

**ORANGE COUNTY CONTINUUM OF CARE
POLICIES, PROCEDURES AND STANDARDS COMMITTEE MEETING**

Tuesday, October 14, 2025

3:30 p.m. – 5:00 p.m.

Location:

County Administration South (CAS)

Multipurpose Room

601 N. Ross St., Rooms 104/106

Santa Ana, CA 92701-4599

[Click Here](#) for parking information.

Virtual Meeting Option*:

Zoom Meeting Link: [Click here for meeting link](#)

Join by phone: +1 669 444 9171

Meeting ID: 999 5994 4290

Committee Chair: Nishtha Mohendra, Families Forward

Committee Members:

Judson Brown, City of Santa Ana

Andrew Crowe, Scholarship Prep

Melanie McQueen, PATH

Dr. Tiffany Mitchell, Orangewood Foundation

Robert “Santa Bob” Morse, Individual

Dawn Price, Friendship Shelter

Maricela Rios-Faust, Human Options

AGENDA

In compliance with the Americans with Disabilities Act, and County Language Access Policy, those requiring accommodation and/or interpreter services for this meeting should notify the Office of Care Coordination 72 hours prior to the meeting at (714) 834-5000 or email CareCoordination@ceo.oc.gov. Requests received less than 72 hours prior to the meeting will still receive every effort to reasonably fulfill within the time provided.

Welcome and Introductions – Nishtha Mohendra, Chair

Public Comments – Members of the public may address the Policies, Procedures and Standards (PPS) Committee on items listed within this agenda or matters not appearing on the agenda so long as the subject matter is within the jurisdiction of the PPS Committee. Public comments will be limited to three minutes. If there are more than five public speakers, this time will be reduced to two minutes. Members

of the public utilizing interpreter services will be given double the amount of time to provide public comment.

To address the PPS Committee during the Public Comment period, members of the public are to complete a Request to Address the Committee form prior to the beginning of each agenda item and submit it to Continuum of Care (CoC) staff. Staff will call your name in the order received.

Members of the public may also submit public comment by emailing CareCoordination@ceo.oc.gov. All comments submitted via email at least 24 hours before the start of the meeting will be distributed to the PPS Committee members and all comments will be added to the administrative records of the meeting. Please include "PPS Committee Meeting Comment" in the email subject line.

CONSENT CALENDAR

1. Approve the PPS Committee Meeting minutes from August 12, 2025.

BUSINESS CALENDAR

1. **Orange County CoC Governance Charter Revisions** – Jasmin Miranda, Interim CoC Administrator, Office of Care Coordination
 - a. Approve the recommended changes to the Orange County CoC Governance Charter for review and approval by the CoC Board, as recommended by the 2025 CoC Nominating Ad Hoc and Collaborative Applicant.
2. **Coordinated Entry System (CES) Policies and Procedures Recommended Changes** – Felicia Boehringer, Interim CoC Manager, Office of Care Coordination and Andrew Crowe, CES Steering Committee Chair
 - a. Approve the revised CES Policies and Procedures, including the removal of shelter status from the prioritization schema, updates to formatting, and other clarifying language, for review and approval by the CoC Board, as recommended by the Lived Experience Advisory Committee (LEAC) and CES Steering Committee.
3. **2-for-1 Match Policy Recommendation** – Felicia Boehringer, Interim CoC Manager, Office of Care Coordination and Andrew Crowe, CES Steering Committee Chair
 - a. Approve the proposed 2-for-1 Match Policy for review and approval by the CoC Board, as recommended by the LEAC and CES Steering Committee.
4. **CoC Strategic Plan** – Nishtha Mohendra, Chair and Felicia Boehringer, Interim CoC Manager, Office of Care Coordination
 - a. Strategy Owner Updates
5. **CoC Updates** – Jasmin Miranda, Interim CoC Administrator, Office of Care Coordination

Adjournment to: Regular meeting on November 11, 2025, from 3:30 p.m. to 5:00 p.m., at the CAS Multipurpose Rooms 103/105, located at 601 N. Ross St., Santa Ana, CA 92701.

**ORANGE COUNTY CONTINUUM OF CARE
POLICIES, PROCEDURES AND STANDARDS COMMITTEE MEETING**

Tuesday, August 12, 2025

3:30 p.m. – 5:00 p.m.

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Committee Chair: Nishtha Mohendra, Families Forward

Committee Members:

Judson Brown, City of Santa Ana
Andrew Crowe, Scholarship Prep
Melanie McQueen, PATH
Dr. Tiffany Mitchell, Orangewood Foundation
Robert “Santa Bob” Morse, Individual
Dawn Price, Friendship Shelter
Maricela Rios-Faust, Human Options

MINUTES

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Welcome and Introductions – Nishtha Mohendra, Chair

Nishtha Mohendra, Chair called the meeting to order at 3:32 p.m.

Present: Judson Brown, Melanie McQueen, Dr. Tiffany Mitchell, Nishtha Mohendra, Robert “Santa Bob” Morse, and Maricela Rios-Faust.

MINUTES

August 12, 2025

Absent Excused: Andrew Crowe and Dawn Price

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CONSENT CALENDAR

1. Approve the PPS Committee Meeting minutes from July 8, 2025.

Melanie McQueen motioned to approve Consent Calendar Item 1. Maricela Rios-Faust seconded the motion. Chair Nishtha Mohendra issued a voice vote. The motion passed unanimously.

BUSINESS CALENDAR

1. **CoC Board Member Term Recommendation** – Felicia Boehringer, Interim CoC Manager, Office of Care Coordination

Felicia Boehringer provided an update on the recommended action to shift CoC Board term lengths to three years, reflecting feedback to support continuity and retain institutional knowledge. The Office of Care Coordination (OCC) contacted seven CoCs with similar term lengths; four responded, noting both benefits and early-stage challenges. The proposed plan includes staggered terms beginning January 2026, with changes detailed in a redlined CoC Governance Charter. Felicia Boehringer acknowledged that while the transition presents some administrative challenges, they are typical of governance updates and can be managed with thoughtful planning, particularly regarding onboarding and the nomination and election process.

Recommended Action:

- a. Recommend establishing the following CoC Board Member Term policy that will be incorporated into the CoC Governance Charter for approval by the CoC Board, to go into effect with the ratification of new CoC Board members at the December 2025 meeting of the CoC Board.
 - i. CoC Board members will serve a three (3) year term;
 - ii. CoC Board members will be given the option to renew their term after the completion of one (1) term, membership on the CoC Board will be confirmed through the election process by the CoC General membership;
 - iii. CoC Board members will serve for no more than two (2) consecutive full terms;

- iv. CoC Board members who have served two (2) consecutive full terms must wait one (1) year before being eligible serve again on the CoC Board.

Maricela Rios-Faust motioned to approve Business Calendar Item 1. Robert “Santa Bob” Morse seconded the motion. Judson Brown, Melanie McQueen, Dr. Tiffany Mitchell, Nishtha Mohendra, Robert “Santa Bob” Morse, and Maricela Rios-Faust voted yes. The motion passed.

Committee Discussion:

- Judson Brown asked whether longstanding CoC Board members would be termed out under the new structure or if they would begin new three-year terms if they are re-elected.
- Maricela Rios-Faust thanked OCC for their work and expressed appreciation for the progress made and encouraged the group to consider several key items moving forward 1) to structure staggered terms so that one-third of the CoC Board cycles out each year, instead of half, to support consistent annual elections and 2) to examine CoC Board Officer terms, as it often takes time for officers to acclimate to their roles. Recognizing the value of term limits for creating space for new leadership, while also ensuring smooth transitions. Maricela Rios-Faust also emphasized the importance of succession planning recommending keeping CoC Committee Chair terms at two years to allow for overlap with the third year of a CoC Board term, ensuring that someone familiar with committee work is in place if a member terms out.
- Melanie McQueen requested two clarifications 1) whether current CoC Board members with terms expiring this year or next would start fresh under the new structure and 2) whether CoC Board Officer term lengths, currently aligned with general Board terms, would also be adjusted.
- Dr. Tiffany Mitchell voiced support for three-year terms and agreed that the questions raised were important and brought thoughtful discussion.
- Chair Nishtha Mohendra commended OCC staff for their work, particularly for gathering feedback from other CoCs with three-year term lengths and emphasized the long-standing nature of this discussion and the importance of aligning term lengths with goals around consistency and succession planning. Chair Nishtha Mohendra clarified that the proposed changes would not impact the current CoC Board composition but would apply to future members, ensuring no immediate loss of talent. Additionally, also suggested a graduated leadership structure (e.g., Secretary → Vice Chair → Chair) to support leadership development and continuity. Lastly, Chair Nishtha Mohendra recommended that the CoC Nominating Ad Hoc Committee take the lead on addressing outstanding questions and developing recommended actions for implementation brought up during the PPS Committee discussion.

2. CoC Updates - Felicia Boehringer, Interim CoC Manager, Office of Care Coordination

Felicia Boehringer shared updates on CoC Policies and Procedures, including ongoing revisions to Coordinated Entry System (CES) guidelines, some are formatting and substantial changes. Additionally going over the 2-for-1 Match Policy. Felicia Boehringer stated that the updates are part of the current annual revisions and engagement is encouraged as they move forward with refining and approving changes.

Committee Discussion:

- Maricela Rios-Faust emphasized that while the proposed changes are currently limited to the general CES, they will likely have long-term implications for the Survivor CES (SCES). Maricela Rios-

Faust recommended that the CoC Domestic Violence (DV) Committee be engaged for feedback and planning, as the Survivor CES continues to operate as a separate system. Maricela Rios-Faust raised concerns in response to Doug Becht's comments during the previous CoC Board meeting about the difficulty and delays in matching clients due to challenges in making contact; and stressed the importance of ensuring that any new policies do not negatively impact already vulnerable populations. Further, advocated for incorporating checkpoints to monitor unintended consequences, particularly when policies are generalized and not population specific.

- Melanie McQueen acknowledged the original intent behind prioritizing shelter residents was to improve throughput from shelter to housing but questioned whether removing shelter preference would impact Emergency Shelters (ES) operations. Melanie McQueen supported Maricela Rios-Faust's point on the need for checks and balances to address root causes rather than symptoms. Additionally, noted that many match failures stem from poor quality matches. Regarding the proposed 2-for-1 matching policy, Melanie McQueen recognized both benefits and drawbacks, noting that it seeks to improve match quality but could also increase administrative burden on providers and cautioned that this added complexity could lead to overwhelmed providers if not properly managed.
- Judson Brown stated that the 2-for-1 match policy will be formally presented at the September 3, 2025, CES Steering Committee meeting. As it related to the proposed changes for the CES Policies and Procedures, Judson Brown stated it would be helpful for the OCC to share data on the amount of households experiencing chronic homelessness versus literal homelessness to understand the impact of the update to remove shelter preference prioritization, emphasizing the shared goal of improving shelter flow and housing opportunities. Judson Brown reported that the Public Housing Authorities (PHA), including Anaheim Housing Authority (AHA) and Santa Ana Housing Authority (SAHA), have submitted letters regarding the 2-for-1 policy and wanted the Office of Care Coordination to engage with all PHA's as key CoC partners. Judson Brown highlighted that SAHA has created 499 units and AHA has developed 300 units. Judson Brown also expressed concern over the lack of communication and transparency, stating that PHA partners were unaware of the discussion at the previous CES Steering Committee meeting and had not been consulted during policy drafting, resulting in a one-sided process and lack of involvement.
- Dr. Tiffany Mitchell inquired about the origin and rationale behind the 2-for-1 CES matching policy, specifically asking what problems or shortcomings it is intended to resolve. Dr. Tiffany Mitchell expressed concern about the potential for erosion of trust among families and Transitional Age Youth (TAY) if they are told they are a secondary match and do not receive housing. Also, noted that repeated unsuccessful matching attempts may discourage participation due to limited bandwidth and engagement capacity among these populations.
- Chair Nishtha Mohendra asked about the overall quality and transparency of the discussions surrounding updates to CES Policies and Procedures. Chair Nishtha Mohendra sought clarification on the proposed removal of shelter status preference and who it would specifically affect. Further, recommended that the item be brought to the CoC Service Provider Forum for broader feedback and dialogue. Chair Nishtha Mohendra noted that the original decision to prioritize shelter preferences dates to 2016 and cautioned against reverting this policy without a well-informed and inclusive process to review why it was established in the first place. As a former manager of housing partnerships, Chair Nishtha Mohendra emphasized the need for more efficient matching systems, especially given the presence of available vacancies while some participants wait too long for placements. Additionally, stated that there is currently no evidence suggesting that 1-for-1 matching is any less trauma-informed than 2-for-1, underscoring the importance of ongoing dialogue and engagement as the committee continues to review and consider these proposed changes.

Chair Nishtha Mohendra adjourned the meeting at 4:34 p.m.

Adjournment to: Regular meeting on September 9, 2025, from 3:30 p.m. to 5:00 p.m., at the CAS Multipurpose Rooms 103/105, located at 601 N. Ross St., Santa Ana, CA 92701.

Date: October 14, 2025

Subject: Orange County Continuum of Care (CoC) Governance Charter Revisions

Recommended Actions:

- a. Approve the recommended changes to the Orange County CoC Governance Charter for review and approval by the CoC Board, as recommended by the 2025 CoC Nominating Ad Hoc and Collaborative Applicant.

Background

CoC Board Nomination and Election Process

The Orange County CoC Board serves as the locally designated primary decision-making group whose purpose and scope is to implement the CoC program which is authorized by subtitle C of title IV of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11381-11389). The Orange County CoC Board is comprised of 17 to 21 total CoC Board member seats with approximately half of the Board member terms expiring each year, in order to prevent all Board seats from turning over at the same time. As approved at the August 25, 2025, CoC Board meeting, Board members will serve a three (3) year term, with a limit of two (2) consecutive full terms and a one (1) year waiting period being eligible to serve again on the CoC Board.

Each year, the Orange County CoC Board establishes a CoC Nominating Ad Hoc to support the annual review of the Orange County CoC Governance Charter (Charter) and facilitate the CoC Board selection process for the CoC Board seats expiring in December. During the August 25, 2025, CoC Board meeting, the CoC Board approved the recommendation to establish the 2025 CoC Nominating Ad Hoc (Ad Hoc) to facilitate the annual Charter review and nomination and selection process. Additionally, CoC Board members suggested that the Ad Hoc consider reviewing a special process for selecting Board members when vacancies occur between regular election cycles, and whether it would be beneficial to establish a policy and process that ensures only one-third of the CoC Board seats expire each year. The Ad Hoc includes one (1) current CoC Board Member that is not up for re-election as well as additional members, including CoC General Members and non-CoC General Members, representing different entities of the homeless service system. The Ad Hoc membership includes Shawndrea Bronson, Elizabeth Flores, Jason Mercado, Robert “Santa Bob” Morse, Dr. Apphia-Yaya Schramenko, and Melissa Welsh.

As detailed in the current Orange County CoC Governance Charter, the timeline below notes the associated activities of the annual CoC Board Election process.

- August/September – CoC Board Chair appoints Nominating Ad Hoc
- September/October – Nominating Ad Hoc convenes to review and update sections of the Charter that pertain to the CoC Board composition, selection process, and qualifications
- October/November – Nominating Ad Hoc outreaches to potential CoC Board candidates. The Nominating Ad Hoc may interview eligible CoC Board candidates to verify that they meet minimum qualifications for the Board.

- November/December – Candidates who moved forward based on their interview are presented to the CoC General Membership for voting/election.
- December – CoC Board ratifies slate of elected candidates by the CoC General membership.
- January – CoC Board seating takes place. Outgoing CoC Board and Board staff will provide training and orientation for incoming CoC Board.

Charter Review

The Ad Hoc convened four times from September 2025 to October 2025 to review, discuss, and update key sections of the current Charter, with the support of the Office of Care Coordination. The Ad Hoc and the Office of Care Coordination had robust discussion to ensure the Charter remains compliant with regulations from the U.S. Department of Housing and Urban Development (HUD), including the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act, relevant Federal Executive Orders and the Fiscal Year (FY) 2024 CoC Program grant agreements. The Ad Hoc reviewed Section V.B.2. on CoC Board Composition and proposed removing language related to race, ethnicity, gender, sexual orientation, and diversity in the Charter. As an alternative, the Ad Hoc supported maintaining a process to prioritize desired representation and expertise within the CoC Board membership, utilizing the most recently available data to ensure that the CoC Board membership background and experience recommendations align with current trends in who experiences homelessness in Orange County.

Additionally, the Ad Hoc reviewed the CoC Board members' suggestions of a special process for filling vacancies and establishing a policy and process that ensures only one-third of the CoC Board seats expire each year. The Ad Hoc and Office of Care Coordination proposed the following revisions to the Section V.B.3. of the Charter that utilizes the most recent CoC Board candidate information:

Should a member leave before the expiration of their term, the Collaborative Applicant will confirm whether the vacancy needs to be filled to meet the designated CoC Board composition. The Collaborative Applicant will utilize the applications and prioritization tool from the most recent election to identify a candidate with the highest votes and fulfills desired representation. If the designated CoC Board composition cannot be fulfilled, the Collaborative Applicant will follow the same process as outlined above in items a. through f. Appointments made to fill a vacancy left by a member before the expiration of their term shall be for the remaining term of the member.

Further, regarding the Board member terms, the Office of Care Coordination facilitated Ad Hoc member discussion around options of either maintaining Charter language of the 3-year term for all new Board members selected through this year's election process or updating Charter to stagger 2 and 3-Year terms for new Board members selected through this year's election process to establish a process of one-third of the CoC Board member terms expiring each year. The Ad Hoc discussed and came to the proposition of keeping the 3-year term for all new Board members, as reflected in Section V.B.3., in order to allow for the new 3-year term to be facilitated for an election cycle. As part of the discussion, the Ad Hoc also proposed the idea to survey current CoC Board members annually to inquire about availability and desire to continue serving, to determine whether any additional vacancies may arise on the Board in the following calendar year.

Section V.B.2 – Section V.B.4 of the Charter was reviewed in detail, and the Ad Hoc is recommending the proposed redlines as detailed in **Attachment A**. The following is a summary of the proposed changes:

Section V.B.2. CoC Board Composition

- Revisions to clarify that there will be an odd number of Board members when first appointed during elections
- Removal of past date language
- Incorporating goal of including at least one representative from the Youth Action Board (YAB) by January 2027
- Removal of desired identities or experiences including minimum number of people with specific identities/experiences, including people who are Black, Indigenous or Native American, People of Color (BIPOC), and Lesbian, Gay, Bisexual, Transgender, Queer/Questioning, Intersex, and Asexual (LGBTQIA+), disabled, neurodivergent, and/or older adults, minimum number of people who have military service experience or military service family experience and minimum number of survivors of domestic violence (DV)
- Replacing desired identities or experiences with an internal process utilizing the most recently available data to determine how to prioritize desired representation and expertise to ensure that the CoC Board membership background and experience recommendations align with current trends in who experiences homelessness in Orange County
- Clarity on the desired professional or personal experience

Section V.B.3 CoC Board Selection Process

- Inclusion of a special process to fill vacant seats should a vacant seat leave a gap in representation
- Revised to clarify that the Nominating Ad Hoc will determine a process to verify that CoC Board candidates meet minimum qualifications
- Inclusion of CoC Board member terms, including 3-year terms and term limits, as previously approved by the CoC Board

Section V.B.4 CoC Board Qualifications

- Inclusion of “accommodation as needed” language
- Incorporation of CoC Committee Chairs responsibility of owning assigned strategies when there is a strategic plan in place

Office of Care Coordination Charter Review

Prior to the Charter review, the Office of Care Coordination as the Collaborative Applicant reached out to local CoCs to inquire if other CoCs were considering revising language within CoC policies and governing documents. One local CoC shared that they are not making Charter revisions at the time but will consider removing specific references to terms such as gender identity or HUD Rules that have sunset. The Office of Care Coordination also spoke to contracted consultants to determine the best steps to move forward. Following these discussions, the Office of Care Coordination proposed removing diversity, equity, access, and inclusion language throughout the entire Charter to ensure compliance with HUD requirements, recent Federal Executive Orders and the FY 2024 CoC Program grant agreements. The Collaborative Applicant is proposing to remove all language related to diversity, equity, access, and inclusion in the Charter to ensure compliance, which includes additional edits to Sections V.B., V.C. and V.D., also detailed in **Attachment A**. The recommendation does not come lightly and is the result of thoughtful consideration and discussion.

The Policies, Procedures and Standards (PPS) Committee is being asked to review and approve the recommended changes to the Orange County CoC Governance Charter for final approval by the CoC Board.

If approved by the CoC Board, the recommended changes will be implemented for this year's CoC nomination and selection process.

Attachments

Attachment A - Orange County CoC Governance Charter – Redlined Version

Attachment B - Orange County CoC Governance Charter – Clean Version

Orange County CoC - CA - 602 Governance Charter

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Item 1. Attachment A

Introduction: In accordance with the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (the “HEARTH Act”) which was enacted into law on May 20, 2009, the Orange County Continuum of Care in consultation with the Collaborative Applicant (County of Orange), Continuum of Care and Emergency Solution Grant funded agencies and Homeless Management Information System (“HMIS”) Lead Agency has developed a governance charter which includes procedures and policies needed to comply with the HEARTH Act requirements as prescribed by U.S. Department of Housing and Urban Development (HUD); and a code of conduct and recusal process for the board, its chair(s), and any person acting on behalf of the board.

In addition to HEARTH Act compliance and in alignment with the Regional System of Care, the Continuum of Care (“CoC”) will operate to enhance, inform and implement services addressing the complex case management and housing needs of individuals and families experiencing homelessness in Orange County. Services supported by the Orange County CoC will also demonstrate best practices and evidence-based practices ensuring a client-centered approach, client choice and client rights and responsibilities are clear and service standards are consistently met.

The Orange County CoC designates the County of Orange as the collaborative applicant and fiscal entity for administering planning and funding for homelessness assistance program throughout the Orange County CoC.

I. Name:

The technical name of the organization is CoC CA-602 hereinafter referred to as the “Orange County CoC”.

II. Geographic Boundaries:

The Orange County CoC covers all the geography within the boundaries of Orange County, including its 34 cities and unincorporated areas as regionalized within North, Central and South Service Planning Areas.

III. Purpose:

The Orange County CoC serves as the locally-designated primary decision-making group whose purpose and scope is to implement the Continuum of Care program (the “CoC”) which is authorized by subtitle C of title IV of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11381-11389). As noted in CFR 24 Part 578.1 Purpose and scope of the HEARTH Act, the program is designed to:

- A. Promote communitywide commitment to the goal of ending homelessness through regional coordination and collaboration;
- B. Advocate for funding and resources to end homelessness and provide funding for proven efforts by nonprofit providers and local governments to quickly rehouse people experiencing homelessness, while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness;
- C. Promote access to and effective utilization of mainstream programs by homeless individuals and families; and

Item 1. Attachment A

- D. Promote implementation of best practices and evidence-based approaches to homeless programming and services.

IV. Responsibilities of the Orange County CoC

The four major responsibilities of the Orange County CoC consists of:

1. Operating the Continuum of Care,
2. Designating and operating an HMIS for the Continuum of Care,
3. Planning for the Continuum of Care, and
4. Preparing an application for funds which is in accordance with § 578.7 Responsibilities of the Continuum of Care and in the HEARTH Act and § 578.79.

A. Operating the Continuum of Care.

The Orange County CoC will:

1. Hold meetings of the full membership, with published agendas, at least semi-annually;
2. Make a public invitation for new members to join available within the geographic area at least annually;
3. Adopt and follow a written process to select a board to act on behalf of the CoC. The process must be reviewed, updated, and approved by the CoC at least every five (5) years;
4. Establish committees, subcommittees and ad hoc groups to address specific functions of the Orange County CoC, as needed;
5. Work with the Collaborative Applicant to develop and update annually a governance charter, which will include all procedures and policies needed to comply with HUD mandates, HEARTH Act regulations and a code of conduct and recusal process for the board, its chair(s), and any person acting on behalf of the board;
6. Consult with recipients and subrecipients to establish performance targets appropriate for population and program type, monitor Continuum of Care and Emergency Solutions Grant funded agencies performance, evaluate outcomes, and take action to address poor performers;
7. Evaluate outcomes of projects funded under the Emergency Solutions Grants program and the Continuum of Care program, and report performance measures to HUD as required;
8. In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish and operate a Coordinated Entry System that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services. The CoC must maintain specific policy to guide the operation of the Coordinated Entry System on how its system addresses the needs of individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from nonvictim service providers in compliance with any requirements established by HUD Notice; and

Item 1. Attachment A

9. In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish and consistently follow written standards for providing Continuum of Care assistance. At a minimum, these written standards must include:
 - a. Policies and procedures for evaluating individuals' and families' eligibility for assistance;
 - b. Policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional housing assistance;
 - c. Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid rehousing assistance;
 - d. Standards for determining what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance;
 - e. Policies and procedures for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance; and
 - f. Where the CoC is designated a high-performing community, as described in Subpart G, policies and procedures set forth in 24 CFR 576.400(e)(vi), (e)(vii), (e)(viii), and (e)(ix).

B. Designating and operating a Homeless Management Information System.

The Orange County CoC will:

1. Designate a single Homeless Management Information System (HMIS) for the geographic area;
2. Designate an eligible applicant to manage the CoC's HMIS, which will be known as the HMIS Lead;
3. Review, revise and approve a privacy plan, security plan, and data quality plan for the CoC HMIS;
4. Ensure consistent participation of recipients and subrecipients in the HMIS;
5. Ensure the HMIS is administered in compliance with requirements prescribed by HUD;
6. Ensure the HMIS operates efficiently and effectively to promote HUD funded and non-funded agency participation, system coordination, and utilization and performance is achieved; and
7. Ensure that HMIS captures the Coordinated Entry System Core Elements of Access, Assessment, Prioritization and Referral through program participation by recipients and subrecipients.

C. Continuum of Care Policies, Procedures and Standards

The Orange County CoC will:

1. Have a Policies, Procedures and Standards Committee that meets at least two times a year or as needed for the review of policies, procedures and standards of the Orange County Continuum of Care;

Item 1. Attachment A

2. Have its various committees, subcommittees, and ad hocs proposed drafts, revisions and/or updates to policies, procedures and/ or standards be submitted to the Policies, Procedures and Standards Committee;
3. Have all proposed policies, procedures and standards reviewed and vetted by the Policies and Standards Committee to ensure adherence to the HEARTH Act, HUD Notices and regulations, best practices and evidenced-based approaches, prior to being presented to the CoC Board for adoption; and
4. Engage the public, including homeless and formerly homeless individuals, in policy and standards development and/or revisions that affect the operations of the CoC and ESG funded programs.

D. Continuum of Care Planning.

The Orange County CoC and the Collaborative Applicant (County of Orange) will develop a plan that includes:

1. Coordinating the implementation of a housing and service system within its geographic area that meets the needs of the homeless individuals, including unaccompanied youth, and families. At a minimum, this system encompasses the following:
 - a. Outreach, engagement, and assessment;
 - b. Shelter, housing, and supportive services;
 - c. Prevention and diversion strategies.
2. Planning for and conducting an annual shelter homeless count and a biennial unsheltered homeless count by Service Planning Area that meets the following requirements:
 - a. Homeless persons who are living in a place not designed or ordinarily used as a regular sleeping accommodation for humans must be counted as unsheltered homeless persons;
 - b. Persons living in emergency shelters and transitional housing projects must be counted as sheltered homeless persons; and
 - c. Other requirements established by HUD Notice or to meet local objectives.
3. The HMIS Lead Agency will assist the Collaborative Applicant in conducting an annual gaps analysis of the homeless needs and services available within the geographic area and/or Service Planning Areas;
4. Providing information required to complete the Consolidated Plan(s) within the CoC's geographic area;
5. Consulting with State and local government Emergency Solutions Grants program recipients within the CoC's geographic area on the plan for allocating Emergency Solutions Grants program funds and reporting on and evaluating the performance of

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Emergency Solutions Grants program recipients and subrecipients. Emergency Solutions Grant entitlements include:

- County of Orange
- Santa Ana
- Anaheim
- Garden Grove

E. Annual Competitive Application for Continuum of Care Funding

The Orange County CoC will:

1. Design, operate, and follow a collaborative process for the development of applications and approve the submission of applications in response to a Notice of Funding Availability (NOFA) published by HUD;
2. Establish priorities for funding proposals to meet needs within in the geographic area;
3. Support the Collaborative Applicant in compiling the required application information from all projects within the geographic area that the CoC has selected for funding; and
4. Retains all of its responsibilities, even if it designates one or more eligible applicants other than itself to apply for funds on behalf of the CoC. This includes approving the CoC application.

V. Orange County CoC Structure:

The operations and management of the Orange County CoC and its responsibilities are structured in four segments.

A. CoC Collaborative Applicant and Fiscal Agent

The Orange County CoC designates the County of Orange as Collaborative Applicant and Planning Grant recipient for homelessness assistance programs throughout the Orange County CoC. The County of Orange will comply with the provisions of 24 CFR 578.7, including coordinating with the development of the CoC system, CoC planning, Coordinated Entry System, HMIS and the support of the various functions and activities as required by the HEARTH Act.

In addition, the Orange County CoC Board designates the County of Orange as administrative and fiscal entity for homeless funding to support the development of the System of Care. The County of Orange is the administrative and fiscal entity for state and local funding from homeless programming that designates the CoC as the eligible applicant and requires the local government entity to be the fiscal agent.

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B. Orange County CoC Board

As noted in §578.5(b) of the HEARTH Act, “The Continuum of Care must establish a board to act on behalf of the Continuum using the process established as a requirement by § 578.7(a)(3) and must comply with the conflict-of-interest requirements at § 578.95(b).”

The Continuum of Care Board is therefore acting on behalf of the members of the Orange County CoC. To this end, the Orange County CoC will strategically comprise a governing board that represents the stakeholder groups enumerated in the HEARTH Act which require the CoC Board to be representative of relevant organizations and of projects serving homeless subpopulations within Orange County, including at least one (1) homeless or formerly homeless individual.

1. Continuum of Care Board Responsibilities

The Continuum of Care Board will:

- a. Conduct the hands-on work and facilitate the committees, subcommittees and ad hoc groups of the Orange County CoC. Every member of the CoC Board must serve on a minimum of one committee;
- b. Build community awareness of the needs of all homeless and at-risk populations identified in the county;
- c. Ensure, to the greatest extent possible, access to services by the subpopulations enumerated in this charter;
- d. Ensure relevant organizations and projects serving various homeless and at-risk subpopulations are represented in the planning and decision-making for the overall coordination of homeless services Continuum of Care;
- e. Ensure regional coordination and collaborative work across the CoC through the use of the Coordinated Entry System;
- f. Coordinate the CoC Programs and set goals and priorities for ending homelessness in Orange County;
- g. Approve Orange County CoC policies as recommended by Committees;
- h. Create committees, subcommittees and ad hoc groups necessary for the proper and efficient functioning of the Orange County CoC, including the CoC program Notice of Funding Opportunity (NOFO); and
- i. Dissolve committees, subcommittees and ad hoc groups, if they are determined to be unnecessary for the proper and efficient functioning of the Orange County CoC.

2. Continuum of Care Board Composition

The CoC Board is comprised of 17 to 21 members in total, who are elected by the voting General Membership, with an odd number of members selected during each election.~~The CoC Board is comprised of an odd number of members, between 17 and 21 members in total, who are elected by the voting General Membership.~~ A quorum consists of fifty percent (50%) plus one (+1) voting members present. The CoC Board shall be comprised of members that provide a well-balanced perspective with multiple ~~identities,~~ experiences, and backgrounds to best lead the response to homelessness in the Orange County CoC.

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The CoC Board designations are:

- a. The CoC Board includes three (3) Officers, who shall be elected by the CoC Board each year. These positions include:
 - i. Chair: Responsible for leading the monthly CoC Board meetings and facilitating the work of the Orange County CoC, as determined in this Charter.
 - ii. Vice-Chair: Responsible for chairing CoC Board meetings in the absence of Chair or when Chair must recuse themself
 - iii. Secretary: Responsible for tracking attendance and motions for CoC Board meetings, reviewing the draft CoC Board meeting minutes, and chairing CoC Board meetings in the absence of both the Chair and Vice Chair, or when Chair and Vice Chair must recuse themselves

- b. The CoC Board shall have ~~an odd number of members with~~ 17 to 21 total CoC Board member seats ~~in any given year, with an odd number of members appointed during each election.~~ By January 2025, tThe makeup of the CoC Board shall include at least the following number of people with each of these ~~identities,~~ experiences, and backgrounds. One person may represent more than one of these ~~identities,~~ experiences, and backgrounds. By January 2027, the CoC Board will include at least one representative from the Youth Action Board (YAB).
 - i. People who have experienced homelessness or housing instability. ~~By January 2025, A~~at least 30% of the CoC Board must be comprised of people with lived experience, though the CoC Board can prioritize including more in any given year. ~~In January 2024, the Board must include at least four (4) people with lived experience.~~ This includes:
 1. One (1) seat will be determined by the Lived Experience Advisory Committee (LEAC). This could be the LEAC chair or someone else.
 2. It is important to the CoC Board that ~~the Board members~~ people with lived experience ~~of homelessness that~~ represent an array of household and age makeups. However, because some people with lived experience may not want to disclose that experience publicly, there are no required seats for people from specific household types or age groups. Ideally, the Board is recommended but not required to include at least one person from each of the following groups:
 - a. Lived experience of homelessness as a Transitional Age Youth (TAY) in the last five (5) years
 - b. Lived experience of homelessness as a single adult
 - c. Lived experience of homelessness with their family
 - d. Lived experience of homelessness as an older adult

 - ii. ~~People with whose experiences~~ identities and experiences that reflect ~~the diversity of those of the people experiencing homelessness within~~ the CoC. Each nomination and election cycle, the CoC Nominating Ad Hoc will utilize the most recently available data to determine how to prioritize desired

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representation and expertise to ensure that the CoC Board membership identity, background, and experience recommendations align with current trends in who experiences homelessness in Orange County. By January 2025, the CoC Board must include at least the following number of people with each of the following identities or experiences. This includes Board members who have and have not experienced homelessness:

~~iii. Black (at least 2)~~

~~iii. Indigenous or Native American (at least 2)~~

~~iii. Person of Color (including but not limited to people who are: Asian, Asian-American, Pacific Islander, Native Hawaiian, Latino/a/e/x, Central American, South American, Caribbean, Middle Eastern, North African) (at least 3)~~

~~iii. LGBTQIA+ (at least 2), including at least one (1) person who identifies as LGBTQIA+ based on each of the below categories:~~

~~iii. Sexual orientation: Lesbian, gay, bi, queer+~~

~~iii. Gender identity: Trans, non-binary, intersex, non-conforming+~~

~~iii. Disabled and/or neurodivergent (at least 2)~~

~~iii. Veteran/military service experience or part of a veteran/military service family (at least 1)~~

~~iii. Experience of domestic violence/intimate partner violence (at least 1)~~

~~iii. Older adult (at least 1)~~

~~iv.ii.~~

~~v.iii.~~ People who are currently representing, in a professional capacity, the following and/or people with current or past personal experience with any of the below listed areas of representation with personal or professional experience with:

1. Veteran/military service-focused agency (at least 1)
2. Emergency Solutions Grant (ESG) Program funded agency or recipient agency (at least 1)
3. Public Housing Agency (PHA) (at least 1)
4. Domestic violence agency (at least 1)
5. Education field / McKinney-Vento liaison (at least 1)
6. Behavioral health field (at least 1)
- ~~7. Faith-based organization or community (at least 1)~~
- ~~8.7.~~ Health care field (at least 1)
- ~~9. Affordable housing development background (at least 1)~~
8. TAY Agency (at least 1)

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9. Family Agency (at least 1)

10. People with experience with the following parts of the system. Ideally, the CoC Board will include members who represent all parts of the system, but at minimum the CoC Board must include members who represent at least three (3) of the following:

- a. Diversion
- b. Street Outreach
- c. Prevention
- d. Emergency Shelter
- e. Rapid Rehousing
- f. Permanent Supportive Housing

~~g. TAY Agency~~

g. Family Agency Faith-based organization or community (at least 1)

h. Affordable housing development background (at least 1)

c. Continuum of Care Board Support

- i. Collaborative Applicant – ~~As the Collaborative Applicant t~~The Continuum of Care CoC Manager and/or other County of Orange staff will facilitate the ~~Continuum of Care CoC~~ Board business and will utilize resources to continue the development of the CoC system.
- ii. HMIS Lead Agency – The HMIS Lead Agency will assist the Collaborative Applicant in providing CoC utilization, performance and gaps data and regional Service Planning Area resource information to the CoC Board.
- iii. Coordinated Entry System Lead Agency – The Coordinated Entry System Lead Agency will assist the Collaborative Applicant in providing performance and gaps data information from the Coordinated Entry System to the CoC Board.

3. Continuum of Care Board Selection Process

In advance of each term expiration, the following steps are to be completed to select new CoC Board Members:

- a. A Nominating Ad Hoc of at least six (6) people will be appointed annually by the CoC Board Chair.
 - i. At least one (1) member of the Nominating Ad Hoc will be a CoC Board member whose seat is not up for election.
 - ii. At least one (1) member of the Nominating Ad Hoc will be a Voting General Member or represent an organization that has a Voting General Member.
 - iii. At least four (4) members of the Nominating Ad Hoc will not be current CoC Board members.
- b. The Nominating Ad Hoc will review the CoC Governance Charter (Charter) and make any proposed revisions needed to ensure the CoC Board composition, selection process, and qualifications align with the community's priorities and the ~~identities,~~ backgrounds, and experiences of key partners, including people with lived experience, in the community. The Nominating Ad Hoc will review the most recently available data to provide due diligence to ensure that the CoC Board

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- membership ~~identity~~, background, and experience recommendations align with current trends in who experiences homelessness in Orange County. The recommended Charter changes will go to the CoC Board for approval. Should the CoC Board provide feedback or recommendations to the proposed changes, the Nominating Ad Hoc will review feedback and incorporate the CoC Board recommendations into the Charter to inform the nomination and election process. In the event that the Nominating Ad Hoc is not in agreement with the CoC Board feedback and recommendations to the Charter, the Nominating Ad Hoc will submit a new version of the Charter for the CoC Board to review and approve before the rest of the CoC Board nomination and election process moves forward.
- c. The Nominating Ad Hoc will support the Collaborative Applicant in outreach to potential CoC Board candidates to make them aware of the upcoming CoC Board election. These outreach efforts will help ensure adequate representation of ~~identities~~, backgrounds, and experiences listed in the CoC Board composition.
 - d. The Voting General Membership will be notified of the nomination period, start and end, as well as the process to nominate a candidate or express interest in being a candidate.
 - e. The Nominating Ad Hoc will support the Collaborative Applicant in reviewing submitted applications and verifying qualifications and ~~identities~~, background, and experience of all candidates who apply to serve as CoC Board Members or Officers. The Nominating Ad Hoc will determine a process to verify all candidates meet minimum qualifications before referring such candidates to the CoC General Membership.
 - f. The CoC General Membership will vote by secret ballot on the slate of qualified candidates. The Nominating Ad Hoc will utilize a prioritization tool that identifies candidates with the highest votes and ensures desired representation of various ~~identities~~, experiences, and backgrounds for the CoC Board membership. The selected candidates will be presented to the CoC Board for ratification.
 - g. The Lived Experience Advisory Committee (LEAC) will select one person to represent them on the CoC Board. The CoC General Membership will not vote on this person's participation on the CoC Board.
 - h. ~~The same process as outlined above in items a. through f. will be completed to fill any vacancies left by a member before the expiration of the term of that member, should the designated CoC Board composition require their seat to be filled. Should a member leave before the expiration of their term, For any vacancies that create a gap in the designated CoC Board composition,~~ the Collaborative Applicant will confirm whether the vacancy needs to be filled to meet the designated CoC Board composition. The Collaborative Applicant will utilize the applications and prioritization tool from the most recent election to identify the next candidate with the highest votes and ensures fulfills desired representation. If the designated CoC Board composition cannot be fulfilled, the Collaborative Applicant will follow the same process as outlined above in items a. through f. Appointments made to fill a vacancy left by a member before the expiration of their ir term ~~of that member~~ shall be for the remaining term of the eat member.
 - i. The traditional nominating and election timeline is as follows:

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- i. August/September – CoC Board Chair appoints Nominating Ad Hoc
- ii. September/October – Nominating Ad Hoc convenes to review and update sections of the Charter that pertain to the CoC Board composition, selection process, and qualifications
- iii. October/November – Nominating Ad Hoc outreaches to potential CoC Board candidates. The Nominating Ad Hoc will determine a process may interview eligible CoC Board candidates to verify that ~~they~~ CoC Board candidates meet minimum qualifications for the Board.
- iv. November/December – Candidates who moved forward based on their interview are presented to the CoC General Membership for voting/election.
- v. December – CoC Board ratifies slate of elected candidates by the CoC General membership.
- vi. January – CoC Board seating takes place. Outgoing CoC Board and Board staff will provide training and orientation for incoming CoC Board.

j. CoC Board Member Terms

- i. The following CoC Board Member Term policy will go into effect with the ratification of new CoC Board members at the December 2025 meeting of the CoC Board, to establish terms and term limits.
 1. CoC Board members will serve a three (3) year term;
 2. CoC Board members will be given the option to renew their term after the completion of one (1) term, membership on the CoC Board will be confirmed through the election process by the CoC General membership;
 3. CoC Board members will serve no more than two (2) consecutive full terms;
 4. CoC Board members who have served two (2) consecutive full terms must wait one (1) year before being eligible to serve again on the CoC Board

~~j.k.~~ At the first meeting of the calendar year, the CoC Board will elect the Board Officers (Chair, Vice-Chair and Secretary) to serve for one-year terms. CoC Board Officers may serve for more than one (1) term.

4. Continuum of Care Board Qualifications

All CoC Board members must bring a commitment to the work to end homelessness using best practices adopted locally. CoC Board members with lived experience of homelessness who are not also representing a local organization will be compensated for their time and expertise using the CoC's current compensation methods and rates.

- a. The Orange CoC Board Members and Officers are selected to represent various ~~identities and~~ personal and professional backgrounds, experiences, and entities. As a whole, the Board should:
 - i. Be ~~representative of diverse and reflect the identities, backgrounds, and experiences of the~~ people who experience homelessness in Orange County;
 - ii. Have complementary skill sets;
 - iii. Represent a balance of community partners in the region; and

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- iv. Willingness to collaborate with other potential CoC Board Members and bring in new leaders.
- b. Potential and current CoC Board Members must be current voting General Members who demonstrate:
 - i. A high level of ethical behavior, including compliance with the Conflict of Interest and Recusal process as defined in this Charter;
 - ii. Working knowledge of, compassion about, and commitment to:
 1. ending homelessness
 2. furthering equity, access, and inclusion effectiveness and collaboration within the CoC Board and across the CoC's work.
 - iii. Leadership and collaborative spirit in the best interest of the Orange County CoC.
 - iv. Willingness and ability to consistently attend meetings and participate in Committees, with accommodation as needed.
- c. All CoC Board members must attend at least 75% of meetings each year and not be absent for three (3) consecutive meetings in order to remain in good standing. All CoC Board members must also participate in at least one (1) committee, working group, or ad-hoc each year, and attend at least 75% of committee meetings. Board Members and Officers failing to meet the attendance standard will be subject to removal by majority vote fifty percent plus one (50% + 1) of the CoC Board.
 - i. When there is a strategic plan, CoC Board members serving as a Chair of a committee will be de-facto owners of their committees' assigned strategies to own. Should a CoC Committee Chair be unable to participate as an owner, a representative from their CoC Committee may be appointed.

5. Continuum of Care Board Meetings

1. All meetings will be open to the public except as otherwise determined by the CoC Board. Any person who attends an Orange County CoC meeting may be asked by the CoC Board Chair to leave if the person is disruptive; if a conflict of interest applies; or if an agenda business item(s) is deemed by the CoC Board Chair to be of such nature that it involves only Orange County CoC closed session business.
2. Robert's Rules of Order Abridged-Revised will guide the process during all meetings.
3. An annual calendar of the CoC Board meetings will be recommended to the CoC Board for adoption at the CoC Board meeting in October and presented at the Service Provider Forum meeting in November. The CoC Board meetings calendar will be distributed to all members electronically and published on the County of Orange – Homeless Services website.

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6. Continuum of Care Board Documentation

1. The Orange County CoC Board will conduct and transact business in a fair and transparent manner. To this end, the CoC Board will maintain records of all Orange County Continuum of Care agendas and minutes and make these available upon request.
2. The Collaborative Applicant will keep record of all HEARTH Act policies, calendars, meeting minutes, and records.

7. CoC Board Conflict of Interest and Code of Conduct

1. Conflict of Interest – Members serving on the CoC Board or any of its committees, ad hocs and/or working groups, shall abstain from voting on any issue in which they may be personally vested to avoid a conflict of interest in accordance with County, State and Federal laws, regulations and ordinances and shall refrain from engaging in any behavior that conflicts with the best interest of the CoC. Members must comply with the conflict of interest and recusal process found in the § 578.95 Conflicts of interest of the HEARTH Act¹ and any additional requirements as outline in the Charter and the Orange County CoC Conflict of Interest Policy and Procedure (Attachment A).
 - a. Members shall not vote nor attempt to influence any other Member on a matter under consideration by the CoC Board or any of its committees, ad hocs or working groups as follows:
 - i. Regarding the provision of services by such member (or by an entity that such member represents); or
 - ii. By providing direct financial benefit to such member or the immediate family of such member; or
 - iii. Engaging in any other activity determined by County, State or Federal law, regulations and ordinances to constitute a conflict of interest.
 - b. Determining Whether a Conflict of Interest Exists – If a question arises as to whether a conflict exists that may prevent a Member from voting, the CoC Board Chair or designee may consult with designated Collaborative Applicant staff to assist in making that determination.
 - c. Neither the CoC Board nor any of its Members shall promote, directly or indirectly, any political party, political candidate or political activity using the name, emblem or any other identifier of the CoC Board.

¹ CFR 24 578.95 § 578.95 Conflicts of Interest: <https://www.hudexchange.info/resource/2035/coc-program-interim-rule-formatted-version/>

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- d. No assets or assistance provided by the Collaborative Applicant to the CoC Board shall be used for sectarian worship, instruction, or proselytization, except as otherwise permitted by law.
2. Code of Conduct – Members serving on the CoC Board or any of its committees, ad hocs or working groups, are entrusted with specific responsibilities related to use of public funds invested in addressing homelessness. Members are expected to observe the highest standards of ethical conduct in the execution of these responsibilities. In the performance of their duties, Members are expected to carry out the mandate of the Orange County CoC to the best of their ability and to maintain the highest standards of integrity while interacting with other Members, Orange County CoC representatives, service recipients, service providers, and the public, as outlined in the Orange County CoC Code of Conduct (Attachment B).
 - a. The Orange County CoC prohibits the solicitation and acceptance of gifts or gratuities by the CoC Board, committees, ad hocs or working groups, Voting Members, or employees and agents of the Collaborative Applicant from anyone who intends to receive personal benefit or preferential treatment. Violation of any portion of this Code of Conduct could subject a CoC Voting Member to immediate termination from membership as determined by the CoC Board;
 - b. The Orange County CoC promotes impartiality in performing official duties and prohibits any activity representing a conflict of interest. Individuals should not act on a matter if a reasonable person who knew the circumstances of the situation could legitimately question fairness;
 - c. Members shall:
 - i. Put forth honest effort in the performance of their duties;
 - ii. Not knowingly make unauthorized commitments or promises of any kind purporting to bind the Orange County CoC without previous CoC Board approval;
 - iii. Disclose waste, fraud, abuse and corruption to the appropriate authorities;
 - iv. Adhere to all laws and regulations that provide equal opportunity to all United States citizens regardless of race, color, religion, sex, gender, sexual orientation, national origin, age, or disability, or any other protected category;
 - v. Conduct themselves with courtesy and respect. Personal relationships should not result in special considerations that influence the performance of their official duties in a manner contrary to the interest of the broader Orange County CoC. Members are expected to exercise

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adequate control and supervision over matters for which they are individually responsible.

- vi. Assure that the resources entrusted to them are used for conducting official business only. Members of the CoC Board must abide by the Conflict of Interest Policies established for CoC Board operations (See Section V.B.7.1.).
 - vii. Protect any confidential information provided to, or generated by, the activities of the Orange County CoC; and
 - viii. Not use confidential information of the Orange County CoC for any purpose or disclose such confidential information to any third party, except as necessary to perform their duties and responsibilities as members of the CoC Board.
3. Termination Policy - Any Member, or the entire CoC Board, may be removed for cause by a two-thirds (2/3) vote of the Orange County CoC Voting Membership at a specially called meeting. Cause is constituted by a violation of the Conflict of Interest regulations or a violation of the Code of Conduct.

C. CoC General Membership

CoC General Membership is based upon organizations within the Geographic Area participating in the responsibilities of the Orange County CoC by having organizational representatives actively participate in CoC Board, committees, ad hocs and working groups.

As noted in § 578.5 Establishing the CoC. Relevant organizations will include:

“Nonprofit homeless assistance providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, and organizations that serve veterans and homeless and formerly homeless individuals.”

Additionally, the Orange County CoC will strive to ensure representation from an array of diverse and public agencies including those dedicated to behavior health; substance use recovery services; health; employment training and development; youth; the two-spirit, lesbian, gay, bisexual, trans, queer, questioning, intersex, asexual/aromantic and all other sexual orientations and genders (2SLGBTQQIA+) community; and housing and community development.

a. Nominations for Orange County CoC General Membership

A public invitation within the Geographic Areas of the CoC will be extended annually for new members to join in accordance with the HEARTH Act as described in § 578.7 Responsibilities of the CoC.

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b. General Membership Terms

There is no term limit. Membership, however, may be terminated by the Orange County CoC in accordance with subsection I. Removal below.

c. Continuum of Care Meetings

The Orange County CoC will hold meetings of the full membership with published agendas at least twice a year. The Orange County Service Provider Forum serves to facilitate CoC full membership meetings.

d. Quorum

A number equal to a majority of those belonging to the Orange County CoC will constitute a quorum for the transaction of business at any general membership meeting.

e. Voting

At all meetings, business items may be decided by arriving at a consensus. If a vote is necessary, all votes will be by voice or ballot at the will of the majority in attendance. The exception to this rule is a vote to elect Members, in this case a vote will be held by secret ballot. Each active organization will have one vote given by one representative even when more than one organizational representative is present. No active organization may vote on any item which presents a real or perceived conflict-of-interest.

f. Conflict of Interest

CoC General Members must comply with the conflict of interest and recusal process found in the § 578.95 Conflicts of interest of HEARTH Act² and any additional requirements as outline in the Charter and the Orange County CoC Conflict of Interest Policy and Procedure (Attachment A).

g. Code of Conduct

Members will ensure a commitment to the Orange County CoC Code of Conduct (Attachment B).

h. Removal

Any CoC General Member of the Orange County CoC may be removed by a two-thirds majority of all organizations present during a scheduled meeting.

D. Collaboration with Commission to End Homelessness

The Commission to End Homelessness focuses on regional policy and implementation strategies, affordable housing development, data and gaps analysis, best practice research, social policy and systems~~ie~~ change to promote an effective response to homelessness within the County of Orange. The CoC Board will regularly provide information and recommendations around CoC funded homeless programs to the

² CFR 24 578.95 § 578.95 Conflicts of Interest: <https://www.hudexchange.info/resource/2035/coc-program-interim-rule-formatted-version/>

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Commission to End Homelessness. This will ensure regional alignment of efforts to resolve homelessness.

1. The CoC Board will collaborate with the Commission to End Homelessness to:
 - a. Address gaps within the System of Care;
 - b. Strengthen operational performance;
 - c. Ensure regional access and alignment;
 - d. Receive expertise related to each System of Care component in support of the CoC System integration objectives; and
 - e. Identify, secure and prioritize funding opportunities that provide system enhancements within the five components of the System of Care” Community Corrections, Behavioral Health, Healthcare, housing, Benefits and Support Services.
2. The CoC Board will at least annually report to the Commission to End Homelessness on the progress of the Orange County CoC. These reports may include:
 - a. HUD System Performance Measures (SPM) Report
 - b. Housing Inventory Chart (HIC)
 - c. Gaps Analysis Reports
 - d. Point-in Time (PIT) Count (unsheltered biennially and sheltered annually)
 - e. Funding priorities, grants and funding awards from federal and state government
 - f. Any other reports requested by the Commission to End Homelessness to help further system of care policy recommendations and regional system development.
3. The chairperson of the CoC Board and the Commission to End Homelessness may establish ad hoc committees to provide recommendations regarding time-limited tasks that support the goals of the Commission to End Homelessness and assist in the functions of the CoC Board.
4. Non-conflicted Commission to End Homelessness members may participate on review panels concerning the award of a grant or other program funding related to the CoC when there is a conflict of interest among CoC Board members.

VI. Continuum of Care Legal Entity

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The County of Orange is the Collaborative Applicant who will submit grants to HUD on behalf of the project applicants comprised in the Orange County CoC. All contracts funded by the CoC competition have direct contracts with HUD. Submission will be in compliance with § 578.9. The County of Orange is the designated administrative entity and fiscal agent for homeless services system funding awards that intersect with the CoC and the System of Care programs.

VII. Public Statement and Media Policy

In the interest of presenting a unified voice in the community, the Collaborative Applicant, County of Orange, is the designated spokespersons and media points of contact for the Orange County CoC for inquiries or official statements related to the Orange County CoC. Members will refrain from making public comments or speaking to the media on behalf of the Orange County CoC, unless the Collaborative Applicant determines that the interests of the Orange County CoC are best served by another member speaking on behalf of the group. When making public statements or speaking to the media on issues related to homelessness, Members will make clear, to the best of their ability, whether they are speaking in their own organization's/individual's name or on behalf of the Orange County CoC.

Orange County CoC - CA - 602 Governance Charter

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Introduction: In accordance with the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (the “HEARTH Act”) which was enacted into law on May 20, 2009, the Orange County Continuum of Care in consultation with the Collaborative Applicant (County of Orange), Continuum of Care and Emergency Solution Grant funded agencies and Homeless Management Information System (“HMIS”) Lead Agency has developed a governance charter which includes procedures and policies needed to comply with the HEARTH Act requirements as prescribed by U.S. Department of Housing and Urban Development (HUD); and a code of conduct and recusal process for the board, its chair(s), and any person acting on behalf of the board.

In addition to HEARTH Act compliance and in alignment with the Regional System of Care, the Continuum of Care (“CoC”) will operate to enhance, inform and implement services addressing the complex case management and housing needs of individuals and families experiencing homelessness in Orange County. Services supported by the Orange County CoC will also demonstrate best practices and evidence-based practices ensuring a client-centered approach, client choice and client rights and responsibilities are clear and service standards are consistently met.

The Orange County CoC designates the County of Orange as the collaborative applicant and fiscal entity for administering planning and funding for homelessness assistance program throughout the Orange County CoC.

I. Name:

The technical name of the organization is CoC CA-602 hereinafter referred to as the “Orange County CoC”.

II. Geographic Boundaries:

The Orange County CoC covers all the geography within the boundaries of Orange County, including its 34 cities and unincorporated areas as regionalized within North, Central and South Service Planning Areas.

III. Purpose:

The Orange County CoC serves as the locally-designated primary decision-making group whose purpose and scope is to implement the Continuum of Care program (the “CoC”) which is authorized by subtitle C of title IV of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11381-11389). As noted in CFR 24 Part 578.1 Purpose and scope of the HEARTH Act, the program is designed to:

- A. Promote communitywide commitment to the goal of ending homelessness through regional coordination and collaboration;
- B. Advocate for funding and resources to end homelessness and provide funding for proven efforts by nonprofit providers and local governments to quickly rehouse people experiencing homelessness, while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness;
- C. Promote access to and effective utilization of mainstream programs by homeless individuals and families; and

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- D. Promote implementation of best practices and evidence-based approaches to homeless programming and services.

IV. Responsibilities of the Orange County CoC

The four major responsibilities of the Orange County CoC consists of:

1. Operating the Continuum of Care,
2. Designating and operating an HMIS for the Continuum of Care,
3. Planning for the Continuum of Care, and
4. Preparing an application for funds which is in accordance with § 578.7 Responsibilities of the Continuum of Care and in the HEARTH Act and § 578.79.

A. Operating the Continuum of Care.

The Orange County CoC will:

1. Hold meetings of the full membership, with published agendas, at least semi-annually;
2. Make a public invitation for new members to join available within the geographic area at least annually;
3. Adopt and follow a written process to select a board to act on behalf of the CoC. The process must be reviewed, updated, and approved by the CoC at least every five (5) years;
4. Establish committees, subcommittees and ad hoc groups to address specific functions of the Orange County CoC, as needed;
5. Work with the Collaborative Applicant to develop and update annually a governance charter, which will include all procedures and policies needed to comply with HUD mandates, HEARTH Act regulations and a code of conduct and recusal process for the board, its chair(s), and any person acting on behalf of the board;
6. Consult with recipients and subrecipients to establish performance targets appropriate for population and program type, monitor Continuum of Care and Emergency Solutions Grant funded agencies performance, evaluate outcomes, and take action to address poor performers;
7. Evaluate outcomes of projects funded under the Emergency Solutions Grants program and the Continuum of Care program, and report performance measures to HUD as required;
8. In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish and operate a Coordinated Entry System that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services. The CoC must maintain specific policy to guide the operation of the Coordinated Entry System on how its system addresses the needs of individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from nonvictim service providers in compliance with any requirements established by HUD Notice; and

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9. In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish and consistently follow written standards for providing Continuum of Care assistance. At a minimum, these written standards must include:
 - a. Policies and procedures for evaluating individuals' and families' eligibility for assistance;
 - b. Policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional housing assistance;
 - c. Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid rehousing assistance;
 - d. Standards for determining what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance;
 - e. Policies and procedures for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance; and
 - f. Where the CoC is designated a high-performing community, as described in Subpart G, policies and procedures set forth in 24 CFR 576.400(e)(vi), (e)(vii), (e)(viii), and (e)(ix).

B. Designating and operating a Homeless Management Information System.

The Orange County CoC will:

1. Designate a single Homeless Management Information System (HMIS) for the geographic area;
2. Designate an eligible applicant to manage the CoC's HMIS, which will be known as the HMIS Lead;
3. Review, revise and approve a privacy plan, security plan, and data quality plan for the CoC HMIS;
4. Ensure consistent participation of recipients and subrecipients in the HMIS;
5. Ensure the HMIS is administered in compliance with requirements prescribed by HUD;
6. Ensure the HMIS operates efficiently and effectively to promote HUD funded and non-funded agency participation, system coordination, and utilization and performance is achieved; and
7. Ensure that HMIS captures the Coordinated Entry System Core Elements of Access, Assessment, Prioritization and Referral through program participation by recipients and subrecipients.

C. Continuum of Care Policies, Procedures and Standards

The Orange County CoC will:

1. Have a Policies, Procedures and Standards Committee that meets at least two times a year or as needed for the review of policies, procedures and standards of the Orange County Continuum of Care;

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2. Have its various committees, subcommittees, and ad hocs proposed drafts, revisions and/or updates to policies, procedures and/ or standards be submitted to the Policies, Procedures and Standards Committee;
3. Have all proposed policies, procedures and standards reviewed and vetted by the Policies and Standards Committee to ensure adherence to the HEARTH Act, HUD Notices and regulations, best practices and evidenced-based approaches, prior to being presented to the CoC Board for adoption; and
4. Engage the public, including homeless and formerly homeless individuals, in policy and standards development and/or revisions that affect the operations of the CoC and ESG funded programs.

D. Continuum of Care Planning.

The Orange County CoC and the Collaborative Applicant (County of Orange) will develop a plan that includes:

1. Coordinating the implementation of a housing and service system within its geographic area that meets the needs of the homeless individuals, including unaccompanied youth, and families. At a minimum, this system encompasses the following:
 - a. Outreach, engagement, and assessment;
 - b. Shelter, housing, and supportive services;
 - c. Prevention and diversion strategies.
2. Planning for and conducting an annual shelter homeless count and a biennial unsheltered homeless count by Service Planning Area that meets the following requirements:
 - a. Homeless persons who are living in a place not designed or ordinarily used as a regular sleeping accommodation for humans must be counted as unsheltered homeless persons;
 - b. Persons living in emergency shelters and transitional housing projects must be counted as sheltered homeless persons; and
 - c. Other requirements established by HUD Notice or to meet local objectives.
3. The HMIS Lead Agency will assist the Collaborative Applicant in conducting an annual gaps analysis of the homeless needs and services available within the geographic area and/or Service Planning Areas;
4. Providing information required to complete the Consolidated Plan(s) within the CoC's geographic area;
5. Consulting with State and local government Emergency Solutions Grants program recipients within the CoC's geographic area on the plan for allocating Emergency Solutions Grants program funds and reporting on and evaluating the performance of

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Emergency Solutions Grants program recipients and subrecipients. Emergency Solutions Grant entitlements include:

- County of Orange
- Santa Ana
- Anaheim
- Garden Grove

E. Annual Competitive Application for Continuum of Care Funding

The Orange County CoC will:

1. Design, operate, and follow a collaborative process for the development of applications and approve the submission of applications in response to a Notice of Funding Availability (NOFA) published by HUD;
2. Establish priorities for funding proposals to meet needs within in the geographic area;
3. Support the Collaborative Applicant in compiling the required application information from all projects within the geographic area that the CoC has selected for funding; and
4. Retains all of its responsibilities, even if it designates one or more eligible applicants other than itself to apply for funds on behalf of the CoC. This includes approving the CoC application.

V. Orange County CoC Structure:

The operations and management of the Orange County CoC and its responsibilities are structured in four segments.

A. CoC Collaborative Applicant and Fiscal Agent

The Orange County CoC designates the County of Orange as Collaborative Applicant and Planning Grant recipient for homelessness assistance programs throughout the Orange County CoC. The County of Orange will comply with the provisions of 24 CFR 578.7, including coordinating with the development of the CoC system, CoC planning, Coordinated Entry System, HMIS and the support of the various functions and activities as required by the HEARTH Act.

In addition, the Orange County CoC Board designates the County of Orange as administrative and fiscal entity for homeless funding to support the development of the System of Care. The County of Orange is the administrative and fiscal entity for state and local funding from homeless programming that designates the CoC as the eligible applicant and requires the local government entity to be the fiscal agent.

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B. Orange County CoC Board

As noted in §578.5(b) of the HEARTH Act, “The Continuum of Care must establish a board to act on behalf of the Continuum using the process established as a requirement by § 578.7(a)(3) and must comply with the conflict-of-interest requirements at § 578.95(b).”

The Continuum of Care Board is therefore acting on behalf of the members of the Orange County CoC. To this end, the Orange County CoC will strategically comprise a governing board that represents the stakeholder groups enumerated in the HEARTH Act which require the CoC Board to be representative of relevant organizations and of projects serving homeless subpopulations within Orange County, including at least one (1) homeless or formerly homeless individual.

1. Continuum of Care Board Responsibilities

The Continuum of Care Board will:

- a. Conduct the hands-on work and facilitate the committees, subcommittees and ad hoc groups of the Orange County CoC. Every member of the CoC Board must serve on a minimum of one committee;
- b. Build community awareness of the needs of all homeless and at-risk populations identified in the county;
- c. Ensure, to the greatest extent possible, access to services by the subpopulations enumerated in this charter;
- d. Ensure relevant organizations and projects serving various homeless and at-risk subpopulations are represented in the planning and decision-making for the overall coordination of homeless services Continuum of Care;
- e. Ensure regional coordination and collaborative work across the CoC through the use of the Coordinated Entry System;
- f. Coordinate the CoC Programs and set goals and priorities for ending homelessness in Orange County;
- g. Approve Orange County CoC policies as recommended by Committees;
- h. Create committees, subcommittees and ad hoc groups necessary for the proper and efficient functioning of the Orange County CoC, including the CoC program Notice of Funding Opportunity (NOFO); and
- i. Dissolve committees, subcommittees and ad hoc groups, if they are determined to be unnecessary for the proper and efficient functioning of the Orange County CoC.

2. Continuum of Care Board Composition

The CoC Board is comprised of 17 to 21 members in total, who are elected by the voting General Membership, with an odd number of members selected during each election. A quorum consists of fifty percent (50%) plus one (+1) voting members present. The CoC Board shall be comprised of members that provide a well-balanced perspective with multiple experiences and backgrounds to best lead the response to homelessness in the Orange County CoC.

The CoC Board designations are:

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- a. The CoC Board includes three (3) Officers, who shall be elected by the CoC Board each year. These positions include:
 - i. Chair: Responsible for leading the monthly CoC Board meetings and facilitating the work of the Orange County CoC, as determined in this Charter.
 - ii. Vice-Chair: Responsible for chairing CoC Board meetings in the absence of Chair or when Chair must recuse themselves
 - iii. Secretary: Responsible for tracking attendance and motions for CoC Board meetings, reviewing the draft CoC Board meeting minutes, and chairing CoC Board meetings in the absence of both the Chair and Vice Chair, or when Chair and Vice Chair must recuse themselves

- b. The CoC Board shall have 17 to 21 total CoC Board member seats , with an odd number of members appointed during each election The makeup of the CoC Board shall include at least the following number of people with each of these experiences and backgrounds. One person may represent more than one of these experiences and backgrounds. By January 2027, the CoC Board will include at least one representative from the Youth Action Board (YAB).
 - i. People who have experienced homelessness or housing instability. At least 30% of the CoC Board must be comprised of people with lived experience, though the CoC Board can prioritize including more in any given year. This includes:
 1. One (1) seat will be determined by the Lived Experience Advisory Committee (LEAC). This could be the LEAC chair or someone else.
 2. It is important to the CoC Board that the Board members with lived experience of homelessness represent an array of household and age makeups. However, because some people with lived experience may not want to disclose that experience publicly, there are no required seats for people from specific household types or age groups. Ideally, the Board is recommended but not required to include at least one person from each of the following groups:
 - a. Lived experience of homelessness as a Transitional Age Youth (TAY) in the last five (5) years
 - b. Lived experience of homelessness as a single adult
 - c. Lived experience of homelessness with their family
 - d. Lived experience of homelessness as an older adult
 - ii. People whose experiences reflect those of the people experiencing homelessness within the CoC. Each nomination and election cycle, the CoC Nominating Ad Hoc will utilize the most recently available data to determine how to prioritize desired representation and expertise to ensure that the CoC Board membership background and experience recommendations align with current trends in who experiences homelessness in Orange County.

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- iii. People who are currently representing, in a professional capacity, the following and/or people with current or past personal experience with any of the below listed areas of representation:
 1. Veteran/military service-focused agency (at least 1)
 2. Emergency Solutions Grant (ESG) Program funded agency or recipient agency (at least 1)
 3. Public Housing Agency (PHA) (at least 1)
 4. Domestic violence agency (at least 1)
 5. Education field / McKinney-Vento liaison (at least 1)
 6. Behavioral health field (at least 1)
 7. Health care field (at least 1)
 8. TAY Agency (at least 1)
 9. Family Agency (at least 1)
 10. People with experience with the following parts of the system. Ideally, the CoC Board will include members who represent all parts of the system, but at minimum the CoC Board must include members who represent at least three (3) of the following:
 - a. Diversion
 - b. Street Outreach
 - c. Prevention
 - d. Emergency Shelter
 - e. Rapid Rehousing
 - f. Permanent Supportive Housing
 - g. Faith-based organization or community
 - h. Affordable housing development background
- c. Continuum of Care Board Support
 - i. Collaborative Applicant – The CoC Manager and/or other County of Orange staff will facilitate the CoC Board business and will utilize resources to continue the development of the CoC system.
 - ii. HMIS Lead Agency – The HMIS Lead Agency will assist the Collaborative Applicant in providing CoC utilization, performance and gaps data and regional Service Planning Area resource information to the CoC Board.
 - iii. Coordinated Entry System Lead Agency – The Coordinated Entry System Lead Agency will assist the Collaborative Applicant in providing performance and gaps data information from the Coordinated Entry System to the CoC Board.

3. Continuum of Care Board Selection Process

In advance of each term expiration, the following steps are to be completed to select new CoC Board Members:

- a. A Nominating Ad Hoc of at least six (6) people will be appointed annually by the CoC Board Chair.
 - i. At least one (1) member of the Nominating Ad Hoc will be a CoC Board member whose seat is not up for election.

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- ii. At least one (1) member of the Nominating Ad Hoc will be a Voting General Member or represent an organization that has a Voting General Member.
 - iii. At least four (4) members of the Nominating Ad Hoc will not be current CoC Board members.
- b. The Nominating Ad Hoc will review the CoC Governance Charter (Charter) and make any proposed revisions needed to ensure the CoC Board composition, selection process, and qualifications align with the community's priorities and the backgrounds and experiences of key partners, including people with lived experience, in the community. The Nominating Ad Hoc will review the most recently available data to provide due diligence to ensure that the CoC Board membership background and experience recommendations align with current trends in who experiences homelessness in Orange County. The recommended Charter changes will go to the CoC Board for approval. Should the CoC Board provide feedback or recommendations to the proposed changes, the Nominating Ad Hoc will review feedback and incorporate the CoC Board recommendations into the Charter to inform the nomination and election process. In the event that the Nominating Ad Hoc is not in agreement with the CoC Board feedback and recommendations to the Charter, the Nominating Ad Hoc will submit a new version of the Charter for the CoC Board to review and approve before the rest of the CoC Board nomination and election process moves forward.
- c. The Nominating Ad Hoc will support the Collaborative Applicant in outreach to potential CoC Board candidates to make them aware of the upcoming CoC Board election. These outreach efforts will help ensure adequate representation of backgrounds and experiences listed in the CoC Board composition.
- d. The Voting General Membership will be notified of the nomination period, start and end, as well as the process to nominate a candidate or express interest in being a candidate.
- e. The Nominating Ad Hoc will support the Collaborative Applicant in reviewing submitted applications and verifying qualifications and background and experience of all candidates who apply to serve as CoC Board Members or Officers. The Nominating Ad Hoc will determine a process to verify all candidates meet minimum qualifications before referring such candidates to the CoC General Membership.
- f. The CoC General Membership will vote by secret ballot on the slate of qualified candidates. The Nominating Ad Hoc will utilize a prioritization tool that identifies candidates with the highest votes and ensures desired representation of various experiences and backgrounds for the CoC Board membership. The selected candidates will be presented to the CoC Board for ratification.
- g. The Lived Experience Advisory Committee (LEAC) will select one person to represent them on the CoC Board. The CoC General Membership will not vote on this person's participation on the CoC Board.
- h. Should a member leave before the expiration of their term, the Collaborative Applicant will confirm whether the vacancy needs to be filled to meet the designated CoC Board composition. The Collaborative Applicant will utilize the applications and prioritization tool from the most recent election to identify a candidate with the highest votes and fulfills desired representation. If the

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designated CoC Board composition cannot be fulfilled, the Collaborative Applicant will follow the same process as outlined above in items a. through f. Appointments made to fill a vacancy left by a member before the expiration of their term shall be for the remaining term of the member.

- i. The traditional nominating and election timeline is as follows:
 - i. August/September – CoC Board Chair appoints Nominating Ad Hoc
 - ii. September/October – Nominating Ad Hoc convenes to review and update sections of the Charter that pertain to the CoC Board composition, selection process, and qualifications
 - iii. October/November – Nominating Ad Hoc outreaches to potential CoC Board candidates. The Nominating Ad Hoc will determine a process to verify that CoC Board candidates meet minimum qualifications for the Board.
 - iv. November/December – Candidates who moved forward based on their interview are presented to the CoC General Membership for voting/election.
 - v. December – CoC Board ratifies slate of elected candidates by the CoC General membership.
 - vi. January – CoC Board seating takes place. Outgoing CoC Board and Board staff will provide training and orientation for incoming CoC Board.
 - j. CoC Board Member Terms
 - i. The following CoC Board Member Term policy will go into effect with the ratification of new CoC Board members at the December 2025 meeting of the CoC Board, to establish terms and term limits.
 1. CoC Board members will serve a three (3) year term;
 2. CoC Board members will be given the option to renew their term after the completion of one (1) term, membership on the CoC Board will be confirmed through the election process by the CoC General membership;
 3. CoC Board members will serve no more than two (2) consecutive full terms;
 4. CoC Board members who have served two (2) consecutive full terms must wait one (1) year before being eligible to serve again on the CoC Board
 - k. At the first meeting of the calendar year, the CoC Board will elect the Board Officers (Chair, Vice-Chair and Secretary) to serve for one-year terms. CoC Board Officers may serve for more than one (1) term.
4. Continuum of Care Board Qualifications
All CoC Board members must bring a commitment to the work to end homelessness using best practices adopted locally. CoC Board members with lived experience of homelessness who are not also representing a local organization will be compensated for their time and expertise using the CoC's current compensation methods and rates.

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- a. The Orange CoC Board Members and Officers are selected to represent various personal and professional backgrounds, experiences, and entities. As a whole, the Board should:
 - i. Be representative of the people who experience homelessness in Orange County;
 - ii. Have complementary skill sets;
 - iii. Represent a balance of community partners in the region; and
 - iv. Willingness to collaborate with other potential CoC Board Members and bring in new leaders.

- b. Potential and current CoC Board Members must be current voting General Members who demonstrate:
 - i. A high level of ethical behavior, including compliance with the Conflict of Interest and Recusal process as defined in this Charter;
 - ii. Working knowledge of, compassion about, and commitment to:
 1. ending homelessness
 2. furthering effectiveness and collaboration within the CoC Board and across the CoC's work.
 - iii. Leadership and collaborative spirit in the best interest of the Orange County CoC.
 - iv. Willingness and ability to consistently attend meetings and participate in Committees, with accommodation as needed.

- c. All CoC Board members must attend at least 75% of meetings each year and not be absent for three (3) consecutive meetings in order to remain in good standing. All CoC Board members must also participate in at least one (1) committee, working group, or ad-hoc each year, and attend at least 75% of committee meetings. Board Members and Officers failing to meet the attendance standard will be subject to removal by majority vote fifty percent plus one (50% + 1) of the CoC Board.
 - i. When there is a strategic plan, CoC Board members serving as a Chair of a committee will be de-facto owners of their committees' assigned strategies to own. Should a CoC Committee Chair be unable to participate as an owner, a representative from their CoC Committee may be appointed.

5. Continuum of Care Board Meetings

1. All meetings will be open to the public except as otherwise determined by the CoC Board. Any person who attends an Orange County CoC meeting may be asked by the CoC Board Chair to leave if the person is disruptive; if a conflict of interest applies; or if an agenda business item(s) is deemed by the CoC Board Chair to be of such nature that it involves only Orange County CoC closed session business.

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2. Robert's Rules of Order Abridged-Revised will guide the process during all meetings.
 3. An annual calendar of the CoC Board meetings will be recommended to the CoC Board for adoption at the CoC Board meeting in October and presented at the Service Provider Forum meeting in November. The CoC Board meetings calendar will be distributed to all members electronically and published on the County of Orange – Homeless Services website.
6. Continuum of Care Board Documentation
1. The Orange County CoC Board will conduct and transact business in a fair and transparent manner. To this end, the CoC Board will maintain records of all Orange County Continuum of Care agendas and minutes and make these available upon request.
 2. The Collaborative Applicant will keep record of all HEARTH Act policies, calendars, meeting minutes, and records.
7. CoC Board Conflict of Interest and Code of Conduct
1. Conflict of Interest – Members serving on the CoC Board or any of its committees, ad hocs and/or working groups, shall abstain from voting on any issue in which they may be personally vested to avoid a conflict of interest in accordance with County, State and Federal laws, regulations and ordinances and shall refrain from engaging in any behavior that conflicts with the best interest of the CoC. Members must comply with the conflict of interest and recusal process found in the § 578.95 Conflicts of interest of the HEARTH Act¹ and any additional requirements as outline in the Charter and the Orange County CoC Conflict of Interest Policy and Procedure (Attachment A).
 - a. Members shall not vote nor attempt to influence any other Member on a matter under consideration by the CoC Board or any of its committees, ad hocs or working groups as follows:
 - i. Regarding the provision of services by such member (or by an entity that such member represents); or
 - ii. By providing direct financial benefit to such member or the immediate family of such member; or
 - iii. Engaging in any other activity determined by County, State or Federal law, regulations and ordinances to constitute a conflict of interest.
 - b. Determining Whether a Conflict of Interest Exists – If a question arises as to whether a conflict exists that may prevent a Member from voting, the

¹ CFR 24 578.95 § 578.95 Conflicts of Interest: <https://www.hudexchange.info/resource/2035/coc-program-interim-rule-formatted-version/>

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CoC Board Chair or designee may consult with designated Collaborative Applicant staff to assist in making that determination.

- c. Neither the CoC Board nor any of its Members shall promote, directly or indirectly, any political party, political candidate or political activity using the name, emblem or any other identifier of the CoC Board.
 - d. No assets or assistance provided by the Collaborative Applicant to the CoC Board shall be used for sectarian worship, instruction, or proselytization, except as otherwise permitted by law.
2. Code of Conduct – Members serving on the CoC Board or any of its committees, ad hocs or working groups, are entrusted with specific responsibilities related to use of public funds invested in addressing homelessness. Members are expected to observe the highest standards of ethical conduct in the execution of these responsibilities. In the performance of their duties, Members are expected to carry out the mandate of the Orange County CoC to the best of their ability and to maintain the highest standards of integrity while interacting with other Members, Orange County CoC representatives, service recipients, service providers, and the public, as outlined in the Orange County CoC Code of Conduct (Attachment B).
- a. The Orange County CoC prohibits the solicitation and acceptance of gifts or gratuities by the CoC Board, committees, ad hocs or working groups, Voting Members, or employees and agents of the Collaborative Applicant from anyone who intends to receive personal benefit or preferential treatment. Violation of any portion of this Code of Conduct could subject a CoC Voting Member to immediate termination from membership as determined by the CoC Board;
 - b. The Orange County CoC promotes impartiality in performing official duties and prohibits any activity representing a conflict of interest. Individuals should not act on a matter if a reasonable person who knew the circumstances of the situation could legitimately question fairness;
 - c. Members shall:
 - i. Put forth honest effort in the performance of their duties;
 - ii. Not knowingly make unauthorized commitments or promises of any kind purporting to bind the Orange County CoC without previous CoC Board approval;
 - iii. Disclose waste, fraud, abuse and corruption to the appropriate authorities;
 - iv. Adhere to all laws and regulations that provide equal opportunity to all United States citizens regardless of race, color, religion, sex, gender,

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sexual orientation, national origin, age, or disability, or any other protected category;

- v. Conduct themselves with courtesy and respect. Personal relationships should not result in special considerations that influence the performance of their official duties in a manner contrary to the interest of the broader Orange County CoC. Members are expected to exercise adequate control and supervision over matters for which they are individually responsible.
 - vi. Assure that the resources entrusted to them are used for conducting official business only. Members of the CoC Board must abide by the Conflict of Interest Policies established for CoC Board operations (See Section V.B.7.1.).
 - vii. Protect any confidential information provided to, or generated by, the activities of the Orange County CoC; and
 - viii. Not use confidential information of the Orange County CoC for any purpose or disclose such confidential information to any third party, except as necessary to perform their duties and responsibilities as members of the CoC Board.
3. Termination Policy - Any Member, or the entire CoC Board, may be removed for cause by a two-thirds (2/3) vote of the Orange County CoC Voting Membership at a specially called meeting. Cause is constituted by a violation of the Conflict of Interest regulations or a violation of the Code of Conduct.

C. CoC General Membership

CoC General Membership is based upon organizations within the Geographic Area participating in the responsibilities of the Orange County CoC by having organizational representatives actively participate in CoC Board, committees, ad hocs and working groups.

As noted in § 578.5 Establishing the CoC. Relevant organizations will include:

“Nonprofit homeless assistance providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, and organizations that serve veterans and homeless and formerly homeless individuals.”

Additionally, the Orange County CoC will strive to ensure representation from an array of public agencies including those dedicated to behavior health; substance use recovery services; health; employment training and development; youth; the two-spirit, lesbian, gay, bisexual, trans, queer, questioning, intersex, asexual/aromantic and all other sexual

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orientations and genders (2SLGBTQQA+) community; and housing and community development.

a. Nominations for Orange County CoC General Membership

A public invitation within the Geographic Areas of the CoC will be extended annually for new members to join in accordance with the HEARTH Act as described in § 578.7 Responsibilities of the CoC.

b. General Membership Terms

There is no term limit. Membership, however, may be terminated by the Orange County CoC in accordance with subsection I. Removal below.

c. Continuum of Care Meetings

The Orange County CoC will hold meetings of the full membership with published agendas at least twice a year. The Orange County Service Provider Forum serves to facilitate CoC full membership meetings.

d. Quorum

A number equal to a majority of those belonging to the Orange County CoC will constitute a quorum for the transaction of business at any general membership meeting.

e. Voting

At all meetings, business items may be decided by arriving at a consensus. If a vote is necessary, all votes will be by voice or ballot at the will of the majority in attendance. The exception to this rule is a vote to elect Members, in this case a vote will be held by secret ballot. Each active organization will have one vote given by one representative even when more than one organizational representative is present. No active organization may vote on any item which presents a real or perceived conflict-of-interest.

f. Conflict of Interest

CoC General Members must comply with the conflict of interest and recusal process found in the § 578.95 Conflicts of interest of HEARTH Act² and any additional requirements as outline in the Charter and the Orange County CoC Conflict of Interest Policy and Procedure (Attachment A).

g. Code of Conduct

Members will ensure a commitment to the Orange County CoC Code of Conduct (Attachment B).

h. Removal

Any CoC General Member of the Orange County CoC may be removed by a two-thirds majority of all organizations present during a scheduled meeting.

² CFR 24 578.95 § 578.95 Conflicts of Interest: <https://www.hudexchange.info/resource/2035/coc-program-interim-rule-formatted-version/>

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D. Collaboration with Commission to End Homelessness

The Commission to End Homelessness focuses on regional policy and implementation strategies, affordable housing development, data and gaps analysis, best practice research, social policy and systems change to promote an effective response to homelessness within the County of Orange. The CoC Board will regularly provide information and recommendations around CoC funded homeless programs to the Commission to End Homelessness. This will ensure regional alignment of efforts to resolve homelessness.

1. The CoC Board will collaborate with the Commission to End Homelessness to:
 - a. Address gaps within the System of Care;
 - b. Strengthen operational performance;
 - c. Ensure regional access and alignment;
 - d. Receive expertise related to each System of Care component in support of the CoC System integration objectives; and
 - e. Identify, secure and prioritize funding opportunities that provide system enhancements within the five components of the System of Care” Community Corrections, Behavioral Health, Healthcare, housing, Benefits and Support Services.
2. The CoC Board will at least annually report to the Commission to End Homelessness on the progress of the Orange County CoC. These reports may include:
 - a. HUD System Performance Measures (SPM) Report
 - b. Housing Inventory Chart (HIC)
 - c. Gaps Analysis Reports
 - d. Point-in Time (PIT) Count (unsheltered biennially and sheltered annually)
 - e. Funding priorities, grants and funding awards from federal and state government
 - f. Any other reports requested by the Commission to End Homelessness to help further system of care policy recommendations and regional system development.
3. The chairperson of the CoC Board and the Commission to End Homelessness may establish ad hoc committees to provide recommendations regarding time-limited tasks that support the goals of the Commission to End Homelessness and assist in the functions of the CoC Board.

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4. Non-conflicted Commission to End Homelessness members may participate on review panels concerning the award of a grant or other program funding related to the CoC when there is a conflict of interest among CoC Board members.

VI. Continuum of Care Legal Entity

The County of Orange is the Collaborative Applicant who will submit grants to HUD on behalf of the project applicants comprised in the Orange County CoC. All contracts funded by the CoC competition have direct contracts with HUD. Submission will be in compliance with § 578.9. The County of Orange is the designated administrative entity and fiscal agent for homeless services system funding awards that intersect with the CoC and the System of Care programs.

VII. Public Statement and Media Policy

In the interest of presenting a unified voice in the community, the Collaborative Applicant, County of Orange, is the designated spokespersons and media points of contact for the Orange County CoC for inquiries or official statements related to the Orange County CoC. Members will refrain from making public comments or speaking to the media on behalf of the Orange County CoC, unless the Collaborative Applicant determines that the interests of the Orange County CoC are best served by another member speaking on behalf of the group. When making public statements or speaking to the media on issues related to homelessness, Members will make clear, to the best of their ability, whether they are speaking in their own organization's/individual's name or on behalf of the Orange County CoC.

Date: October 14, 2025

Subject: Coordinated Entry System (CES) Policies and Procedures Recommended Changes

Recommended Action:

- a. Approve the revised CES Policies and Procedures, including the removal of shelter status from the prioritization schema, updates to formatting, and other clarifying language, for review and approval by the Continuum of Care (CoC) Board, as recommended by the Lived Experience Advisory Committee (LEAC) and CES Steering Committee.

Background and Analysis

The CES Policies and Procedures were last reviewed and approved by the Orange County Continuum of Care (CoC) Board on December 12, 2023. Since then, the Office of Care Coordination, as the CES Lead Agency, has supported CES to continue evolving and improving best practices to promote trauma-informed care, housing first practices, and to more efficiently address the needs of people experiencing homelessness in Orange County.

At the May 7, 2025, CES Steering Committee meeting, the Office of Care Coordination provided an update that the CES Policies and Procedures was being reviewed for potential revisions needed. The Office of Care Coordination sent an updated version of the CES Policies and Procedures for public feedback from June 26, 2025, to July 6, 2025, announced via the CoC and Coordinated Entry email distribution lists. During the July 9, 2025, CES Steering Committee meeting, discussion on the updated CES Policies and Procedures centered on the removal of shelter preference in the prioritization schema. Representatives from local cities expressed their desire to maintain the shelter preference. Alternatively, service providers indicated that the removal of shelter preference would either alleviate challenges families experiencing homelessness encounter, due to limited family shelter beds, or would not negatively impact adult-only households experiencing homelessness due to the high number of adults with chronic homelessness.

At the September 3, 2025, CES Steering Committee meeting, representatives from two (2) local Public Housing Authorities, service providers, and CES administrators participated in a discussion on the removal of the shelter preference as written in the proposed updated prioritization schema for identifying matches for housing opportunities. It was noted that the shelter preference only applies to households experiencing literal homelessness. Data was provided to highlight the number of households experiencing chronic homelessness and that due to the large number of households experiencing chronic homelessness, the shelter status does not come into effect. Andrew Crowe, CES Steering Committee Chair, received the feedback from the committee and recommended to approve the revised CES Policies and Procedures as proposed, for review and approval by the LEAC.

The Office of Care Coordination presented jointly with Andrew Crowe, CES Steering Committee Chair, at the October 1, 2025, LEAC meeting, reflecting discussion that took place at the September CES Steering Committee meeting. Some of the LEAC members asked clarifying questions, including questions relating to potential needed changes to CES prioritization should a reduction in CoC Program-funded permanent

housing put households at risk of losing their housing. The LEAC voted unanimously to recommend the revised CES Policies and Procedures proceed to the PPS Committee for review and approval.

The revised CES Policies and Procedures are included in **Attachment A** for review. As it relates to shelter preference, current prioritization schema indicates that shelter status for any household across the Individual and Family CES subpopulations would only apply to households experiencing literal homelessness and not chronic homelessness. Removing the shelter status would simplify the CES prioritization to mainly consider length of homelessness and disability status into consideration which removes an additional barrier for participants accessing housing opportunities through CES. A breakdown of the current and proposed prioritization is highlighted below, to further illustrate the removal of shelter preference within the prioritization process. Note that in both versions, participants within each group are sorted by the length of the current episode of homelessness, with the participants with the longest length of homelessness listed first (i.e. moving through all participants experiencing chronic homelessness in order of length of homelessness before advancing to the next group: households experiencing literal homelessness with a disability). Additionally, other program-specific eligibility criteria and/or prioritization factors, such as Mental Health Services Act (MHSA) certification or local preferences, may also apply to the overall CES prioritization.

Current Prioritization:

1. Households experiencing Chronic Homelessness
2. Households experiencing Literal Homelessness with a disability
 - a. Sheltered households
 - b. Unsheltered households
3. Households experiencing Literal Homelessness without a disability
 - a. Sheltered households
 - b. Unsheltered households
4. Households At-Risk of Homelessness

Proposed Prioritization:

1. Households experiencing Chronic Homelessness
2. Households experiencing Literal Homelessness with a disability
3. Households experiencing Literal Homelessness without a disability
1. 4. Households At-Risk of Homelessness

Feedback received during the public feedback period and both the July 9, 2025, the September 3, 2025, CES Steering Committee meeting, and the October 1, 2025 LEAC meeting can be referenced in **Attachment B**. Recommended revisions reflected in the revised CES Policies and Procedures that are informed by community feedback include explaining CES prioritization in depth, additional clarification on how Access Points can indicate the populations they serve, defining Open and Closed Access Points, clarifying language on grievance procedures and dynamic matches, and more information on emergency transfers due to concerns relating to domestic or other violence.

The PPS Committee is being asked to review and approve the revised CES Policies and Procedures. If approved, the recommended changes will be shared with the CoC Board for review and final approval.

Attachments

Attachment A – Revised CES Policies and Procedures – Redlined Version

Attachment B – CES Policies and Procedures Feedback Received



COORDINATED ENTRY SYSTEM POLICIES AND PROCEDURES

Date Approved by Continuum of Care Board:

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I. Common Terms and Definitions

Access Point refers to the point of entry into CES for households experiencing homelessness or at risk of homelessness.

Open Access Points will assist anyone (within their SPA/ subpopulations) with completing the CES Assessment or provide a warm hand-off to an appropriate Access Point to meet the household's needs. Open Access Points will receive direct referrals from 2-1-1 Orange County United Way's Virtual Front Door.

Closed Access Points will assist only those enrolled in their program(s) to complete the CES Assessment. Households will need to reach out to your agency directly to be referred to the agency's program and determine eligibility. If the household is not eligible for the agency's program, the household will provide a warm handoff to an Open Access Point for CES enrollment.

Bed Reservation System Assessment is a standardized process for determining a household's shelter needs and interests.

Case Conferencing involves exchanging information between service providers participating in CES to enhance service coordination, minimize duplication in services and expedite access to services when needed and available. The case conferencing is aimed at ensuring that individuals and families being prioritized for a housing resource per the CES policy can have their service needs adequately met and the housing resource is an appropriate match.

Community Queue (CQ) is the *list* that holds all CES households awaiting to be referred, or matched, to opportunities such as emergency shelter, supportive services, or housing opportunities. The CQ may be referred to as the *prioritized list*.

Continuum of Care (CoC) is a regional or local planning body that coordinates housing and service funding for individuals and families experiencing homelessness. The CoC strategizes the community plan to organize and deliver housing and services to meet the specific needs of people who are experiencing homelessness as they move to stable housing and maximize self- sufficiency.

Developer is a participating CES partner organization that constructs or renovates a housing community with the intention of making units available to CES and for those experiencing homelessness.

Diversion in CES refers to problem-solving strategies used to reduce the length of time that people experience homelessness by accessing alternatives to entering emergency shelter or living in places not meant for human habitation.

Dynamic Prioritization is a process in which households enrolled into CES who are referred to the Community Queue (CQ) to be referred to a housing opportunity. The way in which names appear on the CQ is dependent on a number of factors, including but not limited to, length of verifiable homeless experience, ongoing physical or mental health conditions verified by a licensed professional, verifiable ties to a city, last city in which the household was in prior to beginning their current episode of homelessness, and more.

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Emergency Shelter means any facility with the primary purpose of providing temporary shelter for people experiencing homelessness which does not require a household to sign leases or occupancy agreements.

Episode of Homelessness is a period of time that an individual or family is experiencing homelessness as defined in the homeless definition included in [Attachment A](#). Episodes of homelessness are separated by permanent or temporary housing of at least seven nights or stays in an institution of 90 days or more.

Family is a household that consists of at least one adult aged 18+ and has either, at least one child aged 0 – 17, a pregnant mother, or is in the process of reunification. This type of household is eligible for the Family Coordinated Entry System program enrollment.

Homeless Management Information System (HMIS) refers to the United States Department of Housing and Urban Development mandated database used to collect participant-level data on the provision of housing and services to individuals and families experiencing homelessness, as well as individuals and families at risk of homelessness. HMIS is required to follow data standards established by the United States Department of Housing and Urban Development.

Homeless Prevention is services and/or financial assistance to prevent people from experiencing homelessness.

Household is a group of people that are enrolled into any of the three components of the Coordinated Entry System program. A household can be defined as a Family with any number of adults aged 18+ and any number of children aged 0 – 17, or pregnant mother, or a household can be defined as any number of Individuals aged 18+ without children or a pregnant mother. One household will equal one Coordinated Entry System program enrollment. Household may be referred to *participant*.

Housing means community-based housing without a designated length of stay and includes permanent supportive housing and rapid rehousing.

Housing Assessment is a standardized process of determining a household's permanent housing and service needs and interests.

Housing First is an approach that prioritizes connecting people experiencing homelessness to housing as quickly as possible to end their homelessness. Housing first prioritizes client choice in the housing process and supportive service participation.

Housing Provider is a participating CES partner agency that creates housing opportunities in HMIS that are available for CES households through weekly match meetings. These opportunities can be rapid rehousing, permanent supportive housing, or other tenant-based vouchers.

Individual is an adult aged 18+. This type of household is eligible for the Individual Coordinated Entry System program enrollment, regardless of the number of adults in the household.

Interim Housing is a type of emergency shelter that provides temporary shelter for people experiencing homelessness, meet basic needs such as food, safety, and hygiene, and be supported to see and obtain housing.

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Match Meeting is the virtual meeting where households are referred to supportive services or housing opportunities made available by supportive service providers and housing providers. These meetings are moderated by the Individual and Family CES administrative agencies, as well as the Office of Care Coordination for the Transitional Aged Youth and Veteran registries. These meetings are required to take place weekly, unless there are no opportunities made available for that week, or during a *dark week* (explained in a later section).

Permanent Supportive Housing (PSH) is housing that includes supportive service to assist formerly homeless individuals and families with a disabling condition to live independently and maintain housing stability. These housing opportunities utilize two different models, entire housing developments, and scattered sites where units can be in different housing developments.

Public Housing Authority (PHA) a participating CES agency that is a public entity, often at the local or state level, authorized to develop, operate, or assist in the development of housing. These authorities manage publicly owned housing and other federally subsidized housing programs. In Orange County, there are four PHAs, Anaheim Housing Authority, Garden Grove Housing Authority, Santa Ana Housing Authority, and Orange County Housing Authority.

Rapid Rehousing (RRH) is housing with time limited rental assistance and supportive services to assist individuals and families experiencing homelessness, with or without a disabling condition, move as quickly as possible into housing and maintain housing stability. For RRH opportunities, the maximum amount of rent that a household may pay can be up to 100% of the rental amount. In general, the goal will be that households pay no more than 50% of their income in rent at RRH program completion.

Referral is a successful match for a CES participating household to an appropriate CES service such as emergency shelter, supportive services, or housing opportunity. This may also be known as a *match*.

Referral Partner is a CES participating agency that makes matches (referrals) to programs and services made available by housing, emergency shelter, and supportive service providers for CES households.

Service Planning Area (SPA) is a regional sector within Orange County. The three geographic regions are the North, Central and South Service Planning Areas designated to improve service coordination and align resources among regional cities in Orange County. Reference the Planning section for the Service Planning Areas.

Shelter collectively refers to emergency shelter, including Interim Housing, and transitional housing. These are temporary living situations provided to meet basic needs while the individual or family experiencing homelessness does not have permanent housing.

Street Outreach is a program where an organization will perform direct service referrals for those who are experiencing unsheltered homelessness.

Survivor is any individual or family who is fleeing, or attempting to flee, domestic violence; has no other residency; and lacks the resources or support networks to obtain permanent housing. This type of household is eligible to be enrolled into Coordinated Entry System for Survivors, if applicable.

Transitional Aged Youth (TAY) is a household where the head of the household is someone aged 18 – 24. This can be either an adult only household or a family and can be eligible for the Individual or Family

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Coordinated Entry System, depending on household composition. This household will also be eligible for any TAY specific housing opportunities.

Transitional Housing means temporary, supportive housing, where all households have signed a lease or occupancy agreement, with the primary purpose of facilitating movement of individuals and families experiencing homelessness into permanent housing. Transitional housing is generally provided for a limited time period, from two weeks up to 24 months.

United States Department of Housing and Urban Development (HUD) is a cabinet-level agency that oversees federal programs designed to help Americans with their housing needs. HUD seeks to increase access to affordable housing.

Veteran an individual who has served in the United States Armed Forces (Army, Marines, Navy, Coast Guard, Space Force, either in active or reservist status) and has had their service verified by the office of Veteran Affairs.

Victim Service Provider (VSP) HUD defines a VSP to mean a private nonprofit organization whose primary mission is to provide direct services to victims of domestic violence. This term includes permanent housing providers- including rapid re-housing, domestic violence programs (shelters and non-residential), domestic violence transitional housing programs, dual domestic violence and sexual assault programs, and related advocacy and support services programs.

Violence Against Women Act (VAWA)¹ a federal law that, in part, provides housing protections for people applying for or living in units subsidized by the federal government and who have experienced domestic violence, dating violence, sexual assault, or stalking, to help keep them safe and reduce their likelihood of experiencing homelessness.

II. Introduction

The Coordinated Entry System (CES) standardizes the way individuals and families at risk of homelessness or experiencing homelessness access are assessed for and referred to the housing and services that they need for housing stability.

The Office of Care Coordination is the lead CES Agency for the Orange County Continuum of Care (CoC). The Orange County CoC utilizes three different components that comprise CES across the CoC. These three components are Individual CES (ICES), Family CES (FCES), and CES for Survivors (SCES).

Additionally, the Office of Care Coordination manages two additional registries: one for Veterans, and one for Transitional Aged Youth (TAY). These two additional subpopulations may have specific housing opportunities and supportive services that verified Veterans and TAY eligible households may qualify for.

More information on these three CES subpopulations and two registries can be found on the Orange County [CES Learning Academy](#).

¹<https://www.hud.gov/vawa#close> <https://www.hud.gov/vawa#close>

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III. Goal

The goal of the Coordinated Entry System (CES) is to effectively connect individuals and families experiencing homelessness or at risk of homelessness to appropriate services and housing interventions to address and end homelessness in Orange County through:

- Dynamic prioritization
- Collaborative coordination
- Intentional resource utilization
- Equitable resource distribution
- Regional Service Planning Area prioritization

CES is required to incorporate all programs funded through the Continuum of Care (CoC), the Emergency Solutions Grants (ESG) and the Homeless Housing, Assistance and Prevention (HHAP) programs. Other services, shelter and housing programs not receiving any of the funding listed above may voluntarily participate in CES. The goal is to incorporate as many homeless service programs as possible into CES.

These policies and procedures cover referrals for all resources available through CES, including:

- All CoC, ESG, and HHAP -funded programs, including survivor dedicated resources.
- Federal, State, and Local funded programs required to participate in CES.
- Any resources that voluntarily participate in CES.

IV. CES Documents and Regulations

The below policies and procedures replace all previous versions of the CES policies and procedures and are intended to ensure that CES and all agencies participating in CES comply with the following federal regulations required for all coordinated entry systems:

[HUD Coordinated Entry Notice CPD-17-01 - Notice Establishing Additional Requirements for a Continuum of Care Centralized or Coordinated Assessment System: This Notice establishes new requirements that CoC and ESG programs must meet regarding participation in CES.](#)

[HUD Prioritization Notice CPD-16-11 – Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing: This Notice establishes a recommended order of priority for CoC-funded permanent supportive housing to serve households experiencing chronic homelessness with the most severe service needs first.](#)

[Continuum of Care \(CoC\) Program Interim Rule 24 CFR 578: The CoC program interim rule provides guidance on the regulatory implementation of the CoC Program, including CES. Emergency Solutions Grants Interim Rule 24 CFR 576: The ESG interim rule provides guidance on the regulatory implementation of the ESG Program, including the use of CES.](#)

[McKinney-Vento Homeless Assistance Act, As Amended by S. 896 Homeless Emergency Assistance and Rapid Transition to Housing \(HEARTH\) Act of 2009: McKinney-Vento and the HEARTH Act establish a definition of homelessness and consolidated three HUD programs into a single program known as the CoC Program.](#)

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Criteria and Recordkeeping Requirements for Definition of Homelessness and Homeless Definition Final Rule: The Homeless Definition Final Rule defines homelessness and record keeping requirements, including the use of third-party verification and self-certification of homelessness.

Defining Chronically Homeless Final Rule: This rule establishes a definition of chronic homelessness and record keeping requirements, including the use of third-party verification and self-certification of homelessness and sources of verification of disabling conditions.

HUD Equal Access rule: 24 CFR 5: This rule ensures equal access to programs and shelters administered by HUD in accordance with their gender identity, sexual orientation, or marital status.

Homeless Management Information Systems (HMIS) Data Standards: These documents describe the standardized data collection and the documentation requirements for the programming and use of all HMIS and comparable data systems.

V. Roles and Responsibilities

CES involves cross-system collaboration and communication between the CES lead agency, the CES Virtual Front Door (VFD), CES Access Points, and Housing Providers.

A. CES Lead

The CES lead agency, the County of Orange, is empowered by the CoC to manage the process of determining and updating the prioritization for all CoC funded PSH, RRH, homeless prevention, interim housing and emergency shelter programs, including any survivor- dedicated resources as well as any other housing resources that voluntarily or are required locally or by the State to participate in the CES. The CES lead agency will work collaboratively with the CES Steering Committee, a committee of the CoC Board, to develop and review CES policies and procedures every five years, at minimum. The CES lead agency operates the CES based on the CoC Board approved CES policies and procedures.

The CES lead agency's responsibilities include:

- Facilitating referrals between CES for Individuals, Families and Survivors.
- Collecting CES data to report to HUD.
- Providing support to CES Access Points and Housing Providers participating in CES.

B. CES Virtual Front Door (VFD)

The CES VFD is contracted by the CES lead to develop and manage a VFD infrastructure, including the operation of a centralized information and referral process for connecting eligible households to a CES Access Point.

The CES VFD's responsibilities include:

- Facilitating referrals to CES Access Points for eligible households.

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- Screening for sub-population specific service needs, including Survivors, TAY, Veterans, and family status.

C. CES Access Points

CES Access Points are homeless service providers in the community that serve as entry points into CES as well as offer additional assistance via referrals and other services to help support households experiencing a housing crisis. Access Points include mobile street outreach teams, navigation centers, emergency shelters and supportive services agencies.

CES Access Point responsibilities include: (but not limited to)

- Connect eligible households with CES through a standard assessment process.
- Offer additional services and resources to support with housing crisis needs.
- Represent the household's needs in CES.
- Submit a new/updated Current Living Situation Assessment, at minimum, every 90 days or the household will be automatically removed from ~~the Community Queue~~being referred to any housing opportunities.

Maintain accurate and timely data in HMIS, as outlined in the annual CES Participating Agency Agreement form, or a comparable database for survivors.

D. CES Agency Administrators and CES Participating Agency Agreement Form

The CES Participating Agency Agreement Form will be sent out to all CES participating agencies annually in July. The CES Participating Agency Agreement Form will detail roles and responsibilities as a CES participating agency. This form will be submitted electronically and will be submitted by a manager or supervisor on behalf of the agency. The form will also identify the agency's CES Agency Administrators.

Each agency participating in CES will assign up to two staff as CES Agency Administrators. Agency Administrators will be required to attend an annual training provided or coordinated by the County of Orange for CES Agency Administrators. Agency Administrators are responsible ensuring all CES data entered into HMIS is timely and accurate as outlined in the CES Agency Agreement, and for communication and training for all CES users and assessors within their organization. Agency Administrators are also responsible for quality assurance of assessments and communication with the County of Orange regarding staffing changes.

E. Matchmakers

Matchmakers are CES Administrators that manage the CES prioritization and referral process. Matchmakers work collaboratively with Access Points and housing providers to support a successful referral process while prioritizing the most vulnerable households.

Matchmaker responsibilities include:

- Facilitating referrals for shelter, housing, and supportive services resources, including survivor-specific CoC, ESG, and HHAP funded resources.

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- Facilitating referrals between CES for Individuals, Families and Survivors.
- Providing support to CES Access Points and Housing Providers participating in CES.

F. Housing Providers

Housing Providers are CES participating agencies that provide resources for people at risk of homelessness or experiencing homelessness. Housing Provider resources include shelter, supportive services, homeless prevention assistance, rapid rehousing, permanent supportive housing and other permanent housing. All CoC, ESG, and HHAP funded programs are required to participate in CES as Housing Providers.

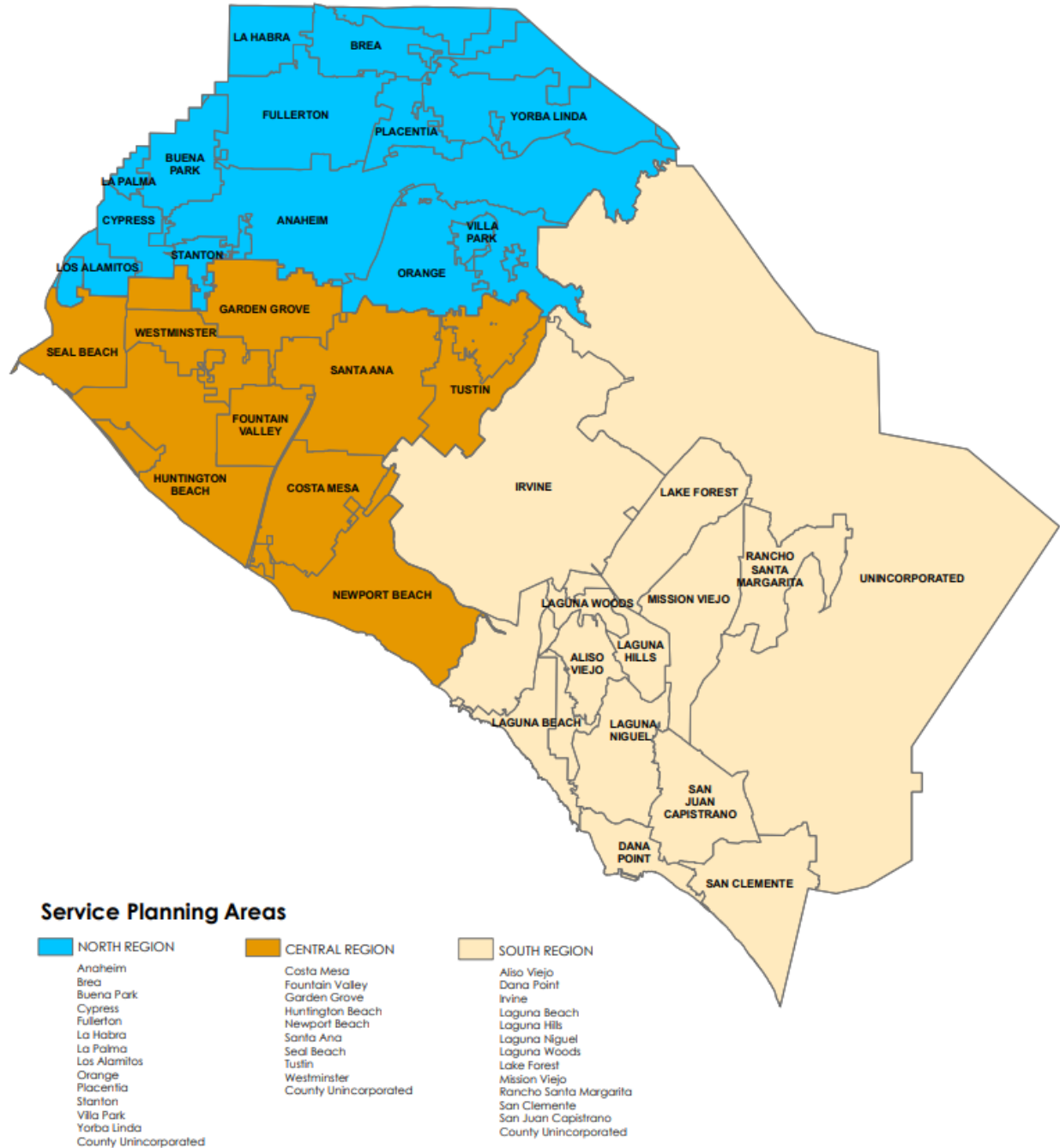
Housing Providers are required to enter any resources in HMIS every Friday by 12pm, Pacific Standard Time, when resources are available to ensure that those resources are available for matching the following week when there is a Housing Provider Match Meeting taking place. Any resources entered after this time may not receive a referral placement the following week.

Housing Provider responsibilities include:

- Notifying CES through HMIS or a comparable database for survivors when a program has an opening and is able to accept referrals.
- Clearly communicate eligibility requirements for available resources.
- Accept referrals for the available resources exclusively through CES.
- Maintain accurate and timely data in HMIS, as outlined in the annual CES Participating Agency Agreement, or a comparable database for Survivors.

G. Planning

The Orange County CoC CES serves people at-risk of and experiencing homelessness in the CA-602 Orange County CoC, which covers the entire geographic area of Orange County. To ensure full coverage of Orange County's geographic area, the CoC utilizes SPAs to allow for targeted services—~~7L~~ resource allocation and regional coordination.



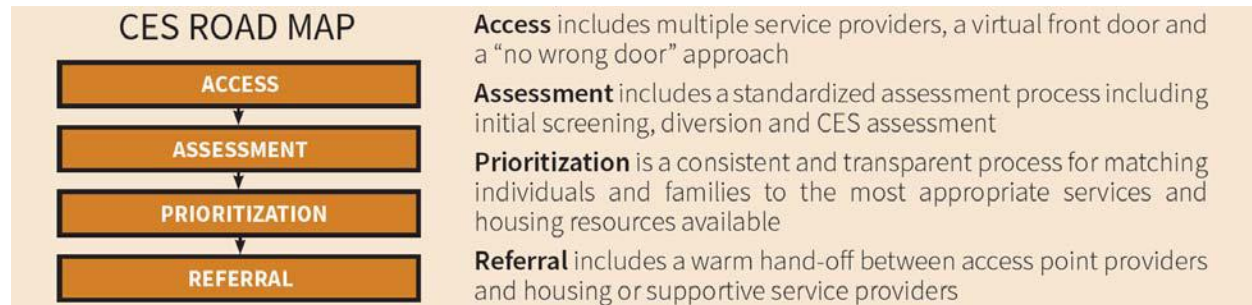
All households who meet the HUD definition of homelessness or at risk of homelessness are eligible to participate in CES. For definitions, please see [Attachment A](#).

CES serves all individuals and families experiencing homelessness in Orange County regardless of race, color, national origin, religion, sexual orientation, gender identity, disability, age, sex, familial status, marital status, income, criminal record, or experience with domestic violence, dating violence, sexual assault or stalking. In addition, CES Access Points, housing providers, and shelter providers are expected

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to competently and fairly serve households regardless of any of these factors—as well, within their identified CES subpopulation.

CES is dedicated to ensuring that households fleeing or attempting to flee domestic violence have safe, low-barrier, survivor-centered access to all resources available through CES. HUD defines “domestic violence” as including dating violence, sexual assault, stalking, and other dangerous or life-threatening conditions that relate to violence against the individual or family member that either takes place in, or they are afraid to return to, their primary nighttime residence (including human trafficking). These policies and procedures refer to this population collectively as “Survivors.”



VI. Access

The Orange County CES is operated so that households seeking housing or supportive services can easily access services. CES and available housing and supportive services are widely advertised throughout the CoC. Marketing strategies include digital and printed media. By displaying posters, flyers, and resource guides, participating agencies within each SPA will support marketing efforts and mainstream partners such as libraries, schools, police stations, and community centers will be invited to support marketing efforts as well. Training explaining how the Orange County CES works is available for a wide variety of partners at egovoc.com/ces-training. In some cases, mainstream partners, such as U.S. Department of Veteran Affairs (VA), the Orange County Health Care Agencies (HCA) and Social Services Agency (SSA) Family Resource Centers, may serve as Access Points.

Any required or recommended training will cover CES policies and procedures including assessment procedures, prioritization, referrals through CES, household privacy, cultural humility and linguistic competency, safety planning and trauma-informed practices. Training resources are regularly reviewed and updated as needed but no less than once a year. Training is provided or coordinated by the County of Orange.

While marketing will encourage people who are part of a particular cohort to connect with certain Access Points for a referral to CES, everyone in need will be accommodated and assisted at any Access Point. All materials will be affirmatively marketed to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, marital status, criminal history, and those who are least likely to complete a CES Housing Assessment in the absence of special outreach. The CES lead will make efforts to incorporate Access Points and other partners who serve populations who have been traditionally over-represented in the homelessness population but may not always receive the appropriate connection to resources and services. Marketing materials will also be provided in formats accessible to all individuals, including those with disabilities and Limited English Proficiency (LEP).

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Prior to attaining access, households might encounter a referral partner - an entity or agency that can direct a person experiencing a housing crisis to a CES Access Point. Examples of referral partners include medical providers, law enforcement and public agencies such as Parks and Recreation and the Public Library. Though referral partners cannot directly connect households to CES, they play a critical, guiding role in connecting households to emergency services which serve as Access Points into CES.

Access to CES occurs after a person's immediate crisis needs have been identified and their basic client information has been entered into HMIS or a comparable database for Survivors. Throughout Orange County, an array of homeless service providers serves as Access Points. Access Points include mobile street outreach teams, navigation centers, emergency shelters and the VFD. Access Points are distributed geographically throughout the County in all three Service Planning Areas (North, Central, and South) and the VFD provides access 24 hours a day through a call center and online access.

To facilitate access to CES for Veterans and people with disabilities, the VA and HCA are CES partners with the ability to conduct the standardized CES assessment and participate in the prioritization and referral process.

A. Access Model

The Orange County CES is comprised of three systems: CES for Individuals, CES for Families, and CES for Survivors. In addition, CES operates two by-name registries, a Veteran Registry for Veterans composed of Veteran households with or without minor children participating in any of the three components of CES and a TAY Registry composed of all households with an adult head of household aged 18-24 years old with or without minor children participating in any of the three components of CES. All CES systems work collaboratively and follow all CES policies and procedures.

Orange County CoC embraces a Housing First approach and, as such, CES, offers services, shelter and housing to people experiencing homelessness without preconditions —or service participation requirements, such as sobriety, mental health treatment, or minimum income thresholds. The primary goals of the Housing First model are rapid placement and stabilization in permanent housing.

Orange County CES is intended to reduce barriers to available emergency services through streamlined and transparent access. All households will be required to complete minimal documentation to participate in CES, including the CES Authorization Form, homeless verification forms, including self-certification, Third Party Verification of Homelessness, and the Disabling Condition Form if applicable, which will be uploaded into their HMIS profile.

~~Survivors~~VSPs who ~~are enrolled~~enroll survivors into CES will also obtain and record informed consent to enter survivors into CES for Survivors ~~will not have~~prior to doing so. This will be recorded using the CES Authorization Form uploaded to HMIS due to not having an HMIS profile and Victim Service Providers (VSP) not being allowed to utilize HMIS. A Survivor being enrolled into CES for Survivors will count as their authorization. VSPs should inform Survivors that this will be their consent to be enrolled into form in the comparable database used for CES for Survivors.

In addition, people experiencing homelessness may access emergency services not participating in CES and, when immediate access to emergency services is available at emergency services that participate in

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CES, people may access emergency services during hours when CES intake and assessment processes are not operating and then be connected to CES as soon as the intake and assessment processes are operating. Completing the standardized Housing Assessment is not a requirement and no household will be denied access to the crisis response system based on willingness to participate in the Housing Assessment process. Regardless of a household's willingness to complete the standardized CES Housing Assessment, people will be warmly welcomed into emergency shelters and/or other emergency services, as available.

Although there are separate systems for Individuals, Families and Survivors, the Orange County CES offers a "no wrong door" approach with a standardized assessment at all Access Points. Initial standardized screening using a Pre-Assessment Screening tool at the VFD and each Access Point allows for immediate linkage to the appropriate subpopulation Access Point. CES ensures that Veterans, TAY and Survivors can access their respective CES subpopulation specific resources and non-dedicated resources referred through CES regardless of the Access Point where they present. This provides households experiencing homelessness a variety of avenues from which to access housing and supportive services, and no one is turned away.

Households experiencing a housing crisis in Orange County have two ways to connect with CES:

B. Virtual Access by Contacting the Virtual Front Door (VFD):

- Households experiencing homelessness or at risk of experiencing homelessness can call 2-1-1 at any time, day or night, and will be connected with a certified multi-lingual referral specialist who can make referrals to appropriate emergency services based on individual and family service needs and SPA location. 211OC, as the CES VFD will also provide referrals to CES Access Points.
- If the VFD referral specialists receive a call from a household that is experiencing homelessness or at risk of homelessness as defined by HUD, the VFD staff will screen the household for Survivor, TAY and veteran status as well as household composition.
- If the household identifies as including Survivors, and requests to be quickly connected to survivor-specific housing options or other assistance for survivors (such as emergency shelter, counseling, etc.), VFD staff will make a warm handoff to a VSP serving as a CES Access Point. Survivors are not required to be referred to a VSP and may accept a referral to any appropriate CES Access Point if there is not a specific request for survivor-specific services.
- If the head of household identifies as a TAY, VFD staff will provide referrals to CES Access Points that provide specialized TAY-specific services. TAY are not required to accept a referral to a TAY provider and may accept a referral to any appropriate CES Access Point if there is not a specific request for TAY-specific services.
- If the household identifies as included a Veteran, VFD staff will provide referrals to CES Access Points that provide specialized veteran-specific services. Veterans are not required to accept a referral to a Veteran provider and may accept a referral to any appropriate CES Access Point if there is not a specific request for Veteran-specific services.

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- If a household identifies as a family that includes minor children, the household will be referred to a Family Access Point. If the household identifies as an adult-only household, the household will be referred to an Individual Access Point. Family and Individual Access Points include Access Points providing specialized subpopulation services for Survivors, TAY, and Veterans and Access Points that provide generalized services for people experiencing homelessness or who are at risk of homelessness.

C. Direct Access by Presenting at an Individual or Family Access Point:

Eligible households may access CES by connecting directly with a CES Access Point. All Access Points will screen all households for Survivor, TAY and Veteran status using the Pre-Assessment Screening tool and receive regular training on conducting these screenings in a Survivor-centered, trauma-informed manner.

If the household identifies as including Survivors, and requests to be connected to Survivor-specific housing options or other assistance for Survivors (such as emergency shelter, counseling, etc.), Access Point staff will immediately offer a referral to a VSP serving as a CES Access Point.

D. Accessibility

Orange County CES ensures that Access Points are accessible to all households, including those with disabilities and limited English proficiency. In cases where particular access points are inaccessible for households for any reason including, but not limited to, structural barriers, language barriers, or transportation limitations, households will be accommodated at alternative Access Points or by a street outreach team with the appropriate auxiliary aids and services necessary to ensure effective communication and completion of the standardized assessment.

E. Safety Planning

Individuals and Families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking need specialized assistance that promotes and protects their confidentiality and safety. Therefore, while they will have unencumbered access to emergency services and CES, appropriate and prompt referrals to services, including hotlines, and emergency shelters specializing in domestic violence are critical. The following domestic violence resources are available in Orange County:

Human Options	877-854-3594
Interval House	714-891-8121
Laura's House	866-498-1511
Radiant Futures	714-992-1931 877-531-5522
Sexual Assault Victim Services (North)	714-957-2737
Sexual Assault Victim Services (South)	949-831-9110
2-1-1 Orange County Helpline	211

	949-646-4357
	888-600-4357

VII. Assessment

CES utilizes a standardized assessment process. The standardized CES assessment process is consistent across all Access Points including street outreach teams. CES uses the following standardized assessment tools:

Pre-Assessment Screening – The Pre-Assessment Screening is completed to determine specialized services needs and guide referrals to appropriate subpopulation specific service providers.

Shelter Assessment – The Shelter Assessment is completed to connect people with shelter opportunities available through CES and is used to collect information to assist with determining homelessness, vulnerability, accessibility needs and eligibility for shelter programs.

Housing Assessment – The standardized Housing Assessment is completed to connect people with housing opportunities available through CES and is separated into sections which assist in determining homelessness, vulnerability, strengths, barriers and other criteria related to eligibility for housing programs.

Survivor Assessment – The Survivor Assessment is completed by VSPs to assess for Survivor -dedicated resources available through CES for Survivors as well as resources available through CES for Individuals or Families. Only VSPs can administer the Survivor Assessment which is used to submit de-identified vulnerability, housing interests and eligibility information to CES.

Stepping Up Assessment – The Stepping Up Assessment is completed with households that are currently housed through a rapid rehousing program who need a more intensive housing intervention to maintain housing stability and is separated into two sections to collect information on eligibility and vulnerability.

Moving On Assessment – The standardized Moving On Assessment is completed with household that are currently housed in a permanent supportive housing program who would like to be considered for a less intensive housing intervention and is separated into two sections to collect information on eligibility and housing stability.

Prevention Assessment – The Prevention Assessment is completed with households at risk of homelessness and is separated into sections which assist in determining at risk of homelessness status, vulnerability and eligibility for homeless prevention resources.

Prior to completing the standardized CES assessment process, Access Points assess and address immediate needs followed by efforts to prevent homelessness or divert from experiencing ongoing homelessness. Services, shelter and housing resources available through CES are limited, therefore Access Points will also assist households with identifying services, shelter and/or housing resources and solutions available outside of CES. If referrals to shelter resources available through CES are required, Access Point staff begin completing the Shelter Assessment. If referrals to housing resources available through CES are required, Access Point staff begin completing the Housing Assessment with the households experiencing

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homelessness. The CES assessments may be completed during a single session or over time as immediate needs are addressed and rapport is developed between Access Point staff and the household experiencing homelessness or at risk of homelessness.

If a household is in crisis, is eligible for shelter and chooses shelter, the following steps must be taken:

- First, provide triage including diversion and prevention;
- Then, connect the household with shelter as needed and capacity allows and;
- Finally, follow up to complete the Housing Assessment process with consent.

Safety planning is done with all individuals and families who may be in danger or could be a danger to themselves or others including identifying appropriate supports and resources. These needs are uncovered through the assessment and responded to immediately to quickly offer appropriate referral linkages. Assessors will be trained on how to understand when a person is at risk of harming themselves or others and serve as mandated reporters so that they are equipped to call 911 when necessary or connect household to a local hospital for crisis support.

CES assessments can and should be updated as contact information or life circumstances change to ensure a successful referral to an available shelter or housing resource and corresponding shelter or housing provider.

CES assessments are completed by Access Points in HMIS except for VSPs who are prohibited from using HMIS. VSPs will use the following process to communicate the outcome of the Survivor Assessment to CES for prioritization and referral to both survivor-dedicated resources and resources accessed through CES for Individuals and Families:

- Assessors will submit de-identified assessment information to CES through Microsoft Forms. De-identified information will include:
 - A unique identifier that VSP staff will create and use to identify the household.
 - Eligibility and vulnerability information necessary to determine prioritization for available housing and resources.
 - Housing interests in order to make the most appropriate housing referrals based on the household's identified housing needs.

VSPs are still required to submit a new CES Assessment every 90 days, or the Survivor will be removed from being considered for additional housing opportunities.

In support of the household's self-determination and autonomy, CES households are freely allowed to decide what information they provide during the assessment process, to refuse to answer assessment questions and to refuse housing and service options without retribution or limiting their access to other forms of assistance. Households who decline to complete CES assessments or provide incomplete information will be informed by the assessor that incomplete assessment information may limit housing opportunities if the incomplete questions are related to eligibility criteria for specific programs.

Unaccompanied minors (children ages 17 and younger) will be immediately connected to Casa Youth Shelter (800-914-2272) or Huntington Beach Youth Shelter (714-842-6600) for emergency shelter and supportive services. The standardized CES assessment may be completed with an unaccompanied minor, as appropriate.

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Providers serving as Access Points have completed training on conducting the standardized CES assessments and entering data into HMIS or a comparable database for VSPs. Updated training is provided at least annually. If further support is needed, it will be made available upon request and as resources permit.

The training covers CES policies and procedures including assessment procedures, prioritization, referrals through CES, participant privacy, cultural humility and linguistic competency, safety planning and trauma-informed practices. Training resources are regularly reviewed and updated as needed but no less than once a year. Training is provided or coordinated by the County of Orange.

A. Prioritization

When the need for services is greater than resources available, CES utilizes an established prioritization schema approved by the CoC Board to connect households experiencing homelessness or at risk of homelessness with shelter, housing and supportive services available through CES. CES has no authority over services, shelter and housing programs that do not participate in CES.

CES prioritization is a dynamic process that applies to all CES Components (Individuals, Families, Survivors, TAY, and Veterans). For all services, shelter and housing opportunities available through CES, except Survivor-specific resources, CES will prioritize households with the longest length of homelessness in the community as collected in HMIS following the most recent HMIS Data Standards and highest service needs as determined using CES program intake, the standardized CES assessments and case conferencing amongst the CES participating agencies, as needed and appropriate. Case conferencing occurring with CES participating agencies is aimed at ensuring households are prioritized per the CES policy for services, shelter and housing opportunities appropriate to their service needs according to their current circumstances. A regional SPA distribution prioritization based on the most recent finalized point in time count is used to distribute non-geographically designated resources by SPA to avoid forcing households to move long distances unless by household choice.

The primary factors considered during prioritization are chronic homelessness as defined in 24 CR 578.3, length of the current episode of homelessness and permanent disabling conditions as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act ([42 U.S.C. 11360\(9\)](#)). The current episode of homelessness starts when the individual or family begins experiencing homelessness as defined in [Attachment A](#) after residing in permanent or temporary housing for at least seven nights or staying in an institution for 90 days or more. The main prioritization factor for households experiencing chronic or literal homelessness will be the length of ~~the~~their current episode of homelessness.

The prioritization groups will be as follows: (all criteria must be verified through proper documentation and uploaded into the household's HMIS profile).

Within each group, all households are sorted by the date their current homelessness began, starting with who has experienced homelessness the longest. If two households in the same group have the same length of homelessness (in days), they will be sorted alphabetically by their randomly assigned HMIS Unique Identifier. Other opportunity specific factors such as local preference may affect prioritization if applicable.

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1. Households experiencing Chronic Homelessness
 - a. Households with a chronic disability who are currently experiencing sheltered or unsheltered homelessness and who have been experiencing homelessness (a) for at least the last 12 months straight OR (b) on at least four separate occasions in the last three years for a combined minimum of 12 months.
2. Households with a Chronic Disability
 - a. Households who are experiencing homelessness but who do not meet the length of time requirements to be experiencing chronic homelessness but who have a disability that is expected to be ongoing, substantially, impedes their housing stability, and could be improved by more suitable housing.
3. Households without a Disability
 - a. Households experiencing literal homelessness who do not have a disability as defined above.
4. Households at risk of homelessness
 - a. Households at risk of homelessness are not eligible for many of the opportunities prioritized through CES, but if eligible will generally be the last priority group.

Services available through CES include some, but not all the following:

- Housing navigation
- Stabilization services
- Emergency shelter
- Interim housing
- Transitional housing
- Permanent Supportive Housing
- Housing Choice Vouchers
- Rapid Rehousing
- Other housing opportunities

At minimum, all CoC, ESG, and HHAP funded services, shelter and housing will prioritize households with the most urgent and severe needs on the CES prioritization list following the prioritization process described below who are eligible for the service, shelter or housing opportunity available through. Other service, shelter or housing resources will be encouraged, but not required, to participate in CES if privately or alternatively funded.

The Orange County CES is integrated into the emergency response services in Orange County to meet basic needs, including emergency shelters, interim housing and transitional shelters. Households experiencing homelessness or at risk of homelessness should work with emergency service providers and/or call 2-1-1 to receive an initial referral to emergency services. Participating emergency response services will utilize the Orange County CES to connect households experiencing homelessness with services, shelter and housing opportunities available through CES by completing the Shelter Assessment and/or the Housing Assessment.

In addition, some shelters in Orange County receive referrals through CES. CES will prioritize individuals and families for shelter opportunities available through CES using the prioritization process described above.

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B. Prevention and Diversion Prioritization

Prevention and diversion services are a critical part of CES and may occur prior to completing the CES assessments or during the process of participating in CES for households experiencing homelessness or at risk of homelessness. Prevention and diversion are key components of CES that should be utilized in case management and housing plans for all households experiencing homelessness or at risk of homelessness in Orange County. Some, but not all, prevention and diversion services are available through CES. Households at risk of homelessness and in need of homeless prevention services, should dial 2-1-1 to receive a referral to available homeless prevention services. In instances where there are no appropriate prevention referrals, 2-1-1 will attempt to connect households to alternate resources.

C. Dynamic Match

Exceptions to the prioritization may be made through case conferencing a dynamic match request, where the CES administrators of both the Family and Individual CES components will be the responsible parties for approving or denying those dynamic match requests and presenting any approved dynamic match requests amongst the CES participating agencies as appropriate to meet specialized client needs and agreed to through consensus by the CES participating agencies, during the respective Housing Provider Match Meeting. In addition, case conferencing amongst the CES participating agencies will be employed to ensure resources are aligned to client needs and promote effective resource utilization.

D. Survivor Prioritization

Survivor-specific resources will be prioritized for Survivors with the highest score on the Survivor Assessment who are interested and eligible for the available Survivor-specific housing resource. If two or more Survivors have the same score, the Survivors will be randomized to determine priority to a housing opportunity if the number of Survivors with the same score exceeds the number of housing opportunities available.

E. Non-CoC Funded Project Prioritization

Housing opportunities provided by public housing authorities that are not funded through the CoC (ex. Housing Choice Vouchers) and receiving referrals through CES will be prioritized by CES in compliance with the administrative plan for each public housing authority jurisdiction. Prioritization and case conferencing amongst the CES participating agencies will be used to refer households who are the most appropriate to the available resource.

F. Stepping Up and Moving On

Tenant-based and project-based PSH tenants are permitted to move between PSH opportunities and/or graduate to HCVs, as available and eligible. Movement between PSH opportunities is determined and agreed upon by the housing providers. Rapid rehousing and permanent supportive housing tenants eligible to complete the Stepping Up and Moving On Assessments are prioritized for housing opportunities

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available through CES. Households with the highest score on the Moving On Assessment will be prioritized first followed by households with the highest score on the Stepping Up Assessment. Moving On Assessments with the highest score will be prioritized for all housing opportunities available through CES to increase access to PSH for people experiencing chronic homelessness with severe service needs. Vacancies created through tenant movement must be refilled through CES using CES prioritization criteria.

G. Targeted Opportunities

Housing opportunities that serve a specific target population may receive referrals of that target population. To target a specific population outside of existing practices and community standards, housing providers must provide documentation to CES of receipt of funding that specifies the funder-defined targeting criteria prior to receiving a referral. Housing providers with targeted housing opportunities will receive referrals from CES that meet the stated targeting criteria, following the system wide prioritization policy for referrals. Housing opportunities that do not state serving a specific target population will be allocated to any CES Component, applicable to local, county, and state zoning laws based on square footage of the unit made available, using the most recent Point in Time Count data, by the County of Orange as the CES lead agency.

Households remain enrolled in CES until the household is permanently housed, opts out of participating in CES, becomes inactive, or is otherwise exited. Households will automatically be made inactive automatically on the CES Community Queue (CQ) after 90 days of non-engagement with Access Points or CES participating agencies as documented in HMIS or the comparable database for VSPs. Households are automatically removed from the Bed Reservation Queue (BRQ) for shelter referrals available through CES after 7 days of non-engagement with an Access Point or CES participating agencies as documented in HMIS. Households are automatically removed from the CQ for supportive services and housing opportunities after 90 days of non-engagement with an Access Point.

H. Prioritization Scenario Examples

Scenario I

CES receives five (5) Housing Choice Vouchers (HCVs). Based on the 2024 Point in Time Count results, homeless households were distributed throughout Orange County's SPAs as follows: 44% North, 47% Central, and 8% South. Therefore, these vouchers will be allocated as follows:

- Two (2) for the North SPA
- Two (2) for the Central SPA
- One (1) for the South SPA

Individuals experiencing chronic homelessness with the longest lengths of homelessness are referred to these opportunities. If no individuals experiencing chronic homelessness are available, individuals with a disabling condition and the longest length of homelessness will be considered. If no individuals with a disabling condition are available, individuals with the longest length of homelessness will be considered.

If these HCVs do not designate a specific target population of CES, the County of Orange as the CES lead agency, reserves the right to allocate the HCVs among any CES Component as long as the household size is within the HCV's parameters and any local, county, or state zoning occupancy standards.

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Scenario II

A project-based PSH unit becomes available in the North Service Planning Area for a family. Families experiencing chronic homelessness with the longest length of homelessness from the North Service Planning Area are considered first for this opportunity. If no families experiencing chronic homelessness from the North Service Planning Area are available, families experiencing chronic homelessness from any Service Planning Area will be considered.

Scenario III

A RRH opportunity becomes available for homeless individuals. Individuals experiencing chronic homelessness with the longest length of homelessness are referred to these opportunities first. If no individuals experiencing chronic homelessness are available, individuals with a disabling condition with the longest length of homelessness will be considered. If no individuals with a disabling condition are available, individuals with the longest length of homelessness will be considered.

I. Disaster Prioritization

CES seeks to be a strong and effective partner to our community in the event of a local, state or national disaster. The County of Orange, as the CES lead, reserves the right to focus all resources available through CES to affected populations who are eligible for the available resource. In these situations, CES may modify the prioritization policy to prioritize households impacted by the disaster using the prioritization process described above.

VIII. Referral and Match Meeting

Service, shelter and housing providers participating in CES share available service, shelter and housing opportunities through HMIS or a comparable database for CES for Survivors selected by the County of Orange. Service opportunities are matched as needed based on availability and the housing resource identified. Shelter opportunities are matched weekly, at minimum, during business hours as opportunities become available. Housing opportunities are discussed weekly at the Match Meetings (and referred to eligible households as prioritized by the prioritization schema.

Match Meetings take place weekly and are scheduled at the discretion of the CES administrators. Match Meetings are not required to take place if there are no housing opportunities available for referrals that week, or if the scheduled HPMM falls on a holiday where the Office of Care Coordination is closed in observance of that holiday, or during the week of the 4th of July, Thanksgiving (the fourth Thursday of November) and Christmas (December 25).

The meetings are attended by participating Access Points, referral partners and housing providers. All information shared at the HPMM is private and confidential. To attend the Match Meetings, attendees are required to review client privacy and confidentiality requirements and attest to complying with the privacy and confidentiality requirements, as well as being fully approved CES participating agencies by both the Count of Orange and the CES administrators of the Family and/or Individual CES components. VSPs are not allowed to attend the HPMM for any CES components. Survivors prioritized through CES for

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Individuals or Families will be considered for all resources available through CES for which the Survivors have indicated their interest and eligible for as indicated in the CES for Survivors Assessment

There is no live Match Meetings for CES for Survivors. Referrals are made weekly by the CES for Survivors administrator, as housing opportunities are made available. Case conferencing for CES for Survivors takes place at the discretion of the CES for Survivors administrator.

Referrals will be provided by email to the Access Point and the housing provider.

Upon referral to service, shelter, and housing opportunities, Access Points will continue to support households throughout the intake and placement process and, ideally, for a month or more after housing placement to ensure housing stability is achieved.

Upon referral to service, shelter, and housing opportunities, service, shelter and housing providers will provide an overview of program expectations including the share of rent and utility costs to participants if applicable and maintain regular communication with Access Point staff and CES.

A. Declining a Referral/Match

When a household declines a service, shelter or housing referral, the household is returned to the CQ and remains on the CQ for a new service, shelter or housing referral. The household will continue to be prioritized for available service, shelter or housing resources following the prioritization process previously described.

Service, shelter and housing providers may deny a referral on the household's behalf from CES under any of the following circumstances:

- Inappropriate referral (ex. Accessibility needs cannot be met)
- Ineligible referral (ex. new intake information fails to meet eligibility requirements)
- Household obtained other permanent housing.
- Household is unresponsive after multiple contact attempts to all available contact information.

Referrals denied by service, shelter and housing providers must be made in writing if not matched through HMIS or electronically in HMIS and include the reason for denying the referral as well as any information obtained during the referral process that ensures accurate household information and helps improve future referral processes.

When a household is denied by service, shelter or housing providers, the household is returned to the CQ and remains on the CQ for a new service, shelter or housing referral. The household will continue to be prioritized for available service, shelter or housing resources following the prioritization process previously described.

Service, shelter and housing provider denials may be contested by conference between the service, shelter or housing provider, the referring agency and the County of Orange. The referred household may also be involved as able and appropriate.

IX. Emergency Transfer Request Policy

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Per the Violence Against Women Act (VAWA), any household who is a victim of domestic violence, dating violence, human trafficking, sexual assault, or stalking can request an emergency transfer under the following circumstances:

- a. A sexual assault occurred on the premises of their HUD-funded housing program; or
- b. Who reasonably believed that they are imminently threatened by harm from further domestic violence, dating violence, sexual assault, stalking, or human trafficking if they remain in that designated HUD-Funded dwelling.

A request for an emergency transfer, under these circumstances, does not guarantee immediate placement, but households who qualify for an emergency transfer will be given a priority referral over all other applications for the next available, safe unit through CES for which they qualify.

If a household is currently enrolled in a HUD-funded housing program and requests an emergency transfer, the household must follow the housing agency's internal emergency transfer housing process. If the housing program is unable to accommodate the emergency transfer request, the housing program may request an emergency transfer via CES [by reaching out to the Office of Care Coordination at CoordinatedEntry@ceo.oc.gov](mailto:CoordinatedEntry@ceo.oc.gov).

X. Privacy and Data Management

CES, as an extension of HMIS, is required to comply with all HMIS policies and procedures. All agency staff participating in CES are required to sign and comply with all HMIS policies and procedures. VSPs are not required to use CES for emergency services and cannot participate in HMIS to utilize the CES program. VSPs partnering with CES are required to use a comparable database managed by the CES lead.

During CES assessment, assessors are required to obtain household consent to disclose their information. In unavoidable circumstances- consent may be initially obtained verbally, and the signed CES Authorization Form must be obtained and uploaded into the client HMIS profile within 30 calendar days of verbal consent. When a household consents to disclose their information, they enhance the ability of CES to assess needs and make appropriate housing referrals. If consent is not obtained, services will not be denied.

In the case that full consent is not obtained, please note these special instructions: Do not enter personal identifiable information into HMIS. HMIS will automatically generate an anonymous ID. Please retain at least the first page of the CES assessment part one with the HMIS ID and household name for your records and future housing referrals.

XI. Grievance Process

At any time during the coordinated entry process, households have the right to file a complaint, should they feel that CES has not complied with the nondiscrimination and equal opportunity provisions of Federal civil rights law, fair housing laws and requirements, or the CES policies and procedures. During assessment, all CES households will be provided with the process for filing a complaint. All complaints will be addressed in a timely and fair manner. The following contacts are provided to households for the purpose of addressing discrimination or grievance concerns:

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- For grievances with ~~an CES policies and~~ Access Point's services as an Access Point, please file a grievance with the Access Point using their established grievance procedures. If the grievance cannot be resolved internally, please contact the Office of Care Coordination at CoordinatedEntry@ocgov.com ~~ceo.oc.gov~~.
- For grievances with ~~service providers~~ CES Access Points, unrelated to their services as Access Point, communication should be directed to the appropriate ~~service provider~~ Access Point for resolution.
- For grievances with shelter and housing programs— grievances should be directed to the appropriate shelter or housing provider for resolution.
- To file a discrimination grievance, contact the Department of Housing and Urban Development through [the online portal: https://www.hud.gov/program_offices/fair_housing_equal_opp/online-complaint](https://www.hud.gov/program_offices/fair_housing_equal_opp/online-complaint)

XII. Evaluation

CES will be regularly evaluated to analyze effectiveness and to identify areas for improvement. System performance metrics will be examined semi-annually, at minimum, to monitor adherence to system benchmarks. Length of time on priority list, placement rates, and returns to homelessness are sample metrics that will be used to understand system capacity and determine where additional resources are needed.

In addition, feedback will be solicited from CES households and participating agencies through feedback surveys and focus groups. Participating agencies will be surveyed at least annually and focus group feedback opportunities will also be provided annually to solicit consumer feedback. Annually, all households who utilize CES will be offered the chance to complete a feedback survey and/or participate in focus group feedback sessions held at geographically dispersed locations. The focus groups and surveys will cover all domains of the coordinated entry process, including intake, assessment and referral, and will be used to gauge household and agency perception of system quality and effectiveness.

The County of Orange, as the lead CES agency, will collect household and agency evaluations and analyze system performance. The information collected will be used to recommend updates to CES, in consultation with a committee of relevant stakeholders. This committee will meet at least annually to adopt and implement system changes.

For the purpose of the evaluation, data analyzed will be de-identified, and feedback will not require a name or other identifiable information. This will be used to ensure household and participating agency privacy during the evaluation process.

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XIII. Attachments

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Chronic Homelessness Definition

HUD published the **Defining Chronically Homeless Final Rule** clarifying the definition of chronic homelessness. The definition of chronically homeless is:

- A homeless individual with a disability as defined in section 401(9) of the McKinney-Vento Assistance Act (42 U.S.C. 11360(9)), who:
 - Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter, and
 - Has been homeless and living as described 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 and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described.
- An individual who has been residing in an institutional care facility, including jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria of this definition before entering that facility**;
- A family with an adult head of household (or, if there is no adult in the family, a minor head of household) who meets all of the criteria of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

*A “break” in homeless is considered to be 7 or more nights.

**An individual residing in an institutional care facility for less than 90 days does not constitute a break in homelessness.

Homeless Definition

Information on the definition of homeless can be found on HUD Exchange at <https://www.hudexchange.info/resource/1928/hearth-defining-homeless-final-rule/> and is summarized below. The following four homeless categories are eligible to participate in CES.

Category 1. Literally Homeless

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

- 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
- Is exiting an institution where (s)he has 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

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Category 2. Imminent Risk of Homelessness

Individual or family who will imminently lose their primary nighttime residence, provided that:

- Residence will be lost within 14 days of the date of application for homeless assistance;
- No subsequent residence has been identified; and
- The individual or family lacks the resources or support networks needed to obtain other permanent housing

Category 3. Homeless under other Federal statutes

Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:

- Are defined as homeless under the other listed federal statutes;
- Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application;
- Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and
- Can be expected to continue in such status for an extended period of time due to special needs or barriers

Category 4. Fleeing/Attempting to Flee Domestic Violence

Any individual or family who:

- Is fleeing, or is attempting to flee, domestic violence;
- Has no other residence; and
- Lacks the resources or support networks to obtain other permanent housing

At Risk of Homelessness Definition

Information on the definition of at risk of homelessness can be found on HUD Exchange at <https://www.hudexchange.info/resource/1927/hearth-esg-program-and-consolidated-planconforming-amendments/> and is summarized below. The following three at risk of homelessness categories are eligible to participate in CES.

Category 1. Individuals and Families

An individual or family who:

- Has an annual income below 30% of median family income for the area; and
- Does not have sufficient resources or support networks immediately available to prevent them from moving to an emergency shelter or another place defined in Category 1 of the “homeless” definition; and
- Meets one of the following conditions:
 - Has moved because of economic reasons 2 or more times during the 60 days immediately preceding the application for assistance; or

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- Is living in the home of another because of economic hardship; or
- Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance; or
- Lives in a hotel or motel and the cost is not paid for by a charitable organization or by Federal, State, or local government programs for low-income individuals; or
- Lives in an SRO or efficiency apartment unit in which there reside more than 2 persons or lives in a larger housing unit in which there reside more than one and a half persons per room; or
- Is exiting a publicly funded institution or system of care; or
- Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient's approved Con Plan.

Category 2. Unaccompanied Children and Youth

A child or youth who does not qualify as homeless under the homeless definition but qualifies as homeless under another Federal statute.

Category 3. Families with Children and Youth

An unaccompanied youth who does not qualify as homeless under the homeless definition but qualifies as homeless under section 725(2) of the McKinney-Vento Homeless Assistance Act, and the parent(s) or guardian(s) or that child or youth if living with him or her.

Coordinated Entry System (CES) Policies and Procedures
 Feedback Received from June 2025 – October 2025

CES Policies and Procedures Public Feedback Received June 26, 2025 – July 6, 2025

Topic	Feedback	Response	Additional Details
Rapid Rehousing	Improve match timeliness and responsiveness by possibly developing a streamlined timeline or expedited matching for high-priority cases	Timelines on the eligibility process are mainly determined by housing providers.	
	Add screening process for matches prior to match meeting to ensure program eligibility / Improve how matches are filtered and aligned with specific program requirements to reduce back-and-forth and better serve participants	CES does not determine eligibility. Prioritized lists are filtered by some eligibility factors and interest questions, and matchmakers case conference to provide as appropriate matches as possible. Final eligibility decisions are made by housing providers.	
	Establish clearer, faster communication between CES matchmakers and RRH providers (when participants are unresponsive or when situations change)	Matches and any communication deadlines are largely on a case-by-case basis shared between CES Access Point for matched household and any housing providers. Challenges around communication are best addressed through discussion with the matchmakers involved.	
	Develop a more responsive system to return clients to the queue or allow providers to initiate that change to reduce to administrative delays	This is functionality of the referral system in HMIS and not the CES Policies and Procedures. Both CES matchmakers and CES housing providers can return a household to the Community Queue.	

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	Recommend further transparency on prioritization criteria to understand how participants are prioritized for housing resources and what data is used	Added list of prioritized groups to policies and procedures to clarify prioritization.	
Dynamic Matching	Requesting further clarification around what is needed in HMIS to ensure a successful match	Dynamic Matching is not monitored by the Office of Care Coordination	Dynamic Matching is determined by consensus during Housing Provider Match Meetings and those in attendance
	Add clear language on what an eligible request for a dynamic match is, language on necessary documents and data inputs needed in HMIS, and add third party authorization process for agencies who are designated CES administrators to ensure no conflict of interest when a dynamic match is submitted on behalf of their own agency	Dynamic Matching is not monitored by the Office of Care Coordination	Dynamic Matching is determined by consensus during Housing Provider Match Meetings and those in attendance
Dynamic Matching/ Prioritization	Add clarifying language to enhance transparency on prioritization criteria, with transparent justifications for each dynamic match on reason for selection.	Revised Policy: Added list of prioritized groups to policies and procedures to clarify prioritization.	
CES Program Training Procedures	Mandate providers to close out CES enrollments if they are no longer working with participants to ensure matches do not get bottle-necked with individuals who have not been engaged for over 90 days	HMIS does automatically remove participants from the Community Queue after 90 days of activity. This language is included in the CES Participating Agency Agreement Form. The CES Participating Agency Agreement Form contains more language on the program standards for CES in HMIS	

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	Require training on CES Policies and Procedures, assessment procedures, prioritization, and referrals through CES prior to gaining access to match meetings.	Although not required, the CES team has developed and continues to develop training on these topics at the OC CES Academy.	
Procedures/ Dynamic Matching	Add training on dynamic match process and offer best practices and examples on how to advocate for dynamic match on CES match meetings.	This feedback will be considered in the development of future trainings.	The Office of Care Coordination will add a training on the dynamic match process into the OC CES Learning Academy (online learning management system)
Referrals	Add requirements for referral/match denials returning back into the Community Queue at a lower prioritization level, to reduce the rate of households making multiple denials for the same match opportunity	Lowering a households' prioritization will go against CoC-approved prioritization standards. Matchmakers take into account past denials when making matches, and case conference in those cases whether another match to the same opportunity is appropriate.	
Prioritization for Survivors	The current prioritization tool is not the most effective/ethical way to serve/match survivors to a housing opportunity that will meet their needs	While mentioned in the Policies and Procedures, all assessments, including the Survivor Assessment, are approved separately from the Policies and Procedures.	The Office of Care Coordination will begin to work with CES Administrators and Victim Service Providers to determine how to proceed on this topic.
Access Points	Differentiate the functions between open/closed Access Points; Survivor CES (SCES) Access Points only serve survivors	Revised policy: Added clarifying language defining open and closed access points, as well as language explaining access points can limit services to subpopulations served (families, survivors, veterans, etc.)	

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CES Authorization for Survivors	The current release form is not VAWA compliant and is inappropriately broad for SCES	The authorization form is separate from the CES Policies and Procedures.	
Emergency Transfer	Add more information about what emergency transfers look like and include examples in the P&Ps	Revised policy: Added additional language on emergency transfer procedures.	
Grievances	Add additional information on how to file a grievance (who files grievance, when/where in process does it happen). More information is needed for focus groups and surveys.	Revised policy: Added additional language on grievance procedures.	

CES Steering Committee Feedback Received during the July 9, 2025, Meeting

Topic	Feedback	Response	Additional Details
Prioritization	Keep shelter preference in prioritization to improve system flow, as well as recognize and encourage jurisdictions that have committed to operating shelter programs.	The Office of Care Coordination is looking to remove barriers into moving anyone into permanent housing. Current prioritization only takes shelter status into consideration for those experiencing literal homelessness and not chronic homelessness.	
	Shelter preference causes issues in the family system, as it causes unsheltered to never be able to be matched to housing, while not seeming to help families in shelter into housing faster	Existing draft removes shelter preference which would help alleviate this issue.	
	From experiences with unsheltered participants, many cannot or will not go into shelter due to disability barriers, fear of violence or discrimination, or lack of access to limited shelter	Feedback supports proposed changes to remove shelter preference from prioritization.	

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	beds. Keeping shelter preference disadvantages the most vulnerable and is not aligned with best practices of other communities.		

CES Steering Committee Feedback Received during the September 3, 2025, Meeting

Topic	Feedback	Response	Additional Details
Prioritization	Keep shelter preference in prioritization to improve system flow, as well as recognize and encourage jurisdictions that have committed to operating shelter programs.	The Office of Care Coordination is looking to remove barriers into moving anyone into permanent housing. Current prioritization only takes shelter status into consideration for those experiencing literal homelessness and not chronic homelessness. Since housing opportunities are largely presented based on length of homelessness, the shelter status is not a factor as housing opportunities are presented first to those experiencing chronic homelessness.	The Office of Care Coordination confirmed with CES Steering Committee Chair that the current proposed changes related to prioritization should be kept.

Lived Experience Advisory Committee Feedback Received during the October 1, 2025, Meeting

Topic	Feedback	Response	Additional Details
Prioritization	Potential changes may be need to CES prioritization, should a reduction in funding for CoC Program-funded permanent housing put households at risk of losing their housing.	The Office of Care Coordination will provide updates on HUD policies and funding requirements as they are made available, and will propose updates to prioritization if needed.	

Date: October 14, 2025

Subject: 2-for-1 Match Policy Recommendation

Recommended Action:

- a. Approve the proposed 2-for-1 Match Policy for review and approval by the Continuum of Care (CoC) Board, as recommended by the Lived Experience Advisory Committee (LEAC) and Coordinated Entry System (CES) Steering Committee.

Background and Analysis

The Office of Care Coordination, as the CES Lead for the Orange County CoC, utilizes the CES Policies and Procedures to guide the prioritization and match process to connect people to housing through CES. Typically, this includes matching a single household to a single unit, however, some of the local Public Housing Authorities have previously requested an additional match per a single vacant unit. While no formal policy or guidance currently exists within the CES Policies and Procedures, this practice was allowed to occur in a few instances to mitigate the amount of time a unit was left vacant.

As this practice began to be used more frequently in 2024 and 2025, some of the Public Housing Authorities requested for a formal policy or guidance to be issued. The Office of Care Coordination developed and proposed a 2-for-1 Match Policy (Policy) for housing providers that wish to opt-in to this process for specific units and vacancies. The aim of this policy is to establish the criteria and steps for the 2-for-1 match process, ensuring transparency for participants involved. In creating this guidance, the Office of Care Coordination considered partner feedback around the lease-up and turnover process, prior practice of these matches in this and other communities, and the experience of participants in this process. Specific goals include providing a person-centered and trauma-informed approach, ensuring existing housing programs are utilized to the highest extent possible and enabling success for new housing programs to attract continued support from the local development community to create more housing.

The Policy documents the situations in which the Office of Care Coordination will consider a 2-for-1 match request, including:

- 1. A unit has been vacant for 15 days, and
- 2. A need to meet financing and other deadlines near the end of initial lease-up for new properties.

Additionally, the Policy outlines requirements around these requests. This includes a requirement for the confirmed agreement of all stakeholders in the lease-up process, to emphasize consensus and collaboration. In order to enable participants to make informed choices about accepting a secondary match, the Policy also includes a form for the matched households to complete. The Policy also stipulates that while both households referred to as a primary and secondary match can go through the application process at the same time, the household assigned as a secondary match cannot move in unless the primary

match is denied or returned as unresponsive by the housing provider, or unless the primary match declines the housing opportunity. This is to create a more equitable process rather than a “first-come, first-served” process, where the participant with the least barriers will have the advantage to move in. Participants face differing barriers to attaining necessary documents, some of which affect people based on membership in protected groups or other arbitrary factors. For example, participants who had to change their name based on marriage, divorce, or other reasons may need to get documentation of that name change. Further, some participants may face greater difficulty obtaining birth certificates or other documents based on the jurisdiction they were born in, due to distance, different procedures, or other reasons. In avoiding a “first-come, first-served” process, the Office of Care Coordination seeks to honor the guiding principles of Coordinated Entry in prioritizing fair and transparent access to limited housing for those in the most need.

The proposed Policy was first shared during the July 9, 2025, CES Steering Committee Meeting. The Office of Care Coordination received initial feedback from those in attendance, including representatives from CES Administrators, local cities, service providers, and Public Housing Authorities, and noted that a public feedback period would be held before the Policy returned to the CES Steering Committee in September 2025. A public feedback period was then opened from July 10 – July 25, 2025, and announced via the CoC and Coordinated Entry email distribution lists.

During the September 3, 2025, CES Steering Committee meeting, the Office of Care Coordination returned with a revised draft Policy, which incorporated feedback received from the committee participants and public feedback period. The CES Steering Committee meeting included representatives from two (2) of the local Public Housing Authorities, service providers, and CES Administrators. Discussion centered around the policy scenarios and criteria for requesting a 2-for-1 match, noting challenges that components of the current draft policy could pose specifically to housing providers. Ultimately, the CES Steering Committee recommended to approve the proposed CES 2-for-1 Match Policy for review and approval by the Lived Experience Advisory Committee, (LEAC), inclusive of the following changes:

- **Scenarios for Requesting a 2-for-1 Match:** Remove requirement of unit(s) approaching 60 day vacancy date; remove requirement for unit to be vacant or in the possession of a housing provider for at least 60 days before request can be made; and update to allow requests to be made if unit has been vacant or in possession of the housing provider for a minimum of 15 days, and if the unit is move-in ready.
- **Criteria for 2-for-1 Match Requests:** Update language to state that a housing provider will provide a secondary match a housing opportunity with the next available unit in their respective housing inventory, with the goal of housing the secondary match within 45 days (rather than requiring them to be housed within 45 days), if both a primary and secondary match are approved and the primary match signs a lease.

The Office of Care Coordination presented jointly with Andrew Crowe, CES Steering Committee Chair, at the October 1, 2025, LEAC meeting, reflecting discussion that took place at the September CES Steering Committee meeting. Discussion amongst LEAC members focused on the experience of the Secondary Match as well as operational considerations within the Homeless Management Information System (HMIS) platform, and overall highlighted support for the proposed Policy. The LEAC requested that should the Policy be approved, that the Office of Care Coordination facilitate an evaluation after one year of implementation. Further, it was recommended that any proposed changes to the Policy return to the LEAC for review and approval. Following discussion, the LEAC voted unanimously to recommend the drafted Policy proceed to the Policies, Procedures and Standards (PPS) Committee for review and approval.

Feedback received during the public feedback period and from the September 3, 2025, CES Steering Committee, and October 1, 2025, LEAC was compiled into **Attachment A** for reference. Following the CES Steering Committee, the Office of Care Coordination worked with Andrew Crowe, as the CES Steering Committee Chair, to confirm that the feedback and recommendations from the committee discussion were accurately reflected in the revised draft of the Policy. The PPS Committee is being asked to review and approve the CES 2-for-1 Match Policy in **Attachment B**. If approved, the Policy will be shared with the CoC Board for review and final approval.

Attachments

Attachment A – 2-for-1 Match Policy Feedback Received

Attachment B – 2-for-1 Match Policy – Redlined Version

Attachment C – Sample 2-for-1 Match Confirmation Form

Attachment D – Sample 2-for-1 Match Request Form

Item 3. Attachment A

Coordinated Entry System (CES) 2-for-1 Match Policy
Feedback Received from July 2025 – October 2025

2-for-1 Match Policy Public Feedback Received July 10, 2025 – July 25, 2025

Topic	Feedback	Response	Additional Details
Concurrent processing of both matches	Proposed policy requires that the Secondary match only proceeds with the application process after a determination from the Primary match is made	Revised policy: Both Primary and Secondary matches can have the application reviewed concurrently. Primary match will be considered first and a Secondary match will be considered second for the housing opportunity.	
Confirmation of 2-for-1 Match Submission	Request that all housing and supportive service providers are in agreement prior to approval of 2-for-1 Matches	This language was previously incorporated into original draft of the Policy.	
Housing opportunities presented to Secondary Match	Request that Secondary match maintains similar unit type, i.e. Mental Health Services Act (MHSA) to MHSA; Project Based Voucher (PBV) to PBV	Added clarifying language to match this feedback received	
	Recommend Secondary match being utilized as a primary match for a unit within same property as a vacancy becomes available	Policy states Secondary matches must maintain their original unit matched. However, should the Secondary match become fully approved, they will be presented with the next available unit within the housing provider’s inventory.	

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<p>Timeframe to return a Secondary match who declines accepting being a Secondary match</p>	<p>Request that housing providers return the Secondary match back to the Community Queue in three (3) days</p>	<p>Policy maintains originally drafted language of seven (7) days to return Secondary match to Community Queue. Three (3) days will be extremely difficult for OCC staff to maintain administrative role and confirm with accepting CES Access Point</p>	
<p>Criteria when 2-for-1 Matches can be requested</p>	<p>Requesting transparent criteria for when a 2-for-1 match may be requested</p>	<p>Policy includes two main scenarios for when a 2-for-1 Match can be submitted with additional clarifying criteria</p>	
<p>HMIS technical capabilities</p>	<p>Housing providers should need to submit or enter two separate housing opportunities in HMIS for same unit</p>	<p>Policy includes language that for each approved 2-for-1 Match Request includes two separate housing opportunities to be entered</p>	
<p>Confirmation of accepting a Secondary Match</p>	<p>Concern that a Secondary match would not be presented other housing opportunities while matched as a Secondary match</p>	<p>Policy states that HMIS does not have the technical capability to have one household have two concurrent housing program referrals. Thus the Secondary matches will not being presented other housing opportunities. Secondary match will sign confirmation form confirming understanding.</p>	
<p>Identifying a Secondary Match</p>	<p>The process of how a Secondary match is identified is unclear within Policy</p>	<p>Policy contains step by step example of how a Secondary match is identified on the Community Queue</p>	

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<p>Dynamic matching for Secondary Match</p>	<p>Secondary match should be allowed to be prioritized for a dynamic match request, should they not move-into a unit for which they were the Secondary match</p>	<p>Secondary matches can decide to return to the Community Queue at any time. Should a Secondary match choose to be returned to the Community Queue, the CES Access Point can submit a dynamic prioritization request where a consensus is needed during each match meeting.</p>	
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CES Steering Committee Feedback Received during the July 9, 2025, Meeting

<p>Topic</p>	<p>Feedback</p>	<p>Response</p>	<p>Additional Details</p>
<p>General support</p>	<p>Support enacting a 2-for-1 match policy to prevent delays in filling vacant units</p>	<p>Feedback was recorded.</p>	
<p>Required Timeframe</p>	<p>Suggest shortening the time frame a unit must be vacant for a 2-for-1 match to be requested, from 90 days to 60 days.</p>	<p>Revised policy: Policy was updated to reflect the requested timeframe a unit must be vacant from 90 days to 60 days</p>	
<p>Simultaneous processing</p>	<p>The policy should explicitly state applicants should go through the eligibility process at the same time.</p>	<p>Revised policy: Policy was updated to allow both Primary and Secondary matches to begin the application process concurrently</p>	
<p>Clarity on process and timeframes</p>	<p>Request for more information around timeframes and a clarifying graphic</p>	<p>Originally drafted Policy contained timeframe for each step except for application/background review</p>	

Item 3. Attachment A

<p>Consideration of secondary matches</p>	<p>Due to the undetermined time in being processed for a match, some back-up option (such as being prioritized for future dynamic matches) should be provided to the secondary match to account for the time they spent being processed.</p>	<p>Secondary matches can decide to return to the Community Queue at any time. Should a Secondary match choose to be returned to the Community Queue, the CES Access Point can submit a dynamic prioritization request where a consensus is needed during each match meeting</p>	
<p>Timeframes</p>	<p>Further discussion should be held if housing provider timelines are expected to change with new policies.</p>	<p>The Office of Care Coordination will track all 2-for-1 matches and analyze any data and implement revisions based on findings</p>	

CES Steering Committee Feedback Received during the September 3, 2025, Meeting

<p>Topic</p>	<p>Feedback</p>	<p>Response</p>	<p>Additional Details</p>
<p>Criteria when 2-for-1 Matches can be requested</p>	<p>Remove 60-day vacancy requirement (and any language that indicates 60 days) before requesting matches, and change it to 15 days</p>	<p>Revised policy: The 15-day vacancy requirement was incorporated as part of the approved Policy by the CES Steering Committee.</p> <p>The Office of Care Coordination originally revised this section from 90 days to 60 days in a previous iteration.</p>	<p>The Office of Care Coordination confirmed revised Policy language with CES Steering Committee Chair prior to LEAC meeting.</p>
	<p>Remove requirement to house the Secondary match in 45 days, change to house to the next available unit</p>	<p>Revised policy: Language was added to further clarify that the Secondary match would be presented the “next available unit with the goal of housing the Secondary match within 45 days” as part of the approved Policy by the CES Steering Committee</p>	<p>The Office of Care Coordination confirmed revised Policy language with CES Steering Committee Chair prior to LEAC meeting.</p>

Item 3. Attachment A

Lived Experience Advisory Committee Feedback Received during the October 1, 2025, Meeting

Topic	Feedback	Response	Additional Details
HMIS technical capabilities	Inquired whether HMIS has the ability to support maintaining a Secondary match on the Community Queue and a referral to another housing opportunity at the same time.	Currently there is no option for any match to remain on the Community Queue while maintaining a housing referral. The Office of Care Coordination would need to consult with Orange County United Way's 2-1-1 Orange County (211OC) as the HMIS Lead, to determine if this a possibility.	



2-for-1 Match Policy and Procedure

~~August~~ September 2025

CoordinatedEntry@ceo.oc.gov | ceo.ocgov.com/care-coordination/homeless-services/coordinated-entry-system

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2-for-1 Match Policy and Procedure

~~August-September~~ 2025

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Background

The 2-for-1 Match Policy and Procedure provides guidance to when and how 2-for-1 matches can be requested by Housing Providers, as well as the needed communication with households who are the identified secondary match.

Housing Providers (housing provider, public housing authorities, developer, etc.) may request a secondary match for a single unit vacancy, commonly referred to as 2-for-1 matches. In this practice, the two (2) households from the Coordinated Entry System (CES) Community Queue are matched to one (1) housing opportunity, as made available by the Housing Provider. This updates the households to a “pending referral” status in the CES Community Queue as they work through the application process for the housing opportunity that were made available.

The Homeless Management Information System (HMIS) does not have the technical capability to keep a household active on the CES Community Queue, while also matched to a housing opportunity as the “secondary match”. As such, households who have a “pending referral” status may not be considered for additional housing opportunities concurrently. The 2-for-1 matches will only be used with Office of Care Coordination approval.

Scenarios for Requesting a 2-for-1 Match

2-for-1 matches can only be requested by the Housing Provider, when one of the two following scenarios is applicable:

1. ~~Property has unit(s) that is approaching the 120 day vacancy date.~~ The request for 2-for-1 match can only be submitted ~~after the unit has been vacant for 60 days, and any of~~when the following conditions are met:
 - a. ~~Unit has been in the possession of the housing provider for at minimum 60 days, Unit has been vacant for at minimum 15 days;~~
 - b. Unit has been ~~move in in the possession of the housing provider for ready for~~ at minimum ~~60-15~~ 15 days; ~~and-~~
 - c. ~~And 60 days have passed since the original match request date. Unit is move-in ready~~
2. A newly opened property needs to achieve a specified occupancy rate by a specified date. The request for 2-for-1 match can only be submitted no earlier than 60 days before the specified date.

The Office of Care Coordination as the CES Lead reserves the right to request documentation confirming either of the data points previously listed with any 2-for-1 Match Request submissions.



2-for-1 Match Policy and Procedure

~~August-September~~ 2025

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Criteria for 2-for-1 Match Requests

When requesting a 2-for-1 Match, the Housing Provider is agreeing to processing the matches as detailed below. The following guidance must be followed to ensure that any 2-for-1 match requests are handled appropriately and that the process is trauma-informed by promoting safety, ensuring participant choice and autonomy, building trust, and providing a strengths-based, compassionate approach for all households involved. All guidelines points below are in alignment with current CES policies and procedures.

1. “Primary” and “Secondary” matches will proceed with the initial application process for the available unit. Housing opportunity will be reserved for Primary match and not utilize a “first come – first served” approach.
2. If a Primary match declines, is denied (including an appeal period if applicable), or is considered unresponsive after 14 days of no contact from the original match email date, then the housing opportunity will be made available for the Secondary match.
 - a. The Primary match will be returned to the Community Queue.
 - b. Should the Primary Match become unresponsive for a period of 30 consecutive days after beginning the application process, they will be considered unresponsive and can be returned to the Community Queue with approval from all parties including the assigned case manager.
3. In the event that both Primary and Secondary matches become fully approved, the Secondary match is not allowed to be returned to the Community Queue (unless requested by the Secondary Match). Should the Secondary Match not request to be returned to the Community Queue the requesting housing provider must will provide the Secondary match a housing opportunity in their respective housing inventory with the next available unit, and with the goal of housing the Secondary match within 45 days.
 - a. Whenever possible, the housing provider will prioritize offering the Secondary match a similar and/or comparable housing opportunity to the original housing opportunity.
 - i. (Mental Health Service Act Units to Mental Health Service Act Units, Project Based Voucher to Project Based Voucher, location, unit size, ADA needs, etc.)
4. Only when both matches are denied, decline, considered unresponsive, or a combination of the three, may the Housing Provider can submit another 2-for-1 match request form for that same unit for two new matches.
 - a. This means that a new Secondary match cannot be requested, after the Primary match is denied, declines, or considered unresponsive.
 - b. A matched household, Primary or Secondary, will be considered unresponsive after 14 calendar days from the original match email date.
5. All stakeholders (Property Manager, Public Housing Authority, developer, supportive services provider, etc.) associated with the specific housing opportunity where a 2-for-1 match request is being requested must agree with the 2-for-1 match request. The Office of Care Coordination will verify via email with all stakeholders that this agreement exists.



2-for-1 Match Policy and Procedure

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6. The Secondary household matched must sign (wet or digitally) the 2-for-1 Secondary Match Confirmation indicating authorization of removal from the CES Community Queue and must be returned to the Office of Care Coordination via email to the original match email within seven (7) calendar days after being received.
 - a. The Office of Care Coordination will follow up with the staff member who submitted the 2-for-1 Secondary Match Confirmation form if the form has not been signed by the secondary household by the seven (7) days.
 - b. On the 8th day, the secondary household match will be voided and returned to the CES Community Queue.
7. Secondary matches reserve the right to be returned to the CES Community Queue for other housing opportunities in which the household wishes to be considered for at any time.
8. 2-for-1 Match Requests are only available for two referrals for every one housing unit.
 - a. If there are two available units to accept referrals, Housing Providers must submit two separate match request forms and so on.

If any of the following steps are not followed, the Office of Care Coordination reserves the right to deny any future requests submitted by the same housing provider, public housing authority, or developer.

Procedure

The Secondary match will only be matched once all other primary matches have been identified based on the number of housing opportunities available for the specific match meeting taking place. This procedure is meant to ensure that the CES Prioritization Policy is followed, and that a household is not considered as a secondary match prior to being matched as a primary to other housing opportunities based on their length of homelessness, disabling conditions and other eligibility criteria.

Example: If there are three (3) units who received approval from the Office of Care Coordination for 2-for-1 Matches, this means that six (6) households will be removed from the CES Community Queue.

The first secondary match, would be the fourth household to appear on the CES Community Queue, and not the second household to appear on the CES Community Queue.

CES Community Queue and matches to Housing Opportunities:

1. John Doe ← Primary match to unit #1
2. Jane Doe ← Primary match to unit #2
3. John Smith ← Primary match to unit #3
4. Jane Smith ← Secondary match to unit #1
5. John Jones ← Secondary match to unit #2
6. Jane Jones ← Secondary match to unit #3



2-for-1 Match Policy and Procedure

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This practice will ensure that the higher prioritized households will be the primary match in the order of prioritization and maintain the integrity of the CES Community Queue that align with the CES policies and procedures as approved by the Orange County Continuum of Care.

Matches may not be shifted to other units in cases where a property has more than one (1) approved 2-for-1 Match Requests. All secondary matches must maintain their originally matched unit. This process will only be utilized after Office of Care Coordination approval and is outlined using the example above:

1. Both John Doe (primary) and Jane Smith (secondary) were matched to unit #1
2. Both John Doe and Jane Smith were returned to the Community Queue.
3. John Jones and as the highest prioritized remaining secondary match can be moved to the Primary match for unit #1.
 - a. A new 2-for-1 Match Request can be requested if John Jones is returned to the Community Queue.
4. All other remaining secondary matches will remain to the original matched unit.

Any Secondary Matches are only to be made after all current housing opportunities available have identified Primary Matches.

If any of the following steps are not followed, the Office of Care Coordination reserves the right to deny any future requests submitted by the same housing provider, public housing authority, and developer.

How to Request a 2-for-1 Match

Housing Providers requesting a 2-for-1 match, shall complete the following steps:

1. The Housing Provider must submit the [2-for-1 Match Request Form](#) for a specific housing opportunity to the CES Lead Agency, through the linked Google Form.
 - a. The Office of Care Coordination can supply this link as requested.
2. Once the Office of Care Coordination reviews a request for completion and additional verification as needed, the Office of Care Coordination will respond with an approval or denial of the request within three (3) business days from the date of form submission.
 - a. If approved proceed to step 3
 - b. If denied proceed to step 5
3. If the Office of Care Coordination has approved the request in writing, the Housing Provider may proceed to enter the two separate housing opportunities into HMIS.
 - a. All 2-for-1 match requests entered in HMIS must include a label of "Primary" or "Secondary" or be included in the opportunity description.
 - b. All 2-for-1 match requests will require a unit number to be entered into the HMIS opportunities.



2-for-1 Match Policy and Procedure

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- c. These housing opportunities will receive matches the following week in which they were approved, and if the housing opportunities were entered by Friday, or last business day of the week, at 12pm, Pacific Standard Time.
4. A 2-for-1 Secondary Match Confirmation must be filled out by *both* CES Access Point case manager and the Secondary matched household (once the matches have been confirmed)
 - a. This document will be provided by the Office of Care Coordination via the original match email for the secondary matched household.
 - b. The 2-for-1 Secondary Match Confirmation must be completed and returned within seven (7) calendar days from the date of the original match email.
5. If the 2-for-1 Match Request is denied, the Office of Care Coordination will provide reason for the denial via email to the original requesting staff member as indicated in the 2-for-1 Match Request Form. The Housing Provider may appeal the decision by responding to the denial email that was sent by the Office of Care Coordination indicating that the 2-for-1 Match Request was denied. The appeal should include any pertinent information that clearly illustrates the need for a secondary match.
6. The Office of Care Coordination will respond to all appeals in a timely manner to ensure that if the decision is overturned, two matches can be received by the next planned match meeting.
7. For all approved 2-for-1 Match Request, weekly updates on the application process for the Primary match must be provided to the Office of Care Coordination via email at the coordinatedentry@ceo.oc.gov every Friday by 2pm with the most updated information. While updates are provided on the Secondary match regularly.
 - a. Failure to provide weekly updates on the application process and status for both households will result in automatic denial of future requests.

If any of the following steps are not followed, the Office of Care Coordination reserves the right to deny any future requests.

All questions regarding 2-for-1 Match Requests should be directed to coordinatedentry@ceo.oc.gov.



2-for-1 Match Confirmation

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2-for-1 Secondary Match Confirmation

This form must be completed in its entirety and attached to the email reply, in the same thread as the original match email that was sent by the CES Match Maker. This form must be submitted within seven (7) calendar days from the date of the original match email. Failure to do so will result in the Office of Care Coordination voiding this Secondary match.

The following section is to be completed by the CES Access Point:

1. CES Access Point who accepted the Secondary match:

2. CES User who accepted this secondary match (first name, last name):

3. CES User email:

4. CES User contact phone number:

5. Name of housing opportunity that was accepted as used in the original match email:

6. Household's HMIS ID and full name as it appears in HMIS:



2-for-1 Match Confirmation

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The following section is to be completed by the CES Household:

*You have been matched to a housing opportunity as a Secondary match. This means you are the second applicant to a unit in which a primary applicant was identified. If you choose to proceed as a Secondary match, you can begin the application process. Should the Primary match become approved for move-in, you will have the option to be returned to the Community Queue for other housing opportunities, or the housing provider will present you another as close as similar housing option as possible, within a goal of 45 days. **There is no definitive timetable as to when the Primary match will be approved or denied for the same housing opportunity.***

*As a Secondary match you will **not be matched to other housing opportunities** while the proceeding with the application process. As a Secondary match you can deny being a Secondary match at any time and be considered for other housing opportunities through the Community Queue as they become available. If you wish to deny being a Secondary match at a later time, please communicate this with your case manager.*

The benefit of being a Secondary match is that you are the next person to be matched to this specific housing opportunity, if and only if, the primary applicant declines or is denied for any reason. However, there is no definitive timetable, when the primary applicant will decline, or be denied for this opportunity.

You have the right to deny this Secondary match for any reason and wait for a housing opportunity where you can be considered a Primary match. A Primary match gives you priority to the housing opportunity when matched.

1. Are you aware that by accepting this Secondary match you will not be considered for any other housing opportunities (with no definitive timetable), including housing opportunities where you may have been considered a *Primary* match?

Yes

No

2. Do you accept being a Secondary match to this housing opportunity and understand you will only be considered for this housing opportunity only when and if the Primary match declines or is denied for any reason?

Yes

No

3. Please sign indicating you authorize and accept this Secondary match:

Date: _____



2-for-1 Match Request Form

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2-for-1 Match Request Form

Question:	Response:
Please list your full name and title	
Please list your email address	
Please list your direct phone number	
Please list your CES participating agency name:	
Please list the Housing Opportunity or HMIS Program for which you are requesting a secondary match:	
Please list the unit number associated with this request:	
Please list any eligibility criteria for this unit (MHSA, Veteran preference, senior, etc). If none, type "N/A":	
Please indicate the public housing authority partnering with this housing community:	Anaheim Housing Authority Garden Grove Housing Authority Orange County Housing Authority Santa Ana Housing Authority N/A
Please list the property management organization partnering with this housing community	
Please initial your understanding of the following: As the CES participating agency and HMIS data entry agency, can you confirm that all parties, including the property manager, Public Housing Authority, and/or supportive services agency, have approved this 2-for-1 Match Request?	Initial
Please initial your understanding of the following: Do you understand that two housing opportunities must be entered into HMIS and include a label of "primary" and "secondary" or will be subject to deletion or not receiving a second match?	Initial



2-for-1 Match Request Form

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<p>Please initial your understanding of the following:</p> <p>Do you understand that should both the Primary and Secondary match be approved for the same unit; the Primary match will be the household who gets the unit? <u>*This means a “first-come-first-served” practice will not be utilized, and follows a trauma-informed care approach.*</u></p>	<p>Initial</p>
<p>Please initial your understanding of the following:</p> <p>Do you understand that should both the Primary and Secondary match be approved the same unit, the Secondary match is not allowed to be returned to the Community Queue (unless requested by the Secondary Match) and it is your responsibility to provide the Secondary match a housing opportunity in your respective housing inventory with the next available unit, and with the goal of housing the Secondary match within 45 days.</p>	<p>Initial</p>
<p>Please initial your understanding of the following:</p> <p>Do you understand that failure to comply with these guidelines may result in future 2-for-1 match requests being denied?</p>	<p>Initial</p>
<p>Please initial your understanding of the following:</p> <p>Do you understand that you will only be able to enter both housing opportunities <u>after</u> receiving written approval from the Office of Care Coordination?</p>	<p>Initial</p>
<p>Please initial your understanding of the following:</p> <p>Do you understand that a secondary match reserves the right to return to the CES Community Queue to be considered for other housing opportunities. <u>This will not allow for a new Secondary only match.</u></p>	<p>Initial</p>
<p>Please initial by the following statements as confirmation of your understanding and commitment to adherence to the 2-for-1 Match Policy as approved by the CoC Board. The 2-for-1 Secondary Match Confirmation form must be filled out by both the CES Access Point and CES Household who is the secondary match. The secondary match has the right to deny being a secondary match, if there is a denial, this will not result in receiving a secondary match.</p>	<p>Initial</p>