

**EXHIBIT A(Sub-Exhibit A)-SCOPE OF WORK (SOW):
PERMANENT SUPPORTIVE HOUSING (PSH)**

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

Permanent Supportive Housing (PSH)

Additional Specifications Program Name - Add Specs
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II. CONTRACTED SERVICES

PSH

Additional Specifications Contracted Services - Add Specs

III. PROGRAM INFORMATION AND REQUIREMENTS

A. Program Goals

Contractor shall provide services to accomplish the following goals:

- i. Improve the ability of clients in designated permanent supportive housing units to retain safe and supportive living situations (homes);
- ii. Ensure that clients obtain and maintain health insurance coverage;
- iii. Improve clients' overall health by connecting them with 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. 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;
- vi. Help clients increase their monthly income and financial assets;
- vii. Increase employment among clients;
- viii. Increase education and/or employment among clients;
- ix. Help clients achieve personal goals and expand their participation in personally meaningful activities;
- x. Help clients expand their community social support networks outside of the professional health and human service system;
- xi. Provide supportive services in alignment with the Housing First approach and Harm Reduction principles; and

xii. Adhere to Alameda County Homelessness Response System Written Standards.¹

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 were formerly homeless and/or chronically homeless now living in PSH units designated for individuals who meet eligibility requirements.

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 which have been assessed and are eligible for designated PSH units in Alameda County. Referrals shall come through the Alameda County Coordinated Entry System (CES) from a queue of prioritized individuals and households currently experiencing moderate to severe mental illness and homelessness who have completed a CES Assessment and have been matched to designated PSH units.

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. Live in designated PSH slots and buildings;
- ii. Meet service necessity for Specialty Mental Health Services as defined by the California Department of Health Care Services (DHCS); and
- iii. Have accepted services that are offered.

Additional Specifications

4. Limitations of Service

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

¹ <https://bhcsproviders.acgov.org/providers/network/cbos.htm>

Additional Specifications
Limitations of Service - Add Specs

C. Program Description

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

1. Program Design

Contractor shall offer PSH Services to tenants living in designated PSH slots or buildings. Contractor shall provide PSH Services in accordance with the published Alameda County Behavioral Health Department (ACBHD) Permanent Supportive Housing Provider - Core Tasks Checklists located on the ACBHD website.²

Contractor's PSH staff shall utilize the Substance Abuse and Mental Health Services Administration (SAMHSA) Permanent Supportive Housing Evidence-Based Practice Toolkit³ (EBP KIT) as a guide to implement services for the program.

Additional Specifications
Program Design - Add Specs

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. Contractor shall notify AC Health H&H about any upcoming and/or unplanned discharges. At the time of discharge, the reasons for discharge and client exit information shall be recorded in the Homeless Management Information System (HMIS).

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

D. Minimum Staffing Qualifications

Contractor shall maintain the following minimum direct service positions:⁴

² <https://bhcsproviders.acgov.org/providers/network/cbos.htm>

³ <https://www.samhsa.gov/resource/ebp/permanent-supportive-housing-evidence-based-practices-ebp-kit>

⁴ The positions shall be maintained at the specified level or higher of direct FTE staff.

Minimum Staffing Qual - Add Specs

IV. CONTRACT DELIVERABLES AND REQUIREMENTS

A. Process Objectives

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

Contractor shall ensure PSH staff have completed the HMIS Security and Privacy training within 30 days of hiring.

Contractor shall ensure that PSH staff who provided these services for at least six months participate in at least two trainings each year in one or more of the following areas: Motivational Interviewing, Mental Health First Aid, harm reduction, crisis intervention, positive behavioral support, 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 with 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 one contact per client per month

Additional Specifications
Quality Objectives - Add Specs

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	At least 70%

Impact Measures	Impact Objectives
assessment or exit assessment for clients who have been in the program for six months or longer	
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 recent update assessment (as appropriate), annual assessment or exit assessment	At least 75%
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%

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 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

Additional Specifications Reporting And Eval Req - Add Specs
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VI. ADDITIONAL REQUIREMENTS

No additional requirements.

Additional Specifications Additional Requirements - Add Specs
