

## Exhibit 1:

# Continuum of Care

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### Developing a Continuum of Care

HUD believes the best approach for alleviating homelessness is through a community-based process that provides a comprehensive response to the different needs of homeless individuals and families. To this end, HUD is encouraging localities to shape a comprehensive and coordinated housing and service delivery system called a Continuum of Care.

A Continuum of Care approach helps communities plan for and provide a balance of emergency, transitional, and permanent housing and service resources to address the needs of homeless persons so they can make the critical transition from the streets to jobs and independent living.

The fundamental components of a **Continuum of Care** system are:

- Homeless prevention
- Outreach and assessment to identify an individual's or family's needs and make connections to facilities and services.
- Immediate (emergency) shelter and safe, decent alternatives to the streets.
- Transitional housing with appropriate supportive services to help people reach independent living. Such services include job training and placement, substance abuse treatment, short-term mental health services, and independent living skills training.
- Permanent housing or permanent supportive housing arrangements.

While many homeless people will not need access to all components, each component must be present and coordinated within a community for a Continuum of Care to be viable. A Continuum of Care system serves the specific needs of all homeless subpopulations within the community. It is coordinated with as inclusive a group of community representatives as possible, such as nonprofit organizations (including faith-based and community-based organizations), State and local governmental agencies, public housing authorities (PHAs), service providers, local businesses and business associations, law enforcement, private funders and homeless or formerly homeless persons.

While the Continuum of Care approach can serve as a framework to bring homeless housing and services and their respective providers together, only the community—not HUD—can design a strategy that works best.

As part of the development and ongoing refinement of a Continuum of Care strategy, communities should assess the service and housing needs of homeless persons in their locality, inventory the existing resources available to serve them, and identify gaps. This assessment will help to ensure that the needs of all homeless persons will be met to the extent practicable.

If you are a service or housing provider for homeless persons and you are not currently involved in a Continuum of Care process, feel free to contact your local HUD Field Office to identify other organizations in your area that have established a Continuum of Care system and may be applying for funding.

### Choosing a Geographic Area

The geographic area included in your Continuum of Care system may be composed of one or more cities or counties. The geographic area of one Continuum of Care system should not overlap any portion of the service area of any other system. If Continuum of Care systems geographically overlap to the extent that they are competing with each other, projects in the application that receive the highest score out of the possible 60 points for Continuum of Care will be eligible for up to 40 points under Need. Projects in the competing application with the less effective Continuum of Care system will be eligible for only 10 points under Need. In no case will the same geography be used more than one time in assigning Need points. The local HUD Field Office can help determine if any of the area covered by one Continuum of Care system is also likely to be claimed under another Continuum of Care in this competition.

**In determining what jurisdictions to include in a Continuum of Care strategy, you should only include those jurisdictions that are fully involved in the development and implementation of the strategy.** You should be aware that the larger the area included in a Continuum of Care strategy, the larger the pro rata need share that will be allocated to the strategy area. However, it would be a mistake to include jurisdictions that are not fully involved in the development and implementation of the Continuum of Care strategy, since this would adversely affect the Continuum of Care score. Because most rural counties have extremely small pro rata need shares, they are strongly encouraged to consider working with contiguous counties to develop a region-wide Continuum of Care strategy covering the combined service areas of these counties.