94	8.1	Massachusetts	2	2	Map
9/14-18/2026	008	10.2	Parkway	2	2	Map
9/14-18/2026	67	4.8	Winter Gardens	2	3	Map
9/14-18/2026	I-8	15.61	Magnolia Ave.	2	4	Map
9/14-18/2026	094	10.226	Spring Sreet on-ramp	2	4	Map
9/21-25/2026	I-8	15.14	Johnson Ave.	2	4	Map
9/21-25/2026	008	15.61	Magnolia Ave.	2	4	Map
9/21-25/2026	SR-67	5.4	Maple view St.	2	6	Map
9/21-25/2026	008	8.7	WB 8 RS 7500 block Pkwy Dr	2	3	Map
9/21-25/2026	067	0.099	Magnolia under SR-67 Connector	2	2	Map
9/28-30/2026	094	11.411	Camp Road	2	5	Map

9/28-30/2026	67	0.396	Fletcher Pwky	2	4	Map
9/28-30/2026	008	15.6	EB 8 to NB 67	2	3	Map
9/28-30/2026	008	18.6	Greenfield	2	4	Map

Source: Monthly Encampment Schedule September 2026.xlsx attached to Caltrans District 11 email dated August 31, 2026. UI means unsheltered individuals as labeled in the source workbook.

Exhibit C

San Diego CoC Street Outreach Standards

Version 4 May 2025 selected sections

1. Applicability of the Standards and the Role of Funders

- 1.1 These standards apply to non-law enforcement personnel (non-profit street outreach providers/publicly funded social services staff) conducting street

outreach throughout the San Diego Continuum of Care and funded through any or all of the following:

- The City of San Diego
- The County of San Diego
- The San Diego Housing Commission
- The Regional Task Force on Homelessness

- 1.2 Street outreach providers are guided by their contractual obligations with their funder. Among other criteria, the contracts inform the approach to be used for street outreach, the activities to be performed with the funding, activities that are not permitted with the available funding, hours of service, area(s) to be served, and service targets.
- 1.3 Funders provide monitoring and oversight to their investment in street outreach services. Each service provider is responsible for meeting the expectations of their funder to allow for future investment in street outreach activities.
- 1.4 The Regional Task Force on Homelessness, the County of San Diego, the City of San Diego, and the San Diego Housing Commission share a commitment to these standards for all of the street outreach work funded by the four entities. Organizations funded by any or all of these four entities are expected to abide by the standards unless the street outreach contract specifically indicates otherwise.
- 1.5 Cities and funders throughout the Continuum of Care are encouraged to adopt and enforce these standards to create a consistent approach in conducting outreach to unsheltered persons throughout the region.

2. Taking Direction in the Coordination and Delivery of Street Outreach Services

- 2.1 The Regional Task Force on Homelessness is responsible for providing a system coordinator for all outreach activities across the entire San Diego Continuum of Care.
- 2.2 The Regional Task Force on Homelessness shall work with the County of San Diego to identify an entity responsible for providing regional coordination for North, East and South parts of the San Diego Continuum of Care. The City of San Diego is responsible for providing a regional coordinator for the city/central part of the San Diego Continuum of Care.
- 2.3 The Regional Task Force on Homelessness is responsible for establishing policy direction related to serving unsheltered persons. The Regional Task Force, together with the Housing Commission, County and City provide funding to organizations to engage in street outreach activities to fulfill that policy direction. Street outreach policy and action in San Diego City and County shall be developed and/or amended through a collaborative process between the major funders, regional coordination entities, and the Regional Task Force on Homelessness to ensure effective alignment and leveraging resources across the region that supports consistent, system-wide best practice in outreach provision.
- 2.4 Street outreach staff take direction from their employer only. An organization that provides street outreach services may be contractually obligated to take direction from, and/or respond to requests for action or information by their regional coordinator or the system coordinator. The organization is responsible for directing their staff to take appropriate action based upon the request from a coordinator.
- 2.5 A regional coordinator may request that a street outreach team respond to a particular person or group of persons who are unsheltered. Unless otherwise specified or operationally imperative, such requests shall be made to the supervisor of the street outreach team. All reasonable measures shall be taken by the street outreach staff to respond to those requests within three business days, so long as it does not interfere with the ability of the street outreach staff to spend 50% or more of their time with known unsheltered persons that they are actively assisting towards the goal of housing. The supervisor or their designate shall report back any necessary information to the coordinator on the outcome

10. Interface with Law Enforcement

- 10.1 Except when required to do so through Mandated Reporting, street outreach staff shall never be the entity responsible for communicating or leading enforcement activities.
- 10.2 Whenever possible, street outreach staff shall be available to assist unsheltered homeless individuals in the event law enforcement engages in activities that dislodge the individual(s) from where they are staying, when notified by law enforcement in advance of enforcement activities. Efforts shall be made by street outreach staff to make referrals and help the individual connect to resources in the event of enforcement activities. Street outreach staff are present to assist the homeless individual(s) only, and are not engaged in any enforcement activities themselves.
- 10.3 When there is planned closure of an encampment, street outreach providers shall provide advanced intensive outreach efforts, and provide information to law enforcement on their efforts when consents are in place to do so, without providing personal identifying information to law enforcement.
- 10.4 When law enforcement's Homeless Outreach Team undertakes outreach and engagement activities they may request street outreach staff participate in those activities with them. Street outreach staff will participate when operationally available, and/or their participation will not jeopardize the relationship between the street outreach staff and the unsheltered person.
- 10.5 In some circumstances, street outreach staff may witness behavior or actions on the part of an unsheltered person that triggers a legal mandate to report the incident or information to law enforcement (e.g., human trafficking). Street outreach staff shall do so promptly and thoroughly in these instances, in accordance with training on Mandated Reporting.

23. Consent

- 21.1 Street outreach teams shall attempt to collect explicit consent to share data within HMIS from any unsheltered person they are serving and recording within HMIS. Until such consent is obtained, street outreach teams will follow current HMIS policies and guidelines for how to correctly restrict client data within HMIS, as well as understanding how to make the data unrestricted once consent were to be obtained.
- 21.2 The organization for whom street outreach staff work, are responsible for maintaining records of consent to receive service, as well as any consents pertaining to the release and sharing of personal information.
- 21.3 Street outreach staff are responsible for ensuring HMIS consent is in place prior to entering data into HMIS, as per HMIS training.
- 21.4 Some unsheltered individuals encountered will not be cognitively well enough to provide consent. In those rare instances, street outreach staff shall work with allied professionals to have a capacity assessment completed on the person to determine their legal ability to provide consent for themselves. Funders may request the volume of instances where this occurs, and it shall be furnished.

24. Confidentiality

- 22.1 Street outreach staff shall confidentially maintain the identity of all unsheltered persons encountered through their professional efforts unless there is explicit consent to share that information with others. Where consent is in place, street outreach staff are encouraged to share necessary information with other parties that are instrumental in helping the person resolve their homelessness.
- 22.2 Electronic records of information shall be password protected to decrease the potential of a privacy breach.
- 22.3 Street outreach staff that make physical notes on paper related to their street outreach efforts shall ensure the papers remain confidential during and after work hours. If stored in a personal vehicle, these notes shall be in a locked box.
- 22.4 Information about an unsheltered person including, but not limited to, name, date of birth, Social Security Number, location, presenting issue(s), referrals, and action steps, shall not be divulged to any third party unless there is explicit consent to do so or a legal mandate to report.

30. Encountering a Person That is Homeless and in Distress

- 28.1 In some instances, street outreach staff will encounter an unsheltered person in physical, emotional, or mental distress. Efforts will be made to engage the unsheltered person and address their distress. When necessary, safe, and appropriate, street outreach staff shall mobilize First Responder resources within the community to help address the unsheltered person's distress.
- 28.2 If the unsheltered person encountered in distress has not already provided informed consent to receive street outreach services, a First Responder may still be appropriate.
- 28.3 If an unsheltered person is in distress and a First Responder response has been activated, the street outreach staff shall take reasonable efforts to stay with the unsheltered person until assistance arrives and to relay pertinent information to First Responders, when it is safe to do so.
- 28.4 When directed by a funder or supervisor to do so, a summary of an incident involving an unsheltered person in distress and the response shall be provided within 24 hours of the encounter with the unsheltered person in distress.

33. Responding to Encampments

- 31.1 When one or more unsheltered persons is occupying space on public property through a tent, tarp or other handmade structure, or the individual has occupied a building on public property for the purpose of habitation, it is considered an encampment. The street outreach staff shall report the location of all encampments they know to be occupied to their regional coordinator once per month.
- 31.2 Street outreach staff may not participate in the construction of any encampment, though, in exceptional circumstances may provide access to materials like a tent that make the encampment possible, unless otherwise prohibited by the funder.
- 31.3 Street outreach staff may engage people near their encampment, but shall not enter into a tent or other similar structure during the provision of services.
- 31.4 If an enforcement body has identified a particular encampment for closure, and the street outreach staff has advanced notice of such, no materials shall be provided by street outreach to the unsheltered person that will exacerbate the clean-up process of the encampment.

Exhibit D

Regional Unsheltered Policy Guidelines

Selected sections addressing coordination and encampments

Policy Guidelines for Regional Response for Addressing Unsheltered Homelessness and Encampments

Throughout San Diego County

Adopted 1/16/2020

Purpose

It is the intent of these Policy Guidelines to provide overall guidance on a shared vision and approach for San Diego County, including all 18 cities and the unincorporated areas, for addressing the needs of individuals experiencing unsheltered homelessness, including those living in vehicles, and those residing in encampments. The guidelines outlined in this document serve to guide all necessary stakeholders (Stakeholders) across the region - including the County of San Diego and affected departments, local municipalities and respective departments, other local government agencies that interact with unsheltered individuals such as transportation entities, service providers, faith-based organizations, and public and private funders. These guidelines incorporate research, best practices, national guidance (See Addendum on National Guidance) on street outreach and addressing encampments for unsheltered homelessness from the United States Interagency Council on Homelessness (USICH), the United States Department of Housing and Urban Development (HUD), and others, and reflect local input, dynamics, and structures.^{1 2 3} In order to better meet the needs of unsheltered individuals, it is recommended that Stakeholders strive to align their policies and procedures with these guidelines while coordinating resources and working together under a shared vision and goal. With all Stakeholders aligning under a shared vision and adopting best practices for addressing unsheltered homelessness it is expected that unsheltered homelessness in the County will decrease over time, successful placements into housing from street outreach programs will increase, and unsheltered individuals will receive necessary services and supports including health and behavioral healthcare.

These guidelines do not provide specific details regarding how they will be implemented, operationalized, or funded. Those decisions will rest with each individual government agency Stakeholder and the boards and individuals that oversee the non-governmental Stakeholders, and it is understood that each government Stakeholder must balance multiple worthwhile considerations when undertaking outreach efforts and issues of encampments, specifically for public health and safety. Rather, these guidelines provide a set of policies for shaping future efforts, guiding funding and resource allocation decisions, and can be used to inform implementation activities. Implementation may be achieved in part by realigning and coordinating existing resources, but it is not possible to achieve the vision set out in these

¹ United States Interagency Council on Homelessness (USICH), 2019, "Core Elements of Effective Street Outreach to People Experiencing Homelessness," https://www.usich.gov/resources/uploads/asset_library/Core-Components-of-Outreach-2019.pdf.

² USICH, 2015, "Ending Homelessness for People Living in Encampments: Advancing the Dialogue," https://www.usich.gov/resources/uploads/asset_library/Ending_Homelessness_for_People_Living_in_Encampments_Aug2015.pdf.

³ United States Department of Housing and Urban Development, Office of Policy Development and Research, 2019, "Understanding Encampments of People Experiencing Homelessness and Community Responses: Emerging Evidence as of Late 2018," <https://www.huduser.gov/portal/sites/default/files/pdf/Understanding-Encampments.pdf>.

guidelines under the current system and with existing levels of funding: a possible.⁴ The Regional Task Force on the Homeless (RTFH) has taken a leadership role in coordinating efforts to address homelessness, including unsheltered homelessness, across multiple sectors including local, state, and federal government agencies, non-profits, healthcare, philanthropy, education, formerly homeless individuals and those currently experiencing homelessness, and business leaders. Key Stakeholders throughout the region are already making significant progress in coordinating outreach efforts to address unsheltered homelessness. The RTFH, County, non-profits, various cities, and several law enforcement agencies who have dedicated Homeless Outreach Teams (HOT) are convening and working together on the issue more than ever before. For years, local law enforcement has served a key role in providing outreach to individuals experiencing unsheltered homelessness and connecting them with shelter and services. These policy guidelines incorporate a shift to build a system of service providers to eventually lead outreach efforts and play a central role in addressing encampments. This shift will, over time, allow law enforcement officers to focus on enforcement related to public health and safety concerns, while continuing their participation by playing a more targeted role in homeless outreach and engagement efforts.

San Diego County Regional Policy Guidelines:

The San Diego regional policy guidelines are divided into three sections:

1. Shared Vision and Position
2. Services and Supports
3. Addressing Encampments

Each section includes specific policy guidelines which should inform the policies adopted and followed by Stakeholders. These policy guidelines build on national guidance but reflect local input with the understanding that each government agency in San Diego County is faced with different dynamics and challenges.

Policy Guidelines for Addressing Unsheltered Homelessness: Shared Vision and

Position The following policy guidelines seek to create a shared vision and position on the issue of unsheltered homelessness. It is important for all Stakeholders regionally to be aligned around a shared vision that includes an understanding of the situation and most effective ways to address unsheltered homelessness, when circumstance and available resources permit. County.

1. **Regional Engagement and Collaboration:** Addressing unsheltered homelessness cannot successfully be done by one Stakeholder alone. Stakeholders should be engaging with, collaborating, and communicating with federal, state, and regional partners for progress to be made. This includes acknowledging regional disparities in access to services and populations in need. Stakeholders should work to identify these regional disparities in access to critical services for those living unsheltered, such as street outreach services and shelter options, and develop a collaborative response for addressing them.

Stakeholders should also ensure that other sector partners that unsheltered individuals frequent, specifically hospitals and jails, are also part of the regional effort. Local PIT Count data has

⁴ HUD, Continuum of Care Interim Rule, 24 CFR Subpart A - General Provisions, §578.3.

demonstrated that a fair share of those in jails on the night of the count were unsheltered prior to incarceration as well as hospitals are now mandated through SB 1152 to ensure appropriate discharge planning and processes for individuals experiencing homelessness. All sectors need to be critical partners and be aligned with regional policies and approaches to ensure strong collaboration.

It is also vital that a regional unsheltered outreach coordination model be developed to help decrease duplication of street outreach and other efforts and ensure individuals experiencing unsheltered homelessness are identified, assessed, and engaged in services in a coordinated and trauma-informed manner. The region should designate a centralized entity to guide regional outreach activities and serve as the large-scale, cross-provider coordinator of outreach efforts. Such an entity can determine how to deploy resources in the most effective manner; track results of outreach efforts for continual process improvement; offer system-level, ongoing training opportunities; and ensure that outreach teams can easily share information with one another across agencies. This would allow for new strategic approaches to outreach in San Diego County, such as allowing outreach workers to undertake a concerted effort in a particular region in response to an emerging need and allowing teams to have a sustained focus in specific neighborhoods to help build rapport. This entity could also provide a central point of contact that agencies or members of the public might use to alert trained outreach workers to people or encampments in need of contact and services as opposed to calling law enforcement to respond.

2. **Address the Affordable Housing Crisis:** Homelessness, especially unsheltered homelessness, is largely driven by a lack of affordable housing options throughout the region.^{5 6} The most effective way to address unsheltered homelessness is through the provision of a permanent stable home with appropriate ongoing support. To address unsheltered homelessness, affordable housing is greatly needed; more specifically, housing with the appropriate level of supportive services in the form of case management, income and employment services, behavioral health treatment which includes mental health and substance use disorder services, healthcare services,

and life skills supports is critical for maintaining housing stability. Permanent supportive housing - defined as subsidized affordable housing with wrap-around supportive services to meet the needs of homeless individuals who are the hardest to serve - is a national evidence-based practice and has been shown to be an effective solution for chronic homelessness.¹²

Stakeholders and the general public need to support the creation of affordable and permanent supportive housing in their jurisdictions through measures that include streamlining of permit processes and times, zoning amendments and other land use actions that make available sufficient property to develop such projects, avoiding costly and time-consuming litigation based

⁵ National Alliance to End Homelessness, 2018, "Exploring the Crisis of Unsheltered Homelessness," <https://endhomelessness.org/exploringcrisis-unsheltered-homelessness/>.

⁶ Andrew Khouri, "High cost of housing drives up homeless rates, UCLA study indicates," *Los Angeles Times*, June 13, 2018, <https://www.latimes.com/business/la-fi-ucla-anderson-forecast-20180613-story.html>.

on a desire to limit such projects, and other measures designed to make it easier to build much-needed housing units across a spectrum of affordability.

3. **Respectful, Person-Centered, and Trauma Informed Approach:** All efforts and interactions by Stakeholders and the general public should be respectful, compassionate, patient, and driven by empathy for the individual's situation. Interactions such as calls for public services should be coordinated with available outreach and services programs whenever possible and should be focused on assisting the individual to resolve their homeless situation in a manner that is respectful, dignified, trauma informed, and supportive while at the same time meeting the needs for public safety and health. The personal space, time, and property of persons in unsheltered situations should be respected during all interactions, including respect for the rest and comfort of individuals encountered during outreach and other interactions. System level training and certification opportunities should be made available to relevant staff and outreach personnel across the region on topics including Trauma Informed Care, Motivational Interviewing, Crisis Intervention and Mental Health First Aid.
4. **Alternatives to the Criminalization of Homelessness:** All Stakeholders should seek to balance the need for public safety with the priority to connect the homeless with available shelter and services in lieu of enforcement action. With not enough temporary and permanent housing options to meet demand, individuals have limited options and may feel they have no other choice but to live outside or in their vehicles or may prefer that option over shelter. Laws that limit activities such as sitting, sleeping outside or in vehicles, or eating in public spaces may have a disproportionate impact on people living on the streets. In jurisdictions where there is an absence of shelter, other alternatives, or private places to perform those activities, people have the right to undertake these activities in public, as long as the activities are not causing public health and safety risks.

At the same time, Stakeholders should conscientiously and compassionately navigate respecting

¹² Ann O'Hara, January 2003, "Permanent Supportive Housing: A Proven Solution to Homelessness," Technical Assistance Collaborative (TAC) and the Consortium for Citizens with Disabilities (CCD) Housing Task Force, *Opening Doors* Issue 20, <http://www.tacinc.org/media/13714/PSH%2020.pdf> and U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, 2010, "Permanent Supportive Housing: How to Use the Evidence-Based Practices KITS", HHS Pub. No. SMA-10-4509, Rockville, MD: Center for Mental Health Services, <https://store.samhsa.gov/product/Permanent-Supportive-Housing-Evidence-BasedPractices-EBP-KIT/SMA10-4509>.

a coordinated, systemic process for how the community provides access for individuals and families who are at-risk or currently experiencing homelessness to the homeless system, how individuals receive a standardized assessment of their needs, how resources are prioritized, and how individuals and families are referred for housing and supportive

services.⁷ In San Diego, the RTFH is responsible for oversight and coordination of San Diego County's CES.

- b. *By Name List*: List of names of individuals and families currently experiencing homelessness generated through the CES which provides important information such as: identifying who is experiencing homelessness in a given region, basic demographics, acuity scores from their CES Assessment, and recommended housing intervention. The list is prioritized based on acuity scores from the CES assessment and other factors to determine those most in need and recommend the most appropriate housing intervention for each individual.

14. **Youth Homelessness**: According to 2018 Point-in-Time Count estimates, San Diego has the 5th highest rate of unaccompanied youth who are experiencing unsheltered homelessness in the country (78.8%).⁸ Preventing and ending youth homelessness is a local priority, as reflected in the [San Diego Coordinated Community Plan to End Youth Homelessness](#). San Diego also recognizes that the needs of youth and young adults are uniquely different than those of adults and require responsive policies that reflect those differences, including within these guidelines. Policy guidelines included in this document such as using a non-judgmental low barrier approach, incorporating perspectives and hiring individuals with lived experience, creating true and authentic relationships, and using other best-practice approaches such as trauma-informed care, cultural competency, and motivational interviewing are all concepts that need to be incorporated to successfully engage unsheltered youth and young adults. This document acknowledges that services and supports to meet the needs of youth experiencing unsheltered homelessness - including stable housing, education and employment supports, supportive connections to caring adults, and family reunification when safe and appropriate – may be similar in concept however different in implementation from those outlined above for adults experiencing homelessness.

Policy Guidelines for Addressing Unsheltered Homelessness: Addressing Encampments The following policy guidelines provide guidance for addressing homeless encampments. For the purposes of these guidelines a homeless encampment is a location in which tents or other handbuilt structures occupied by individuals experiencing homelessness are on public or private property.

1. **Clearance with Support**: For addressing encampments, Stakeholders should adopt a clearance with support framework, which understands encampments need to be abated and closed for

⁷ Building Changes, "Coordinated Entry," <https://buildingchanges.org/strategies/coordinated-entry> and U.S. Department of Housing and Urban Development, June 2017, "Coordinated Entry Core Elements," <https://files.hudexchange.info/resources/documents/CoordinatedEntry-Core-Elements.pdf>.

⁸ HUD Office of Community Planning and Development, "The 2018 Annual Homeless Assessment Report (AHAR) to Congress, Part 1: Point-in-Time Estimates of Homelessness," December 2018, page 53.

public health and safety reasons. Stakeholders should ensure that services, supports, and offers of assistance, including temporary and permanent housing options and storage opportunities, are offered by outreach workers with as much advance notice as possible of an encampment abatement, if safe conditions exist and necessary resources are available. When circumstances and resources permit, encampment abatements should be conducted at the conclusion of a multi-disciplinary assessment that includes evaluation from street outreach personnel and other Stakeholders to ensure that all avenues of assistance and supports have been utilized. This evaluation should include an assessment of how many individuals residing in the encampment have been offered temporary or permanent housing options and assurance that all remaining encamped individuals are being connected to focused outreach, engagement and transition planning to prevent their displacement when the encampment is resolved. When circumstance and resources permit, this evaluation should also include feedback from appropriate Stakeholders that may include fire-rescue, public health, public works personnel and others as needed to determine protocol and timeline for waste management and debris removal based on the state of the encamped site.

In the interest of public safety, law enforcement maintains the authority to close encampments when unsafe conditions exist. Examples of unsafe conditions include, but are not limited to unsanitary conditions, criminal activity that negatively impacts the surrounding community, fire risks and environmental hazards. When circumstances lead to an immediate encampment closure, law enforcement should attempt to coordinate with appropriate Stakeholders to provide more intense outreach to allow for greater chance of service acceptance and as many meaningful opportunities for connection as time permits.

2. **Coordination with Property Owners as Appropriate:** In the event that an encampment is on private property, Stakeholders need to take necessary steps and coordinate outreach activities with the property owner, with the understanding that cleanups and trash removal of closed encampments is generally the responsibility of the property owner. In addition, if encampments are on state owned or other non-local public land, Stakeholders need to coordinate with appropriate state or other government entity.
3. **Multi-Disciplinary Approach:** Stakeholders should use a multi-disciplinary approach that includes the County, contracted non-profits, law enforcement, and other necessary partners for addressing homeless encampments when circumstances permit. The approach should be prior to the closure of the encampment and should focus on diversion and problem solving, offering support and services including temporary housing, permanent housing, storage, and working positively with those living in encampments. Many individuals living in encampments may have acute health and behavioral health issues, specifically substance use disorders, and Stakeholders should coordinate with the County for providing health and behavioral health services and supports as part of encampment resolutions. The County should provide adequate levels of behavioral health support, including field based mental health and substance use disorder services such as MAT, to those residing in encampments based on need.
4. **Assess and Prioritize Based on Need:** When addressing encampments, Stakeholders should assess encampments for needs, prioritizing specific encampments based on community concerns and risks which include health, safety, and the vulnerability of populations residing in them.

5. **Temporary Housing Options:** Stakeholders should strive to dedicate temporary options to assist those transitioning out of encampments successfully. If an individual living in an encampment is living in a municipality that has available access to available temporary shelter or other temporary options and has agreed to utilize that resource, the encampment should be closed and abated after the temporary placement has been arranged and is completed, unless extenuating circumstances, like those related to health and safety exist.

Additionally, individuals residing in encampments may avoid traditional shelters and other temporary housing options due to previous negative experiences with high barrier policies and approaches. Such experiences may include being denied admission with pets, lack of storage for personal possessions, separation from partners, and being turned away or having assistance terminated due to substance use or other behavioral health issues. Stakeholders should address these common reasons for shelter avoidance through low-barrier approaches and message their policy changes to individuals residing in encampments during outreach and engagement efforts.

6. **Individualized Encampment Strategies:** Factors such as where an encampment is located, the number of people residing in the encampment and the characteristics of people encamped may require the involvement of different Stakeholders and the utilization of different approaches for encampment resolution and abatement. The timing of outreach and enforcement efforts to encamped individuals is also critical to avoid displacing individuals to other areas of the community prior to connecting them to services.
7. **Seek to Repurpose and Secure Space:** Stakeholders should develop strategies for repurposing or securing the space where the encampment was located, as appropriate, so as not to have unsheltered individuals return to the location and revive the encampment. Securing the space may involve in-depth debris and hazardous materials removal and implementation of measures such as fencing or landscaping to prevent re-encampment. Once the site is secured, it should be turned back over to the appropriate entity to provide ongoing management.

Exhibit E

Carlsbad Encampment Resolution Funding Letter

RTFH letter of support dated June 9, 2026

June 9, 2026

Dear Mr. Shilling,

The Regional Task Force on Homelessness (RTFH) is pleased to provide this letter of support to the City of Carlsbad in support of your application for the Encampment Resolution Funding Program, Round 5. RTFH serves as the HUD-designated Continuum of Care for the San Diego region, and is a funder of a variety of homeless service interventions throughout the region. The mission of RTFH is to reduce and end homelessness in San Diego, ensuring that if this situation does happen for anyone, it remains a rare, brief and non-recurring instance; not an outcome. RTFH serves as a policy expert, convener, funder, and administers the Homeless Management Information System (HMIS) and Coordinated Entry system (CES) for the region. The City of Carlsbad's ERF 5 proposal directly supports the Regional Community Action Plan to Prevent and End Homelessness in San Diego, particularly the "People Goal" of reducing the percentage of people experiencing unsheltered homelessness throughout the region by 50%.

The City of Carlsbad and RTFH have a long history of working collaboratively to address homelessness, and the City of Carlsbad has been actively engaged in RTFH as a long-standing participant in the Continuum of Care's Full Membership. We are excited to continue this collaboration by supporting Carlsbad's actionable, person-centered proposal to resolve the experience of unsheltered homelessness for people residing in encampments. Carlsbad's proposal will address the safety and wellness of people within encampments, resolve critical encampment concerns, and provide clear pathways to permanent housing. In alignment with the city's Homelessness Action Plan. The proposal uses a coordinated approach which is datainformed, non-punitive, low-barrier, person-centered, and consistent with the principles of housing first.

We look forward to partnering with the City of Carlsbad on this proposal as they continue to connect people experiencing homelessness to permanent housing options that reduce and end homelessness.

Sincerely,



Tamera Kohler, CEO
Regional Task Force on Homelessness



Exhibit F

Oceanside and Carlsbad Encampment Resolution Funding Update

CoC General Membership presentation from February 2026 selected pages

Encampment Resolution Funding (ERF) Grant Program

- Cities of Oceanside and Carlsbad launched joint implementation of a comprehensive **Encampment Resolution Program** along the State Route 78 corridor and Buena Vista Creek area.
- \$11.3 M awarded by the state's Encampment Resolution Fund (ERF) in August 2024.
- Program duration:
 - January 2025- March 2028



Zone 1 Conditions

Encampment Boundary
(white dashed line)

Proposed locations for
ecological restoration

- Approximately 65-70 residents
- High calls for service, significant safety issues, long-term unsheltered homelessness
- Goal: Close within 3 months



Zone 1 Results



The City of Oceanside's annual Point-in-Time Count (PITC) offers a snapshot of how many people are experiencing homelessness in Oceanside on any given day.

In 2025, Oceanside's PITC identified

318

individuals experiencing unsheltered homelessness.

The 2025 PITC represented a

▼ **12%**

decrease in unsheltered homeless since 2024, a regional year-over-year high.

ERF efforts resulted in a

▼ **17%**

decrease in unsheltered homeless in only three months (Apr - Jul 2025).

>90% of clients on BNL housed by closure date

How do we maintain these results over time?



Served

76

residents as of August 2025



Removed

24 TENTS

from April - July 2025



Ended homelessness for

54

individuals residing in encampments



Removed

30 TONS

of debris from ecologically protected areas

Exhibit G

Lemon Grove State Route 94 Encampment Resolution Funding Report

Certified annual report through December 31, 2025 selected pages

Lemon Grove California State Route 94 Encampment

3 encampments

- Phase 1 (North Ave)
- Phase 2 (Massachusetts/Broadway)
- Phase 3 (East Lemon Grove/outlier encampments)

Payment to / Contract with

Contractor 1

Sub

No

Payment to / Contract with

RTFH Administrative Costs

Eligible Use Category

Administrative Costs

Amount Obligated as of 12/31/2025

\$345,875.00

Amount Expended as of 12/31/2025

\$85,400.63

Contractor 2

Sub

Yes

Payment to / Contract with

Brilliant Corners

Eligible Use Category

Rental Assistance and Rapid Rehousing

Amount Obligated as of 12/31/2025

\$5,415,000.00

Amount Expended as of 12/31/2025

\$406,410.70

Contractor 3

Sub

Yes

Payment to / Contract with

Crisis House

Eligible Use Category

Street Outreach

Amount Obligated as of 12/31/2025

\$670,000.00

Amount Expended as of 12/31/2025

\$236,196.57

Contractor 4

Payment to / Contract with
Crisis House

Eligible Use Category
Prevention and Diversion (other than Rental Assistance and Rapid Rehousing)

Amount Obligated as of 12/31/2025
\$202,500.00

Amount Expended as of 12/31/2025
\$0.00

Contractor 5

Sub
Yes

Payment to / Contract with
Crisis House

Eligible Use Category
Services and Services Coordination

Amount Obligated as of 12/31/2025
\$500,000.00

Amount Expended as of 12/31/2025
\$0.00

Contractor 6

Sub
No

Payment to / Contract with
Impact Consulting Group

Eligible Use Category
Services and Services Coordination

Amount Obligated as of 12/31/2025
\$240,000.00

Amount Expended as of 12/31/2025
\$128,885.31

Contractor 7

Sub
Yes

Payment to / Contract with
Think Dignity

Eligible Use Category
Services and Services Coordination

Amount Obligated as of 12/31/2025
\$175,000.00

Amount Expended as of 12/31/2025
\$17,820.68

Activity Status as of 12/31/2025
In Progress

Completion Date or Estimated Completion Date
2/24/2028

Total dollars obligated and expended as of December 31, 2025

Total ERF 4L Dollars Obligated
\$7,548,375.00

Total ERF 4L Dollars Expended
\$874,713.89

Part II – Notable Successes and Lessons Learned

Instructions:

Describe other notable quantifiable or concrete outcomes and accomplishments achieved through your ERF funds. The purpose of this section is to showcase and share innovative solutions from your ERF program that may be replicable throughout the state to resolve other encampments. These may be successes that led to a greater number of encampment residents to be housed, braided housing/homelessness/behavioral health funding effectively, paid for rehabilitation of permanent housing units that will be sustained using local funds for the same population going forward, etc.

Definitions

- **Lead Entity or Entities Responsible:** The ERF grantee responsible for leading the progress on the designated outcomes.
- **Partners Involved:** Entities partnering with the Lead Entity to achieve the outcome. May include a group, organization, or jurisdiction working to address or improve the outcome.
- **Description of Accomplishments:** Include specific, relevant details for the accomplishment, including actions taken, quantifiable measures, outcomes, and next steps (if applicable).
- **Timeframe of Accomplishment:** Include general timeframe for accomplishment, including starting and ending dates or projected completion dates.
- **Impact of Accomplishment:** A description of how this accomplishment resolve the encampment, impacted the encampment residents, and/or restored the encampment site to its public use.
- **Link to Activity:** Referencing the ERF Activity #, link the reported success to as many associated ERF Activities as apply.

Success 1

Lead Entity or Entities Responsible

Regional Task Force on Homelessness

Partners Involved

City of Lemon Grove

Caltrans

County of San Diego

Crisis House

Brilliant Corners

Impact Consulting Group

Think Dignity

Family Health Centers

City of La Mesa Homeless Outreach and Mobile Engagement (HOME) Team

Description of Accomplishments Our ERF phases employ a coordinated, client-centered outreach and housing strategy focused on

consistent rapid engagement and placement. We utilized a By-Name List (BNL) approach that segmented the mapped encampments into smaller phases, allowing our team of providers and local government partners to address each phase sequentially rather than simultaneously to connect encampment residents to essential services and housing pathways efficiently. This phased approach also ensured consistent, focused engagement with clients, strengthened trust-building, and enabled teams to successfully resolve each encampment and keep the restored property clear before moving on to the next. We leveraged our Flexible Housing Pool, Housing Problem Solving and Diversion-focused outreach resources, and flexible Diversion funds (Resolution Strategies) to remove barriers and expedite housing placements, which was pivotal in transitioning clients who were facing chronic homelessness into permanent housing.

Outcomes:

- All Phase 1 encampments were resolved within 9 weeks, about 3 weeks ahead of schedule.- All but one individual transitioned into housing with the remaining individual engaged in supportive services to work towards housing.
- Our ERF initiative developed and improved trust and support from local businesses and community members, contributing to a collaborative encampment resolution process.
- Our trust and partnership with the City of Lemon Grove and Caltrans ensured that restored property were maintained in clean and safe conditions.
- Increased receptivity to housing and supportive services was observed in Phase 2, including among individuals with histories of chronic homelessness.
- Our average time between the start of each phase and move-in for Rapid Rehousing clients is approximately 10 days, with some clients ready to move-in within the first day of engagement due to the success of Phase 1.
- Approximately 17% of clients increased their income, further strengthening their ability to stabilize their housing.

Next Steps:

Phase 2, which was launched in early November 2025, reached 50% completion by the end of 2025. It will continue utilizing the phased BNL resolution model, alongside rapid placement strategies and sustained engagement, with an increased focus on individuals with higher-acuity needs.

Timeframe of Accomplishment

Planning: The planning portion was crucial in expediting the encampment resolution processes for each phase. From February to July 2025, we worked on identifying the necessary resources for impactful encampment resolution, establishing trusted partnerships with local government agencies and community providers, and developing a stable framework in assessing and addressing the various challenges affecting housing access and encampment removals within the community.

BNL outreach and development: The development of the official BNL for each phase consisted of initial outreach and engagement a week prior to the launch of service provision and housing placement.

Phase 1 dates: Phase 1 started on August 18, 2025 and ended on October 15, 2025 with all encampments in its designated area closed and all but one individual moved into housing.

Phase 2 dates: Phase 2 started on November 3, 2025 and reached 50% completion by December 1, 2025. This phase is anticipated to close ahead of schedule in early 2026.

Impact of Accomplishment

Our coordinated client-centered and housing-focused approach for the ERF initiative in the City of Lemon Grove fully resolved Phase 1 and is generating similar results in Phase 2 as it improved access to critical services needed to remove barriers to housing and willingness among encampment residents to accept housing and supportive services. Consistent, relationship-based engagement strengthened trust in

providers and local government agencies, resulting in higher levels of participation, including among individuals with histories of chronic homelessness who had previously been resistant to assistance. Individuals who moved into housing were able to reintegrate into San Diego communities and focus on their well-being and growth in their homes. One client had shared that she had lost her housing after a serious car accident, which left her unable to work and pay for her housing. She was recently homeless and struggling to regain stability on a fixed income. Our ERF initiative supported her in securing a safe, permanent unit by assisting with her move-in costs. With stable housing, she was able to focus on her recovery, rebuild her budget and work toward long-term goals like regaining transportation and returning to work.

The success of this approach has also strengthened support from other local residents as our initiative visibly restored encampment sites to safe, clean public spaces, especially those located near private residences and businesses. Our coordinated effort reduced the negative impacts of encampments and supported the City's goal of improving public safety. Our work in Phases 1 and 2 have greatly reduced public safety calls in high traffic areas that were populated with encampments to the City from residents, increased parking spaces for local businesses and residential areas, and minimized the use of City resources for high waste disposal and cleanups on public and private spaces.

Which funded activity or activities was this success linked to?

Linked Activity 1

Untitled
Activity 1

Part III – Challenges and Opportunities

Instructions:

Use this section to include notable challenges or areas where you have struggled to make the impact you intended while implementing ERF funds. This can include potential risks you see ahead, changes you plan to implement to address these challenges in the future, and/or ways HCD can support you better through technical assistance.

Definitions

- **Description of Challenge:** General description of challenge, including entities/populations affected and timeframe if applicable.
- **Impact of Challenge:** Include scope of challenge, including how this challenge impacted the services and/or housing solutions provided by the award, if applicable.
- **Lesson Learned:** Description of changes implemented or planned in response to address the challenge.
- **HCD Support:** Are there specific policy changes HCD could make, or technical assistance HCD could provide, to better support grantees in addressing this challenge? Please include the type of technical assistance, specific policy guidance or change, etc.
- **Link to Activity:** Referencing the ERF Activity #, link the reported challenge to as many associated ERF Activities as apply.

Challenges

Challenge 1

Contacts and Certification

The individual who certifies this report should be someone who can confirm on behalf of the administrative entity that the funds reported in this form were expended during the reporting period ending December 31, 2025.

I certify under the penalty of perjury under the laws of California that all information included in this report is true, complete, and correct.

I certify under the penalty of perjury under the laws of California that all information included in this report is true, complete, and correct.

Name

Carlynnne Yu

Title

CFO

Phone

(858) 292-7627 x51

Email

carlynnne.yu@rtfhdsd.org

Place of Execution

4699 Murphy Canyon Rd, Ste 106, San Diego, California 92123-4397

Exhibit H

Regional Homeless Outreach Meeting (RHOM)

Prior 12-month meeting record: November 2025–September 2026

RTFH co-facilitates RHOM quarterly with the County of San Diego Health and Human Services Agency. The March 3, 2026 meeting notes describe RHOM as a countywide forum for outreach workers, regardless of funder or organization, to share effective practices, learn from one another, and coordinate work across regions. The summary below reproduces material facts from authenticated RTFH administrative records; originals are retained by RTFH.

Meeting	Retained record	Evidence of regional coordination
Nov. 4, 2025	RHOM agenda	RTFH Regional Outreach Coordinator and County Office of Homeless Solutions; County public-health update; Lemon Grove Encampment Resolution Funding update; food access; and Point-in-Time Count.
Mar. 3, 2026	Meeting notes and attendance report	Notes document quarterly co-facilitation by RTFH and County HHSA and countywide coordination goals. The meeting platform recorded 111 participants.
Jun. 9, 2026	Agenda, attendance report, and follow-up records	Agenda included RTFH, County Office of Homeless Solutions, County public health, CalFresh/Medi-Cal, PIT reporting, and community coordination. The meeting platform recorded 111 participants.
Sep. 8, 2026	Agenda, attendance report, and presentation follow-up	Agenda included RTFH, County Office of Homeless Solutions, HMIS, and County Aging & Independence Services/Home Safe. The meeting platform recorded 113 participants from multiple jurisdictions and outreach, housing, health, behavioral-health, veteran, and other service partners.

Evidence note: Attendance totals are deidentified in this exhibit. The underlying attendance reports, agendas, meeting notes, invitations, and follow-up materials are retained in RTFH administrative records. This exhibit demonstrates recurring regional coordination; it does not assign enforcement authority to CoC outreach providers or authorize disclosure of protected participant information.

Local Competition Scoring Tools

FY 2026 Continuum of Care Program Competition
CA-601 San Diego City and County Continuum of Care

Attachment 1D-1

This attachment combines the blank scoring tools used in CA-601's FY 2026 local competition. It includes the applicable point schedules and scoring criteria for all ranked renewal and new project component types. Completed applicant scorecards are not included.

Component and Page Index

Section	Tool / Project Type	Maximum Points	Pages
Renewal	Bonus point schedule	PSH 9; TH 5; SH 0	2
Renewal	Permanent Supportive Housing (PSH)	109 including bonus	3-4
Renewal	Transitional Housing (TH)	105 including bonus	5-6
Renewal	Safe Haven (SH)	100	7-10
New	Instructions	Not applicable	11
New	Bonus point schedule	TH 5; Street Outreach 2; SSO 0	12
New	Transitional Housing (TH)	105 including bonus	13-15
New	SSO - Standalone	100	16-18
New	SSO - Street Outreach	102 including bonus	19-21

Attachment Scope

The New Project workbook's Priority Listing Summary is excluded because project-selection results are submitted separately as Attachment 1D-2c. CoC Planning and other unranked projects are not included in this scoring-tool attachment.

The scoring sheets that follow are reproduced from the final local competition tools. Page scaling and page breaks were adjusted only to make the scoring criteria and maximum point values readable.

Renewal Projects	Bonus Points
PSH	9
TH	5
SH	0

RTFH FY 2026 PERMANENT SUPPORTIVE HOUSING RENEWAL PRIORITY SCORECARD

Preservation-Based Review: 90-Point Renewal Priority Base + 10 Differentiation Points

Agency		Reviewer	
Project Name		Review Date	
Project Type	Permanent Supportive Housing (PSH)	Annual Renewal Amount	
Project Identifier		Project Population	

SECTION 1 — RENEWAL QUALIFICATION THRESHOLD REVIEW			
Threshold Area	Qualification Standard	Result	Documentation / Reviewer Notes
Project Eligibility	Eligible PSH renewal project; renewal application and required materials are complete.	Pass	
Population & Program Compliance	Project continues to serve a HUD-eligible PSH population and operates consistently with the grant agreement.	Pass	
Applicant Review	Application is complete and has required attachments	Pass	
HMIS / Data Participation	Project participates in HMIS or an approved comparable database and responds to required data-quality corrections.	Pass	
THRESHOLD DETERMINATION		INCOMPLETE	

SECTION 2 — PRESERVATION PRIORITY BASE			
Priority Category	Rationale	Maximum Points	Points Awarded
Qualified PSH Renewal Preservation Priority	Preserves existing permanent housing capacity and minimizes disruption or displacement for currently housed participants. Awarded only after the project satisfies the threshold review above.	90	90

SECTION 3 — OBJECTIVE DIFFERENTIATION FACTORS (10 POINTS)							
Category	Measure	Raw Data / Result	Max Points	Points Awarded	Scoring Rubric	Data Source	Reviewer Notes
Housing Stability	Percent of participants who remained in or exited to permanent housing		3		95%+ = 3.0 90%-94.9% = 2.5 85%-89.9% = 2.0 80%-84.9% = 1.5 Below 80% = 1.0	APR / HMIS	
Returns to Homelessness	Percent returning to homelessness after exit		2		15% or less = 2.0 15.1%-27% = 1.5 27.1%-40% = 1.0 Above 40% = 0.5	HMIS System Performance Report	
Grant Spending & Utilization	HUD Quarterly Spending Report		2		95%+ = 2.0 90%-94.9% = 1.5 80%-89.9% = 1.0 Below 80% with documented circumstances = 0.5 Below 80% without explanation/corrective action = 0 50%+ = 1.0 50% = 0.5 Less 50% = 0.0	HUD financial report / closeout	
High-Need Population Served	% Service to Seniors		1			APR / application	
Cost Effectiveness	Project has reasonable costs per permanent housing exit as defined locally		2		<=5%(no more than 5% above benchmark=2.0, <=7% (no more than 7% above benchmark=1.0, >7% or more above benchmark=0.0	HMIS data quality report / monitoring	
DIFFERENTIATION SUBTOTAL			10	0			
FINAL RENEWAL PRIORITY SCORE							
BONUS POINTS				9			
FINAL POINTS							
RENEWAL PRIORITY STATUS				QUALIFIED RENEWAL — REVIEW DIFFERENTIATORS			

Policy Note: The score establishes relative order among qualified PSH renewals. Tier placement remains subject to the CoC-approved ranking policy, HUD requirements, project funding amounts, and the available Tier 1 dollar limit. A Conditional Pass must be cured by the deadline established by RTFH.

TH Renewal Scorecard 2026

Agency								Team Reviewer
Project								Review Complete
Project Type	TH Renewal							Score %
Project Identifier								Total Points

Category	Criteria	Project Type	Raw Data	Max Points Possible	Points Awarded	Benchmark for Full Points	Partial Benchmark 2 (50-99%)	Partial Benchmark 3 (<50%)	Data Source
HUD CoC Thresholds	Acceptable organization general review (CoC)	TH		0	N/A	Yes			CoC Monitoring - Documentation.etc
HUD CoC Thresholds	Application is complete and has required attachments.	TH		0	N/A	Yes			Review Checklist
HUD CoC Thresholds	Coordinated Entry Participation (Commitment)	TH		0	N/A	Yes			Signed Commitment Form on Intent
HUD CoC Thresholds	Documented, secured minimum match	TH		0	N/A	Yes			Application - Signed agreements
HUD CoC Thresholds	Project Participation in HMIS	TH		0	N/A	Yes			Commitment or active project in HMIS/DV
HUD CoC Thresholds	HUD Applicant Eligibility Thresholds Review	TH		0	N/A	Yes			Threshold Review Page & Sources
Exits to Permanent Housing	Minimum percent move to permanent housing	TH		25		85% or more	42.5% - 84%	Less than 42.5%	APR calculation
New or Increased Earned Income	Minimum new or increased earned income for project leavers	TH		4		50% or more	25% - 49%	Less than 25%	APR Q
New or Increased Earned Income	Minimum new or increased earned income for project stayers	TH		4		0% or more	N/A	N/A	APR Q
New or Increased Income and Earned Income	Minimum new or increased non-employment income for project leavers	TH		4		45% or more	22.5% - 44%	Less than 22. 5%	APR Q
New or Increased Income and Earned Income	Minimum new or increased non-employment income for project stayers	TH		4		0% or more	N/A	N/A	APR Q
Project Effectiveness	Audit Monitoring- Documented organization financial stability	TH		6		0 Issues	1-2 issues / corrected	substantial deficiency - risk	Audit / Monitoring Review Form
Project Effectiveness	Use of Funds - spending rates; unspent funds, slow spending; includes recapture \$	TH		6		>= 95%	>=90%-94%	< 90%	E-LOCCS report;use of funds grant closeout reports
Project Effectiveness	Project has reasonable costs per permanent housing exit as defined locally	TH		12		<= 5 % above	<=7% above	>7% above	Not more than 5% above average cost per successful exit
Project Effectiveness -Returns to Homelessness	Maximum percent of participants return to homelessness @ exit	TH		7		0%	Above 0% - 2 %	Greater than 2%	APR Calculation
Serves High Need Populations	Minimum percent of participants entering project from place not meant for human habitation	TH		6		68% or more	34% - 67%	Less than 34%	APR calculation
Serves High Need Populations	Minimum percent of participants with 2 or more disabilities (Severe Service Needs)	TH		6		2% or more	1%	Less than 1%	APR calculation
Serves High Need Populations	Minimum percent of participants with zero income at entry	TH		6		35% or more	17.5% - 34%	Less than 17.5%	APR calculation
Priority Vulnerable Population - DV	Project dedicated to DV	TH		2		2	N/A	N/A	Intent Form, HIC designation
Priority Project - Chronic	Project % serve CH	TH		2		2	0.5	<50%	APR Q - served
Priority Vulnerable Population - Seniors/Youth	% Service to Seniors/Youth	TH		6		>50%	0.5	<50%	Application & APR Served
TOTAL				100	0				

Bonus Points	5
Overall Score %	0

TH/SH	Base	Base +5%	Base +7%
IND	\$2,826	\$2,967.15	\$3,023.67

TH Renewal Scorecard 2026

Agency		
Project		
Project Type	TH Renewal	0.0%
Project Identifier		0

Category	Criteria	Project Type	Applicant Evidence / Notes	Reviewer Notes	Points Full Benchmark	Points Benchmark 2	Points Benchmark 3
HUD CoC Thresholds	Acceptable organization general review (CoC)	TH			0	0	0
HUD CoC Thresholds	Application is complete and has required attachments.	TH			0	0	0
HUD CoC Thresholds	Coordinated Entry Participation (Commitment)	TH			0	0	0
HUD CoC Thresholds	Documented, secured minimum match	TH			0	0	0
HUD CoC Thresholds	Project Participation in HMIS	TH			0	0	0
HUD CoC Thresholds	HUD Applicant Eligibility Thresholds Review	TH			0	0	0
Exits to Permanent Housing	Minimum percent move to permanent housing	TH			25	12.5	0
New or Increased Earned Income	Minimum new or increased earned income for project leavers	TH			4	2	0
New or Increased Earned Income	Minimum new or increased earned income for project stayers	TH			4	2	0
New or Increased Income and Earned Income	Minimum new or increased non-employment income for project leavers	TH			4	2	0
New or Increased Income and Earned Income	Minimum new or increased non-employment income for project stayers	TH			4	2	0
Project Effectiveness	Audit Monitoring- Documented organization financial stability	TH			6	3	0
Project Effectiveness	Use of Funds - spending rates; unspent funds, slow spending; includes recapture \$	TH			6	3	0
Project Effectiveness	Project has reasonable costs per permanent housing exit as defined locally	TH			12	6	0
Project Effectiveness -Returns to Homelessness	Maximum percent of participants return to homelessness @ exit	TH			7	3.5	0
Serves High Need Populations	Minimum percent of participants entering project from place not meant for human habitation	TH			6	3	0
Serves High Need Populations	Minimum percent of participants with 2 or more disabilities (Severe Service Needs)	TH			6	3	0
Serves High Need Populations	Minimum percent of participants with zero income at entry	TH			6	3	0
Priority Vulnerable Population - DV	Project dedicated to DV	TH			2	1	0
Priority Project - Chronic	Project % serve CH	TH			2	1	0
Priority Vulnerable Population - Seniors/Youth	% Service to Seniors/Youth	TH			6	3	0

TOTAL

Overall Score %

TH/SH	Base	Base +5%
IND	\$2,826	\$2,967.15

Safe Haven Renewal Scorecard 2026

[illegible]

Category	Criteria	Project Type	Raw Data	Max Points Possible	Points Awarded	Benchmark for Full Points	Partial Benchmark 2 (50-99%)	Partial Benchmark 3 (<50%)	Data Source
HUD CoC Thresholds	Acceptable organization general review (CoC)	SH		0	N/A	Yes			CoC Monitoring - Documentation.etc
HUD CoC Thresholds	Application is complete and has required attachments.	SH		0	N/A	Yes			Review Checklist
HUD CoC Thresholds	Coordinated Entry Participation (Commitment)	SH		0	N/A	Yes			Signed Commitment Form on Intent
HUD CoC Thresholds	Documented, secured minimum match	SH		0	N/A	Yes			Application - Signed agreements
HUD CoC Thresholds	Project Participation in HMIS	SH		0	N/A	Yes			Commitment or active project in HMIS/DV
HUD CoC Thresholds	HUD Applicant Eligibility Thresholds Review	SH		0	N/A	Yes			Threshold Review Page & Sources
Exits to Permanent Housing	Minimum percent move to permanent housing	SH		25		50% or more	25% - 49%	Less than 25%	APR calculation
New or Increased Earned Income	Minimum new or increased earned income for project leavers	SH		4		7% or more	3.5% - 6%	Less than 3.5%	APR Q
New or Increased Earned Income	Minimum new or increased earned income for project stayers	SH		4		0%	N/A	N/A	APR Q
New or Increased Income and Earned Income	Minimum new or increased non-employment income for project leavers	SH		4		0%	N/A	N/A	APR Q
New or Increased Income and Earned Income	Minimum new or increased non-employment income for project stayers	SH		4		0%	N/A	N/A	APR Q
Project Effectiveness	Audit Monitoring- Documented organization financial stability	SH		6		0 Issues	2 issues / corrected	substantial deficiency - risk	Audit / Monitoring Review Form
Project Effectiveness	Use of Funds - spending rates; unspent funds, slow spending; includes recapture \$	SH		6		>= 95%	>=90%-94%	< 90%	E-LOCCS report;use of funds grant closeout reports
Project Effectiveness	Project has reasonable costs per permanent housing exit as defined locally	SH		12		<= 5 % above	<=7% above	>7% above	Not more than 5% above average cost per successful exit
Project Effectiveness -Returns to Homelessness	Maximum percent of participants return to homelessness @ exit	SH		7		25% or less	26% -37.5%	More than 37.5%	APR Calculation
Serves High Need Populations	Minimum percent of participants entering project from place not meant for human habitation	SH		6		74% or more	37% - 73%	Less than 37%	APR calculation
Serves High Need Populations	Minimum percent of participants with 2 or more disabilities (Severe Service Needs)	SH		6		13% or more	6.5% - 12%	Less than 6.5%	APR calculation

Serves High Need Populations	Minimum percent of participants with zero income at entry	SH		6		83% or more	41.5% - 82%	Less than 41.5%	APR calculation
Priority Vulnerable Population - DV	Project dedicated to DV	SH		2		1	N/A	N/A	Intent Form, HIC designation
Priority Project - Chronic	Project % serve CH	SH		2		1	0.5	<50%	APR Q - served
Priority Vulnerable Population - Seniors/Youth	% Service to Seniors/Youth	SH		6		>50%	0.5	<50%	Application & APR Served

TOTAL	100	0
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SH Bonus Points	0
Overall Score %	0%

PSH	Base	Base +5%	Base +7%
FAMILIES	\$4,620.81	\$4,851.85	\$4,944.26
INDIVIDUALS	\$19,612.33	\$20,592.95	\$20,985.20
MIXED	\$17,182.30	\$18,041.41	\$18,385.06

TH/SH	Base	Base +5%	Base +7%
IND	\$2,826	\$2,967.15	\$3,023.67

SSO	Base	Base +5%	Base +7%
TAY	\$14,627.40	\$15,358.77	\$15,651.32

Safe Haven Renewal Scorecard 2026

Agency			
Project			
Project Type	SH		0.0%
Project Identifier			0

Category	Criteria	Project Type	Applicant Evidence / Notes	Reviewer Notes	Points Full Benchmark	Points Benchmark 2	Points Benchmark 3
HUD CoC Thresholds	Acceptable organization general review (CoC)	SH			0	0	0
HUD CoC Thresholds	Application is complete and has required attachments.	SH			0	0	0
HUD CoC Thresholds	Coordinated Entry Participation (Commitment)	SH			0	0	0
HUD CoC Thresholds	Documented, secured minimum match	SH			0	0	0
HUD CoC Thresholds	Project Participation in HMIS	SH			0	0	0
HUD CoC Thresholds	HUD Applicant Eligibility Thresholds Review	SH			0	0	0
Exits to Permanent Housing	Minimum percent move to permanent housing	SH			25	12.5	0
New or Increased Earned Income	Minimum new or increased earned income for project leavers	SH			4	2	0
New or Increased Earned Income	Minimum new or increased earned income for project stayers	SH			4	2	0
New or Increased Income and Earned Income	Minimum new or increased non-employment income for project leavers	SH			4	2	0
New or Increased Income and Earned Income	Minimum new or increased non-employment income for project stayers	SH			4	2	0
Project Effectiveness	Audit Monitoring- Documented organization financial stability	SH			6	3	0
Project Effectiveness	Use of Funds - spending rates; unspent funds, slow spending; includes recapture \$	SH			6	3	0
Project Effectiveness	Project has reasonable costs per permanent housing exit as defined locally	SH			12	6	0
Project Effectiveness -Returns to Homelessness	Maximum percent of participants return to homelessness @ exit	SH			7	3.5	0
Serves High Need Populations	Minimum percent of participants entering project from place not meant for human habitation	SH			6	3	0
Serves High Need Populations	Minimum percent of participants with 2 or more disabilities (Severe Service Needs)	SH			6	3	0

Serves High Need Populations	Minimum percent of participants with zero income at entry	SH			6	3	0
Priority Vulnerable Population - DV	Project dedicated to DV	SH			2	1	0
Priority Project - Chronic	Project % serve CH	SH			2	1	0
Priority Vulnerable Population - Seniors/Youth	% Service to Seniors/Youth	SH			6	3	0

TOTAL

Overall Score %

PSH	Base	Base +5%
FAMILIES	\$4,620.81	\$4,851.85
INDIVIDUALS	\$19,612.33	\$20,592.95
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TAY	\$14,627.40	\$15,358.77

How to Use This Scoring Tool

STEP 1	Open the correct project type tab
	Use the 'Transitional Housing (TH)', 'SSO — Standalone', or 'SSO — Street Outreach' tabs. Each tab has criteria specific to that project type per the FY 2026 NOFO.
STEP 2	Fill in the header fields
	Enter the Project/Applicant Name, and Review Date in the blue input fields at the top.
STEP 3	Score each criterion
	Enter a score in each gold cell (column F). Scores must be between 0 and the Max Points shown. The total score is auto-calculated at the bottom.
STEP 4	Add reviewer notes
	Use the 'Reviewer Notes & Justification' column (gold, column D) to document your reasoning for each score. These notes are required for any rejection or reduction decision.
STEP 5	Check the HUD Threshold
	Section A contains HUD's mandatory project quality threshold criteria. The HUD Threshold Check row will automatically show PASS or FAIL. An application that fails the HUD threshold cannot be ranked and must be rejected, regardless of total score.
STEP 6	Set recommendation
	Use the dropdown at the bottom of each sheet to select: Accept & Rank / Accept — Conditional / Reduce / Reject. If rejecting or reducing, enter the written reason (required per NOFO Section V.A.3(2)).
STEP 7	Transfer to Priority Listing Summary
	Go to the 'Priority Listing Summary' tab. Enter each project's name, type, total score, and HUD threshold score. The Pass/Fail column auto-calculates. Assign proposed ranks in the last column.
STEP 8	Export for CoC Application
	The completed Priority Listing Summary is the basis for your CoC Priority Listing and the competition listing attachment required by NOFO Section V.B.1.a(2). Save and attach to your e-snaps submission.
HUD THRESHOLDS	Minimum scores required by HUD
	• Transitional Housing (TH): ≥ 6 out of 8 points on Section A criteria • SSO — Standalone: ≥ 4 out of 5 points on Section A criteria • SSO — Street Outreach: ≥ 5 out of 6 points on Section A criteria Projects below threshold MUST be rejected. HUD will also conduct its own threshold
APPLICANT NOTICE	15-day notification requirement
	Per NOFO Section V.B.1.a(2): CoCs must notify all applicants in writing (outside e-snaps) whether their application is accepted, rejected, or reduced — no later than 15 days before the August 26, 2026 HUD deadline. Deadline for notification: August 11, 2026. Written reasons are required for any rejection or reduction.
NOFO REFERENCE	Source document
	FY 2026 Continuum of Care Competition and Youth Homelessness Demonstration Program Grants NOFO, CPD-2600-DC-0025, published June 1, 2026. New project threshold criteria: Section V.A.4.c. Local competition requirements: Section V.B.1.a.

New Projects	Points
Transitional Housing	5
Street Outreach	2
SSO Only	0

FY 2026 CoC New Project Scoring — Transitional Housing (TH)

Project / Applicant Name:	
Review Date:	
Conflict of Interest Disclosed?	

Reviewer Attestation

Project Type (confirm):	Transitional Housing (TH)
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⚠ HUD THRESHOLD: New Transitional Housing (TH) applications must score at least 6 out of 8 points on Section A (HUD criteria) or will be REJECTED by HUD regardless of total score.

#	Criterion	Description / What to Look For	Reviewer Notes & Justification	Max Points	Score (0-Max)	% of Max
A — HUD PROJECT QUALITY THRESHOLD CRITERIA						
A1	Supportive services provision [HUD: 2 pts]	Project will provide and/or partner to deliver eligible supportive services necessary to help participants obtain and maintain housing (case management, behavioral healthcare, employment training, etc.) Guidance: Look for: specific services listed, named partners, MOU/agreement evidence, service frequency.		10	0	0%
A2	Experience or plan: exit within 24 months [HUD: 1 pts]	Applicant has prior experience helping participants exit homelessness within 24 months — or has a credible, specific plan to achieve this. Guidance: Look for: APR data, prior program exit rates, step-down plan, benchmarks.		5	0	0%
A3	≥50% exit to positive destination + employment income [HUD: 1 pts]	Applicant has or will achieve ≥50% of participants exiting to positive destinations within 24 months AND ≥50% exiting with employment income (per HMIS or other data). Guidance: specific targets, income-growth plan.		5	0	0%
A4	Mainstream resource leveraging [HUD: 1 pts]	Project will be supplemented with resources from public or private sources (Medicare, Medicaid, SSI, SNAP, TANF, etc.). Guidance: Look for: named mainstream benefits, enrollment assistance plan, leveraged funding sources.		5	0	0%
Section subtotal						0%

B — PROGRAM DESIGN & SERVICE INTENSITY						
B1	20-hour weekly engagement plan [HUD: 2 pts]	Project describes how it will assess individual service needs and provide ≥20 hours/week of services, activities, or employment for all participants (exception: age 62+ or disability per 24 CFR 8.3). Guidance: Look for: schedule, activity types (case management, job training, counseling, volunteering), documentation plan.		10	0	0%
B2	Individualized service plans	Project will create service plans for each participant including services schedule, providers, participant goals, strategies and target dates — focused on health, housing stability, employment income, and self-sufficiency. Guidance: Look for: ISP template/process, how often updated, goals tied to employment & income.		10	0	0%
Section subtotal						0%

C — ORGANIZATIONAL CAPACITY & FINANCIAL HEALTH						
C1	Relevant organizational experience	Organization has demonstrated experience operating TH, shelter, or comparable housing programs serving people experiencing homelessness. Guidance: Look for: years of operation, program history, comparable grants managed, staff qualifications.		10	0	0%
C2	Financial stability & audit compliance	Organization demonstrates financial health: clean or resolved audits, no significant monitoring findings, timely drawdowns on existing grants. Guidance: Look for: most recent audit, monitoring finding history, eLOCCS drawdown patterns, fiscal controls.		10	0	0%
Section subtotal						0%

D — SYSTEM PERFORMANCE ALIGNMENT

D1	Alignment with CoC system performance priorities	Project addresses documented gaps in the CoC's homelessness system; proposed outcomes align with CoC-wide PIT and SPM trends (e.g., reducing length of stay, returns to homelessness, encampments, first-time homelessness). Guidance: Look for: reference to local PIT data, gap analysis, how project improves community-wide metrics.		15	0	0%
Section subtotal						0%

E — POPULATION SERVED & TARGETING						
E1	Target population clarity & CoC priority alignment	Application clearly identifies target population and demonstrates alignment with CoC-identified priority populations (e.g., chronically homeless, veterans, youth, DV survivors, re-entry). Guidance: Look for: specific population defined, eligibility criteria, outreach strategy to reach priority populations.		10	0	0%
Section subtotal						0%

F — BUDGET & COST EFFECTIVENESS						
F1	Cost per household reasonableness [HUD: 1 pts]	Average cost per household served is reasonable per 2 CFR 200.404. Budget is well-justified and aligns with proposed activities and staffing. Guidance: Look for: cost per household calculation, justification for line items, no padding, administrative costs ≤10%.		10	0	0%
Section subtotal				10	0	0%

HUD THRESHOLD CHECK — Section A raw score (need ≥6 of 8 to pass)				8	#VALUE!	✓ PASS
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TOTAL SCORE (0–100) Enter scores in the gold cells above						8%
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RANKING RECOMMENDATION	Accept & Rank
REASON (required if Reject or Reduce)	

Ranking Justification Summary
 Top Strengths
 Key Weaknesses
 Basis for Final Ranking

FY 2026 CoC New Project Scoring — SSO — Standalone

Project / Applicant Name:

Review Date:

Conflict of Interest Disclosed?

Reviewer Attestation

Project Type (confirm):

SSO — Standalone

⚠ HUD THRESHOLD: New SSO — Standalone applications must score at least 4 out of 5 points on Section A (HUD criteria) or will be REJECTED by HUD regardless of total score.

#	Criterion	Description / What to Look For	Reviewer Notes & Justification	Max Points	Score (0-Max)	% of Max
A — HUD PROJECT QUALITY THRESHOLD CRITERIA						
A1	Necessity & annual assessment of needs [HUD: 1 pts]	Project is necessary to assist people in exiting homelessness, addressing barriers to stable housing (SUD, unemployment, childcare, etc.) AND recipient will conduct an annual assessment of participant service needs. Guidance: Look for: needs assessment process described, gap justification, annual re-assessment protocol.		10	0	0%
A2	Strategy for hard-to-reach & unsheltered participants [HUD: 2 pts]	Project has a specific strategy for providing services to participants including those with histories of unsheltered homelessness and those who don't traditionally engage with services. Guidance: Look for: low-barrier design, flexible service delivery, engagement strategy for non-traditional participants.		10	0	0%
A3	Mainstream resource leveraging [HUD: 1 pts]	Project will be supplemented with resources from public or private sources (Medicare, Medicaid, SSI, SNAP, etc.). Guidance: Look for: named benefits, enrollment assistance, leveraged funding partners.		5	0	0%
A4	Cost per household reasonableness [HUD: 1 pts]	Average cost per household served is reasonable per 2 CFR 200.404. Guidance: Look for: cost per household calculation, comparison to similar programs, budget justification.		5	0	0%

Section subtotal	0%
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B — SERVICE PARTICIPATION / PROGRAM DESIGN						
B1	Individualized service planning	Project describes how services will be individualized to participant needs; includes a structured assessment process and clear service coordination approach. Guidance: Look for: intake/assessment tool, how services are matched to individual needs, coordination across providers.		10	0	0%
B2	Path to self-sufficiency	Project articulates a clear pathway for participants from service engagement toward housing stability, income growth, and reduced dependence on homelessness services. Guidance: Look for: measurable milestones, income/employment goals, exit criteria, step-down plan.		10	0	0%
Section subtotal						0%

C — ORGANIZATIONAL CAPACITY & FINANCIAL HEALTH						
C1	Experience in supportive services delivery	Organization has demonstrated experience providing the types of supportive services proposed in this application. Guidance: Look for: years of relevant service delivery, program history, staff credentials and experience.		10	0	0%
C2	Financial stability & audit compliance	Organization demonstrates financial health: clean or resolved audits, no significant monitoring findings, timely drawdowns on existing grants. Guidance: Look for: most recent audit, monitoring history, drawdown patterns on prior CoC grants.		10	0	0%
Section subtotal						0%

D — SYSTEM PERFORMANCE ALIGNMENT						
D1	Alignment with CoC system priorities	Project addresses a documented gap; proposed activities align with CoC SPM goals (reduce first-time homelessness, improve successful exits, reduce returns to homelessness). Guidance: Look for: reference to local SPM data, specific metrics the project improves, tie to CoC strategic plan.		15	0	0%
Section subtotal						0%

E — POPULATION SERVED & TARGETS						
E1	Target population definition & prioritization	Application clearly defines who will be served, how they will be identified/referred, and how priority populations are served with appropriate urgency. Guidance: Look for: specific population defined, referral sources, eligibility criteria, how highest-need individuals are prioritized.		15	0	0%
Section subtotal				15	0	0%

HUD THRESHOLD CHECK — Section A raw score (need ≥4 of 5 to pass)	5	#VALUE!	✓ PASS
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TOTAL SCORE (0–100) Enter scores in the gold cells above	5%
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RANKING RECOMMENDATION	Accept & Rank
REASON (required if Reject or Reduce)	

Ranking Justification Summary

Top Strengths

Key Weaknesses

Basis for Final Ranking

FY 2026 CoC New Project Scoring — SSO — Street Outreach

Project / Applicant Name:

Review Date:

Conflict of Interest Disclosed?

Reviewer Attestation

Project Type (confirm):

SSO — Street Outreach

⚠ **HUD THRESHOLD:** New SSO — Street Outreach applications must score at least 5 out of 6 points on Section A (HUD criteria) or will be **REJECTED** by HUD regardless of total score.

#	Criterion	Description / What to Look For	Reviewer Notes & Justification	Max Points	Score (0-Max)	% of Max
A — HUD PROJECT QUALITY THRESHOLD CRITERIA						
A1	Mainstream resource leveraging [HUD: 1 pts]	Project will be supplemented with resources from public or private sources (Medicare, Medicaid, SSI, SNAP, etc.). Guidance: Look for: named benefits, enrollment assistance, leveraged funding partners.		5	0	0%
A2	Strategy for unsheltered / hard-to-reach participants [HUD: 2 pts]	Project has a specific strategy for providing services to participants with histories of unsheltered homelessness and those who don't traditionally engage with services. Guidance: Look for: low-barrier outreach model, trauma-informed approach, strategy for non-engagement, persistent follow-up plan.		10	0	0%
A3	Law enforcement & first responder partnership [HUD: 1 pts]	Applicant has a history of, or credible plan for, partnering with first responders and law enforcement to engage people in places not meant for human habitation. Must cooperate with (not impede) local camping/drug laws and assist first responders. [FY 2026 NEW CRITERION] Guidance: Look for: named law enforcement partners, co-response model, MOU, documented cooperation with encampment clearing.		10	0	0%
A4	Outreach experience + exit effectiveness [HUD: 1 pts]	Applicant has experience providing outreach per 24 CFR 578.53(e)(13) and has demonstrated or plans to demonstrate effectiveness helping people exit places not meant for human habitation to shelter, treatment, TH, or permanent housing. Guidance: Look for: prior outreach data, positive exit rates from outreach, HMIS documentation of outreach outcomes.		5	0	0%

A5	Cost per household reasonableness [HUD: 1 pts]	Average cost per household served is reasonable per 2 CFR 200.404. Guidance: Look for: cost per household calculation, comparison to similar outreach programs, budget justification.		5	0	0%
Section subtotal						0%

B — SERVICE PARTICIPATION / PROGRAM DESIGN						
B1	Engagement and follow-up approach	Project describes how it will build trust, conduct repeated engagement contacts, and move individuals from initial contact to service enrollment and housing pathways. Guidance: Look for: contact frequency, engagement protocol, trust-building approach, warm handoff process.		10	0	0%
B2	Connections to treatment & recovery resources	Project articulates how it connects participants to SUD treatment, mental health services, crisis supports, and recovery resources. Aligns with FY2026 emphasis on treatment-oriented outreach. Guidance: Look for: named treatment partners, warm handoffs to CCBHC/CMHC/PATH, 988/crisis system coordination, peer recovery specialists.		10	0	0%
Section subtotal						0%

C — ORGANIZATIONAL CAPACITY & FINANCIAL HEALTH						
C1	Field outreach experience & staffing model	Organization has demonstrated experience conducting street outreach with unsheltered populations; adequate staffing model, supervision structure, and safety protocols described. Guidance: Look for: years of outreach operation, staff-to-participant ratios, field safety policy, supervisor qualifications.		10	0	0%
C2	Financial stability & audit compliance	Organization demonstrates financial health: clean or resolved audits, no significant monitoring findings, timely drawdowns if existing CoC grantee. Guidance: Look for: most recent audit, monitoring finding history, drawdown patterns on existing grants.		10	0	0%

Section subtotal	0%
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D — SYSTEM PERFORMANCE ALIGNMENT					
D1	Alignment with unsheltered & encampment priorities	Project directly addresses the CoC's unsheltered homelessness and encampment reduction goals as reflected in PIT count data and FY2026 NOFO scoring criteria. Guidance: Look for: reference to local PIT unsheltered count, specific encampment locations targeted, connection to CoC encampment strategy.		10	0 0%
Section subtotal					0%

E — POPULATION SERVED & TARGETING					
E1	Geographic coverage & highest-need prioritization	Application identifies target geographic areas, describes known encampment locations or high-need zones, and explains how chronically unsheltered individuals with highest needs will be prioritized. Guidance: Look for: map or list of target areas, unsheltered PIT data by location, prioritization criteria for highest-need individuals.		15	0 0%
Section subtotal				15	0 0%

HUD THRESHOLD CHECK — Section A raw score (need ≥5 of 6 to pass)	6	#VALUE!	✓ PASS
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TOTAL SCORE (0–100) Enter scores in the gold cells above	6%
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RANKING RECOMMENDATION	Accept & Rank
REASON (required if Reject or Reduce)	

Ranking Justification Summary

Top Strengths

Key Weaknesses

Basis for Final Ranking

Public Notice of CoC NOFO, timeline, and project application deadline – 06.02.2026

Email Template ReviewFY_2026_CoC_NOFO_Local_TimInbox (287) - alma.vasquez@rtfRegional Task Force on HomeleNotice of Funding Opportunity+Ask Gemini

rtfhsd.org/about-coc/notice-of-funding-opportunity-nof/

Work

GmailCalendarGoogle DriveAlchemerRTFH web24 CFR Part 578grants.gov/search-g...NEW CoC Program...CoC FAQs - HUD Ex...QuickBooks Time ...ClarityPoint in Time Mobil...CoC Grant Inventor...All Bookmarks

Eligible Renewal Applicants:

Pending HUD's release of the 2026 Grant Inventory Worksheet. All 2025 renewal projects have been awarded and should be eligible to renew.

Funding Availability:

\$4,040,000,000. Of this amount, HUD is making available at least \$52,000,000 for new DV restricted projects.

Set aside of \$1,300,000,000 for new projects with a priority for Transitional Housing and Supportive Service Only projects.

Estimated Number of Awards:

HUD estimates to award around 7,000 with the available funding authorized under the Consolidated Appropriations Act, 2026 (Public Law 119-75)

Additional Information:

For this federal funding opportunity, RTFH serves as the HUD-designated Collaborative Applicant. On behalf of the San Diego City and County Continuum of Care (CA-601), RTFH is responsible for the solicitation and administration of a local competition process. This includes receiving and evaluating all project applications, both renewal and new, according to the parameters of the Fiscal Year 2026 CoC NOFO.

RTFH uses Dropbox to manage the local application process created specifically for this funding opportunity. As part of the preliminary intent process, RTFH has collected staff names who will need access to Dropbox.

RTFH will obtain new access requests for new project applicants when the official intent to submit process has opened. Please see the local timeline below for more details.

Contact us:

For the following:

- Request a **Dropbox Project Applicant folder** set up
- Subscribe to the **CoC distribution list** for important NOFO updates
- Technical Assistance** questions regarding FY 2026 CoC NOFO

Please contact Chief Program Officer, Kathryn.durant@rtfhsd.org

Timeline and Local Competition Deadline:

Download our [local timeline here](#). This timeline may be updated during the competition process as needed.

FY 2026 CoC Program Local Competition Project Application Submission Deadline:

Jul 13, 2026 by 11:59 pm (Pacific Time)

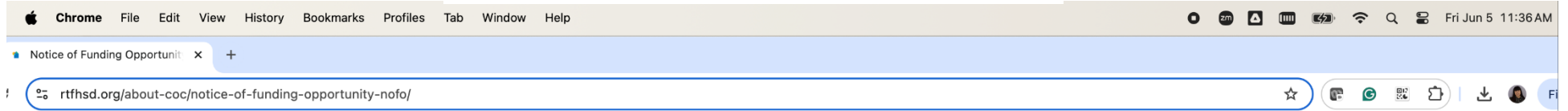
CoC NOFO Overview Public Session:

During the Monthly CoC General Membership Meeting

Type here to search

64°F Mostly sunny10:51 AM6/2/2026

Public Notice for Calls for Intent to Submit – 06.05.2026



Timeline and Local Competition Deadline:

Download our [local timeline here](#). This timeline may be updated during the competition process as needed.

FY 2026 CoC Program Local Competition Project Application Submission Deadline:

Jul 13, 2026 by 11:59 pm (Pacific Time)

CoC NOFO Overview Public Session:

During the Monthly CoC General Membership Meeting

Date: Thursday, June 11, 2026

Time: 10:30 AM Pacific Time

Zoom Meeting: <https://us02web.zoom.us/j/88354454160>

Formal Call for Intent

Applicants interested in submitting a project application must complete the Call for Intent by:

Monday, June 15, at 5:00 p.m. Pacific Time

Submit your intent here: [FY 2026 CoC NOFO Intent Form \(Google Form\)](#)

Local Competition Documents:

This section contains all documents created for the local funding competition process, including detailed instructions on project eligibility, important deadlines, calls for action, and supplemental tools used to evaluate and submit local proposals.

- [FY 2026 CoC NOFO](#)
- [FY 2026 CoC NOFO Local Process Overview & Applicant Requirements](#)
- [FY 2026 CoC NOFO Local Timeline](#)
- [General Statutory and Regulatory Eligibility Requirements](#)

Public Notice- Call for Applications – 6.16.2026

Timeline and Local Competition Deadline:

Download our [local timeline here](#). This timeline may be updated during the competition process as needed.

FY 2026 CoC Program Local Competition Project Application Submission Deadline:

Jul 13, 2026 by 11:59 pm (Pacific Time)

CoC NOFO Overview Public Session:

During the Monthly CoC General Membership Meeting

Date: Thursday, June 11, 2026

Time: 10:30 AM Pacific Time

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- [FY 2026 CoC NOFO Local Timeline](#)
- [General Statutory and Regulatory Eligibility Requirements](#)
- [FY 2026 Match and Leverage Guide](#)
- [FY 2026 NOFO Overview Presentation](#)
- [HUD Guidance- Participants' Eligibility to Move from PSH/RRH to TH](#)
- [HMIS and CES Commitment Form](#)
- [RTFH Public Notice: FY 2026 CALL for ALL Project Applications: Due July 13, 2026](#)
- FY 2026 CoC Project Rating Tool
- FY 2026 Preliminary CoC Project Ranking
- FY 2026 Final CoC Project Ranking

HUD Applicant Documents

- Detailed Instructions – FY 2026 Project Applications – all types

Preliminary Prioritization and Ranking Public Notice - 08.05.2026

ChromeFileEditViewHistoryBookmarksProfilesTabWindowHelp

Notice of Funding Opportunit

rtfhsd.org/about-coc/notice-of-funding-opportunity-nof/

Relaunch to u

This section contains all documents created for the local funding competition process, including detailed instructions on project eligibility, important deadlines, calls for action, and supplemental tools used to evaluate and submit local proposals.

- [FY 2026 CoC NOFO](#)
- [FY 2026 CoC NOFO Local Process Overview & Applicant Requirements](#)
- [FY 2026 CoC NOFO Local Timeline](#)
- [General Statutory and Regulatory Eligibility Requirements](#)
- [FY 2026 Match and Leverage Guide](#)
- [FY 2026 NOFO Overview Presentation](#)
- [HUD's CoC Program FAQ](#)
- [FY 2026 CoC NOFO FAQ](#)
- [New HUD Guidance – Recension of Notice on Prioritization of CH and other vulnerable persons for new PSH projects](#)
- [HUD Guidance- Participants' Eligibility to Move from PSH/RRH to TH](#)
- [HMIS and CES Commitment Form](#)
- [RTFH Public Notice: FY 2026 CALL for ALL Project Applications: Due July 13, 2026](#)
- [FY26 NOFO Street Outreach Application Template](#)
- [FY26 NOFO SSO Standalone Application Template](#)
- [FY26 NOFO Transitional Housing Application Template](#)
- [DV Bonus Supplemental Questions](#)
- [FY2026 CoC NOFO Local Evaluation Process and Form](#)
- [FY 2026 CoC Project Rating Tool](#)
- [FY 2026 Preliminary CoC Project Ranking](#) – posted 8/5/2026
- [FY 2026 Final CoC Project Ranking](#)

HUD Application Documents and Resources

- [HUD Guidance- Participants' Eligibility to Move from PSH/RRH to TH](#)
- [SSO Component Fact Sheet](#)
- [Project Applicant Profile e-snaps Navigational Guide](#)
- [How to Access Project Applications in e-snaps](#)
- [Renewal Projects Detailed Instructions](#)
- [New Projects Detailed Instructions](#)
- [Renewal YHDP Detailed Instructions](#)
- [YHDP Replacement and Reallocation Detailed Instructions](#)
- [CoC Planning Detailed Instructions](#)
- [UFA Costs Detailed Instructions](#)