

EXHIBIT A – PROGRAM REQUIREMENTS (A-P): PERMANENT SUPPORTIVE HOUSING (PSH)

I. Program Name

Permanent Supportive Housing (PSH)

II. Contracted Services¹

PSH

III. Program Information and Requirements

A. Program Goals

Contractor shall provide services to accomplish the following goals:

- Improve the ability of clients in designated permanent supportive housing units to retain safe and supportive living situations (homes);
- Ensure that clients obtain and maintain health insurance coverage;
- Improve clients' overall health by connecting them with quality health care services, including physical, mental, and substance use disorder services, through direct service provision and linking clients with other health care providers;
- Reduce client hospitalizations and utilization of emergency health care services for mental health and physical health issues;
- Improve client mental health status by reducing distressing mental health symptoms and improving daily functioning through direct mental health services provision and connections with appropriate mental health treatment and support;
- Help clients to increase their monthly income and financial assets;
- Increase employment among clients;
- Increase educational and/or vocational attainment among clients;
- Increase meaningful activity as defined by the client; and
- Decrease social isolation among clients.

B. Target Population

Contractor shall provide services to the following populations:

1. Service Groups

Contractor shall provide services to individuals who were formerly homeless and now living in PSH units designated for individuals who meet eligibility requirements for specialty mental health services.

¹ See all requirements specified in the Exhibit A-1: Standard Requirements, Exhibit A - Scope of Work (SOW), and other Exhibits attached to this Agreement.

2. Referral Process to Program

Contractor shall only take referrals of clients living in the designated PSH units. Referrals can come from outreach, self-referral, property owners or managers, and the Home Stretch Unit within the Alameda County Health Care Services Agency.²

3. Program Eligibility

Contractor shall serve all clients living in the designated PSH slots and buildings that are specified in the Exhibit A-Scope of Work (SOW) who:

- Meet eligibility requirements for specialty mental health services; and
- Are willing to accept services.

4. Limitations of Service

Contractor shall retain the option not to serve individuals who significantly threaten violence, are violent, and / or require physical restraint.

C. Program Description

Contractor shall maintain programmatic services at or above the following minimum levels:

1. Program Design

Contractor shall provide PSH Services to tenants living in designated PSH slots or buildings. Contractor's PSH Service Providers shall utilize the federal Substance Abuse and Mental Health Services Administration (SAMHSA) Evidence-Based Practice (EBP) Toolkit³ as a program design and implementation guide for their services program.

Contractor shall provide PSH Services in accordance with the published ACBH Core Tasks Checklists located on the ACBH website at: <http://www.acbhcs.org/providers/network/cbos.htm>.

2. Discharge Criteria and Process

Whenever possible, Contractor shall engage in discharge planning with clients who are exiting the PSH site, either voluntarily or involuntarily. At the time of discharge, the reasons for discharge and client exit information shall be recorded in Homeless Management Information System (HMIS) or an equivalent data system approved by the Home Stretch Unit.

3. Hours of Operation

Contractor shall maintain the hours as specified in Exhibit A-SOW.

² This Unit was formerly called the ACBH Housing Office and is responsible for coordinating referrals to permanent supportive housing units.

³ Available online at <https://store.samhsa.gov/product/Permanent-Supportive-Housing-Evidence-Based-Practices-EBP-KIT-/SMA10-4510>

4. Service Delivery Sites

Contractor shall deliver services at designated service delivery sites as specified in Exhibit A-SOW.

D. Minimum Staffing Qualifications

Contractor shall maintain the direct service staffing as specified in the Exhibit A-SOW.

IV. Contract Deliverables and Requirements

A. Process Objectives

Contractor shall deliver units of service as specified in Exhibit A-SOW.

B. Quality Objectives

Contractor shall provide services toward achieving the following quality objectives:

Quality Measures	Quality Objectives
Percent of clients with entry/exit information entered into HMIS the day of entry/exit	At least 80%
Percent of clients with income information recorded in HMIS at entry and at annual or exit assessments	At least 80%
Frequency of client contact recorded in HMIS	At least one contact per client per month

Contractor shall ensure that staff providing PSH for at least six months have attended at least two trainings per year in one or more of the following areas: Motivational Interviewing, Mental Health First Aid, harm reduction, crisis intervention, positive behavioral support, Coordinated Entry System, trauma-informed care, HMIS, staff self-care/burnout intervention, public benefits and health insurance advocacy, and/or culturally affirmative practices.

C. Impact Objectives

Contractor shall provide services towards achieving the following impact objectives.

Impact Measures	Impact Objectives
Percent of clients with increased cash income from entry to their most recent annual or exit assessment, among clients who have been in the program for 12 months or longer	At least 70%
Percent of clients who obtain or maintain one or more of the following non-cash benefits at their most recent annual or exit assessment: WIC, CalFresh, CalWORKs childcare and transportation benefits (excludes health insurance)	At least 65%
Percent of clients accessing health insurance at their most recent annual or exit assessment	At least 75%

Impact Measures	Impact Objectives
Percent of clients who retain housing for one year or more	At least 90%
Percent of clients who exit PSH to the streets or places not meant for human habitation (excludes exits to higher level of medical care and death)	Less than 10%

V. Reporting and Evaluation Requirements

Contractor shall input client status related to housing, income, and other related demographics at episode opening, closing, and in between as changes occur but at least annually via the HMIS. Contractor shall also input client discharge status at closing. Contractor shall complete timely input of all required data into HMIS.

Contractor shall submit to the ACBH Program Contract Manager and the Housing Solutions for Health Director⁴ a Quarterly and Annual Program Report derived from HMIS and other data. Quarterly Reports are due according to the following schedule:

Quarter	Dates Covered in Report	Due Date
1 st	July 1 – September 30	October 31
2 nd	October 1 – December 31	January 31
3 rd	January 1 – March 31	April 30
4 th	April 1 – June 30	July 31

The Fourth Quarter Report shall count as the Annual Report. All reports shall include the following:

- Client Demographics Report (from HMIS);
- Housing and Urban Development (HUD) Annual Performance Report (from HMIS);
- Program Outcomes Report (from HMIS); and
- Narrative report that highlights Contractor’s progress in meeting the Contract Deliverables and Requirements.

VI. Additional Requirements

No additional requirements.

⁴ The Housing Solutions for Health Director works within the Home Stretch Unit.