



# North Carolina Balance of State Continuum of Care

---

[bos@ncceh.org](mailto:bos@ncceh.org)

919.755.4393

[www.ncceh.org/BoS](http://www.ncceh.org/BoS)

## Transitional Housing Written Standards

### Overview

The NC Balance of State Continuum of Care has developed these written standards to provide specific guidelines for how programs can operate to have the best chance of ending homelessness. These guidelines create consistency across the Balance of State, protect our clients by putting their needs first, and provide a baseline for holding all of the CoC's transitional housing programs to a specific standard of care.

The US Department of Housing and Urban Development (HUD) requires every Continuum of Care to evaluate outcome of projects funded under the Emergency Solutions Grants program and the Continuum of Care program and report to HUD (24 CFR 578.7(a)(7). In consultation with recipients of ESG program funds within the geographic area, CoCs must establish and operate either a centralized or coordinated entry system that provides an initial, standardized, comprehensive assessment of the needs of individuals and families for housing and services.

In consultation with recipients of ESG program funds within the geographic area, CoCs must establish and consistently follow written standards for providing CoC assistance. At a minimum, these written standards must include:

- Policies and procedures for evaluating individuals' and families' eligibility and determining the process for prioritizing eligible households in emergency shelter, transitional housing, rapid rehousing, and permanent supportive housing programs (24 CFR 578.7(a)(9).
- Program standards that meet HUD's requirements for transitional housing to define policies and procedures for admission, diversion, referral, and discharge standards as well as safeguards to meet needs for special populations such as victims of domestic violence, dating violence, sexual assault, and stalking.
- Policies and procedures for coordination among emergency shelters, transitional housing programs, essential service providers, homelessness prevention programs, rapid rehousing programs, and permanent supportive housing programs.
- Definitions for participation in the CoC's Homelessness Management Information System (or comparable database for domestic violence or victims' service programs).

The NC Balance of State Continuum of Care developed the following Transitional Housing program standards to ensure:

- Program accountability to individuals and families experiencing homelessness, specifically populations at greater risk or with the longest histories of homelessness
- Program compliance with the US Department of Housing and Urban Development

- Service consistency within programs
- Adequate program staff competence and training, specific to the target population served

## **EXPECTATIONS**

All program grantees using US Department of Housing and Urban Development Continuum of Care Program funding must adhere to these performance standards and will be monitored by the NC Balance of State Continuum of Care to ensure compliance. The NC BoS CoC recommends that transitional housing programs funded through other sources also follow these standards. These performance standards attempt to provide a high standard of care that places community and client needs first. Based on proven best practices, this high standard of care is necessary to achieve our goal of ending homelessness in the NC BoS CoC.

## **TRANSITIONAL HOUSING**

Traditionally, agencies have created transitional housing to provide an interim-housing option (18-24 months) for moderately vulnerable individuals and families prior to permanent housing.<sup>1</sup> Several common types of transitional housing programs exist, including: HUD CoC Program-funded transitional housing, Emergency Solutions Grant Program-funded transitional housing, VA Grant Per Diem housing, privately-funded transitional housing programs for survivors of/persons fleeing from domestic violence and individuals with substance abuse and alcohol addictions. [Many communities throughout the NC Balance of State CoC have transitional housing as a component of their homeless response system.](#)

The performance standards in this document attempt to provide guidance and insight as to how agencies can use transitional housing to achieve the best possible outcomes. Nationally, many transitional housing programs are providing a truly interim housing solution for high-need, high-acuity individuals and families experiencing homelessness. In the NC Balance of State, transitional housing programs can play an essential role by providing triage or interim beds for individuals and families experiencing chronic homelessness or others with multiple disabling conditions that inhibit them from entering shelter. Transitional housing programs can provide a short-term housing solution for individuals and families who cannot access traditional emergency shelter but need a place to stay until rapid rehousing and permanent supportive housing providers can identify a suitable permanent housing placement, a model known as bridge housing.<sup>2</sup> With intensive services and no negative effects due to shorter stays, transitional housing can provide a powerful interim housing.

[Transitional housing projects funded by the FY2025 CoC Program Competition should align with the FY2025 Notice of Funding Opportunity \(NOFO\) by demonstrating that their program model: will help individuals and families achieve self-sufficiency within 24 months; provide supportive services that increase participants' earned income and ability to exit to permanent housing destinations; will provide up to 40 hours per week of customized services for each participant \(see NOFO for further details\); minimizes preconditions to housing assistance while using](#)

<sup>1</sup> <https://www.gpo.gov/fdsys/granule/CFR-2012-title24-vol3/CFR-2012-title24-vol3-part576/content-detail.html>

<sup>2</sup> <https://www.hudexchange.info/resources/documents/Deputy-Secretary-of-Veterans-Affairs-Letter-to-GPD-Grantees.pdf>



individualized participation agreements to outline expectations for engaging in supportive services; tracks and reports outcome metrics required by the CoC through HMIS and HUD reporting processes; and maintains and documents staff training, policies, and quality improvement processes.

Every transitional housing program within the NC Balance of State should participate in their local community's coordinated entry system. In the NC BoS CoC, each community utilizes the Prevention and Diversion screening tool and Homeless Assessment and Referral Tool (HART) to set priorities and housing triage methods, while housing programs use the Case Management Tool for more developed housing placement purposes and for intensive case management over time. Communities use HART to prioritize individuals and families experiencing literal homelessness based on an acuity score that indicates the type of housing intervention best suited to their ongoing needs.

## **DEFINITIONS**

**Acuity:** When using HART, acuity means the presence of a presenting issue based on the prescreening score. Acuity on the prescreening tool is expressed as a number with the higher score representing more complex, co-occurring issues likely to impact overall stability in permanent housing. When using the Case Management Tool acuity refers to the severity of the presenting issue and the ongoing goals to addressing these issues.

**Case Management Tool:** A standardized tool for case management to track outcomes in the coordinated entry process. Housing programs administer this tool at program entry, housing entry, and every six months thereafter until program discharge. Upon discharge from the program, housing case managers administer the tool one final time 12 months later, when possible, to ensure the household continues to make progress.

**Chronically Homeless:** (1) an individual with a disability as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)) who: (i) lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and (ii) had been homeless and living as described in (i) continuously for at least 12 months or on at least 4 occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating occasions included at least 7 consecutive nights of not living as described in (i). Stays in institutional care facilities for fewer than 90 days will not constitute a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering the care facility; (2) 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 in paragraph (1) of this definition, before entering that facility; or (3) 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 in (1) or 2) of this definition, including a family whose composition had fluctuated while the head of household has been homeless. (24 CFR 578.3)

**Comparable Database:** HUD-funded providers of housing and services (recipients of ESG and/or CoC Program funding) who cannot enter information by law into HMIS (victim service providers as defined under the Violence Against Women and Department of



Justice Reauthorization Act of 2005) must operate a database comparable to HMIS. According to HUD, “a comparable database . . . collects client-level data over time and generates unduplicated aggregate reports based on the data.” The recipient or subrecipient of CoC and ESG Program funds may use a portion of those funds to establish and operate a comparable database that complies with HUD’s HMIS requirements. (24 CFR 578.57)

**Coordinated Entry:** “A centralized or coordinated process designed to coordinate program participant intake, assessment, and provision of referrals across a geographic area. The . . . system covers the geographic area (designated by the CoC), is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool” (24 CFR 578.3). CoC’s have ultimate responsibility to implement coordinated entry in their geographic area.

**Developmental Disability:** As defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002): (1) A severe, chronic disability of an individual that (i) is attributable to a mental or physical impairment or combination of mental and physical impairments; (ii) is manifested before the individual attains age 22; (iii) is likely to continue indefinitely; (iv) results in substantial functional limitations in three or more of the following major life activities: (a) self-care; (b) receptive and expressive language; (c) learning; (d) mobility; (e) self-direction; (f) capacity for independent living; (g) economic self-sufficiency; (v) reflects the individual’s need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated. (2) an individual from birth to age 9, inclusive, who has a substantial developmental disability or specific congenital or acquired condition, may be considered to have a developmental disability without meeting three or more of the criteria in (1)(i) through (v) of the definition of “developmental disability” in this definition if the individual, without services or supports, has a high probability of meeting these criteria later in life. (24 CFR 578.3)

**Disabling Condition:** According to HUD: (1) a condition that: (i) is expected to be of indefinite duration; (ii) substantially impedes the individual’s ability to live independently; (iii) could be improved by providing more suitable housing conditions; and (iv) is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury; or a developmental disability, as defined above; or the disease of Acquired Immunodeficiency Syndrome (AIDS) or any conditions arising from AIDS, including infection with the Human Immunodeficiency Virus (HIV). (24 CFR 583.5)

**Diversion:** Diversion is a strategy to prevent homelessness for individuals seeking shelter or other homeless assistance by helping them identify immediate alternate housing arrangements, and if necessary, connecting them with services and financial assistance to help them return to permanent housing. Diversion practices and programs help reduce the number of people becoming homeless and the demand for shelter beds.

**Family:** A family includes, but is not limited to the following, regardless of actual or perceived sexual orientation, or marital status: (1) a single person, who may be an elderly person, displaced person, disabled person, near-elderly person, or any other single person; or (2) a group of persons residing together, and such group includes, but is not limited to:



(i) a family with or without children (a child who is temporarily away from the home because of placement in foster care is considered a member of the family); (ii) an elderly family; (iii) a near-elderly family; (iv) a disabled family; (v) a displaced family; and (vi) the remaining member of a tenant family. (24 CFR 5.403)

**Homeless:**

*Category 1:* an individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: (i) an individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; (ii) an individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by Federal, State, or local government programs for low-income individuals); or (iii) an individual who exits an institution where ~~he/she~~ they 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;

*Category 2:* an individual or family who will immediately lose their primary nighttime residence, provided that: (i) the primary nighttime residence will be lost within 14 days of the date of application for homeless assistance; (ii) no subsequent residence has been identified; and (iii) the individual or family lacks the resources or support networks (e.g. family, friends, faith-based or other social networks) needed to obtain other permanent housing; or

*Category 4:* any individual or family who: (i) is experiencing trauma or a lack of safety related to, or fleeing or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous, traumatic, or life-threatening conditions related to the violence against the individual or a family member in the individual's or family's current housing situation, including where the health and safety of children are jeopardized; (ii) has no other safe residence; and (iii) lacks the resources to obtain other safe permanent housing. (24 CFR 578.3)

**Homeless Assessment and Referral Tool (HART):** A tool used by all regions in the NC Balance of State CoC to determine acuity and assist the CE system to prioritize households for permanent housing resources.

**Prevention and Diversion Screening Tool:** A tool used to reduce entries into the homeless service system by determining a household's needs upon initial presentation to shelter or other emergency response organization. This screening tool gives programs a chance to divert households by assisting them to identify other permanent housing options and, if needed, providing access to mediation and financial assistance to remain in housing.

**Rapid Rehousing:** A national best practice model designed to help individuals and families exit homelessness as quickly as possible, return to permanent housing, and achieve long-term stability. Rapid rehousing assistance does not require adherence to preconditions such as employment, income, absence of criminal record, or sobriety. Financial assistance and housing stabilization services match the specific needs of the household. The core components of rapid rehousing are housing identification/relocation, short- and/or medium-term rental and other



financial assistance, and case management and housing stabilization services. (24 CFR 576.2)

**Transitional Housing:** Temporary housing for participants who have signed a lease or occupancy agreement with the purpose of transitioning participants into permanent housing within 24 months.

## **PERFORMANCE STANDARDS**

### **PERSONNEL**

**STANDARD:** The program shall adequately staff services with qualified personnel to ensure quality of service delivery, effective program administration, and the safety of program participants.

### **Benchmarks**

- The organization selects employees and/or volunteers with adequate and appropriate knowledge, experience, and stability for working with individuals and families experiencing homelessness and/or other issues that place individuals and families at risk of homelessness.
- The organization provides time for all employees and/or volunteers to attend webinars and/or trainings on program requirements, compliance and best practices.
- The organization trains all employees and/or volunteers on program policies and procedures, available local resources, and specific skills areas relevant to assisting clients in the program.
- For programs using the Homeless Management Information System (HMIS), all end users must abide by the HMIS@NCCEH User and Participation Agreements, including adherence to the strict privacy and confidentiality policies.
- Staff supervisors of casework, counseling, and/or case management services have, at a minimum, a bachelor's degree in a human service-related field and/or experience working with individuals and families experiencing homelessness and/or other issues that place individuals and families at risk of homelessness.
- Staff supervising overall program operations have, at a minimum, a bachelor's degree in a human service-related field and/or demonstrated ability and experience that qualifies them to assume such responsibility.
- All program staff have job descriptions that address tasks staff must perform and the minimum qualifications for the position.
- Case managers provide case management with the designated Case Management Tool on a frequent basis for all clients.
- Organizations should share and train all program staff on the NC Balance of State Transitional Housing Written Standards.

### **CLIENT INTAKE PROCESS**

**STANDARD:** Programs will actively participate in their community's coordinated entry system. The program will limit entry requirements to ensure that the program serves the most vulnerable individuals and families needing assistance.



## Benchmarks

- All adult program participants must meet the following program eligibility requirements:
  - 18 years or older
  - Literally homeless and/or fleeing or attempting to flee domestic violence (see definitions listed above for Category 1 and 4 of the homelessness definition)
  - [Transitional housing projects funded by the FY2025 CoC Program Competition may also serve persons meeting the Category 2: Imminent Risk of Homelessness definition \(24 CFR 578.3\)](#)
- Programs may not require clients to meet additional program eligibility requirements except for the following:
  - Chronically homeless ([if applicable](#))
  - Residency requirements (abiding by the language of the occupancy agreement)
- All CoC recipients must use the standard order of priority for documenting evidence to determine homeless status and chronically homeless status. Grantees must document in the client file that the agency attempted to obtain documentation in the preferred order. The order should be as follows:
  - Third-party documentation (including HMIS)
  - Intake worker observations through outreach and visual assessment
  - Self-certification of the person receiving assistance
- Programs can only turn away individuals and families experiencing homelessness from program entry for the following reasons:
  - Household make-up (provided it does not violate HUD's Fair Housing and Equal Opportunity requirements): singles-only programs can disqualify households with children; families-only programs can disqualify single individuals
  - All program beds are full
  - If the program has in residence at least one family with a child under the age of 18, the program may exclude registered sex offenders and persons with a criminal record that includes a violent crime from the program so long as the child resides in the same housing facility (24 CFR 578.93)
- Programs cannot disqualify an individual or family from entry because of employment status or lack of income.
- Programs cannot disqualify an individual or family because of evictions or poor rental history.
- [Programs should create individualized participation agreements for participants to engage in supportive services.](#)
- Programs will maintain release of information, case notes, and all pertinent demographic and identifying data in HMIS as allowable by program type. Paper files should be maintained in a locked cabinet behind a locked door with access strictly reserved for case workers and administrators who need said information.

## **TRANSITIONAL HOUSING**

**STANDARD:** The program will provide safe, affordable housing that meets clients' needs in accordance with the client intake process and guidelines set by the US Department of Housing and Urban Development.



## **Benchmarks**

- When providing or arranging for housing, the program must consider the needs of the individual or family experiencing homelessness.
- The program provides assistance in accessing suitable permanent housing.
- The program may provide assistance with moving costs (24 CFR 578.53(e)(2)).
- The program has participants sign occupancy agreements or subleases, regardless of whether the agency owns the housing units or not (24 CFR 578.77(a)).
- The program enters into an agreement with clients for at least one month and up to 24 months (24 CFR 578.79). The program should work with the client to minimize their time in temporary housing and consistently and regularly evaluate and engage them for permanent housing placement.
- In accordance with 24 CFR 578.77, programs do not have to charge clients occupancy fees. However, if the program does charge occupancy fees, the program must impose them on every household served by the program. If the program charges occupancy fees, they may not exceed the highest of:
  - 30% of the household's monthly adjusted gross income;
  - 10% of the household's monthly income; or
  - If the household receives payments for welfare assistance from a public agency wherein part of the payment is for housing costs, the portion of the payment designated for housing costs.

Programs must outline the occupancy payment policy as part of its program manual.

- Programs providing housing to families may not deny housing to a family on the basis of age and sex of a child under the age of 18 years of age.
- Programs must actively participate in their community's coordinated entry process.
- Programs must review and ensure that their program policies do not create undue barriers to program entry and program participation.

## **CASE MANAGEMENT SERVICES**

**STANDARD:** The program shall provide access to case management services by trained staff to each individual and/or family in the program.

### **Benchmarks (Standard available services)**

- Transitional housing programs provide regular and consistent case management to clients based on the individual's or family's specific needs. Case management includes:
  - Assessing, planning, coordinating, implementing, and evaluating the services delivered to the client(s).
  - Assisting clients to maintain their transitional housing placement in a safe manner and understand how to get along with fellow residents.
  - Helping clients to create strong support networks and participate in the community, as they desire.
  - Creating a path for clients to permanent housing as quickly as possible through providing rapid rehousing or permanent supportive housing or a connection to another community program that provides these services.
  - Using the Case Management Tool for ongoing case management and measurement of acuity over time, determining changes needed to better serve residents.
- Programs provide individualized budgeting and money management services to clients as needed.



- Program staff or other programs connected to the transitional housing program through a formal or informal relationship will assist clients in accessing cash and non-cash income through employment, mainstream benefits, childcare assistance, health insurance, and other sources.
- Program staff will connect families with children to appropriate educational services including, but not limited to, early Head Start, Head Start, Public Pre-K, community colleges, and others. Staff will liaise with the local homeless school liaison to ensure coordination, allowing youth to attend their school of origin and receive eligible educational and other services allowable under McKinney-Vento.

**Benchmarks (Optional but recommended services, often from other providers)**

- Representative payee services.
- Basic life skills, including housekeeping, grocery shopping, menu planning and food preparation, consumer education, transportation, obtaining vital documents (social security cards, birth certificates, school records).
- Relationship-building and decision-making skills.
- Education services such as GED preparation, post-secondary training, and vocational education.
- Employment services, including career counseling, job preparation, job search, resume-building, dress and maintenance.
- Behavioral health services such as relapse prevention, crisis intervention, medication monitoring and/or dispensing, outpatient therapy and treatment.
- Physical health services such as routine physicals, health assessments, and family planning.
- Legal services related to civil (rent arrears, family law, uncollected benefits) and criminal matters (warrants, minor infractions).
- Ongoing assistance with food, clothing, and transportation.

**TERMINATION**

**STANDARD:** Termination should be limited to only the most severe cases. Programs will exercise sound judgment and examine all extenuating circumstances when determining if violations warrant program termination (24 CFR 578.91). BoS recommends programs work with other community service providers to develop a board to hear client grievances.

**Benchmarks**

- The program may terminate services when clients violate the terms of their occupancy agreement.
- If the program terminates services for reasons other than the above, it is responsible for providing evidence that it considered extenuating circumstances and made significant attempts to help the client continue in the program. This includes a formal process, recognizing the rights of the individuals receiving assistance under the due process of law. This process, at a minimum, must consist of:
  - Providing the client(s) with a written copy of the program rules and the termination process before the client(s) begins receiving assistance and keep a copy signed by the client in the file.
  - Written notice to the client containing a clear statement of the reasons for termination.



- Review of the decision, in which the client(s) can present written or oral objections before a person other than the person who approved the termination decision.
- Prompt written notice of the final decision to the client.
- Programs follow a termination process and have a process for appeals/grievances in accordance with 24 CFR 578.91 in regard to due process. Programs provide this information to clients at the beginning of the program and if/when the termination of services occurs with a signed copy kept in the client file.
- Termination does not bar the program from providing further assistance at a later date to the same individual or family. Programs should never carry a “barred list” of clients unless said client has presented a terminal risk to staff or other clients.
- Programs should not terminate clients from services because of entry into an institution (medical, mental health, substance abuse, jail). Providers can maintain open units for individuals and families who are institutionalized for a maximum of 90 days.

### **FOLLOW-UP SERVICES**

**STANDARD:** Programs must ensure a continuity of services to all clients exiting their programs. Agencies can provide these services directly or through referrals to other agencies.

#### **Benchmarks**

- Using the Case Management Tool, programs work with clients to develop exit plans for clients whose forward progress demonstrates potential success (acuity score threshold to be determined by the community’s coordinated entry system) in market rate or subsidized housing. Programs should work with clients to exit when they meet this threshold score even if they have not reached the maximum number of months in the program.
- Programs prioritize the development of exit plans for each client to ensure continued permanent housing stability and connection to community resources, as desired.
- Programs should attempt to follow up with clients through verbal or written contact at least once after the client exits services. A program may provide follow-up services to include identification of additional needs and referral to other agency and community services.

### **CLIENT AND PROGRAM FILES**

**STANDARD:** Transitional housing programs will keep all client files up-to-date and confidential to ensure effective delivery and tracking of services

#### **Benchmarks**

- Client files should, at a minimum, contain all information and forms required by HUD (24 CFR 578.103), service plans, case notes, referral lists, and service activity logs, including services provided directly by the transitional housing program and indirectly by other community service providers. Programs should have:
  - Documentation of homeless status (see above for the priority of types of documentation).
  - Determination of ineligibility, if applicable, which shows the reason for this determination.
  - Annual income evaluation.
  - Program participant records.



- Documentation of using the community's coordinated entry system.
- Compliance with shelter and housing standards.
- Services and assistance provided.
- Expenditures and match.
- Conflict of interest/code of conduct policies.
- Other Federal requirements, if applicable.
- Confidentiality procedures.
- All client information should be entered in the HMIS@NCCEH in accordance with data quality, timeliness, and additional requirements found in the agency and user participation agreements. At a minimum, programs must record the date the client enters and exits the program, HUD required data elements, and an update of clients' information as changes occur.
- Program must maintain a release of information form for clients to use to indicate consent in sharing information with other parties. This cannot be a general release but one that indicates sharing information with specific parties for specific reasons.
- Programs must maintain the security and privacy of written client files and shall not disclose any client-level information without written permission of the client as appropriate, except to program staff and other agencies as required by law. Clients must give informed consent to release any client identifying data to be utilized for research, teaching, and public interpretation.
- All records pertaining to HUD CoC funds must be retained for the greater of 5 years or the participant records must be retained for 5 years after the expenditure of all funds from the grant under which the program participant was served. Agencies may substitute original written files with microfilm, photocopies, or similar methods. Records pertaining to other funding sources must adhere to those record retention requirements.

## **FAIR HOUSING POLICY**

**STANDARD:** Transitional housing programs, as part of their work to assist households access permanent housing resources, will support households who may be working with housing providers who have violated Federal, state, and/or local Fair Housing laws.

### **Benchmarks**

- Understand and implement the NC Balance of State CoC's Fair Housing Policy.
- Post the Fair Housing Public Notice (see Appendix A of the CoC's Fair Housing Policy).
- Assist households who may need to ask for a reasonable accommodation or a reasonable modification to fully access available housing units.
- Assist households to locate and choose permanent housing based on their needs and desires, ensuring they have a range of choices in various geographic areas regardless of race, color, national origin, religion, sex, familial status, and disability.
- Provide information to households who believe a housing provider has violated Federal, state, and/or local Fair Housing laws on how to connect to legal resources and file a complaint. See the CoC Fair Housing Policy for information on how to file a complaint.
- Inform the local or state participating jurisdiction or consortium that a housing complaint has been filed with HUD. See the CoC Fair Housing Policy for information on how to find the participating jurisdiction or consortium.



- Submit pertinent household information to NCCEH within 5 business days of filing a housing complaint. See the CoC Fair Housing Policy for information on how to submit information to the CoC.

### **EVALUATION AND PLANNING**

**STANDARD:** Transitional housing programs will work with the community to conduct ongoing planning and evaluation to ensure programs continue to meet community needs for individuals and families experiencing homelessness.

#### **Benchmarks**

- Agencies maintain written goals and objectives for their services to meet outcomes required by the HUD CoC program or other funding sources.
- Programs review case files of clients to determine if existing services meet their needs. As appropriate, programs revise goals, objectives, and activities based on their evaluation.
- Programs conduct, at a minimum, an annual evaluation of their goals, objectives, and activities, making adjustments to the program as needed to meet the needs of the community.
- Programs regularly review project performance data in HMIS to ensure reliability of data. Programs should review this information, at a minimum, quarterly.
- Programs that regularly operate below 100% utilization of their beds must review their eligibility criteria and program rules to ensure they are not screening out households who need program beds to transition into permanent housing.
- Program must follow other Federal requirements for CoC programs at 24 CFR 578.99, as applicable.

