

**COUNTY OF SAN DIEGO
HEALTH AND HUMAN SERVICES AGENCY
HIV PLANNING GROUP**

**HOUSING SERVICES
SERVICE STANDARDS
FOR RYAN WHITE CARE AND TREATMENT**

March 2017



Revised 3/14/17



Table of Contents

Service Category Definition.....	3
Purpose and Goals.....	3
Intake.....	3
Key Service Components and Activities.....	3
Personnel Qualifications.....	4
Assessment and Service Plan.....	5
Transition and Discharge.....	5
Case Closure.....	6
Client Rights and Responsibilities.....	7
Grievance Process.....	7
Cultural and Linguistic Competency.....	7
Privacy and Confidentiality.....	8

Housing Services

Service Category Definition

Housing services provide limited short-term assistance to support emergency, temporary or transitional housing to enable clients or families to gain or maintain outpatient/ambulatory health services. Housing-related referral services include assessment, search, placement, advocacy and the fees associated with these services.

Purpose and Goals

Housing services are essential for an individual or family to gain or maintain access and compliance with HIV-related medical care and treatment. The goal of housing services is to prevent negative client outcomes as a result of housing difficulties by providing a stable living environment which enables clients to access or maintain medical and other necessary care and treatment services, and improve compliance with medical regimens that improve health outcomes.

Intake

Case managers providing case management services are responsible for determining clients' need and eligibility for housing assistance. Client has to provide valid proof of the qualifying one-time housing emergency and has no access other subsidized housing, either tenant or project-based. Case managers will coordinate client intake and initiation of housing assistance services. Case managers may also provide information on other relevant services during the intake process. The complete Intake process is required for all clients. If required information and documentation is already on file for a client, extensive intake is not required.

Key Service Components and Activities

Housing services include housing-related referrals such as:

- Housing assessments
- Housing searches
- Housing placement and advocacy

Financial assistance with temporary or transitional housing is also available. The fees associated with all of these services are also included.

Eligible housing includes housing that provides some form of medical or supportive services (such as residential substance use disorder services or mental health services, residential foster care, or assisted living residential services) and housing that does not provide direct medical or supportive services, but is essential for a client or family to gain or maintain access to and compliance with HIV-related outpatient/ambulatory health services and treatment.

Housing services are transitional in nature and for the purposes of moving or maintaining a client or family in a long-term, stable living situation. Assistance is not provided on a permanent basis and is accompanied by a strategy to identify, relocate, and/or ensure the client or family is moved to, or capable of maintaining, a long-term, stable living situation.

Housing services funds are not provided in the form of direct cash payments to clients and cannot be used for mortgage payments.

Housing assistance is provided in the form of:

- **Emergency housing assistance** which offers temporary assistance with housing needs, including short-term hotel/single room occupancy (SRO) stays, payment of rent for individuals facing eviction, or security deposits; requests for SRO payments shall be prioritized over requests for rental assistance and security deposits.
- **Partial Assistance Rent Subsidy (PARS) program** is a short-term, forty-eight (48) month maximum partial rental assistance program designed to transition clients to more stable housing arrangements. PARS provides 40% of a client’s monthly rental costs not to exceed 40% of the fair-market rent for San Diego County as determined by the U.S. Department of Housing and Urban Development (HUD)

All clients are required to work with their case managers to develop a care plan with the goal of eventual self-sufficiency. Individuals on PARS can continue past the 48 month enrollment cap providing adherence to their individual care plan can be demonstrated. There is no lifetime cap per client.

Standard	Measure
Staff ensures clients’ eligibility and needs	Documentation of interviews and assessments all potential clients utilizing a standard client eligibility screening tool
Staff maintains records of eligibility, intake and assessments	Documentation of eligibility, intake, comprehensive assessments, individual care plans, and progress of clients on a standard housing services form
	Maintain a single record for each client
Staff ensures clients are connected to the appropriate services when needed	Documentation of all services provided/offered to clients
	Completion of the Client Transition Plan for deemed ineligible for housing services or deemed ready to be transitioned out of these services

Personnel Qualifications

Services are provided by a case manager who possesses a minimum of a high school diploma or GED equivalency and a minimum of two years professional or volunteer experience. The case worker should also have work or volunteer experience in the field of HIV/AIDS that demonstrates competency to provide case management to persons with HIV/AIDS.

Case managers who provide housing services will also possess a comprehensive knowledge of current local, state, and federal housing programs and how to access these programs.

Standard	Measure
Staff meet minimum qualifications	Documentation of appropriate education/experience
Staff have clear understanding of job responsibilities	Documentation of current job descriptions on file that are signed by staff and appropriate supervisors
Staff will meet housing experience qualifications	Documentation that shows that housing related referrals are provided by case managers or other professional(s) who possess a comprehensive knowledge of local, state, and federal housing programs and how to access these programs

Standard	Measure
Staff are competent	Documentation that confirms staff is up to date with current regulations regarding local, state, and federal housing programs and how to access these programs

Assessment and Service Plan

Assessment: Case managers will determine the need for housing assistance. Clients will need to submit proof of the need (i.e., eviction warning notices). Housing assistance funds can only be used as a last resort for complete or partial assistance with housing payments.

Housing plan: Case managers will develop individualized housing plans for clients covering each client will receive short term, transitional and emergency housing services. Each plan will include a strategy to assist the client in obtaining stable housing.

Standard	Measure
Staff will ensure that all services provided are appropriate to meet each client’s needs and are provided for a limited period for a predetermined limited number of times	Documentation that shows: <ul style="list-style-type: none"> • All services provider are for short-term assistance to support emergency, temporary, or transitional housing to enable an individual or family to gain or maintain medical care • Type of housing-related services provided including; housing assessment, search, placement, advocacy, and the fees associated with them • Mechanisms are in place to allow newly identified clients access to housing services
Staff will develop individual’s plans for each client to assist them in finding and securing long-term housing solutions	A plan showing that each client receives assistance designed to help him/her obtain stable long-term housing, through a strategy to identify, relocate, and/or ensure the individual or family is moved to or capable of maintaining a stable long-term living situation
Staff shall adhere to policies and procedures on client housing	Documentation of policies and procedures to provide individualized written housing plan covering each client receiving short term, transitional and emergency housing services
Staff shall adhere to policies regarding the prohibition of direct payments to clients	Documentation of policies that prohibit direct payments to recipients for rent or mortgage payments

Transition and Discharge

Clients will be disenrolled from housing services once housing has been stabilized. Other criteria for disenrollment include:

- Client has died
- Client requests to be disenrolled

- Client cannot be located within 120 days after repeated efforts including attempted written, oral and personal contact
- Client relocates outside of San Diego County
- Client demonstrates repeated non-compliance or inappropriate behavior in violation of specific written policies of the provider especially with regard to violation of confidentiality of other client information
- Client is incarcerated longer than 30 days
- Client does not qualify for housing services based on eligibility requirements

Standard	Measure
Staff will document reasons for disenrollment in the client record	Documentation of reason for disenrollment
Staff will determine client eligibility for other programs and re-instatement in Ryan White housing services	Documentation of “inactive status” and maintenance of records and contact information to facilitate rapid re-enrollment, as appropriate

Case Closure

Case closure is a systematic process for discharging clients from housing services. The process includes formal client notification regarding pending case closure and the completion of a case closure summary to be maintained in the client chart. Clients are considered active providing they receive housing services at least once within each sixty-day period. Case closure may occur for the following reasons:

- Successful attainment of stable housing
- Client relocation outside San Diego County
- Continued client non-adherence to service plan
- An inability to contact a client
- Client-initiated termination of service
- Unacceptable client behavior
- Client’s needs cannot be adequately addressed by the service

A Case Closure Summary will be completed for each client who has terminated treatment. The summary includes the following documentation:

- Course of treatment
- Discharge diagnosis
- Referrals
- Reason for termination
- Documentation of attempts to contact client, including written correspondence and results of these attempts (For those clients who drop out of treatment without notice)

Standard	Measure
Client's case is terminated when medical care is stabilized and client no longer needs services or is determined to be non-compliant	Completed Case Closure Summary

Client Rights and Responsibilities

All providers will have written policies and procedures for a complaint process. The policy will identify staff responsible, an appeal process, tracking system, follow-up procedures, and a timeline. Housing services providers will use relevant Federal, State and County regulations for investigating and resolving complaints. A copy of the complaint policy will be conspicuously displayed. Complaints and investigation results will be forwarded to the County within 24 hours of both the receipt and resolution of the complaint.

Standard	Measure
Providers have policies regarding the rights and responsibilities of housing services clients	Documentation of policies and procedures for a complaint process

Grievance Process

All housing services providers will maintain written grievance policies. The grievance policy will be posted in a prominent location with information on how clients may also contact the County of San Diego's HIV, STD and Hepatitis Branch (HSHB) as an alternative to completing the form. Forms inadvertently collected by providers will immediately be forwarded to the address on the form.

Housing services providers will also post a copy of the HSHB Client Service Evaluation form ("goldenrod") in a prominent place. Copies of the form will be available for clients upon request with a mechanism for the clients to mail the form to HSHB for review.

Standard	Measure
Clients' rights are protected and clients have access to a grievance/complaint resolution process and are made aware	Documentation of a grievance policy
Clients have the ability to file a grievance or complaint	Verification of visible goldenrod (English and Spanish) placement in client sites

Cultural and Linguistic Competency

Cultural competency as defined by the HIV Planning Group is: "Recognizing the differences in physical and emotional life challenges, including disabilities of all kinds, culture and ethnicity, religion and spirituality, and in histories, traditions and languages. More specifically, all providers must have the ability to provide appropriate and acceptable services to all potential and current clients, including people of color, gay men, lesbians, transsexuals, transgender individuals, former and active substance abusers, persons with mental health concerns, persons of differing abilities, and others. Providers who serve any of these groups will make reasonable accommodations in service provisions."

All providers must include a requirement in their policies that all staff, board members and volunteers possess knowledge of the Ryan White Part A program and the Americans with Disabilities Act. Program policies and procedures regarding cultural competency will address cultural sensitivity, diversity, and inclusiveness. Policies on cultural competency are given to clients at admission and posted in a prominent place. Provider's admission procedures will assess client access issues, including cultural needs, physical accessibility, and service location.

Providers must assess and ensure the training and competency of individuals who deliver language services to assure accurate and effective communication between clients, staff and volunteers transcend language barriers and avoid misunderstanding and omission of vital information. Staff and volunteers working directly with clients must receive a minimum of four hours of cultural sensitivity training each year.

Providers will also identify staff and volunteers who can provide bilingual/bicultural services to individuals who need or prefer to communicate in Spanish. If there are no staff members or volunteers who can perform this function, the provider will develop alternate methods to ensure language appropriate services

are available. Providers will employ proactive strategies such as partnering with other local organizations to develop a diverse workforce.

Standard	Measure
Agency policies will address cultural and linguistic competency	Documentation on policies on cultural competency
Staff will comply with American Disabilities Act (ADA)	Completed form/certification on file
Staff and volunteers will receive annual training on cultural competency	Documentation of all staff/volunteer trainings on cultural competency
	Copies of the curriculum and handouts etc. kept on file (If training is provided by the provider)
Staff and volunteers are bilingual and can address the language needs of the populations they serve. If there are no appropriate bilingual people on staff, a plan is in place to ensure language needs are met	Copy of written plan to address
Provider will have written and posted materials in the appropriate languages for the communities being served are available and visible to clients	Posted documentation inspected and noted during routine site visits

Privacy and Confidentiality

All providers must develop written policies and procedures that address security, confidentiality, access and operations. In addition providers must ensure that:

- All physical case files are stored in a locked cabinet or room and electronic files are secured.
- All activities that relate to client data will have appropriate safeguards and controls in place to ensure information security.
- Case files not left unattended.
- Case files and records are not removed from the service site without the case management supervisor's written agreement.
- Case files and records are locked at night and not left on desks or in unlocked desk drawers.
- When a case file is removed from the central filing area, it will be booked out via a clear administrative procedure that can be traced to its temporary location.

In addition, providers will also ensure that:

- All employees and volunteers working under this agreement have signed a confidentiality agreement.
- All staff orientation materials include client confidentiality policies and procedures and indicate how they are communicated to staff and volunteers.
- All training logs and personnel files demonstrate that staff and volunteers have received adequate training on privacy and confidentiality, upon initial hire and annually thereafter. Training will address HIPAA, security measures and other topics related to client confidentiality.

All providers must ensure that written policies regarding confidentiality are presented to and signed by clients and maintained in clients' case files. A release of Information form will also be signed by clients as needed. Prior to releasing any client information, providers must obtain written consent which includes:

- The name of the program or person permitted to make the disclosure;
- The name of the client;
- The purpose and content (kind of information to be disclosed) of the disclosure;
- Client’s signature or legal representative’s signature.

All providers will make available a private, confidential environment for clients to discuss their cases, especially when addressing fear and concern about their diagnosis and disclosure of their HIV status. Providers will inform clients that they will maintain confidentiality of other persons with HIV infection.

Standard	Measure
Staff will develop written policies and procedures that address security, confidentiality, access and operations	Copies of policies and procedures
All files are secured	Inspected and noted during routine site visits
All staff and volunteers have undergone a thorough background check	Documentation of background checks
Staff and volunteers will receive training on privacy and confidentiality	Documentation of all staff/volunteer trainings on privacy and confidentiality
	Copies of the curriculum and handouts etc. kept on file (If training is provided by the provider)

