

**EXHIBIT A(x)-SCOPE OF WORK (SOW):
HOUSING NAVIGATION**

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| 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

Housing Navigation

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| Additional Specifications Program Name - Add Specs |
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II. CONTRACTED SERVICES

Housing Navigation

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| Additional Specifications Contracted Services - Add Specs |
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III. PROGRAM INFORMATION AND REQUIREMENTS

A. Program Goals

Contractor shall provide services to accomplish the following goals:

- i. Improve the ability of clients to secure and maintain stable permanent housing¹ in the least restrictive and most integrated living situation appropriate to meet their needs and preferences;
- ii. Increase and support client choice around appropriate housing;
- iii. Reduce client hospitalizations and utilization of emergency health care services for mental health and physical health issues;
- iv. 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;
- v. Reduce client criminal justice involvement and recidivism;
- vi. Ensure that clients obtain and maintain health insurance;
- 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;
- ix. Increase employment among clients;
- x. Increase educational and/or vocational attainment among clients;
- xi. Decrease social isolation among clients;

¹ See the definition of permanent housing in section Q23: <https://files.hudexchange.info/resources/documents/Sage-Template-CoC-Full-APR.pdf>.

- xii. 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; and
- xiii. 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 for specialty mental health services.

Contractor shall make it a priority to serve eligible adults identified as particularly high need by Alameda County Behavioral Health Care Services (ACBH). ACBH 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 take referrals prioritized for Housing Navigation through the Alameda County Housing Crisis Response System. Referrals shall come from a countywide list of currently homeless individuals with moderate to severe mental illness who have completed an Alameda County Coordinated Entry Assessment (Coordinated Entry Assessment). Staff from the Home Stretch Unit within the Alameda County Health Care Services Agency (Home Stretch) shall make referrals from this list.

Additional Specifications

Referral Process to Program - Add Specs

3. Program Eligibility

Contractor shall only serve clients who:

- i. Are literally homeless and residing in Alameda County;
- ii. Are not connected to a Full Service Partnership;
- iii. Meet specialty mental health criteria with impairments in the moderate to severe range;
- iv. Have a completed Coordinated Entry Assessment;
- v. Have been prioritized for services and referred by Home Stretch.

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

³ See http://www.acbhcs.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 Home Stretch of its concern. In the event that Contractor declines to accept a referral from Home Stretch, Contractor shall transmit to Home Stretch the specific reason for not accepting the referral.

Contractor shall initiate and document at least five unique attempts to engage a referred client within 30 days of receiving the referral from Home Stretch prior to sending that client referral back to Home Stretch with the reason that a client could not be reached or engaged.

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's Housing Navigation shall provide an intensive, housing-focused, care coordination role within Alameda County's health and housing services provider networks. Contractor's Housing Navigators shall help 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 practices to help clients obtain and maintain housing.**

Service duration shall be individualized in accordance to client need. Extensions of services beyond twelve months after a client has obtained housing may be granted on a case-by-case basis through written approval from Home Stretch staff.

At least one member of Contractor's program shall have access to the electronic data entry and claiming system approved by ACBH for purposes of coordinating care with other mental health providers in the ACBH provider network.

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

Additional Specifications
Program Design - Add Specs

2. Discharge Criteria and Process

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

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

- i. Discharge planning that begins at intake;
- ii. Agreement as to 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 clients' discharge shall be successful;
- iii. Discharge according to the client's discharge plan that describes the role of Contractor's staff in providing follow-up resources or services, and the coordination, if appropriate, with friends, family, and other members of the clients' support network.

In cases where the assessment indicates the need for follow-up case/care management, supervision, and 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 all collaborating team members, 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 ACBH, in writing as a part of client's record.

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

- i. Client is able to sustain current living situation financially, in terms of activities of daily living (ADLs) and instrumental activities of daily living (IADLs), 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 of personal meaning; and
- iv. Client has connections with social supports outside of the professional health and human service system.

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| Additional Specifications |
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| Discharge Criteria and Proc - Add Specs |
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3. Hours of Operation

Contractor shall maintain the following hours of operation:

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| Hours of Operation - Add Specs |
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4. Service Delivery Sites

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

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| Service Delivery Sites - Add Specs |
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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:⁴

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| Minimum Staffing Qual - Add Specs |
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IV. CONTRACT DELIVERABLES AND REQUIREMENTS

A. Process Objectives

Contractor shall serve 20-25 households at any point in time, and 30 households annually for each 1.0 Full-Time Equivalent (FTE) Housing Navigator.

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| Additional Specifications Process Objectives - Add Specs |
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B. Quality Objectives

Contractor shall provide services toward achieving the following quality objectives:

| Quality Measures | Quality Objectives |
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| Percent of clients with entry/exit information entered into the Homeless Management Information System (HMIS) on the day of entry/exit | At least 80% |
| Percent of clients with income information recorded in HMIS at entry and update, annual, or exit assessments | At least 80% |
| Percent of clients who have completed the Coordinated Entry Assessment within their first three months of services | At least 75% |
| Frequency of client contact recorded in HMIS | At least three contacts per client per month |
| Average length of program participation among clients | Less than or equal to 12 months |
| Among clients who move into housing, average time from Housing Navigation project enrollment to housing move-in date | Less than or equal to six months |

Contractor shall ensure that staff providing Housing Navigation 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.

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

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| 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 entry to their most recent update , annual, or exit assessment, among 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 at their most recent update , 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 update , annual, or exit assessment | At least 75% |
| Percent of clients who exit Housing Navigation into permanent housing or enrollment in Rapid Re-Housing (excludes exits to higher level of medical care and death) | At least 60% |

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| Additional Specifications Impact Objectives - Add Specs |
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V. REPORTING AND EVALUATION REQUIREMENTS

Contractor shall notify Home Stretch whenever their program is at capacity and they are unable to accept new referrals. 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 in HMIS. Contractor shall also input service data and client discharge status at closing. Contractor shall complete timely input of all required data into HMIS.

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

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

Reports shall be labeled in accordance with the established naming convention and shall be uploaded to the ACBH Citrix ShareFile 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 |

| Quarter | Dates Covered in Report | Due Date |
|-----------------|--------------------------------|-----------------|
| 3 rd | January 1 – March 31 | April 30 |
| 4 th | April 1 – June 30 | July 31 |

The Fourth Quarter Report shall be cumulative and shall serve as an Annual Program Report.

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

No additional requirements related to program area.

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| Additional Specifications Additional Requirements - Add Specs |
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