

**EXHIBIT A(Sub-Exhibit A)-SCOPE OF WORK (SOW):
INTERIM HOUSING**

Contractor Name	Account NameContractor Legal Name
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See Applicable Exhibit A Documents. Any additional specifications or variations in contracted service requirements applicable to this Exhibit A-SOW shall be contained herein.

I. PROGRAM NAME

Interim Housing

Additional Specifications Program Name - Add Specs
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II. CONTRACTED SERVICES

Interim Housing Services

Housing Navigation

Medi-Cal Administrative Activities (MAA) Requirements Apply

Additional Specifications Contracted Services - Add Specs

III. PROGRAM INFORMATION AND REQUIREMENTS

A. Program Goals

Contractor shall provide services to accomplish the following goals:

- i. Assist clients in obtaining and retaining safe, supportive, and sustainable permanent housing¹ as quickly as possible;
- ii. Ensure that clients obtain and maintain health insurance;
- iii. Assist clients in obtaining and maintaining access to quality health care services, including physical, mental, and substance use disorder (SUD) services, through direct service provision and linking clients with other health care providers;
- iv. Reduce client hospitalizations and utilization of emergency health care services for mental health and physical health issues;
- v. Reduce client criminal justice involvement and recidivism;
- vi. Help clients reduce distressing mental health symptoms and improve daily functioning;
- vii. Ensure that clients obtain and maintain enrollment in public benefits programs for which they are eligible;
- viii. Help clients increase their monthly income and financial assets;

¹ See the definition of permanent housing: <https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-program-components/permanent-housing/>

- ix. Increase education and/or employment among clients;
- x. Help clients expand their community social support networks outside of the professional health and human service system; and
- xi. Help clients achieve personal goals and expand their participation in personally meaningful activities.

Additional Specifications

Program Goals - Add Specs

B. Target Population

Contractor shall provide services to the following populations:

1. Service Groups

Contractor shall provide services to individuals who are literally homeless² and who meet eligibility requirements.

Contractor shall make it a priority to serve eligible adults identified as particularly high need by Alameda County Behavioral Health Department (ACBHD). Contractor shall utilize an approach adopted by the Alameda County Continuum of Care (CoC) for identifying level of need among homeless individuals.³

Additional Specifications

Service Groups - Add Specs

2. Referral Process to Program

Contractor shall only accept referrals from Alameda County Health, Housing and Homeless Services (AC Health H&H) for households that have been assessed and are eligible for designated shelter beds in Alameda County.

Contractor shall notify AC Health H&H in writing whenever their program is at capacity and unable to accept new referrals.

Additional Specifications

Referral Process to Program - Add Specs

3. Program Eligibility

Contractor shall only serve clients who:

- i. Are literally **or chronically** homeless and residing in Alameda County;
- ii. Meet service necessity for Specialty Mental Health Services as defined by the California Department of Health Care Services (DHCS); and
- iii. Have been prioritized for services and referred by AC Health H&H to Interim Housing designated beds.

² See criteria in Category 1 and Category 4 in the document linked below to define “literally homeless.” https://bhcsproviders.acgov.org/providers/network/docs/Forms/Housing-Homeless_Criteria_Def.pdf

³ See **criteria on page 2 in the document linked to define “chronically homeless”**: https://bhcsproviders.acgov.org/providers/network/docs/2015/EveryOne_Home_CoC_Prioritization.pdf

Additional Specifications Program Eligibility - Add Specs

4. Limitations of Service

In instances where complex clinical issues complicate the Contractor's capacity to provide services, Contractor shall alert AC Health H&H in writing of its concern. In the event that Contractor declines to accept a referral from AC Health H&H, Contractor shall notify AC Health H&H in writing with the specific reason(s) for not accepting the referral.

Contractor shall not hold a bed for a referred individual for longer than 72 hours without first obtaining written approval from AC Health H&H.

Additional Specifications Limitations of Service - Add Specs
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C. Program Description

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

1. Program Design

Contractor shall only accept referrals from AC Health H&H for Interim Housing designated beds at Contractor's shelter. Contractor shall respond to AC Health H&H within 24 hours and confirm they have received the referral.

Contractor shall designate staff at the shelter to serve as Housing Navigators (Navigators) for Interim Housing residents. This staff member shall also be responsible for maintaining Medi-Cal Administrative Activities (MAA) service logs and utilizing Alameda County's Clinician Gateway record system to coordinate services for Interim Housing residents with other ACBHD providers.

Contractor shall integrate Housing Navigation with Interim Housing Services, and services shall include but not be limited to the provision of:

- i. Emergency shelter beds;
- ii. Meals, showers, laundry facilities, linens, beds, and toiletries;
- iii. General case management services; and
- iv. An array of additional onsite groups and services.

Contractor's Housing Navigation shall provide an intensive, housing-focused, care coordination role within AC Health H&H provider networks. Contractor's Navigators shall help referred clients obtain permanent safe and supportive homes as quickly as possible. Navigators shall also work to ensure that appropriate resources and supports are in place for individuals to maintain their housing. Navigators shall provide time-limited supports and use evidence-based best practices to help clients obtain and maintain housing.

Service duration shall be individualized in accordance with client's needs.

Contractor's program shall maintain access to the electronic systems approved by ACBHD for purposes of coordinating care with other mental health providers in the ACBHD provider network.

Contractor shall provide Housing Navigation and Interim Housing Services in accordance with the published ACBHD Housing Navigator Core Tasks Checklist and Alameda County Homeless Response System Written Standards (Interim Housing Section 5: Standards Specific to Emergency Shelter).⁴

Contractor shall maintain a MAA claim plan and shall conduct outreach and engagement in a way that maximizes revenue generation through MAA.

Additional Specifications Program Design - Add Specs
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2. Discharge Criteria and Process

Interim Housing

Contractor shall follow the discharge criteria and process outlined in the Alameda County Homeless Response System Written Standards.

Housing Navigation

Contractor shall ensure discharge planning is reflected in the service/care plan goals. Contractor shall engage client in discharge planning through a collaborative service/treatment planning process.

Contractor's discharge process shall include, but not be limited to:

- i. Discharge planning that begins at intake;
- ii. Schedule for when the client shall choose to discharge, where he/she shall discharge to, and identification of the type of follow-up resources required to ensure that the client's discharge shall be successful;
- iii. Description of Contractor's role in providing follow-up resources or services; and
- iv. Plans for coordination, if appropriate, with friends, family, and other members of the client's support network.

In cases where the assessment indicates the need for follow-up case/care management, on-going support, and/or assistance beyond the ability of Contractor to provide, every effort shall be made to secure appropriate resources from another agency. Whenever possible, Contractor shall convene a discharge meeting with collaborating providers, friends, family, and other members of the client's support network, including the client, 30 to 90 days prior to a planned discharge to assure clarity of the plan. Contractor shall maintain discharge plans, available to AC Health, in writing as a part of client's record.

⁴ <https://bhcsproviders.acgov.org/providers/network/cbos.htm>

Contractor shall assess client's readiness for discharge by the following indicators:

- i. Client is able to sustain current living situation, in terms of activities of daily living (ADLs) and instrumental activities of daily living (IADLs), financially, and in terms of following housing expectations contained in rental or other agreements;
- ii. Client is able to manage their health as evidenced by engagement in health services and ability to understand and follow recommended health care treatments and supports;
- iii. Client is engaged in regular activities they find personally meaningful; and
- iv. Client has connections with social supports outside of the professional health and human service system.

Additional Specifications

Discharge Criteria and Proc - Add Specs

3. Hours of Operation

Contractor shall maintain the following hours of operation:

Hours of Operation - Add Specs

4. Service Delivery Sites

Contractor shall provide services at the following location(s):

Service Delivery Sites - Add Specs

Contractor shall also provide services in community settings where clients are located.

D. Minimum Staffing Qualifications

Contractor shall maintain the following minimum direct service positions:⁵

Minimum Staffing Qual - Add Specs

Contractor shall maintain 0.50 Full-Time Equivalent (FTE) Housing Navigator for every 10 Interim Housing beds under this contract.

IV. CONTRACT DELIVERABLES AND REQUIREMENTS

A. Process Objectives

On an annual basis, Contractor shall deliver the following services/deliverables:

Contractor shall ensure Housing Navigation staff have completed the Homeless Management Information System (HMIS) Security and Privacy training within 30 days of hiring.

Contractor shall ensure that Housing Navigation staff who have provided services for at least six months participate in at least two trainings each year in one or more of the

⁵ The positions shall be maintained at the specified level or higher of direct FTE staff.

following areas: Motivational Interviewing, Mental Health First Aid, harm reduction, crisis intervention, positive behavioral support, Coordinated Entry System (CES), trauma-informed care, HMIS, staff self-care/burnout intervention, public benefits and health insurance advocacy, and/or culturally affirmative practices.

Process Objectives - Add Specs

B. Quality Objectives

Contractor shall provide services toward achieving the following quality objectives:

Quality Measures	Quality Objectives
Percent of clients with an HMIS episode opening and program entry assessment completed on the day of their program entry and an episode closing with exit assessment completed on the day of their exit from the program	At least 80%
Percent of clients with completed income information entered in HMIS on the program entry assessment, update assessments (as appropriate), annual assessment, and exit assessment	At least 80%
Frequency of client contact recorded in HMIS	At least three contacts per client, per month

Additional Specifications Quality Objectives - Add Specs
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C. Impact Objectives

Contractor shall provide services toward achieving the following impact objectives:

Impact Measures	Impact Objectives
Percent of clients with increased cash income from their HMIS program entry assessment to their most recent update assessment (as appropriate), annual assessment or exit assessment for clients who have been in the program for six months or longer	At least 30%
Percent of clients who obtain or maintain one or more of the following non-cash benefits from their HMIS program entry assessment to their most recent update assessment (as appropriate), annual assessment or exit assessment: Supplemental Nutritional Assistance Program (SNAP), Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), CalFresh, California's Work Opportunity and Responsibility to Kids (CalWORKs) child care and transportation benefits (excludes health insurance)	At least 65%
Percent of clients who obtain or maintain health insurance from their HMIS program entry assessment to their most	At least 75%

Impact Measures	Impact Objectives
recent update assessment (as appropriate), annual assessment or exit assessment	
Percent of clients who exited Interim Housing to permanent housing including enrollment in Rapid Re-Housing (excludes exits to higher level of medical care and death)	At least 30%
Percent of clients who exit Interim Housing to the streets or places not meant for human habitation (excludes exits to higher level of medical care and death)	Less than 15%

Additional Specifications Impact Objectives - Add Specs

V. REPORTING AND EVALUATION REQUIREMENTS

Contractor shall complete timely input of all required data into HMIS, including but not limited to client status related to housing, income, and other related demographics. Contractor shall enter this information into HMIS at episode opening, as changes occur, and upon program exit, but at least annually. Contractor shall ensure that no more than five percent of fields are represented with null values in the Department of Housing and Urban Development (HUD) Annual Performance Report (APR).

Contractor shall submit MAA logs that detail Contractor’s activities sorted in ascending order by staff and then by date. These reports shall be submitted to the ACBHD Finance Office Specialist Clerk by the 15th of the month for the prior month’s activities.

Contractor shall submit a Quarterly Program Report that includes the following:

- i. HUD APR, extracted from HMIS;
- ii. Program Outcomes Report, extracted from HMIS; and
- iii. Narrative report that highlights Contractor’s progress and challenges in meeting the Contract Deliverables and Requirements.

Reports shall contain cumulative data from the beginning of the contract fiscal year through the current reporting period. Reports shall be labeled in accordance with the ACBHD established naming convention and shall be uploaded to ShareFile according to the following schedule:

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

Contractor shall submit an Annual Behavioral Health Services Act (BHSA) report on an ACBHD-provided template that includes Contractor's progress, successes, and challenges in achieving the Contract Deliverables and Requirements. Reports shall be labeled in accordance with the established naming convention and shall be uploaded to the ACBHD ShareFile within 30 days from the end of each fiscal year.

Additional Specifications

Reporting And Eval Req - Add Specs

VI. ADDITIONAL REQUIREMENTS

No additional requirements.

Additional Specifications

Additional Requirements - Add Specs