

CoC Eligibility Guide

Overview

This document provides a step-by-step process for you to identify what clients your program can serve, how to assess the eligibility of those clients, and how to properly document client eligibility to remain in compliance with HUD regulations.

Please review the following steps to ensure compliance.

Step 1: Identify your program's CoC project type.

Step 2: Review your grant agreement and the CoC NOFA your project is currently funded under to ensure there are no limitations identified on who you can serve.

Step 3: Review and understand the HUD-eligible categories of homelessness.

Step 4: Determine by project type, what categories of homelessness your project can serve.

Step 5: Review the community documentation checklist and the resources in this document to ensure that you are correctly documenting homeless status

Step 1: Identify Your Program's Project Type

In order to determine what clients are eligible for you to serve, you must identify your program's project-type. We have included this information in the chart below.

CoC-Eligible Project Types

There are several permissible *housing project* types that can currently be funded by the CoC Program:

- Permanent Supportive Housing (PSH),
- Rapid Rehousing (RRH), and
- Joint Transitional Rapid Rehousing (TH-RRH)

PSH and RRH projects are considered Permanent Housing (PH) projects. As of the 2019 NOFA Transitional Housing (TH) is no longer eligible as a *new* project type. However, projects can continue to receive funding under this project type which was eligible under previous NOFAs. The chart below outlines the current CoC-funded projects in Stanislaus as of the 2019 CoC NOFA Competition.

CoC-Funded Project Type	Number of Current Projects in Stanislaus	Providers
PSH	15	CICV, HACS, CHSS, STANCO, WeCare
RRH	1	CHS
TH	1	CHS

Step 2: Review your grant agreement and the CoC NOFA your project is currently funded under

Each CoC grantee should have a grant agreement with HUD. This grant agreement dictates your obligations as a grantee. Program staff should review the grant agreement to ensure that it does not place eligibility limitations on your program.

In addition, program staff should review the NOFA under which your project is currently being funded. Certain NOFAs limit eligibility requirements for certain project types.

For example, if your project is currently drawing down on funds awarded under the 2018 CoC Competition, you should review the requirements in the 2018 NOFA for eligibility requirements and limitations.

Please search for the applicable NOFA year on the [HUD Exchange Website](#).

Step 3: Review the HUD-eligible categories of homelessness

There are four applicable categories of homelessness recognized by HUD’s CoC Program. **HUD has not authorized any CoC to serve Category 3, so we will not be reviewing this in detail today.** In addition, many PSH projects require “chronic homelessness” as an eligibility requirement.

Category 1: Literally Homeless

Definition: Household lacking a fixed, regular, and adequate nighttime residence, i.e.:

Primary nighttime residence is a public or private place not meant for human habitation; **OR**

Residing in a shelter designated to provide temporary living arrangements (e.g., emergency shelters, transitional housing, and hotels/motels paid for by charitable organizations or by government programs); **OR**

Exiting an institution after 90 days or fewer **and** immediately before entering that institution **either** resided in an emergency shelter or place not meant for human habitation

Category 2: Imminent Risk of Homelessness

Definition: An individual/family who will imminently lose their primary nighttime residence, provided that:

Residence will be lost within 14 days of date of application for homeless assistance **AND**

No subsequent residence has been identified **AND**

The individual/family lacks the resources and support networks (i.e., family, friends, faith-based or other social networks) needed to obtain other permanent housing

Category 4: Fleeing DV

Definition: Any individual or family who:

Is fleeing, or is attempting to flee, domestic violence; **AND**

Has no other residence; **AND**

Lacks the resources and support networks (i.e., family, friends, faith-based or other social networks) to obtain other permanent housing.

"Domestic violence" includes dating violence, sexual assault, stalking, and other dangerous or life-threatening conditions that relate to violence against the individual/family member that make them afraid to return to their primary nighttime residence

Chronic Homelessness

A homeless individual:

- With a disability;
- Who lives in a place not meant for human habitation, safe haven, or emergency shelter; **AND**
- Has been homeless:
 - **Continuously for at least 12 months OR**
 - On at least 4 separate occasions in the last 3 years, as long as the **combined occasions equal at least 12 months.**

Step 4: Determine by project type, what categories of homelessness your project can serve.

Once you have identified your project type and have a grasp of the eligible categories of homelessness that CoC-funded programs can serve, review your project type from the list below and identify which categories of homeless persons your program can serve.

Permanent Supportive Housing (PSH)

Many permanent supportive housing programs are 100% dedicated to serving chronically homeless persons or are Dedicated Plus, where 100% of the beds are dedicated to serve individuals with disabilities and families in which one adult or child has a disability, including unaccompanied homeless youth, that meets certain criteria as described in the NOFA. Because no projects are currently Dedicated Plus we did not include detailed eligibility information in this document on Dedicated Plus, however, more information on these requirements can be found [here](#) on the HUD Exchange.

With the exception of the Housing Authority projects, all PSH projects in Stanislaus are 100% dedicated to serving chronically homeless persons and no projects are Dedicated Plus. To confirm that your project is 100% dedicated to serving chronically homeless persons you can review this information in your CoC project application(s) in e-snaps under Screen 3C. Screen 3C will show whether you have designated your project as "100% Dedicated" to serving chronically homeless persons or "Dedicated Plus."

For 100% Dedicated (to CH) PSH:

- Persons who meet the definition of **chronic homelessness ONLY**

For Dedicated Plus PSH:

- Persons who meet the definition of DedicatedPLUS (see Section III.C.2.g of the 2019 NOFA)
- NOTE: Stanislaus does NOT currently have a PSH project that is DedicatedPLUS

For non-CH-dedicated PSH:

- **Category 1** (literally homeless)
- **Category 4** (fleeing DV) from streets, shelter, institution, or TH where entered from shelter

Rapid Rehousing (RRH)

For rapid rehousing projects CoC grantees should review the NOFA under which the project was first funded AND the CoC NOFA for the particular grant year as well as your grant agreement.

For CoC-funded Projects Funded Under the 2019 NOFA rapid rehousing projects can serve:

- **Category 1** (literally homeless)¹
- **Category 2** (imminent risk of homelessness)
- **Category 4** (fleeing DV)

Transitional - Rapid Rehousing (TH-RRH)

Under the 2019 NOFA, TH-RRH projects can serve:

- **Category 1** (literally homeless)
- **Category 2** (imminent risk of homelessness)
- **Category 4** (fleeing DV)

NOTE: Stanislaus does NOT currently have a TH-RRH project.

Transitional Housing (TH)

CoC-funded transitional housing programs can serve:

- **Category 1** (literally homeless)
- **Category 2** (imminent risk of homelessness)
- **Category 4** (fleeing DV)

¹ NOTE: Under certain NOFA years, projects are mandated to serve category 1 persons ONLY from streets or shelter ONLY and not TH. However, this is not applicable to Stanislaus as the only RRH project was just funded under the 2019 NOFA, and therefore may serve the categories outlined above.

Step 5: Ensure you are correctly documenting homeless status

Below is a chart of documentation requirements for each eligible category of homelessness. The applicable DRAFT documentation templates for each category are also referenced and linked in the second column. Please be sure to follow the directions on the documentation templates as closely as possible to ensure compliance with HUD regulations. Please note that third party verification is always preferred.

Please also note as DRAFT documentation templates are updated, the active links to the documentation templates on this chart may change. Please see the most current documentation templates on the [CSoc Website](#).

Category	Documentation Required
<p>Category 1: (1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:</p> <ul style="list-style-type: none"> (i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; (ii) An individual or family living in a supervised 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, or local government programs for low-income individuals); or (iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution; 	<p>Documentation Required: The night before program enrollment (HUD has previously found it permissible to include documentation within 14 days of enrollment), you need ONE of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Written observation by an outreach worker of the conditions where the individual or family was living <input type="checkbox"/> Written referral by another housing or service provider <input type="checkbox"/> Certification by the individual or head of household seeking assistance <p>If the individual was in an institution, you also need ONE of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Discharge paperwork from the institution; or <input type="checkbox"/> Written or oral referral from social worker, case manager, or other official from the institution with start/end dates of residency; or <p>If those are not obtainable,</p> <ul style="list-style-type: none"> <input type="checkbox"/> a written record of the intake worker's due diligence to obtain that evidence PLUS a certification by the individual seeking assistance that states (s)he is exiting or has just exited an institution where (s)he has resided for 90 days or less. <ul style="list-style-type: none"> <input type="checkbox"/> See Documentation Templates: <ul style="list-style-type: none"> <input type="checkbox"/> Homelessness Documentation Checklist <input type="checkbox"/> Homelessness Certification

	<ul style="list-style-type: none"> ○ <u>Certification Based on Intake Conversation</u> ○ <u>Client Self-Declaration of Homelessness</u>
<p>Category 2: (2) An individual or family who will imminently lose their primary nighttime residence, provided that:</p> <ul style="list-style-type: none"> (i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance; (ii) No subsequent residence has been identified; and (iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing; 	<p>Documentation Requirements: Each of the 3 parts of the definition must be documented. In other words, files for Category 2 (Imminent Risk) clients must have documentation of ALL of the following:</p> <ul style="list-style-type: none"> □ Residence will be lost within 14 days of application AND □ MUST INCLUDE ONE of the following pieces of documentation that: <ul style="list-style-type: none"> ○ Household will be evicted by Court Order or similar state action within 14 days of application date ○ For households whose primary nighttime residence is a hotel/motel, evidence the household will be unable to pay for additional nights within 14 days of application date ○ Oral statement by household member that the landlord will not let them stay -- intake worker must record the statement and certify credibility by: <ul style="list-style-type: none"> ○ Verifying with the landlord and documenting in writing or by recording the landlord's oral statement OR ○ If unable to contact the landlord, documenting due diligence to obtain verification AND obtaining written certification by the household that the statement was true and complete □ No subsequent residence has been identified AND <ul style="list-style-type: none"> ○ Certification by the individual or head of household that no subsequent residence has been identified

	<ul style="list-style-type: none"> □ Individual/family lacks the resources or support networks to obtain other permanent housing <ul style="list-style-type: none"> ○ Certification or other written documentation that the household lacks the resources and support networks to obtain other permanent housing. <p>See Documentation Templates:</p> <ul style="list-style-type: none"> □ Homelessness Documentation Checklist □ Client Self-Declaration of Homelessness
<p>Category 4: (4) Any individual or family who:</p> <ul style="list-style-type: none"> (i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; (ii) Has no other residence; and (iii) Lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, to obtain other permanent housing. 	<p>Documentation Requirements:</p> <ul style="list-style-type: none"> □ Self-certification that client is fleeing DV, no subsequent residence has been identified, and they lack resources/support network needed to obtain housing □ If not a victim service provider and safety would not be jeopardized, the oral statement must be documented by: <ul style="list-style-type: none"> ○ Written observation by intake worker verifying the condition client is fleeing OR ○ Written referral from an organization from whom the individual or head of household has sought assistance <p>See Documentation Templates:</p> <ul style="list-style-type: none"> □ Homelessness Documentation Checklist □ Client Self-Declaration of Homelessness
<p>Chronic Homelessness:</p> <ul style="list-style-type: none"> □ A homeless individual: □ With a disability; □ Who lives in a place not meant for human habitation, safe haven, or emergency shelter; AND <ul style="list-style-type: none"> ○ Has been homeless: <ul style="list-style-type: none"> ▪ Continuously for at least 12 months OR ▪ On at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months. 	<p>Documentation Requirements:</p> <ul style="list-style-type: none"> □ Documentation of homeless status <ul style="list-style-type: none"> ○ <i>*This overlaps with documenting homelessness!</i> ○ HMIS (or comparable database) record(s); ○ Written observation by outreach or intake worker of encounters with individual that includes a description of the conditions where the

	<p>individual was or is currently living;</p> <ul style="list-style-type: none"> ○ Written community member observation of where the individual was or is currently living; ○ A written referral by another housing or service provider, OR, ○ <u>If such evidence cannot be obtained</u>, a certification by the individual seeking assistance. <p>□ Documentation of disability</p> <ul style="list-style-type: none"> ○ Written verification from a professional licensed by the state to diagnose/ treat the disability, AND certification that the disability: <ul style="list-style-type: none"> ▪ Is expected to be long-continuing or of indefinite duration AND ▪ Substantially impedes the individual's ability to live independently. ○ Written verification from the Social Security Administration ○ Receipt of a disability check (e.g., Social Security Disability Insurance or Veteran Disability Compensation) ○ Intake staff-recorded observation of disability such that, <u>no later than 45 days</u> from the application for assistance, is confirmed and accompanied by at least one other acceptable piece of evidence ○ Other documentation approved by HUD <p>□ Housing History and Breaks in Homelessness:</p> <ul style="list-style-type: none"> ○ Documentation showing that the client has been homeless:
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	<ul style="list-style-type: none"> ▪ Continuously for at least 12 months OR ▪ On at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months ▪ Please see the Chronic Homeless Documentation Checklist. ▪ At least 9 of the 12 months must be verified by third party verification including: <ul style="list-style-type: none"> • HMIS • Observation by intake worker • Discharge paperwork • Referral ○ Each break in homelessness of 7+ consecutive nights between distinct episodes of homelessness must also be documented ○ There is a self-certification exception for breaks <ul style="list-style-type: none"> ▪ Breaks in homelessness may be documented “entirely based on a self-report by the individual seeking assistance” <p>See Documentation Templates:</p> <ul style="list-style-type: none"> □ Chronic Homelessness Documentation Checklist □ Verification of Disability □ Guide: CA Professionals Licensed to Diagnose & Treat Disabilities
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Additional Questions or Concerns?

Please contact stanislaus@homebaseccc.org for additional assistance and support.