

**Introduced by Assembly Member Haney  
(Principal coauthor: Assembly Member Stefani)**

January 16, 2025

An act to add Division 10.95 (commencing with Section 11999.45) to the Health and Safety Code, and to amend Section 8255 of the Welfare and Institutions Code, relating to public health.

## LEGISLATIVE COUNSEL'S DIGEST

AB 255, as introduced, Haney. The Supportive-Recovery Residence Program.

Existing law establishes the California Interagency Council on Homelessness to oversee the implementation of Housing First guidelines and regulations, and, among other things, identify resources, benefits, and services that can be accessed to prevent and end homelessness in California. Existing law requires a state agency or department that funds, implements, or administers a state program that provides housing or housing-related services to people experiencing homelessness or who are at risk of homelessness to revise or adopt guidelines and regulations to include enumerated Housing First policies. Existing law specifies the core components of Housing First, including services that are informed by a harm-reduction philosophy that recognizes drug and alcohol use and addiction as a part of tenants' lives and where tenants are engaged in nonjudgmental communication regarding drug and alcohol use.

This bill would authorize state programs to fund supportive-recovery residences, as defined, that emphasize abstinence under these provisions as long as the state program meets specified criteria, including that the applicant for funding provides certification from the county in which the project is located indicating that the project would not result in supportive-recovery residence units exceeding 25% of the total inventory of permanent supportive housing within the county. The bill would require a county, upon request, to determine whether the aforementioned condition is satisfied using specified data and, if satisfied, provide the certification to the applicant. By imposing additional duties on counties, this bill would impose a state-mandated local program.

This bill would specify requirements for applicants seeking funds under these programs and would require the state to perform periodic monitoring of select supportive-recovery residence programs to ensure that the supportive-recovery residences meet certain requirements, including that core outcomes of the supportive-recovery housing emphasize long-term housing stability and minimize returns to homelessness. The bill would also prohibit eviction on the basis of relapse, as specified. The bill would require, if a tenant is no longer interested in living in a supportive-recovery residence or is at risk of eviction, that the supportive-recovery residence provide assistance in accessing housing operated with harm-reduction principles that is also permanent housing.

Existing law requires the State Department of Health Care Services to license and regulate facilities that provide residential nonmedical services to adults who are recovering from problems related to alcohol, drug, or alcohol

and drug misuse or abuse, and who need alcohol, drug, or alcohol and drug recovery treatment or detoxification services. Existing law also requires the department to certify alcohol and other drug treatment recovery services, as specified.

This bill would require the department to adopt the most recent standards approved by the National Alliance for Recovery Residences, the Substance Abuse and Mental Health Services Administration, or other equivalent standards as the minimum standard for supportive-recovery residences that receive public funds under these provisions. The bill would require the department to establish a separate process for determining if the supportive-recovery residence complies with the core components of Housing First. The bill would authorize the department to charge a fee for certification of a supportive-recovery residence in an amount not to exceed the reasonable cost of administering the program, not to exceed \$1,000, and would establish the Supportive-Recovery Residence Program Fund for collection of the fee, to be available upon appropriation by the Legislature.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

## **Digest Key**

Vote: majority Appropriation: no Fiscal Committee: yes Local Program: yes

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## **Bill Text**

# **THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:**

**SECTION 1.** Division 10.95 (commencing with Section 11999.45) is added to the Health and Safety Code, to read:

### **DIVISION 10.95. The Supportive-Recovery Residence Program**

11999.45. For the purposes of this division, the following definitions shall apply:

- (a) “Department” means the State Department of Health Care Services.
- (b) “Housing first model” means housing that satisfies the core components of Housing First pursuant to Section 8255 of the Welfare and Institutions Code.
- (c) “Supportive-recovery residence” means housing in a residence that serves individuals experiencing, or who are at risk of experiencing, homelessness and who have substance use disorders and that does all of the following:
  - (1) Satisfies the core components of Housing First pursuant to Section 8255 of the Welfare and Institutions Code.
  - (2) Uses substance-use-specific, peer support, and physical design features supporting individuals and families on a path to recovery from substance use disorders.

(3) Emphasizes abstinence.

(4) Offers tenants permanent housing only.

11999.50. (a) The department shall adopt the most recent standards approved by the National Alliance for Recovery Residences (NARR), the Substance Abuse and Mental Health Services Administration, or other equivalent standards as the minimum standard for supportive-recovery residences (SRR) that receive public funding under this chapter.

(b) An SRR that is certified by an organization currently recognized as an affiliate of NARR and has adopted the standards approved by NARR, including a requirement that a federally approved opioid overdose reversal medication be readily available in case of an onsite opioid overdose emergency, may be presumed to have met the minimum best practices operating requirement adopted by the department.

(c) The department shall establish a separate process for determining if the SRR complies with the core components of Housing First pursuant to subdivision (b) of Section 8255 of the Welfare and Institutions Code.

(d) The department may charge a fee for certification of SRRs in an amount not to exceed the reasonable cost of administering the program, not to exceed one thousand dollars (\$1,000).

(e) The Supportive-Recovery Residence Program Fund is hereby established in the State Treasury. All fees collected in accordance with this division shall be deposited in the fund. The moneys in the fund shall be available upon appropriation by the Legislature for the purposes of supporting the certification activities of the department.

(f) This chapter shall not prohibit a county contracting authority from requiring quality and performance standards that are similar to, or that exceed, the standards described in this chapter, when contracting for recovery residence services.

(g) A certifying organization that provides recognition, registration, or certification for supportive-recovery residences may enter into a memorandum of understanding with a county for the purpose of determining if the county's requirements meet or exceed its minimum requirements. A memorandum of understanding may include the granting of reciprocity based upon the requirements of the county contract.

**SEC. 2.** Section 8255 of the Welfare and Institutions Code is amended to read:

8255. For purposes of this chapter:

(a) "Council" means the California Interagency Council on Homelessness, formerly known as the Homeless Coordinating and Financing Council established pursuant to Section 8257.

(b) "Core components of Housing First" means all of the following:

(1) Tenant screening and selection practices that promote accepting applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services.

(2) Applicants are not rejected on the basis of poor credit or financial history, poor or lack of rental history, criminal convictions unrelated to tenancy, or behaviors that indicate a lack of "housing readiness."

(3) Acceptance of referrals directly from shelters, street outreach, drop-in centers, and other parts of crisis response systems frequented by vulnerable people experiencing homelessness.

(4) Supportive services that emphasize engagement and problem solving over therapeutic goals and service plans that are highly tenant-driven without predetermined goals.

(5) Participation in services or program compliance is not a condition of permanent housing tenancy.

(6) Tenants have a lease and all the rights and responsibilities of tenancy, as outlined in ~~California's~~ *the* Civil, Health and Safety, and Government ~~codes.~~ *Codes.*

(7) The use of alcohol or drugs in and of itself, without other lease violations, is not a reason for eviction.

(8) In communities with coordinated assessment and entry systems, incentives for funding promote tenant selection plans for supportive housing that prioritize eligible tenants based on criteria other than “first-come-first-serve,” including, but not limited to, the duration or chronicity of homelessness, vulnerability to early mortality, or high utilization of crisis services. Prioritization may include triage tools, developed through local data, to identify high-cost, high-need homeless residents.

(9) Case managers and service coordinators who are trained in and actively employ evidence-based practices for client engagement, including, but not limited to, motivational interviewing and client-centered counseling.

(10) *(A)* Services are informed by a harm-reduction philosophy that recognizes drug and alcohol use and addiction as a part of tenants’ lives, where tenants are engaged in nonjudgmental communication regarding drug and alcohol use, and where tenants are offered education regarding how to avoid risky behaviors and engage in safer practices, as well as connected to evidence-based treatment if the tenant so chooses.

*(B) State departments or agencies may allow programs to fund supportive-recovery residences, as defined in Section 11999.45 of the Health and Safety Code, that have been certified pursuant to Section 11999.50 of the Health and Safety Code, and use substance-use-specific, peer support, and physical design features supporting individuals and families on a path to recovery from addiction that emphasizes abstinence and promotes self-determination in the recovery process, so long as the state program meets all of the following requirements:*

*(i) The applicant for funding provides certification from the county in which the project is located indicating that the project would not result in supportive-recovery residence units exceeding 25 percent of the total inventory of permanent supportive housing within the county. Upon request, a county shall do both of the following:*

*(I) Using data from the most recent United States Department of Housing and Urban Development housing inventory count, determine whether the project would result in supportive-recovery residence units exceeding 25 percent of the total inventory of permanent supportive housing within the county.*

*(II) If the project would not result in supportive-recovery residence units exceeding 25 percent of the total inventory of permanent supportive housing within the county, provide to the applicant the certification required by this clause.*

*(ii) The state program shall require a grantee under the program, prior to awarding subgrants, to confirm that the subgrantee has achieved successful outcomes in promoting housing retention, similar to rates of housing retention as harm-reduction programs.*

*(iii) The state performs periodic monitoring of select recovery housing programs to ensure that the supportive-recovery residence complies with the following:*

*(I) The supportive-recovery residence otherwise complies with all other components of Housing First in this section, including low barrier to entry.*

*(II) Participation in a program is self-initiated.*

*(III) Core outcomes emphasize long-term housing stability and minimize returns to homelessness.*

*(IV) Policies and operations ensure individual rights of privacy, dignity and respect, and freedom from coercion and restraint, as well as continuous, uninterrupted access to the housing.*

*(V) Holistic services and peer-based recovery supports are available and directly communicated to all program participants along with services that align with participants' choice and prioritization of personal goals of sustained recovery and abstinence from substance use.*

*(VI) The housing abides by local and state landlord-tenant laws governing grounds for eviction.*

*(VII) Relapse is not a cause for eviction from housing and tenants receive relapse support.*

*(VIII) Eviction from a supportive-recovery residence shall only occur when a tenant's behavior substantially disrupts or impacts the welfare of the recovery community in which the tenant resides. A tenant may apply to reenter the housing program if expressing a renewed commitment to living in a housing setting targeted to people in recovery with an abstinence focus. Presence of a roommate or roommates shall not be a valid basis for eviction.*

*(IX) If a tenant is no longer interested in living in a supportive-recovery residence model or the tenant is at risk of eviction, the housing program provides assistance in accessing housing operated with harm-reduction principles that is also permanent housing. If an eviction proceeding is initiated for an alleged violation of a lease provision agreement as described in subclause (VIII), the subgrantee shall submit documentation of the alleged lease violation to the local continuum of care and any other grantor.*

(11) The project and specific apartment may include special physical features that accommodate disabilities, reduce harm, and promote health and community and independence among tenants.

(c) "Homeless" has the same definition as that term is defined in Section 91.5 of Title 24 of the Code of Federal Regulations.

(d) (1) "Housing First" means the evidence-based model that uses housing as a tool, rather than a reward, for recovery and that centers on providing or connecting homeless people to permanent housing as quickly as possible. Housing First providers offer services as needed and requested on a voluntary basis and ~~that~~ do not make housing contingent on participation in services.

(2) (A) "Housing First" includes time-limited rental or services assistance, so long as the housing and service provider assists the recipient in accessing permanent housing and in securing longer term rental assistance, income assistance, or ~~employment~~. *employment, and the housing otherwise meets the core components identified in this section.*

(B) For time-limited, supportive services programs serving homeless youth, programs should use a positive youth development model and be culturally competent to serve unaccompanied youth under 25 years of age. Providers should work with the youth to engage in family reunification efforts, where appropriate and when in the best interest of the youth. In the event of an eviction, programs shall make every effort, which shall be documented, to link tenants to other stable, safe, *and* decent housing options. Exit to homelessness should be extremely rare, and only after a tenant refuses assistance with housing search, location, and move-in assistance.

(e) "State programs" means any programs a California state agency or department funds, implements, or administers for the purpose of providing emergency shelter, interim housing, housing, or housing-based services to people experiencing homelessness or at risk of homelessness, with the exception of federally funded programs with requirements inconsistent with this chapter.

*(f) "Supportive-recovery residence" has the same definition as in Section 11999.45 of the Health and Safety Code.*

**SEC. 3.** To the extent that this act has an overall effect of increasing the costs already borne by a local agency for programs or levels of service mandated by the 2011 Realignment Legislation within the meaning of Section 36 of Article XIII of the California Constitution, it shall apply to local agencies only to the extent that the state provides annual funding for the cost increase. Any new program or higher level of service provided by a local

agency pursuant to this act above the level for which funding has been provided shall not require a subvention of funds by the state or otherwise be subject to Section 6 of Article XIII B of the California Constitution.