Lake County HUB - December 2023



Lake County HUB - December 2023				
Service	Description	3 Year Contract	5 Year Contract	
Community Health Record™ (CHR) Software Platform	CHR Platform - Annual; CCS's software platform license includes system, internal/integrated community resources directory via HealthBridge.care®, HIPAA secure messaging, standard reporting. Tier 2 user support with escalation for technical support, security compliance audit, standard hosting, standard maintenance, backup/restore, and frequent standard system upgrades. Includes 25 licensed users.	\$75,000	\$60,000	
Additional User Licenses	User Licenses - Additional user licenses above allotment may be added and removed at any time. Fee will be pro-rated for licensed users added mid-year.	\$1,250/user/annual	Unlimted users	
Patient Activation Measure® (PAM®) License	Patient Activation Measure (PAM) - Validated performance measure survey. 2 annual screenings for active clients. Clients screened in excess are \$25/client per screening	Included in contract	Included in contract	
HealthBridge.care® Referral Resource Directory	Integrated Healthbridge.care [™] - Integrated community resource referral directory via HealthBridge.care [®] (non-public facing website). Uses the available clinical and community resources of the Community HUB to streamline the referral process for care coordinators.	Included in contract	Included in contract	
Integrated Invoicing & Payout CHR Module	Invoicing - Multiple performance- based contracts for outcomes; braided-funding waterfall determines the appropriate payer for the outcome for the client. Specialized reporting for invoicing and financing operations including payer contract terms management, secure invoicing to payers, and invoicing and reporting support.	Included in contract	Included in contract	
Healthwise®	Health Education - System integration of Healthwise® to support patient/client education.	Included in contract	Included in contract	

HIE & EHR Advisory	Advisory - Scope review with one HIE, CIE, or EHR for CHR integration. Deliverables include project plan and budget for integration	\$5,000	Included in contract	
	Additional Option	ns & Training		
Medication Reconciliation Reviewer License	Integrated Medication Reconciliation - License grants clinician access to CHR to work directly and securely with the care coordinator in completing medication reconciliations for the client. Upon completion by the reviewer, the coordinator is notified, and the reconciled assessment is securely stored in the client's record.	\$6,000/License		
Payer Access License	Allow payers full CHR access or read-only access to authorized clients. Payer licenses includes Tier 2 CCS support, secure communication with care coordinators, supervisors, and HUB staff to work in a team approach. Reporting access to authorized client information and progress.	\$1,000/	\$1,000/License	
Activation Training	Dynamic training of community health workers and supervisors in the CHR platform focusing on features and HUB specific workflow using real-life case study examples. Separate Supervisor training provided for free to those attending Software Activation Training. Supervisor break-out training includes managing coordinators, best practices for signing documents and monitoring caseloads via reporting tool. Additional support scheduled for 1 week after training will include 1- hour open office-hour sessions for coordinators, supervisors, and HUB staff to ask for refreshers, guidance and/or problem solve current cases. Participants must attend entire training session. Minimum number of 10 participants for travel expenses to be included. Software Activation training to be held no earlier than 2 weeks before live launch into the field	\$1,500/participant		

	Project management, consulting on HUB best practices and expansion, advisory; development, customization of forms and reports.	\$300/hour Option to purchase 20-hour increments at \$250/hour
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For additional information please contact: Kate.Hinken@ccs.health

MEMORANDUM OF UNDERSTANDING Between LAKE COUNTY BEHAVIORAL HEALTH SERVICES And LAKE COUNTY CONTINUUM OF CARE For COLLABORATIVE APPLICANT AND LEAD AGENCY SERVICES

THIS MEMORANDUM OF UNDERSTANDING ("MOU") is entered into this _____ day of ______, 20232024, by and between the Lake County Behavioral Health Services, herein referred to as "LCBHS" and Lake County Continuum of Care, herein referred to as "CoC", hereinafter jointly referred to as the "Parties". The purpose of this document is to set forth the types and terms of collaborative services between LCBHS and CoC.

WITNESSETH:

1

WHEREAS, the CoC designated the LCBHS as the Collaborative Applicant and Lead Agency for the CoC by vote on September 18, 2019; and

WHEREAS, the CoC reestablished the LCBHS as the Collaborative Applicant and Lead Agency for the CoC by vote on September 19, 2022; and

NOW, THEREFORE, in consideration of their mutual covenants and conditions, the Parties hereto agree as follows:

1. PURPOSE

The purpose of this MOU is to confirm agreements between the CoC and LCBHS related to the roles of Collaborative Applicant and Lead Agency and the CoC.

This MOU reestablishes the LCBHS as the Collaborative Applicant and Lead Agency for the CoC, defines general understandings, and defines the roles and specific responsibilities of each Party relating to the positions of Collaborative Applicant and Lead Agency.

Collaborative applicant is defined to mean an eligible applicant (a private nonprofit organization, State, local government, or instrumentality of State and local government) that has been designated by the CoC to apply for grant funding on behalf of the CoC.

2. TERM

The term of this MOU is _____, 2023-2024 through December 31, 2025.

3. FISCAL EXPLANATION

This is a nonfinancial MOU and there are no costs associated with this agreement. This MOU will represent a shared responsibility for fiscal items, relying primarily on grant funding for operations but also some in-kind contribution from LCBHS. The CoC will determine how grants are awarded to housing service providers.

4. **RESPONSIBILITIES**

The responsibilities of LCBHS and CoC are set forth in Attachment 1, Description of Services, attached hereto and by this reference incorporated herein. These services are being provided with no cost to either LCBHS or CoC.

5. TERMINATION

This MOU may be terminated by either Party upon the giving of sixty (60) days advance written notice of an intention to terminate.

6. NON-ASSIGNMENT

Neither Party shall assign, transfer or sub-contract this MOU nor their rights or duties under this MOU without the prior written consent of the other Party.

Page 1 of 7

7. RECORDS

All Parties subject to this MOU shall maintain a record of services provided in sufficient detail to permit evaluation of the MOU. All such records shall be made available during normal business hours to authorized representatives of County, State, and Federal governments during the term of this MOU and during the period of record retention for the purpose of program review and/or fiscal audit.

8. COMPLIANCE WITH LAWS/POLICIES

The Parties shall comply with all applicable laws, rules and regulations related to U.S. Department of Housing and Urban Development (HUD) CoC and Emergency Solutions Grant (ESG) regulations. As well as compliance with State and other funding regulations, standards, and guidelines.

9. CONFIDENTIALITY

The Parties shall act in strict conformance with all applicable Federal, State of California and/or local laws and regulations relating to confidentiality, including but not limited to, California Civil Code section 56 et seq., Welfare and Institutions Code sections 827, 5328, 10850 and 14100.2, Health and Safety sections 11977 and 11812, 22 California Code of Regulations section 51009, and 42 Code of Federal Regulations sections 2.1 et seq. The Parties shall ensure that no list of persons receiving services under this MOU is published, disclosed, or used for any other purpose except for the direct administration of the program or other uses authorized by law that are not in conflict with requirements for confidentiality.

10. NON-DISCRIMINATION

During the performance of this MOU, the Parties shall not unlawfully discriminate against any employee or applicant for employment, or recipient of services, because of race, religion, color, national origin, ancestry, physical disability, medical condition, marital status, age or gender, pursuant to all applicable State and Federal statutes and regulations, as set forth in Attachment 11, Assurance of Compliance, attached hereto and by this reference incorporated herein.

11. RELATIONSHIP OF PARTIES

It is understood that this is a MOU by and between a coalition of interested entities addressing homelessness and a department of County government and is not intended to and shall not be construed to create a relationship of agent, servant, employee, partnership, joint venture or association.

12. NO THIRD PARTY BENEFICIARIES

Both LCBHS and CoC agree it is their specific intent that no other person or entity shall be a Party to or a third Party beneficiary of this MOU or and attachment or addenda to this MOU.

13. INDEMNIFICATION

Both LCBHS and CoC agree to be responsible and assume liability for its own wrongful or negligent acts or omissions, or those of its officers, agents, or employees to the full extent required by law.

14. NOTICE

Any and all notices, reports or other communications to be given to LCBHS or CoC shall be given to the persons representing the respective parties at the following addresses:

Department of Behavioral Health Services

Name:	Scott AbbottMellssa Kopt
Title:	Behavioral Health Services, Program ManagerStaff Services Analyst
Address:	PO BOX 1024, Lucerne, CA 95458
Email:	scott.abbottMelissa,Kopf@lakecountyca.gov

Lake County Continuum of Care

Name:	Kimbralee GuerraBruno Sabatier
Title:	Chair
Address:	255 N Forbes Street, Lakeport, CA 95453160 S Main Street, Lakeport, CA 95453
Email:	Bruno.Sabatier@lakecountyca.govGuerraK@redwoodcommunityservices.org

Page 2 of 7

15. PUBLIC RECORDS ACT

Both LCBHS and CoC are aware that this MOU and any documents provided are related only to this MOU may be subject to the California Public Records Act and may be disclosed to members of the public upon request. It is the responsibility of both LCBHS and CoC to clearly identify information in those documents that it considers to be confidential under the California Public Records Act. To the extent that LCBHS and CoC agree with that designation, such information will be held in confidence whenever possible. All other information will be considered public.

16. ENTIRE AGREEMENT AND MODIFICATION

This MOU contains the entire agreement of the Parties relating to the subject matter of this MOU and supersedes all prior agreements and representations with respect to the subject matter hereof. This MOU may only be modified by a written amendment hereto, executed by both Parties. If there are attachments attached hereto, and a conflict exists between the terms of this MOU and any attachment, the terms of this MOU shall control.

17. ENFORCEABILITY AND SEVERABILITY

The invalidity or enforceability of any term or provisions of this MOU shall not, unless otherwise specified, affect the validity or enforceability of any other term or provision, which shall remain in full force and effect.

18. DISPUTES

Both LCBHS and CoC shall use good faith efforts to resolve any disputes prior to bringing any action to enforce the terms of this MOU.

Should it become necessary for a Party to this MOU to enforce any of the provisions hereof, the prevailing party in any claim or action shall be entitled to reimbursement for all expenses so incurred, including reasonable attorney's fees.

It is agreed by LCBHS and CoC hereto that unless otherwise expressly waived by them, any action brought to enforce any of the provisions hereof or for declaratory relief hereunder shall be filed and remain in a court of competent jurisdiction in the County of Lake, State of California.

19. CAPTIONS

The captions of this MOU are for convenience in reference only and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this MOU.

20. OTHER DOCUMENTS

Both LCBHS and CoC agree that they shall cooperate in good faith to accomplish the object of this MOU and, to that end, agree to execute and deliver such other and further instruments and documents as may be necessary and convenient to the fulfillment of these purposes.

21. CONTROLLING LAW

The validity, interpretation and performance of this MOU shall be controlled by and construed under the laws of the State of California.

22. AUTHORITY

LCBHS and CoC and each Party's signatory warrant and represent that each has full authority and capacity to enter into this MOU in accordance with all requirements of law. The Parties also warrant that any signed amendment or modification to the MOU shall comply with all requirements of law, including capacity and authority to amend or modify the MOU.

ATTACHMENT 1

DESCRIPTION OF SERVICES

Unless indicated otherwise herein, LCBHS shall furnish all labor, materials, transportation, supervision, and management and pay all taxes required to complete the project described below.

A majority of services shall be provided at LCBHS offices located at 6302 Thirteenth Ave., Lucerne, CA 95458. Services may also be provided at various locations county-wide.

1. CoC Responsibilities

- A. Designate a Collaborative Applicant and Lead Agency.
- B. Designate responsibilities to the Collaborative Applicant and Lead Agency.
- C. Review the CoC Governance Charter annually in consultation with the Collaborative Applicant.
- D. Fulfill the responsibilities as contained in the By-Laws for the General Membership, Executive Committee, Subcommittees, and Workgroups.
- E. Strive for transparency and accountability with the community, including:
 - a) Inviting partnerships, collaborations, and membership opportunities to community stakeholders, particularly those with lived experience and traditionally underserved populations.
 - b) Assessing, evaluating, and prioritizing the homeless needs of the community through open forum.
 - c) Ensuring that grant funds are awarded fairly and appropriately to address identified homeless needs within the community.
 - d) Ensuring homeless services are being performed with quality.
 - e) Providing an oversight of how funding has been utilized.

2. LCBHS Responsibilities

- A. As Collaborative Applicant, the LCBHS shall:
 - a) Serve as the applicant for project sponsors who jointly submit a single application for grants on behalf of the CoC, receive grants directly from the source, distribute grants to awarded project sponsors, and provide training to grant recipients as needed.
 - b) Design a collaborative process for the development of applications for grant funding and for evaluating outcomes of projects for which funds are awarded, which includes:
 - Ensuring compliance with grant program requirements;
 - · Ensuring compliance with grant selection criteria; and
 - · Establishing priorities for funding projects in the geographic area involved.
 - c) Ensure that all funds disbursed are properly accounted for, appropriate services conducted, and records maintained in accordance with Generally Accepted Accounting Principles.
 - d) Provide technical assistance and training to provider agencies to ensure compliance with U.S. Department of Housing and Urban Development (HUD) CoC and ESG regulations, as well as compliance with State and other funding regulations, standards, and guidelines.
 - e) Participate in the Consolidated Plan for the geographic area served by the CoC.

- f) Ensure operation of, and consistent participation by, project sponsors in the Homeless Management Information System.
- g) Review HUD rules, regulations, and guidance and suggest updates to the Governance Charter.
- In consultation with the CoC Executive Committee, submit the annual application to HUD for CoC Program funding.
- i) Submit the annual CoC Planning Funds application to HUD.
- Submit the Consolidated Application to HUD through the Electronic Special Needs Assistance Programs (ESNAPS).
- B. As Lead Agency, the LCBHS shall:
 - a) Coordinate and oversee CoC Executive Committee meetings and All Membership meetings. This includes:
 - Scheduling meetings;
 - · Developing meeting agendas;
 - Issuing meeting materials; and
 - Posting relevant documents to the CoC website.
 - b) Provide support for CoC Executive Committee and all CoC committees.

c) Build strategic partnerships and cultivate new service partnerships within the community

e)d) Provides CoC Secretary and HMIS administration through obtained grant funding.

e) Create contract agreements for the CoC's awardees and LCBHS, representing as the Lead Agency,

- d)f) In support of the Strategic Planning Committee, Ccomplete the strategic plan updates with local and county governments.
- e)g)Monitor provider agencies' programmatic and financial management to ensure compliance with HUD CoC, ESG, State, and other regulations, standards and guidelines.
- f)h) Support the Performance Review Committee, measure and monitor performance of CoC funded projects. This includes developing strategic goals to end homelessness, collecting and disseminating data to measure performance toward those goals, and continuously evaluating and improving performance.
- <u>g)i)</u> Maintain the Lake County Continuum of Care website to provide transparency to the activities of the CoC.

3. Associated Costs

- a) LCBHS will utilize grant funding obtained for the CoC to pay for the operating costs associated with the salary of an analyst/HMIS Administrator for the CoC, HMIS software and licenses, and costs associated with Coordinated Entry System such as a contracted central provider, as well as consultants to assist with HMIS, writing for grants, and other quality improvement efforts.
- b) LCBHS will offer in-kind funding support to pay for a program manager, fiscal personnel support, and County Counsel as needed, and a number of Coordinated Entry System Access Points.
- c) Additional costs will be agreed upon by both parties to determine payment.

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Page 5 of 7

ATTACHMENT 11

ASSURANCE OF COMPLIANCE

WITH

THE LAKE COUNTY DEPARTMENT OF BEHAVIORAL HEALTH SERVICES NONDISCRIMINATION IN STATE AND FEDERALLY ASSISTED PROGRAMS

Lake County Continuum of Care

HEREBY AGREES THAT it will comply with Title VI and VII of the Civil Rights Act of 1964 as amended; Section 504 of the Rehabilitation Act of 1973, as amended; the Age Discrimination Act of 1975, as amended; the Food Stamp Act of 1977 as amended, and in particular Section 272.6; Title II of the Americans with Disabilities Act of 1990; California Civil Code, Section 51 et seq., as amended; California Government Code Section 11135-11139.5, as amended; California Government Code Section 12940 ©, (h) (1), (1), and U); California Government Code, Section 4459; Title 22, California Code of Regulations 98000 -98413, and other applicable federal and state laws, as well as their implementing regulations (including 45 Code of Federal Regulations (CFR) Parts 80, 84, and 91, 7 CFR Part 15, and 28 CFR Part 42), by ensuring that employment practices and the administration of public assistance and social services programs are nondiscriminatory, to the effect that no person shall because of ethnic group identification, age, sex, color, physical disability, mental disability, medical condition, national origin, race, ancestry, marital status, religion, religious creed or political belief or sexual orientation of any person be excluded from participation in or be denied the benefits of, or be otherwise subject to discrimination under any program or activity receiving federal or state financial assistance; and HEREBY GIVE ASSURANCE THAT it will immediately take any measures necessary to effectuate this agreement.

THIS ASSURANCE is given in consideration of and for the purpose of obtaining any and all federal and state assistance; and THE VENDOR/RECIPIENT HEREBY GIVES ASSURANCE THAT administrative methods/procedures which have the effect of subjecting individuals to discrimination or defeating the objectives of the California Department of Social Services (CDSS) Manual of Policies and Procedures (MPP) Chapter 21 will be prohibited.

BY ACCEPTING THIS ASSURANCE, the vendor/recipient agrees to compile data, maintain records and submit reports as required, to permit effective enforcement of the aforementioned laws, rules and regulations and permit authorized CDSS and/or federal government personnel, during normal working hours, to review such records, books and accounts as needed to ascertain compliance. If there are any violations of this assurance, CDSS shall have the right to invoke fiscal sanctions or other legal remedies in accordance with Welfare and Institutions Code Section 10605, or Government Code Section 11135-11139.5, or any other laws, or the issue may be referred to the appropriate federal agency for further compliance action and enforcement of this assurance.

The person or persons whose signatures appear below are authorized to sign this Assurance on behalf of the recipient.

THIS ASSURANCE is binding on the vendor/recipient directly or through contract, license, or other provider services, as long as it receives federal or state assistance.

IN WITNESS WHEREOF, the Parties hereto, by their duly authorized representative, have affixed their hands on the day and year first above written.

LAKE COUNTY CONTINUUM OF CARE

Kimbralee GuerraBruno Sabatier, Chair Date Lake County Continuum of Care

LAKE COUNTY BEHAVIORAL HEALTH SERVICES

Elise Jones, Director Date Lake County Behavioral Health Services

APPROVED AS TO FORM

Lloyd Guintivano County Counsel

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Date

Page 7 of 7

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Lake County Continuum of Care Emergency Solutions Grant (ESG) – CARES Act (ESG-CV) Program Policies and Procedures Manual

Table of Contents

<u>1. General Information</u> 5	
1.1 Purpose of this Document	
1.2 Guiding Principles	
1.3 Lake County ESG Contact Information	
2. Funding and Program Requirements6+	Formatted: Tab stops: Not at 0.31"
2.1 Applicable Regulations & HCD Policies	
2.2 Grant Awards and Spending Requirements	
3. Program Standards	Formatted: Tab stops: Not at 0.31"
3.1 Coordination with the Continuum of Care	
3.2 Eligible Activities	
3.2.1 Street Outreach	
3.2.2 Emergency Shelter	
3.3 Rapid Rehousing	
3.4 Administration 14	
4. Eligible Participants	Formatted: Tab stops: Not at 0.31"
	Formatted: Tab stops. Not at 0.51
4.1 Category 1: Literally Homeless	
4.2 Category 2: Imminent Risk of Homelessness	
4.3 Category 3: Homeless under other Federal Statutes	
4.4 Category 4: Fleeing/Attempting to Flee Domestic Violence	
5. Housing First	Formatted: Tab stops: Not at 0.31"
6. Fair Housing, Equal Access, and Anti-Discrimination Requirements	
6.1 Policy Against Discrimination	
6.2 Reasonable Accommodations for Disability	
6.3 Affirmative Outreach	
6.4 Faith-Based Requirements	
6.5 Equal Access Rule17	
7. Shelter Minimum Habitability Standards	Formatted: Tab stops: Not at 0.31"
8. Use of Homeless Management Information System (HMIS)	
9. Confidentiality	
10. Collection of Documentation	Formatted: Tab stops: Not at 0.46"
10.1 Documentation	
2 P a g e	

10.2 Record Retention		
<u>11. Intake</u>		Formatted: Tab stops: Not at 0.46"
12. Termination of Assistance and Grievance Policy		
12.1 Termination of Assistance	23	
12.2 Appeal	24	
12.3 Grievance Policy	24	
13. Financial Policies	<u></u> 25←	Formatted: Tab stops: Not at 0.46"
13.1 Duplication of Benefits	<u></u> 25	
14. Other required policies	<u></u> 25	Formatted: Tab stops: Not at 0.46"
14.1 Participation of People Experiencing Homelessness	<u></u> 25	
14.2 Drug Free Workplace	<u></u> 26	
14.3 Conflict of Interest Code of Conduct	<u></u> 26	
14.4 Lobbying	<u></u> 26	
I- General Information	4	
1.1 Purpose of this Document	4	
1.2 Guiding Principles	4	
1.3 Lake County ESG Contact Information	5	
2 <u>Funding and Program Requirements</u>	5	
2.1 Applicable Regulations & HCD Policies	5	
2.2 Grant Awards and Spending Requirements		
2 Program Standards		
- <u>Coordination with the Continuum of Care</u>	6	
3.2.1 Street Outreach	6	
<u>3-2-2 Emergency Shelter</u> <u>3-2-3 Additional Eligible Activities Under ESG-CV</u>	8 8	
3.3 Rapid Rehousing		
4.2 Category 2: Imminent Risk of Homelessness		
<u></u>		
4.4 Category 4: Fleeing/Attempting to Flee Domestic Violence		
3 Page		

<u>5 Housing First</u>	
<u>6 Fair Housing, Equal Access, and Anti-Discrimination Requirements</u>	
6.1 Policy Against Discrimination	 13
6.2 <u>Reasonable Accommodations for Disability</u>	
6.3 Affirmative Outreach	 13
6.4 Faith Based Requirements	 1 4
6.5 Equal Access Rule	 1 4
<u>7 Shelter Minimum Habitability Standards</u>	
8 <u>Use of Homeless Management Information System (HMIS)</u>	
<u>9 Confidentiality</u>	
10 <u>Collection of Documentation</u>	15
10.1 Documentation	
10.2 Record Retention	 16
<u>11 Intake</u>	16
12 Termination of Assistance and Grievance Policy	
<u>12.1</u> — <u>Termination of Assistance</u>	 17
<u>12.2</u> <u>Appeal</u>	 18
12.3 <u>Grievance Policy</u>	 18
13 <u>Financial Policies</u>	
13.1 Duplication of Benefits	 19
14 Other required policies	
14.1 Participation of People Experiencing Homelessness	 19
14.2 Drug Free Workplace	 19
14.3 <u>Conflict of Interest Code of Conduct</u>	 20
<u>14.4 Lobbying</u>	 20

I. General Information

The Emergency Solutions Grant (ESG) provides federal funds from the U.S. Department of Housing and Urban Development (HUD) to support local programs in assisting individuals and families to quickly regain stability in permanent housing after experiencing a housing crisis or homelessness. The California Department of Housing and Community Development (HCD) received supplemental funding under the ESG-CARES Act (ESG-CV) to further support local communities and tribes in providing additional homeless assistance to mitigate the impacts created by the coronavirus. The HCD-funded ESG-CV grant for Lake County Behavioral Health Services, Administrative Entity for the Lake County Continuum of Care (LAKE COUNTY), Emergency Solutions Grant Program, will allow LAKE COUNTY to aid people experiencing and at-risk homelessness.

Lake County experiences severe shortages of available housing, significant overcrowding, lack of transitional or emergency shelter and high cost for construction of new housing. These factors contribute to a substantial number of individuals and families experiencing homelessness and were exacerbated by the COVID-19 pandemic and the economic and other effects of the sustained public health emergency.

LAKE COUNTY will work with local partners to provide a system-wide approach to meet the needs of people experiencing homelessness within the geographical area of Lake County. LAKE COUNTY has received ESG-CV funding for emergency shelter, street outreach, rapid rehousing, Homeless Management Information Systems (HMIS) and administrative funds to support its communities.

1.1 Purpose of this Document

The information provided here is intended to guide staff on the process on how to assist of assisting families, children, and youth who are experiencing homelessness and requesting ESG-CV assistance from Lake County. It includes policies mandated by HCD and HUD for all recipients and subrecipients of ESG-CV funds, as well as policies specific to the operation of LAKE COUNTY ESG-CV programs. This document also acts as a guide for

how other programs and projects are expected to operate as contractors of the Lake County Continuum of Care.

1.2 Guiding Principles

In administering this program, LAKE COUNTY offers the following guiding principles for its approach and service delivery:

- Housing is a basic human need to ensure it is accessible, safe, and affordable for participants.
- Participant's basic needs should be met first (food, housing, clothing, etc.), with other needs focused on only after those are met (recovery, parenting, education, etc.) and even then, offered voluntarily.
- Participants have the right to set their own goals and make their own decisions, LAKE COUNTY should work to reduce as many barriers to services as possible,
- Participants are the experts in what they need and how they can achieve their goals. Participants experiencing homelessness are incredibly resilient and possess many strengths and assets, which should always be leveraged and considered in service delivery.
- Every participant has inherent dignity and worth so LAKE COUNTY will treat participants in a caring and respectful fashion, mindful of individual differences and cultural and ethnic diversity.
- Participants have a right to confidentiality and to be informed of their rights, especially as it relates to their records, program termination, grievances, etc.
- Services delivered to participants should promote participant well-being and work to integrate the participant with mainstream resources and the larger community as much as possible.
- > Families, individuals, and children are better off in "home-like" settings rather than institutions.

1.3 Lake County ESG Contact Information

Questions regarding ESG should be directed to: Scott Abbott, Program Manager, Lake County Behavioral Health Services, scott.abbott@lakecountyca.gov.

2 Funding and Program Requirements

2.1 Applicable Regulations & HCD Policies

The Emergency Solutions Grants (ESG) program is governed by the <u>ESG Program Interim Rule</u>, found at 24 CFR Part 576. The CARES Act allocated additional ESG monies throughout the U.S. to support efforts to prevent, prepare for, and respond to coronavirus for people experiencing homelessness. These funds are known as the ESG-CV grant. There are three notices specific to ESG-CV, listed and linked below:

- Notice 20-08 (Issued: September 2020)
- Notice 21-08 (Issued: July 2021) Notice 22-06 (Issued: April 2022)

All ESG/ESG-CV funded projects shall incorporate the following HCD policies, regardless of the ESG/ESG-CV components (Outreach; Emergency Shelter; Rapid Rehousing; HMIS; Administration).

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- ESG Housing Problem Solving Policy (PDF)
- <u>ESG Personally Identifying Information (PII) Policy (PDF)</u>
- ESG Personally Identifying Information Checklist (PDF)
- <u>ESG Program Income Policy (PDF)</u>
- ESG Equipment Acquisition and Disposition Policy (PDF)
- <u>Cross Cutting Policies (PDF)</u> (Section 3; Fair Housing and Equal Opportunity; Affirmative Outreach; Lead-Based Paint; Environmental Reviews; 2 CFR 200; Uniform Relocation Act; Procurement of Recovered Materials)

2.2 Grant Awards and Spending Requirements

All ESG-CV funds for outreach, shelter, rapid rehousing and must be expended by September 30, 2023. All administrative and Homeless Management Information Systems (HMIS) funds for ESG-CV closeout must be expended by October 31, 2023.

3 Program Standards

3.1 Coordination with the Continuum of Care

LAKE COUNTY (including the Lake County Continuum of Care), and where applicable, develop and comply with the CoC's written standards and policies and procedures for ESG-funded activities in order to provide a strategic, community-wide system to prevent and end homelessness. Those policies include:

1. Performance standards and outcomes for projects assisted by ESG funds.

2. Policies and procedures for administration, funding, and operation of HMIS and compliance with data entry, data quality, and security guidelines.

3. Coordinated Entry Systems (CES), so that the people served by ESG-CV programs are assessed and eligible for housing and services through the CoC's CES.

3.2 Eligible Activities

LAKE COUNTY has contracted to serve eligible participants using ESG-CV funds through providing street outreach and emergency shelter services, and also using administrative and HMIS funds as outlined in its standard agreement with the state of California. All activities must be authorized under CPD Notice 21-08 and 24 CFR 576.

3.2.1 Street Outreach

Under 24 CFR 576.101, Street Outreach activities are designed to meet the needs of unsheltered homeless people by connecting them with emergency shelter, housing and/or critical health services that include: engagement; emergency mental health services; case management; transportation; emergency health services; and services for special populations.

7 | Page

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Lake County incorporates the following HCD policies, procedures, and resources into the operation of its ESG/ESG-CV Outreach Programs:

- ESG Street Outreach Policy (PDF)
- ESG Client File Checklist Street Outreach (PDF).
- <u>ESG-CV Client File Checklist Street Outreach (PDF)</u>
- <u>ESG Housing Stability Plan Fillable (PDF)</u>
- <u>ESG-CV Housing Stability Plan Fillable (PDF)</u>
- <u>https://www.hcd.ca.gov/grants-funding/active-funding/esg/docs/ESG-and-ESG-CV-Deep-Dive-ES-</u>
 <u>SO.pdf</u>ESG-CV Street Outreach and Emergency Shelter Training Slides

Coordinated Entry integration.

Street outreach project will participate in the local Coordinated Entry System to ensure that participants are connected quickly to the resources available via Coordinated Entry, including but not limited to ESG-funded permanent housing. A number of current outreach projects are Access Points to Coordinated Entry and can enroll participants directly.

Participant eligibility. Outreach projects will establish and document participant eligibility as described on p. 5-11 of <u>ESG Homelessness Eligibility Policy (PDF)</u>. As required by the ESG Program Interim Rule, lack of thirdparty documentation must not be a barrier to enrollment in ESG-SO projects. This function will be carried out by case manager of the project.

Subrecipient requirements: Subrecipients receiving ESG/ESG-CV Outreach funds must describe the following elements of ESG/ESG-CV outreach projects:

Coverage Area:

- Geographic area(s) served:
- Will outreach services be mobile, site-based or both?
- How will project(s) ensure to reach people experiencing unsheltered homelessness in its geographic area and target population who are lease likely to request services?

Suite of Services:

- Describe full suite of services (must be eligible in 24 CFR 576.101):
- Describe process for assessing each participant's individual strengths and housing barriers, then
 developing an individualized case management plan that incorporates those strengths and housing
 barriers to quickly return the participant to safe, stable permanent housing.

Staffing Pattern:

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- Describe estimated size of outreach staff and associated job duties:
- Describe process for entering participant data into and maintaining participant data in HMIS:

Housing Problem Solving: Note: projects should continue to provide diversion and rapid exit services to all participants until both project and participant mutually agree that the participant will no longer benefit from them.

- Describe how the project attempt to provide <u>diversion services</u> to all participants who either (a) will experience their first night of unsheltered homelessness on the night of contact or (b) are experiencing unsheltered homelessness but have not yet received diversion services.
- Describe how the project attempt to provide <u>rapid exit services</u> to all participants who are experiencing unsheltered homelessness and who are not already receiving rapid exit services from another project or provider.

3.2.2 Emergency Shelter

Under 24 CFR 576.102, Emergency Shelter activities are designed to increase the quantity and quality of temporary shelters provided to homeless people, through paying for the operating costs of shelters, and providing essential services.

Eligible essential services include: case management; child care; education services; employment assistance and job training; outpatient health services; legal services; life skills training; mental health services; substance abuse treatment services; transportation; services for special populations

Eligible shelter operations costs include: maintenance; rent; security; fuel; equipment; insurance; utilities; food; furnishings; supplies necessary for shelter operation; hotel/motel vouchers.

Lake County incorporates the following HCD policies, procedures, and resources into the operation of its ESG/ESG-CV Emergency Shelter Programs:

- ESG Emergency Shelter Policy (PDF)
- ESG Minimum Habitability Standards for Shelter and Housing Policy (PDF).
- ESG Client File Checklist Emergency Shelter (PDF)
- <u>ESG-CV Client File Checklist Emergency Shelter (PDF)</u>
- ESG Housing Stability Plan Fillable (PDF)
- <u>ESG-CV Housing Stability Plan Fillable (PDF)</u>
- ESG California Lead Base Paint Assessment Worksheet (fillable PDF)
- ESG VAWA Compliance Policy (PDF)

3.2.3 Additional Eligible Activities Under ESG-CV

Specific additional eligible activities authorized under the CARES Act and CPD Notice 21-08 include:

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3.2.3.1 Landlord Incentives

ESG-CV funds may be used under 24 CFR 576.105 to add the eligible cost of paying for landlord incentives as reasonable and necessary to obtain housing for individuals and families experiencing homelessness and atrisk of homelessness. Total ESG-CV incentives may not exceed three times the rent charged for the unit.

Eligible landlord incentive costs include:

- Signing bonus of up to two months of rent
- Paying the cost to repair damages incurred by the program participant not covered by the security
 deposit or that are incurred while the program participant is still residing in the unit
- Paying the costs of extra cleaning or maintenance of a program participant's unit or appliances The subrecipient must determine and document that each landlord incentive cost is reasonable and necessary.

3.2.3.2 Volunteer Incentives

Under 24 CFR 576.101(a), 102(a)(1), and 105(b), ESG-CV funds may be used to provide reasonable incentives to volunteers who have been or are currently helping to provide necessary street outreach, emergency shelter, essential services and housing relocation and stabilization services during the coronavirus outbreak.

3.2.3.3 Cell Phones and Internet

Under 24 CFR 576.101(a), 102(a)(1), and 105(b), ESG-CV funds may be used for the costs of providing temporary cell phones for individuals and families experiencing homelessness, receiving rapid re-housing or homeless prevention assistance, or residing in permanent supportive housing funded with CoC and YHDP programs.

The cell phone and corresponding wireless service plan must be owned by the recipient or subrecipient, or sub-subrecipient but may be loaned to the program participant. The phone must be used while stay-athome or social distancing orders are in effect in the community in which the program participant resides, or while they continue to need it to participate in activities necessary to obtain and maintain housing (e.g., job interviews, health and mental health services) that remain virtual even after social distancing measures are relaxed. At which point, the phone is no longer necessary for such uses, it must be returned to the recipient or subrecipient.

3.2.3.4 Personal Protective Equipment (PPE) for Program Participants

Under the eligible activities of 24 CFR 576, PPE can be provided to program participants as an essential service under emergency shelter and street outreach. Additionally, PPE can be provided under rapid rehousing and homeless prevention activities if required to participate in corresponding activities such as housing stabilization activities. CPD Notice 21-08 expands the allowances under homeless prevention and rapid re-housing and PPE can be provided to any program participant being assisted under homeless prevention or rapid re-housing activities to ensure that they limit exposure to the coronavirus.

3.2.3.5 Vaccine Incentives

In situations where other incentive programs are not available to individuals experiencing homelessness to receive a vaccine, ESG-CV funds can be used to pay up to \$50 per dose of an FDA-approved coronavirus vaccine.

3.2.3.6 Laundry

ESG-CV funds may be used to pay for laundry services, including by paying for laundry trucks to outdoor locations under 24 CFR 576.101(a) as authorized by CPD Notice 21-08.

3.2.3.7 Hotel and Motel Costs

Hotel and motel costs are generally eligible expenses for emergency shelter where no appropriate emergency shelter exists. The use of hotel or motel costs is expanded to be used for participants residing in emergency shelter, receiving rapid re-housing or homeless prevention assistance, or those residing in permanent supportive housing. In these cases, hotel or motel costs would be eligible when a program participant needs to isolate or quarantine to keep from spreading coronavirus to other shelter occupants or household members.

Additionally, ESG-CV funds may be used to pay for the cleaning of rooms as well as to repair damage above normal wear and tear.

3.2.3.8 Legal Services

Legal services authorized under 24 CFR 576.102(a)(1)(vi) and 24 CFR 576.105(b)24) are limited to those services necessary to help program participants obtain housing or keep a program participant from losing housing where they currently reside.

3.2.3.9 Training

ESG-CV funds may be used for training on infectious disease prevention and mitigation for staff working directly to prevent, prepare for, and respond to coronavirus among persons who are homeless or at risk of homeless. Such costs will not be considered administrative costs. Such training costs will be considered a standalone activity.

3.2.3.10 Hazard Pay

ESG-CV funds may be used to pay hazard pay for recipient or subrecipient or sub-subrecipient staff working directly to prevent, prepare for, and respond to coronavirus. Records must be maintained showing how the staff works directly to prevent, prepare for, and respond to coronavirus.

3.2.3.11 Handwashing Stations and Portable Bathrooms

Under 24 CFR 576.101(a), ESG-CV funds may be used for installing and maintaining handwashing stations and bathrooms in outdoor locations for people experiencing unsheltered homelessness.

3.3 Rapid Rehousing

Rapid Rehousing (RRH) Assistance includes <u>financial assistance</u>, rental assistance and housing relocation and stabilization services for households experiencing homelessness at the time of program entry.

Rapid Re-Housing assistance is available for persons who are literally homeless according to HUD⁴<u>s</u> definition in Household Eligibility. See the Lake County ESG-CV Written Standards for more information about Rapid Rehousing.

The CARES Act provides that ESG-CV funds may be used to mitigate the economic impact of COVID-19. Programs are encouraged to consider the maximum number of rental assistance months be extended/adjusted to address unemployment, loss of income, or benefits due to COVID-19. Additionally,

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CARES Act ESG-CV funding does not require a rental payment for households receiving financial assistance and projects are expected to serve people with zero income. Additionally, providers cannot require participants to receive the COVID-19 testing or vaccination to receive rapid re-housing or homelessness prevention services, including prioritizing assistance.

ESG-CV funds may be used to provide housing relocation and stabilization services and short- and/or medium-term rental assistance necessary to prevent an individual or family from moving into an emergency shelter or another place described in paragraph (1) of the "homeless" definition in <u>24 CFR 576.2</u>, ESG-CV rent assistance and housing relocation and stabilization services should be prioritized for households with the longest history of homelessness and for households with the most severe service needs including COVID-19 related needs.

When providing RRH assistance to eligible participants, programs are required to maintain the following documents for each participant:

• Leases

- Each program participant receiving rental assistance must have a legally binding, written lease for the rental unit, unless the assistance is solely for rental arrears. The lease must be between the owner and the program participant. Where the assistance is solely for rental arrears, an oral agreement may be accepted in place of a written lease, if the agreement gives the program participant an enforceable leasehold interest under state law and the agreement and rent owed are sufficiently documented by the owner's financial records, rent ledgers, or canceled checks. For program participants living in housing with project-based rental assistance under paragraph (i), the lease must have an initial term of 1 year.
 - Each lease executed on or after *December 16, 2016* must include a lease provision or incorporate a lease addendum that includes all VAWA requirements that apply to tenants, the owner or lease under 24 CFR part 5, subpart L (Protection for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking), as supplemented by 24 CFR 576.409, including the prohibited bases for eviction and restrictions on construing lease terms under 24 CFR 5.2005(b) and (c). If the housing is not assisted under another "covered housing program," as defined in 24 CFR 5.2003, the lease provision or lease addendum may be written to expire at the end of the rental assistance period.
 - Subrecipients may choose between two options for VAWA lease amendments:
 - Subrecipients may use the sample "Lease Addendum" (HUD-91067), provided here: https://www.hud.gov/sites/documents/91067.doc
 - Subrecipients may create their own lease addendum, which must incorporate
 all protections listed in 24 CFR Part 5, Subpart L

<u>Rental Assistance Agreements</u>

<u>Lake County or its subrecipients may only make rental assistance payments to an owner with</u>
 whom the county or subrecipient has entered into a rental assistance agreement. The rental
 assistance agreement must set forth the terms under which rental assistance will be
 provided, including the requirements that apply under this section. The rental assistance
 agreement must provide that, during the term of the agreement, the owner must give the
 recipient or subrecipient a copy of any notice to the program participant to vacate the

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housing unit or any complaint used under State or local law to commence an eviction action against the program participant.

- The rental assistance agreement must contain the same payment due date, grace period, and late payment penalty requirements as the program participant's lease.
- Each rental assistance agreement that is executed or renewed on or after December 16, 2016 must include all VAWA protections that apply to tenants and applicants under 24 CFR part 5 subpart L, as supplemented by § 576.409, except for the emergency transfer plan requirements under 24 CFR 5.2005€ and 576.409(d).
 - If the housing is not assisted under another "covered housing program", as defined in 24 CFR 5.2003, the agreement may provide that the owner's obligations under 24 CFR part 5, subpart L (Protection for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking), expire at the end of the rental assistance period.

Habitability Standards

o Minimum Habitability Standards can be found here.

Rent Reasonableness Certification

Rental assistance cannot be provided unless the rent complies with HUD's standard of rent reasonableness, as established under 24 CFR 982.507.

Sample rent reasonable form

VAWA Notice of Occupancy Rights: These forms must be provided at each of the following times:

When an applicant is denied ESG rental assistance

- When an applicant's application for a unit receiving project-based rental assistance is denied 0
- o When a participant begins receiving ESG rental assistance
- When a participant is notified of termination of ESG rental assistance
- o When a participant receives notification of eviction

Lead-Based Paint Forms (for units built before Jan 1, 1978)

<u>o Lead-Paint Disclosure</u>

- Protect Your Family From Lead In Your Home pamphlet
- o Lead-Paint Visual Assessment (only if a child under the age of 6 or a pregnant person will be living in the unit)

Lake County incorporates the following HCD policies, procedures, and resources into the operation of its ESG/ESG-CV Rapid Rehousing Programs:

- ESG Rapid Rehousing Manual (PDF)
- ESG Rapid Rehousing Manual Checklist (PDF)
- ESG Minimum Habitability Standards for Shelter and Housing Policy (PDF).

13 | Page

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- ESG Client File Checklist Rapid Rehousing (PDF).
- ESG-CV Client file Checklist Rapid Rehousing (PDF).
- ESG Housing Stability Plan Fillable (PDF).
- ESG-CV Housing Stability Plan Fillable (PDF).
- ESG California Lead Base Paint Assessment Worksheet (fillable PDF)
- ESG Fair Market Rent and Rent Reasonableness Policy (PDF)
- Fair Market Rent and Rent Reasonableness Certification (PDF)
- ESG VAWA Compliance Policy (PDF)
- ESG VAWA Lease Agreement (PDF)

3.4 Administration

Eligible costs for administration may not exceed 10 percent of total ESG program funds awarded. Such costs include:

- Salaries, wages, and related costs for staff whose primary responsibilities involve program administration, developing systems for ensuring compliance with program requirements, preparing reports and other documents related to the ESG Program, performance of financial management responsibilities related to the grant and coordinating the resolution of audit and/or monitoring findings;
- Administrative services performed under third-party contracts or agreements such as accounting services and audit services;
- Public information activities, such as notices for pre-development permit hearings or notices to announce availability and eligibility criteria for homeless services.

4 Eligible Participants

Emergency Shelter and Street Outreach programs may serve people who are homeless under the Homeless Definition final rule, published in the Federal Register on December 5, 2011. This rule defines homelessness in four (4) categories as follows (which must be documented to receive assistance):

4.1 Category 1: Literally Homeless

Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- i. Has a primary nighttime residence that is a public or private place not meant for human habitation;
- Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, and local government programs); or

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Is exiting an institution where (s)he has resided for 90 days or less and who resided in an iii. emergency shelter or place not meant for human habitation immediately before entering that institution. 4.2 Category 2: Imminent Risk of Homelessness Individual or family who will imminently lose their primary nighttime residence, provided that: Formatted: Font: 12 pt i. Residence will be lost within 14 days of the date of application for homeless assistance; ii. No subsequent residence has been identified; and The individual or family lacks the resources or support networks needed to obtain other iii. permanent housing. 4.3 Category 3: Homeless under other Federal Statutes Unaccompanied youth under 25 years of age, or families with children and youth, who do not Formatted: Font: 12 pt otherwise qualify as homeless under this definition, but who: Are defined as homeless under the other listed federal statutes located at 24 CFR part i. 576.1 "Definitions". Have not had a lease, ownership interest, or occupancy agreement in permanent housing ii. during the 60 days prior to the homeless assistance application. iii. Have experienced persistent instability as measured by two moves or more during the preceding 60 days; and Can be expected to continue in such status for an extended period due to special needs or iv. barriers. 4.4 Category 4: Fleeing/Attempting to Flee Domestic Violence Any individual or family who: Formatted: Font: 12 pt Is fleeing, or is attempting to flee, domestic violence; i. Has no other residence; and ii. iii. Lacks the resources or support networks to obtain other permanent housing. 5 Housing First LAKE COUNTY operates consistently with Housing First practices and progressive engagement principles as Formatted: Font: 12 pt outlined in 25 CCR, § 8409, subdivision (b)(1)-(7), including the following: (1) Ensuring low-barrier, easily accessible assistance to all people, including, but not limited to, people with no income or income history, and people with active substance abuse or mental health issues; (2) Helping participants quickly identify and resolve barriers to obtaining and maintaining housing; (3) Seeking to quickly resolve the housing crisis before focusing on other non-housing-related services;

(4) Allowing participants to choose the services and housing that meets their needs, within practical and funding limitations; and

(5) Connecting participants to appropriate support and services available in the community that foster long-term housing stability.

LAKE COUNTY is committed to creating a healthy and safe environment for all clients, and to maintaining low barriers to entry. Shelter staff aim to support clients to remain in the program until they reach their housing goals. In a Housing First model case management and other programs are designed to assist participants in moving to housing as quickly as possible, serving those most in need or most vulnerable, and providing services as needed to support long-term stability.

Termination from the shelter will only occur in extreme circumstances, for actual threat or injury to other participants, staff, or property. Shelter staff will make every effort to accommodate participants regardless of any infraction and to resume assistance to the client in the future.

Participants are encouraged to take advantage of voluntary housing-focused case management services to return to permanent housing as rapidly as possible. Case managers will refer clients to voluntary services that reflect the core principles of Housing First, using a client-centered, flexible, harm-reduction approach. Staff are trained in trauma-informed care, motivational interviewing and other practices that help support clients to actively participate in their rehousing process.

6 Fair Housing, Equal Access, and Anti-Discrimination Requirements

LAKE COUNTY works with its partners, including Tule River Tribal Council, county governments and nonprofits, to be leaders in their crisis response systems, facilitating partnerships among service organizations and promoting evidence-based, anti-racist practices.

LAKE COUNTY staff works to ensure that all eligible persons receive equitable services and support and are served with dignity, respect and compassion regardless of circumstance, ability or identity.

LAKE COUNTY programs provide culturally competent, accessible services to all populations, including Black, Native and Indigenous, people of color, immigrants, people with criminal records, people with disabilities, people with mental health and substance use vulnerabilities, people with limited English proficiency, people who identify as transgender, people who identify as LGBTQ+, and other individuals who may not access mainstream support.

6.1 Policy Against Discrimination

LAKE COUNTY treats all persons equally, courteously, and professionally during all points of the program cycle, and does not discriminate on the basis of any protected characteristic, including race, color, national origin, religion, sex, age, familial status, ancestry, marital status, sexual orientation, gender identity, or disability and ensures equal access to all eligible households. Disability and mental health status are never reasons to deny services or program access to a potential client.

As a recipient of federal funds, LAKE COUNTY complies with applicable civil rights and fair housing laws and requirements, including the Fair Housing Act, 42 USC § 3601, *et seq.*, Section 504 of the Rehabilitation Act, 29 USC § 794, *et seq.*, the Americans with Disabilities Act, 42 USC § 12182, *et seq.*, and Title VI of the Civil Rights Act, 42 USC § 2000d, *et seq.*

16 | Page

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Pursuant to 24 CFR 576.102, the age of a child under age 18 must not be used as a basis for denying any family's admission to an emergency shelter that uses Emergency Solutions Grant (ESG) funding or services and provides shelter to families with children under age 18.

6.2 Reasonable Accommodations for Disability

Clients and prospective clients with disabilities receive reasonable accommodations to allow program participation. LAKE COUNTY grants applicant and client requests to change program policies or procedures when reasonable and necessary due to a disability. Such an accommodation is treated equally whether requested at application, intake, during participation, or at exit.

Staff and clients have the right to report discrimination or harassment without fear of retaliation by the program or staff. LAKE COUNTY continually reviews policies and procedures in order to reasonably accommodate client needs.

6.3 Affirmative Outreach

LAKE COUNTY shall:

- Make known that the use of the facilities, assistance, and services are available to all on a nondiscriminatory basis, and establish additional procedures, as required under 24 CFR 576.407(b), to ensure that people who may qualify are made aware of the availability of these facilities, assistance, or services; and
- Take appropriate steps to ensure effective communication with persons with disabilities; and
- Take reasonable steps to ensure meaningful access to programs and activities for persons with limited English proficiency (LEP) and to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability, who are least likely to apply in the absence of special outreach.

6.4 Faith-Based Requirements

In accordance with 24 CFR 576.406, LAKE COUNTY staff do not, in providing assistance, discriminate against a client or prospective client on the basis of religion or religious belief. In providing services and in outreach activities related to such services, LAKE COUNTY does not discriminate against current or prospective clients on the basis of religion, a religious belief, a refusal to hold a religious belief, or a refusal to attend or participate in a religious practice.

6.5 Equal Access Rule

The Equal Access Rule, announced in January 2012, codified HUD's commitment to the fair administration of its funded projects "regardless of marriage status, sexual orientation or gender identity." Following that announcement, in September 2016, HUD further required that decisions related to placement and accommodations in single-sex shelters and facilities must be made in accordance with the client's gender identity. The Equal Access Rule prohibits discrimination based on both actual and perceived gender identity.

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The purpose of these best practices is to ensure the safety, dignity, and well-being of transgender and gender non-conforming persons accessing programs.

The best practice is to treat transgender and gender non-conforming clients with respect. Respect is key to ensuring safety and equal access for all clients. Use of language is one way that staff can show respect. Staff should refrain from making assumptions about a client's gender and take care to use words that affirm clients' identities and to avoid words that are offensive. If you are unsure if a term is affirming or offensive to an individual client, you may ask the client what terms they prefer.

In furtherance of the Equal Access Rule, LAKE COUNTY will:

- 1. Grant equal access to facilities, buildings, benefits, accommodations, and services to individuals in accordance with the individual's gender identity, and in a manner that affords equal access to the individual's family.
- 2. Prohibit any requirements for individuals to prove gender identity (including documentation, identification, intrusive questioning on person's anatomy or medical history, etc.
- 3. Train staff that when uncertain of the participant's sex or gender identity, they may simply inform the participant or potential participant that the program provides shelter based on the gender with which the individual identifies.
- 4. Prohibit consideration of a participant or potential participant's entry into a program because his, her, or their appearance or behavior does not conform to gender stereotypes.
- 5. Prohibit any segregation of transgender participants (e.g., transgender only shelter or space), unless the transgender participant requests an accommodation (like a more private space) and the facility can accommodate the request.
- 6. Base discharges, service restrictions, and warnings following any incidents involving transgender participants ONLY on the individual's behavior, not gender identity.
- 7. Have a zero tolerance for harassment of transgender guests:
 - a) Staff shall recognize that harassment based on gender identity is discriminatory behavior and will be treated as such.
 - b) All unacceptable behavior including, but not limited to harassment, abuse, assault, discrimination, intimidation, threats, violence and many other forms against transgender guests will be dealt with based on the program's behavior policies.
 - c) Due to the high incidence of harassment of transgender people, concerns about the safety of a transgender guest will be taken with utmost seriousness.
- 8. Permit any participants expressing concern to use bathrooms and dressing areas at a separate time from others in the facility.
- 9. Work (to the extent feasible) with the layout of any shelter facilities to provide for privacy in bathrooms and dressing areas.
- 10. Ensure that policies do not isolate or segregate participants based upon gender identity.
- <u>11.</u> Provide staff (including full-time, part-time and volunteer) and contractors with ongoing training on best practices as well as Equal Access rules and the needs, concerns, and realities of transgender people seeking services.
 - 11.

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7 Shelter Minimum Habitability Standards

LAKE COUNTY will ensure that sites used as shelter meet standards for habitability, including lead-based paint remediation and disclosure requirements for applicable buildings. The ESG Program interim rule, at 24 CFR 576.403, establishes minimum standards for safety, sanitation, and privacy in emergency shelters funded with ESG. Under the ESG-CV program, certain flexibilities are provided for shelter and housing standards. A tool will be used to evaluate shelters.

8 Use of Homeless Management Information System (HMIS)

LAKE COUNTY will follow the policies and procedures of the Lake Count CoC HMIS for all ESG-CV participants. Information will be entered into HMIS within 3-5 business days of program entry. LAKE COUNTY will work with the CoC HMIS lead to ensure timeliness of data entry and data quality standards are met and that applicable confidentiality and data privacy safeguards are implemented.

LAKE COUNTY will use the HMIS release of information and privacy forms provided by the HMIS lead agency, and keep those on file for each participant.

9 Confidentiality

LAKE COUNTY protects program participant confidentiality in the administration of its ESG-CV activities pursuant to 24 CFR 576.500 (x) which states that the recipient and its subrecipients must develop and implement written procedures to ensure:

(i) All records containing personally identifying information (as defined in HUD's standards for participation, data collection, and reporting in a local HMIS) of any individual or family who applies for and/or receives ESG assistance will be kept secure and confidential;

(ii) The address or location of any domestic violence, dating violence, sexual assault, or stalking shelter project assisted under the ESG will not be made public, except with written authorization of the person responsible for the operation of the shelter; and

(iii) The address or location of any housing of a program participant will not be made public, except as provided under a preexisting privacy policy of the recipient or subrecipient and consistent with state and local laws regarding privacy and obligations of confidentiality.

Lake County requires its ESGCV subrecipients to maintain confidentiality procedures in writing, and the procedures must be maintained in accordance with 24 CFR 576.500(x). Confidentiality procedures will be reviewed and amended as needed through annual monitoring (both internally and with subrecipients).

Lake County's Confidentiality Procedures are as follows:

Protecting Personally Identifying Information (PII)

<u>PII is defined by OMB M-07-116, "Memorandum for the Heads of Executive Departments and Agencies", as</u> follows: Formatted: Font: 12 pt

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<u>"Information which can be used to distinguish or trace an individual's identity, such as their name, social</u> security number, biometric records, etc. alone, or when combined with other personal or identifying information which is linked or linkable to a specific individual."

 PII includes, but is not limited to, social security numbers, addresses, medical information, bank account information, and personal telephone numbers. PII can be found in participant records, in HMIS, on a computer, and/or in financial records and back-up documentation. To protect PII that may be collected, staff
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 Limit the collection of PII

Limit the collection of PII	Formatted: Font: 12 pt, Bold
 Only collect the PII you need. 	Formatted: Font: 12 pt
 Make sure you are authorized to collect the PII 	
Manage Access of PII	Formatted: Font: 12 pt, Bold
 Only share or discuss PII on a need-to-know basis. 	Formatted: Font: 12 pt
 Never discuss or release PII without authorization. 	
 Treat meeting notes and minutes as confidential if they contain PII. 	
 Do not send PII in a text, email or voicemail. 	
Protecting Physical Files	Formatted: Font: 12 pt, Bold
 <u>All files should be stored in lockable containers.</u> 	Formatted: Font: 12 pt
 Only access files with PII in a secure work area. 	
 Do not leave documents with PII in areas unattended. 	
Protecting Electronic Files	Formatted: Font: 12 pt, Bold
 Files containing PII will be stored in the county's internal network system. do not open or 	Formatted: Font: 12 pt
store electronic files containing PII when out in public, on public unsecured wi-fi networks,	
<u>etc.</u>	
Electronic Transmissions of PII	Formatted: Font: 12 pt, Bold
 When emailing PII: confirm the recipient's email address, confirm receipt of the email, and 	Formatted: Font: 12 pt
whenever possible, send PII exclusively between two secure (encrypted) email servers.	Formatted: Indent: Left: 1.07", No bullets or numbering
(Consult with the County's information technology experts if you aren't sure how to do this.)	
 All documents that are emailed must have PII redacted in black. Adobe has a redaction 	
function for pdf documents. All PII must be redacted using this feature on pdfs. If the	
document is in Word or Excel format, all PII must still be redacted. Staff may need to convert	
these files to pdfs in order to redact.	
Data Breach	Formatted: Font: 12 pt, Bold
 Any data breaches should be reported immediately to their supervisor. The supervisor will 	Formatted: Font: 12 pt
then determine the next course of action.	
 The program should work with internal staff and/or with the subrecipient to determine the 	
nature and extent of the breach.	
 Re-secure the information to the extent possible by retrieving records, destroying 	
copies, overseeing the process for permanently digitally erasing records, etc.	
Staff must ensure the subrecipient is following their internal processes related to ESG +	Formatted
data breaches.	

 Staff may need to consult with the appropriate legal authority at the County to determine any additional actions that the county or the subrecipient should take;

Redacting PII

- <u>County staff and subrecipients must redact PII on all documents submitted to the County</u> and/or the County's grantors (unless the grantor explicitly requests an unredacted document). This includes but is not limited to: financial back-up documentation for reimbursement requests, and documents submitted as part of the monitoring process, including client files.
- "Redacted" means that PII has been permanently erased, covered, or removed such that it cannot be retrieved by anyone in possession of the document. This is often accomplished by using correction fluid, correction tape, or an opaque black marker.
- Note that when using an opaque black marker, a single layer is often not sufficient to completely redact a file. Instead, a file should be redacted using an opaque black marker, scanned, printed, and redacted a second time; the second redaction should permanently remove all redacted PII.

10 Collection of Documentation

10.1 Documentation

The recordkeeping requirements found in §576.500 require ESG-CV recipients and subrecipients to maintain and follow written intake procedures to determine whether potential program participants meet the homeless definition found in §576.2. These procedures must require documentation at intake of the evidence relied upon to establish and verify homeless status. To ensure compliance with the homeless definition in 576.2, documentation at intake of the evidence relied upon to establish and verify homeless status must be provided and retained in client file. The established order of priority for obtaining evidence is as follows every attempt, where feasible, must be made to follow this order of priority:

(a) Third-party verification- referral from CES or a certifying letter written on letterhead from another agency gualified to make a determination of homeless status, may be submitted as third-party verification.

(b) Written case worker or intake worker observation- a written statement by the case worker or intake worker may be an option ONLY if third party documentation and verification are unable to be obtained.

Written observations must be well-documented including date, time and efforts made to verify homeless status (i.e., date and time homeless location was visited, where visited, observed evidence of homelessness, who/ what witnesses, if any, were interviewed to verify homeless status, etc.).

(c) Self-Certification – a statement from the party seeking assistance may provide a well- documented statement certifying homelessness ONLY when options a) and b) above are not feasible. The statement must include dates/duration of homelessness, circumstances leading to homelessness, current place of residence (i.e., La Merc Park residing in storm drain, etc.), lack financial resources and support system, etc.

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As a justification for using self-certification, case workers MUST document all attempts to obtain third-party verification and must document why they were unable to provide written observation of homeless status. Self-certifications are last resort, not first resort. If proper documentation to verify homeless status does not exist, the client may be deemed an ineligible client and may affect the County's ability to reimburse for services rendered.

LAKE COUNTY will ensure that ESG funds are used in accordance with requirements and to ensure that sufficient records are established and maintained to determine whether ESG requirements are being met (including documentation of program participant eligibility and documentation of homeless and chronically homeless status for individuals and families, as defined by HUD). (24 CFR §576.500(a))

LAKE COUNTY will document eligibility of program participants through gathering information either through a sign-in sheet at the emergency shelter facility that notes that the participant's signature verifies homelessness, or by provision of a self-certification form.

Street outreach workers will log in their contacts with unsheltered individuals, noting their observations of homeless status and, where feasible or necessary, filling out certification of homelessness forms. Where possible, LAKE COUNTY case managers will attempt to gather third-party documentation of homeless status and other documentation as indicated to ensure that participants may establish eligibility for other housing programs and services.

LAKE COUNTY Street Outreach Intake forms should be:

- Lake County Housing Problem Solving
- LAKE COUNTY Release of Information
- Lake County HMIS Intake Enrollments

LAKE COUNTY case managers must document through case notes the services provided to program participants. Case notes should be:

- Legible and securely stored in the participant file (either electronically in HMIS or in a paper file), If stored electronically and hardcopy, both documentations should have same information.
- Sufficiently detail the services provided, including the date, time, type of service, and staff member(s) assisting,
- Spell out the participant's housing plan and any goals they might have set for themselves, and
- Include any other relevant information.

10.2 Record Retention

LAKE COUNTY will retain copies of program participant files for at least five years after the expenditure of all funds from the grant under which the program participant was served (follows requirements of 2 CFR 200).

11 Intake

Guests shall be	provided the following forms at intake:	

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- Participant Personal Information
- Household Information
- Housing Problem Solving Assessment
- Eligibility Certification
- Health and Living Situation Assessment
- Income and Assets
- Identification Form
- Participant Close Contact Form
- Participant Rights and Responsibilities
- VAWA Protections
- -___Project Grievance Policy

12 Termination of Assistance and Grievance Policy

LAKE COUNTY Emergency Shelter will work with guests to ensure that they understand acceptable behavior and have the support and resources they need to succeed in the program. However, in some circumstances, guests will be exited from the motel and terminated from the program.

Appropriate circumstances for program termination include:

- <u>Violent Behavior</u>: When staff has witnessed a participant, or they have admitted to, being violent or
 physically intrusive inside the shelter or other facility or they have repeatedly targeted another
 individual, they may be asked to leave.
- <u>Multiple Warnings for the Same Unacceptable Behavior</u>: If a guest receives multiple warnings about the same unacceptable behavior (e.g., failure to abide by program rules that ensure health and safety for guests, staff, and others), followed by a final warning for threatening or unsafe behavior, they may be asked to leave.
- <u>Extremely Threatening Behavior</u>: Extreme threat to the health or safety of others will result in immediate exit. If a guest is too aggressive, angry or out of control to leave the premises on their own, security, or the police, can be called to escort the guest from the premises.

12.1 Termination of Assistance

Staff shall give each guest a copy of the termination policy and the appeals procedure within 24 hours of admission and explain policies in clear, simple terms that the guest understands. Those policies shall include appropriate circumstances for termination and termination due process procedures.

Staff will inform a guest when their behaviors may lead to termination from the program and develop a written agreement with the guest to resolve the issues that may result in program termination. In such cases, project's manager will facilitate a meeting with the guest and case manager to review the remediation plan outlined in the written agreement and explain the consequences of continued non-compliance with program requirements, with the ultimate consequence being termination from the program.

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When terminating a guest, the project must provide a written letter to the guest signed by the project's manager. All guests being terminated should be provided written notice of the termination that contains the following information:

- The reasons and effective date of the termination,
- A description of the program appeal process,
- The deadline date for the appeal,
- The person to be contacted to schedule an appeal hearing,
- A blank appeal form or other written information on how to appeal,
- Whether supportive services will continue while an appeal is pending, and
- The conditions or process for re-admission to the program or shelter.

Except in emergency situations involving safety of guests or staff or facilities, the guest termination notice will provide the guest with 30-day notice of termination.

Employees have an obligation to assist such guests in linking to other appropriate services prior to leaving the program. This may include, among other things, making referrals or providing the guests with resources to self-refer. Staff should always remain non-judgmental in their approach to the guest. Be honest with the guest about why they are being asked to leave. The guest may react angrily to the involuntary discharge and staff may be the target of that anger so staff should ensure they are not alone during this procedure and any necessary safety concerns are addressed.

12.2 Appeal

If a participant disagrees with a termination determination, the participant may request a review of the decision within ten (10) days of the date of the notice by making a request in writing to the project's Executive Director.

The project's Executive Director, or designee, will review the request and may investigate the claims, ask to interview the participant or members of the household, and/or call a hearing with the participant, agency staff, and any others that may be needed to review the decision. The appealing participant will be given the opportunity to present oral objections. The project's Executive Director, or designee, must review the request and make the final determination within fourteen (14) calendar days. A prompt written notice of the final decision will be provided to the participant.

Guests are entitled to reasonable accommodations and modifications to the termination process. All guests are permitted to be accompanied by an advocate (e.g., co-worker, friend, family member) during the termination process.

Termination does not bar the program from providing further assistance at a later date to the same individual or family.

12.3 Grievance Policy

Clients have the right to make a complaint without fear of retaliation or interference from any staff members. Clients shall be provided the opportunity to express any grievances or request for appeals and

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receive a timely response. Staff shall give each client a copy of the grievance procedure within 24 hours of admission and explain policies in clear, simple terms that the client understands. Those policies shall include appropriate circumstances for termination and termination due process procedures as well as the complaint and grievance procedure.

13 Financial Policies

LAKE COUNTY, representing the LCCoC, and its subrecipients shall comply with the Procurement Standards contained in 2 CFR 200. When procuring goods with ESG-CV funds, the LAKE COUNTY and its subrecipients must provide the state of California with evidence of compliance with these requirements, as applicable.

LAKE COUNTY and its subrecipients follows best practices in financial management and internal controls as outlined in <u>Lake County Financial Policy</u> with regard to its HUD-funded programs to ensure it complies with ESG-CV regulations, 2 CFR part 200 – Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards, and all applicable requirements.

All costs shall be reasonable, allocable, and eligible in accordance with the principles of applicable federal cost principles and terms and conditions of the award. Further fiscal controls, including audit protocols, and accounting procedures are described in the Lake County Financial Policy.

LAKE COUNTY shall comply with Procurement Standards contained in 2 CFR 200. When procuring goods with ESG-CV funds, LAKE COUNTY will provide the state of California with evidence of compliance with these requirements, as applicable.

13.1 Duplication of Benefits

In accordance with the CARES Act and the Robert T Stafford Disaster Relief and Emergency Assistance Act, as amended, LAKE COUNTY will conduct routine financial review to prevent the occurrence of duplication of benefits. Duplication of Benefits occurs when federal financial assistance is provided to a person or entity through a program to address losses resulting from a federally declared emergency or disaster, and the person or entity has received (or would receive by acting reasonably) financial assistance for the same costs from any other source.

LAKE COUNTY will 1) determine the total amount of need for the activity provided (e.g., Emergency Shelter, Street Outreach), and 2) determine the amount of funding that has or will be provided from all non-ESG-CV funding sources to pay for those activity costs; in order to 3) verify that the amount of ESG-CV award plus the non-ESG-CV funding is equal to or lower than the maximum need.

Records of such review will be maintained to ensure that a duplication of benefits does not occur.

14 Other required policies

14.1 Participation of People Experiencing Homelessness

Pursuant to 24 CFR Part 576.405, recipients of ESG funds must provide for the participation of not less than one homeless or formerly homeless persons in a policy-making function within the subrecipient's **25** | P a g e

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organization. All subrecipients of ESG funds are required to involve or encourage involvement of participants in the operation of an ESG-funded program or facility. LAKE COUNTY encourages current and former guests to engage in program design, policy, and operations through the Lake County Continuum of Care, including through its monthly general meeting, membership on the Executive Board, and subcommittees such as the Lived Experience Workgroup.

LAKE COUNTY recognizes and values program participants' interest and involvement in program management, including meal delivery, outreach, and facility maintenance. In accordance with these principles and ESG regulations 24 CFR 576.405, LAKE COUNTY strives to provide ongoing, meaningful opportunities for program participants to give input and be involved in program design and policies, LAKE COUNTY surveys those experiencing homelessness in both the annual PIT Count and the bi-annual Gap Analysis performed within the Strategic Planning Committee. Additionally, program participants may provide feedback at any time by submitting feedback through the Lake County Continuum of Care website. A staff member will review all submitted items and will consider any feedback received when designing and implementing programs. The staff member will also promptly elevate any areas of immediate concern and forward to the LCCoC and project as appropriate.

14.2 Drug Free Workplace

Pursuant to 2 CFR part 2429, LAKE COUNTY is a drug-free workplace:

- The unlawful manufacture, distribution, dispensing, possession, or use of controlled substances is prohibited in the workplace.
- Employees must notify management, as a condition of employment, in writing within five calendar days, if they are convicted of violating a criminal drug statute.

Appropriate personnel action will be taken, within 30 calendar days, against any employee convicted of violating a criminal drug statute up to and including termination or require the employee to participate satisfactorily in a federal, state, local, or law enforcement-approved drug abuse assistance or rehabilitation program.

• Federal agencies must be notified in writing, within 10 calendar days, if any employee engaged in the performance of an award is convicted of violating a criminal drug statute.

14.3 Conflict of Interest Code of Conduct

The Lake County Continuum of Care has a <u>Conflict of Interest policy</u> on file with HUD. It meets these standards: <u>https://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/conductgrants</u>.

14.4 Lobbying

LAKE COUNTY is prohibited from using appropriated funds for lobbying the executive or legislative branches of the federal government in connection with a specific contract, grant, or loan. LAKE COUNTY shall disclose, using HUD Standard Form LLL (SF-LLL), "Disclosure of Lobbying Activities," any funds other than Federally appropriated funds, that will be or have been used to influence federal employees, members of Congress, or congressional staff regarding specific contracts, grants, or loans. As an applicant for future funds, LAKE COUNTY shall submit the SF-LLL if it has used or intends to use federal funds for lobbying activities.

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