



## County of San Bernardino

### DELEGATED AUTHORITY – DOCUMENT REVIEW FORM

This form is for use by any department or other entity that has been authorized by Board of Supervisors/Directors action to execute grant applications, awards, amendments or other agreements on their behalf. All documents to be executed under such delegated authority must be routed for County Counsel and County Administrative Office review prior to signature by designee.

**Note: This process should NOT be used to execute documents under a master agreement or template, or for construction contract change orders. Contact your County Counsel for instructions related to review of these documents.**

Complete and submit this form, along with required documents proposed for signature, via email to the department's County Counsel representative and Finance Analyst. If the documents proposed for signature are within the delegated authority, the department will submit the requisite hard copies for signature to the County Counsel representative. Once County Counsel has signed, the department will submit the signed documents in hard copy, as well as by email, to CAO Special Projects Team for review. If approved, the department will be provided routing instructions as well as direction to submit one set of the executed documents to the Clerk of the Board within 30 days.

**For detailed instructions on submission requirements, reference Section 7.3 of the Board Agenda Item Guidelines as the Delegation of Authority does not eliminate the document submission requirements.**

Department/Agency/Entity: Community Development and Housing Agency

Contact Name: Gary Hallen

Telephone: 387-4411

Agreement No.: N/A

Amendment No.: \_\_\_\_\_

Date of Board Item 12/17/19

Board Item No.: 20

Name of Contract Entity/Project Name: Supportive Services Plan/Liberty Lane Redlands Supportive Housing, L.P.

Explanation of request/Special Instructions:

CEO signature required on Supportive Services Plan to accompany the competitive No Place Like Home state funding program application for the Liberty Lane affordable housing development to be developed by A Community of Friends' Redlands Supportive Housing, L.P.

**Insert check mark that the following required documents are attached to this request:**

- ☒ Documents proposed for signature (Note: For contracts, include a signed non-standard contract coversheet for contracts not submitted on a standard contract form).
- ☒ Board Agenda item that delegated the authority

|                                     |   |   |
|-------------------------------------|---|---|
| Department Routed to County Counsel | County Counsel Name:<br>Suzanne Bryant                                | Date Sent:<br>12/19/19  |
| Reviewing County Counsel Use Only   | Review Date <u>12-19-19</u><br><br><u>Suzanne Bryant</u><br>Signature | Determination:<br><input checked="" type="checkbox"/> Within Scope of Delegated Authority<br><input type="checkbox"/> Outside Scope of Delegated Authority  |
| CAO-Special Projects Use Only       | Review Date <u>12-23-19</u><br><br><u>Danette Teulor</u><br>Signature | Disposition:<br><input checked="" type="checkbox"/> Route for signature to:<br>____Chair <input checked="" type="checkbox"/> CEO ____Department<br><input type="checkbox"/> Return to Department for preparation of agenda item |

## Supportive Services Plan (SSP) §203

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Instructions: All Projects that include Supportive Housing units must complete a Supportive Services Plan for the NPLH units. The checklist below shall serve as a guide to ensure that the Supportive Services Plan is complete.

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|------------------|--|
| <b>Part I.</b>   | <b>Tenant Selection Narrative</b>  |
| Yes              | Section 1: Tenant Selection Criteria   |
| <b>Part II.</b>  | <b>Lead Service Provider (LSP) Detail</b>                                    |
| Yes              | Section 1: Lead Service Provider (LSP)                                       |
| Yes              | Section 2: Best Practices in Service Delivery                                |
| <b>Part III.</b> | <b>Supportive Services Detail</b>  |
| Yes              | Section 1: Supportive Services Chart   |
| Yes              | Section 2: Supportive Services Coordination                                  |
| Yes              | Section 3: Verification from Appropriate Public or Non-Profit Funding Agency |
| <b>Part IV.</b>  | <b>Tenant Safety and Engagement</b>  |
| Yes              | Section 1: Tenant Engagement   |
| Yes              | Section 2: Safety and Security   |
| <b>Part V.</b>   | <b>Staffing</b>  |
| Yes              | Section 1: Staffing Chart  |
| Yes              | Section 2: Staffing Ratios   |
| <b>Part VI.</b>  | <b>Supportive Services Budget</b>  |
| Yes              | Section 1: Supportive Services Budget Table & Cost Per Unit Table            |
| Yes              | Section 2: Budget Narrative and Funding Commitments                          |
| Yes              | Section 3: Service Funding History Table                                     |
| <b>Part VII.</b> | <b>Collaboration and Reporting</b>   |
| Yes              | Section 1: Collaboration   |
| Yes              | Section 2: Reporting Requirements Certification                              |

### Part I. Tenant Selection Narrative

This section asks for a detailed description of the tenant selection process. Using the titled sections below, the narrative should be as specific as possible, delineating the roles of property management and the Lead Service Provider and how these functions will be coordinated. Your description should clearly and conclusively document processes to ensure NPLH tenant households occupy NPLH Assisted Units following tenant selection and Housing First Practices.

#### Section 1: Tenant Selection Criteria

##### 1. Target Tenant Population and Eligibility Criteria

a. Do you use Housing First Practices?

Yes

b. Describe the criteria that will be used to ensure that tenants are eligible to occupy the NPLH Assisted Units.

In accordance with the County's already existent practice of using the Coordinated Entry System (CES) to serve its homeless population, Liberty Lane will also utilize the Coordinated Entry System for household referrals. The project will prioritize referrals in the following order: (1) Chronically Homeless, (2) Currently Homeless, and (3) At-Risk of Chronic Homelessness. San Bernardino County's CES complies with HUD Notice CPD 16-11 and prioritizes those with the longest lengths of homelessness and highest severities of service need. In the absence of viable tenant referrals who meet the definitions of chronically homeless or currently homeless the project will serve those at risk of chronic homelessness with the highest severity of service need as identified and referred by the CES.

Supportive services and case management will be provided for the NPLH designated units by San Bernardino County Department of Behavioral Health. In addition, ACOF will be contracting with U.S. Vets to provide supportive services and case management services that will be available to all tenants. Both agencies have extensive experience providing onsite supportive services to residents of permanent supportive housing and worked collaboratively in developing this supportive services plan.

c. Description of the Target Population to be served, and identification of any additional subpopulation target or occupancy preference for the NPLH Project that the Applicant wishes to undertake beyond what is permitted under the Target Population requirements. **NOTE: Any additional subpopulation targeting or occupying preference for an NPLH Project must be approved by the Department prior to construction loan closing and must be consistent with federal and state fair housing requirements.**

Liberty Lane will be a new, 80-unit affordable housing development for individuals and families. Thirty-nine of the units will be designated for the homeless living with a mental disability at or below 30% AMI (NPLH units); twenty-three units will be designated for veterans at or below 50% AMI and the remaining units will be affordable for families (with a preference for veterans) at or below 60% AMI; the project will also have two manager's units.

d. If not stated in question (b) in this section, describe the criteria relating to the applicant's income eligibility, and eligibility as a member of the Target Population as defined under Section 101 of the NPLH Guidelines.

N/A

e. Describe any additional eligibility criteria other than those indicated above, i.e., information needed to determine if Applicant can comply with lease terms. **NOTE: Selection criteria designed to assess anything other than the ability to comply with lease terms generally run afoul of fair housing laws designed to protect equal access to housing for people with disabilities. See Between the Lines, A Question and Answer Guide on Legal Issues in Supportive Housing Chapter 4.**

The NPLH units will be leased through the Coordinated Entry System as indicated above. Please reference the Tenant Selection Criteria, Exhibit A within the Preliminary Property Management Plan (Attachment 47) for leasing and eligibility criteria for the non-NPLH units.

f. Identify all disclosures that will be provided to applicants/tenants. Example: Megan's Law disclosures.

Tenant disclosures provided by property management include: Megan's Law (if further than 2000 feet from schools and parks), Pest Control, Smoking policy, Security Deposit, Move-in Checklist, Lead-Based Paint, Smoke Detectors/Carbon Monoxide, Domestic Violence/VAWA.

g. Describe how the local Coordinated Entry System (CES) is selecting tenants? If the local Coordinated Entry System is not yet operational, describe the plan to use it for tenant selection when it is established. Including the name and contact information for the system.

The Coordinated Entry System (CES) will choose the top candidates for each determined category (chronically homeless, homeless, and at-risk of chronic homelessness) in line with the rules of the local Continuum of Care (CoC). If the CES does not have the means to rank those that are at-risk of chronic homelessness, then a procedure that is approved by the CoC will be followed.

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### 2. Marketing/Outreach

a. Will Applicant commit to use a Coordinated Entry System (CES) to fill all of the NPLH Assisted Units based on use of a standardized assessment tool which prioritizes those with the highest need for Permanent Supportive Housing and the most barriers to housing retention? (provide description of system below).

Yes the project will use CES, tenants will be assessed using the Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) and entered into the Coordinated Entry System (CES). All vacancies will be filled through CES referral.

b. If a separate alternate system must be used to refer persons At-Risk of Chronic Homelessness, a minimum of 40 percent of the NPLH Assisted Units must be reserved for persons who qualify as Chronically Homeless and a maximum of 30 percent of the NPLH Assisted Units may be reserved for persons who are At-Risk of Chronic Homelessness. All referrals must be based on a prioritization of those with the highest need for Permanent Supportive Housing, and the most barriers to housing retention (provide description of system below).

N/A

### 3. Housing First Characteristics

a. Please confirm compliance by checking all of the characteristics that apply to the NPLH units in the Project:

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|--|-----|
| Tenants have a lease and all the rights and responsibilities of tenancy, as outlined in California's Civil, Health and Safety, and Government codes  | Yes |
| Tenant has his/her own room or apt. and is individually responsible for selecting a roommate in any shared tenancy   | Yes |
| Tenant may stay as long as he/she pays his or her share of rent and complies with the terms of his/her lease   | Yes |
| Unit is subject to applicable state and federal landlord tenant laws   | Yes |
| Participation in services or program compliance is not a condition of permanent housing tenancy  | Yes |
| Tenant screening and selection practices that promote accepting applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services  | Yes |
| 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"  | Yes |
| Supportive services that emphasize engagement and problem solving over therapeutic goals and service plans that are highly tenant-driven without predetermined goals?  | Yes |
| The use of alcohol or drugs in and of itself, without other lease violations, is not a reason for eviction?  | Yes |
| 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 | Yes |
| 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  | Yes |
| 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  | Yes |
| The project and specific apartment may include special physical features that accommodate disabilities, reduce harm, and promote health and community and independence among tenants   | Yes |

### Part II. Lead Service Provider (LSP) Detail

#### Section 1: LSP

The County or other LSP is the entity that has overall responsibility for the provision of supportive services & implementation of the Supportive Services Plan. The County or other LSP provides comprehensive case management services (individualized services planning & the provision of connections to mental health, substance use, employment, health, housing retention) and may also coordinate with other agencies that do so.

1. County/LSP Name: County of San Bernardino Department of Behavioral Health

Relationship to Applicant: Memorandum of Understanding

How long has the County/LSP been providing services to homeless: 25 Years 0 Months

How many Projects have the Applicant and LSP completed together? (Provide list of completed Projects when submitting)

2. List any additional agencies that will be providing comprehensive case management services to residents. Describe population(s) they will serve and how their services will be coordinated by the LSP.

| Agency Name | Populations the Agency will serve | How Services will be Coordinated  |
|-------------|-----------------------------------|---|
| U.S.VEST    | Veterans and general affordable   | <p>Case Management and property management staff will work together to promote the success, stability and retention of tenants at Liberty Lane, to implement the principles of the Housing</p> <p>First model and facilitate the implementation of reasonable accommodation policies consistent with Fair Housing regulations and other applicable laws and regulations.</p> <p>Accordingly, the following communication protocols will be implemented and are subject to revision at the request of any of the parties:</p> <p>a. Property Management and Case Management will each designate a single point of contact as the representative for communication.</p> <p>b. Parties shall establish a regular schedule of communication that involves direct meetings among designated representatives during the lease up period.</p> <p>c. Collaborative staff meetings will be held as a formal opportunity for planning and strategizing to ensure that Case Management and Property Management work as a team on behalf of the tenants to discuss at-risk tenancies; keep each other informed about site events such as inspections, audits and plan community activities.</p> |
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#### Section 2: Service Delivery



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| <p>1. Fully describe in the yellow cells below for each question how the best practices may be utilized in the service delivery model. Include a description of policies and periodic training plans. For the clinical interventions in this section, include a description of how the intervention is used and describe training. <b>NOTE: Do not include definitions of these practices.</b></p>  |            |
| <p>Benefits counseling and advocacy, including assistance in accessing SSI/SSP, enrolling in Medi-Cal, outreach, access, and recovery: Staff trained prior to lease up?</p>   | <p>Yes</p> |
| <p>San Bernardino County Department of Behavioral Health (DBH) case managers use the SSI/SSDI Outreach, Access and Recovery (SOAR) model in assisting NPLH tenants to obtain SSI/SSDI. All NPLH tenants will be assessed for their ability to obtain employment. For those that are too impaired to work, the SOAR model will be used to assist them in obtaining benefits. Staff will follow their training in engaging the tenant to complete the application and following them throughout the process. Training is available via the County's training database as well as online. All staff will be trained in the SOAR model within the first 6 months of employment.</p> <p>U.S.VETS also has experience and training in SOAR (SSI/SSDI Outreach, Access, &amp; Recovery). Staff will provide on-site and off-site services to assist non-NPLH tenants in applying for Social Security, SNAP (food stamps), TANF, Medical/care/Affordable Care, and other mainstream benefits as well as VA benefits. The assistance will benefit tenants by educating them on benefits they may be eligible for and helping them navigate the application process which may result in a more expedited approval process. Staff receive training at orientation and annually and/or through periodic supervision sessions with a manager.</p>  |            |
| <p>Critical Time Intervention: Staff trained prior to lease up?</p>   | <p>Yes</p> |
| <p>DBH does not currently use the Critical Time Intervention model for its staff, however, it is being considered for the future.</p> <p>U.S.VETS utilizes the Critical Time Intervention (CTI) model as an evidence-based model that focuses on the clients' mental health stability when it has been identified as a barrier to their ability to maintain independent housing. U.S.VETS' application of CTI utilizes several models that have been identified to assist in creating a working relationship with clients, such as the Recovery Model, Trauma-Informed Care, Client-Centered Care, Harm Reduction Model, Stages of Change, and Motivational Interviewing. Clients move through three phases in CTI: Phase 1-Transition to the Community (Rapport building, identifying needs/barriers), Phase 2- Try-Out (testing and adjusting the systems of support in the community), and Phase 3-Transfer of Care (fine-tuning the network of support). CTI addresses the needs of the clients, such as psychiatric treatment and medication compliance, money management, substance use management, housing crisis management, psychoeducational groups, peer support groups, and/or family intervention, paying special attention to factors precipitating housing loss in the past, as well as current needs and difficulties. Staff receive training at orientation and annually and/or through periodic supervision sessions with a manager.</p>  |            |
| <p>Trauma-Informed Care: Staff trained prior to lease up?</p>   | <p>Yes</p> |
| <p>DBH provides numerous trainings related to trauma and trauma-informed care throughout the year, both in-person and online. All staff will receive on-going training in working with those that have experienced trauma. New staff will receive training within 6 months of hire. Staff will provide psychoeducation to tenants and their providers in regards to the role that trauma plays in homelessness and will help provide an atmosphere of empathy and safety as tenants learn to negotiate their new surroundings and engage in services. It may be necessary to help providers, e.g., dentists, doctors, etc., understand the culture of homelessness and the psychological impact on their new client.</p> <p>U.S. Vets will provide Trauma-Informed Care for residents who have experienced trauma of any type, such as:<br/>         Trauma Informed Care principles of safety, trustworthiness, choice, collaboration, and empowerment. Staff are trained to recognize the effects of trauma and how to foster a safe environment while helping veterans and their families to rebuild a sense of empowerment. Staff receive training at orientation and annually and/or through periodic supervision sessions with a manager.</p>   |            |
| <p>Motivational Interviewing: Staff trained prior to lease up?</p>  | <p>Yes</p> |
| <p>DBH offers training in Motivational Interviewing twice a year. Staff will be required to take the training within 6 months of their being hired. Motivational Interviewing is at the heart of engagement interactions. Supportive Services staff will be assessing all tenants' level of engagement in working toward wellness and eliminating barriers to housing stability and continue to engage as they move toward taking action in being well. This intervention will be used as appropriate, but especially with those tenants that are not ready to engage in services.</p>  |            |
| <p>Voluntary Moving-on strategies: Staff trained prior to lease up?</p>   | <p>Yes</p> |
| <p>The County is working with the local Housing Authority to develop moving on strategies that may include stepping down from the Permanent Supportive Housing vouchers to another type of voucher that would still assist with rental subsidies but would no longer have Supportive Services attached. It is hoped that there will be an opportunity to expand to NPLH housing in the future.</p> <p>Through use of Motivational Interviewing, U.S. VETS is often able to assist tenants with choosing to move on to other types of housing when appropriate. U.S. VETS has a variety of</p>   |            |
| <p>Safety and security of staff and residents: Staff trained prior to lease up?</p>   | <p>Yes</p> |
| <p>There are a number of trainings that DBH staff are required to take regarding safety in the field and with tenants before they are allowed to go into the field and to transport in a County vehicle. These trainings include but are not limited to: Safety in the field, Non-Violent Crisis Intervention, Driver Safety, and Assaultive Behavioral Drills. Safety protocols will be developed specific to the site. These trainings will occur within 6 months of being hired. Tenant and staff safety is an ongoing and evaluated with each new situation. Safety will also be an ongoing topic with Property Management.</p> <p>U.S.VETS has safety and security procedures in place and employs a variety of methods and protocols to ensure staff and resident safety. U.S.VETS will build upon its relationship with local law enforcement who typically is willing to do periodic patrols of its facilities and be responsive to any issues that may arise. U.S.VETS staff are trained in Active Shooter protocols and drills are done for tenants as well though in a sensitive manner as to not cause undue stress and trauma. Staff receive training at orientation and annually and/or through periodic supervision sessions with a manager.</p>   |            |
| <p>Peer Support (include length of time Peer Support program used, if applicable): Staff trained prior to lease up?</p>   | <p>Yes</p> |
| <p>DBH has had Peer and Family Advocates (PFA) as part of our teams for over 10 years. PFAs have been an integral part of the Outreach and Engagement Teams and working with our Permanent Supportive Housing for years. Any new peers would be trained prior to working with clients, would shadow, be shadowed and have on-going mentorship. Peers provide services, resources and can act as a support and liaison. Any new PFAs that will be hired will have lived experience with homelessness. This may have a positive impact on the tenants by building relationships on "shared experience" and the ability to empathize and assist in developing mutual understanding between other supportive services staff and the tenants. Training for PFAs is on-going and support offered both within the program and in the department as a whole.</p> <p>U.S. VETS builds upon comradery by fostering peer support, responsibility, and a sense of belonging while supporting tenants in achieving their goals. As some tenants progress through the stages of change/recovery, they assume greater personal and social responsibilities in the community. It is common for some tenants to take on leadership roles within the tenant council (TC); this aid to others is seen as an important part of changing oneself. The TC principles are applied through a variety of methods which may include:</p> <ul style="list-style-type: none"> <li>• Veteran Council – Veterans take a leadership role in the community as council members and coordinate activities within the community designed to engage residents and/or raise issues of a personal nature and look to the community for support and solutions</li> <li>• Peer Mentors – Tenants with longer stays in the facility or those who are more stabilized volunteer to welcome and mentor newly admitted residents. Tenants guide and support each other while they become stronger, more self-determined individuals, through the process of helping another.</li> <li>• Peer Support Groups &amp; Activities – Tenants participate and may lead support groups, life skills groups, or social/recreational activities to foster peer support.</li> </ul> <p>Staff receive training at orientation and annually and/or through periodic supervision sessions with a manager.</p> |            |
| <p>Case conferencing: Staff trained prior to lease up?</p>  | <p>Yes</p> |

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Case conferencing happens on a weekly basis at minimum and more often if needed. Staff are already trained in case conferencing. New staff would be trained within the first few months of being hired. There will be monthly housing case conferencing with the Property Management and clinical case conferencing among Supportive Services providers to assess tenant's movement toward wellness. An established agenda will be developed that will aid the team in reviewing each client and determining how needs will be met and strategies will be used to assist tenants in linking to services.

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| Communicating the Applicant's and LSP's program philosophy, values, and principles: Staff trained prior to lease up?   | Yes |
| Tenants will be oriented on the program philosophy, values and principles at the beginning and on-going as appropriate. Staff will be trained within the first 6 months of hire. |     |

U.S.VETS will share the philosophy, values, and principles are consistent and conveyed to clients beginning during outreach, through lease-up and tenancy. U.S.VETS shares its core values with clients as well as the community through various encounters and meetings. Staff receive training at orientation and annually and/or through periodic supervision sessions with a manager.

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| Rent by residents during periods of hospitalization: Staff trained prior to lease up?   | Yes |
| Rent will continue to be paid for residents that are hospitalized. Depending on the circumstance rent could be paid for a couple of months. Special consideration will be given on a case by case basis. Staff are and will be trained prior to lease up. |     |

U.S.VETS collaborates with Property Management to consider the circumstances for any unpaid rent by a tenant before proceeding with eviction and most certainly accounts for residents' potential inability to pay rent timely if hospitalized. When possible, U.S.VETS assists veterans with setting up bank accounts and direct deposit so that their expenses can be maintained in the event of life circumstances. Staff receive training at orientation and annually and/or through periodic supervision sessions with a manager.

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| Resident Privacy and Confidentiality: Staff trained prior to lease up?   | Yes |
| All staff are trained in privacy and confidentiality issues. All staff have been trained and are required to retake the training on an annual basis for HIPAA. All new staff will be trained within the first 6 months of their being hired. |     |

U.S.VETS maintains secured client files and ensures privacy and confidentiality is maintained. U.S.VETS follows applicable laws in regards to maintaining client confidentiality and informs clients of the legal limits of confidentiality verbally and in writing. When a client enters into a U.S.VETS program or housing opportunity, a treatment team member will verbally discuss and present in writing the U.S.VETS policy of Informed Consent Regarding Legal Limits of Confidentiality. When it is determined by the U.S.VETS treatment team that the client has heard and understands the Informed Consent Regarding Legal Limits of Confidentiality, it is U.S.VETS' policy that the client and staff will sign the written policy which will be placed in the client's file and a copy will be available to the client as needed. Staff receive training at orientation and annually and/or through periodic supervision sessions with a manager.

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| How the supportive services staff and property management staff will work together to prevent evictions, to adopt and ensure compliance with harm reduction principles, and to facilitate the implementation of reasonable accommodation policies from rent-up to ongoing operations of the Project: Staff trained prior to lease up? | Yes |
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ACOF property management staff and DBH and U.S. Vets case management staff will work collaboratively to ensure services are delivered seamlessly to tenants. Site staff meetings are designed as a formal opportunity for planning and strategizing to ensure that Services and Property Management work as a team to assure successful tenancies. Examples of topics of meetings include but are not limited to the following:

- Rent roll
- Existing and projected vacancies
- Move-ins being scheduled
- Processing of applicants and interface with the Coordinated Entry System
- Notices of evictions and late-rent paying tenants
- Compliance with regulatory agreements and other governance documents for the project
- Concerns about behavior and conduct of residents that would be detrimental to their continued tenancy
- Incidents of damage, crime and safety concerns on the property
- Requests from tenants for services not currently being provided
- Participation of tenants in supportive services
- Maintenance and appearance issues of the property

Property management will update Services on warning notices, adherence to payment plans and/or reasonable accommodation agreements, and any signs, such as housekeeping violations, that a tenant's ability to maintain their apartment or adhere to the terms of the lease has been compromised. Services will update property management on their client's progress on tenant intervention and if appropriate service plans, reasonable accommodation agreements and any property management related tenant concerns. Regular meetings between Services and Property Management prevent the escalation of tenant issues and allows for expeditious resolution of existing problems. Any issues that arise between meetings should be forwarded to the identified leads, in writing.

Property Management and Supportive Services staff will meet on a monthly basis and as needed to discuss issues that may arise regarding tenancy issues. DBH staff has years of experience working with severely and persistently mentally ill, chronically homeless clients in maintaining their residency. Harm reduction principles are always at the heart of the interventions used. When needed, reasonable accommodations can be applied for and managed from lease up and beyond. Supportive services staff are currently trained and experienced in harm reduction philosophy and the recovery model. These strategies will be used with all barriers to wellness and housing stability including any problems tenants encounter with illicit drug use. New staff will be trained upon hire and will be coached throughout.

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| General service provider and property manager communication protocols: Staff trained prior to lease up?  | Yes |
| Case Management and property management staff will work together to promote the success, stability and retention of tenants at Liberty Lane, to implement the principles of the Housing First model and facilitate the implementation of reasonable accommodation policies consistent with Fair Housing regulations and other applicable laws and regulations. |     |

Accordingly, the following communication protocols will be implemented and are subject to revision at the request of any of the parties:

- a. ACOF, DBH and U.S. Vets will each designate a single point of contact as the representative for communication.
- b. Parties shall establish a regular schedule of communication that involves direct meetings among designated representatives during the lease up period.
- c. Collaborative staff meetings will be held as a formal opportunity for planning and strategizing to ensure that Case Management and Property Management work as a team on behalf of the tenants to discuss at-risk tenancies; keep each other informed about site events such as inspections, audits and plan community activities.

DBH, U.S. Vets and ACOF agree that they will not at any time disclose confidential information and/or material without the consent of the other party unless such disclosure is authorized in advance or required by law. Where appropriate, releases will be secured before confidential information is exchanged. Confidential NPLH Tenant information will be handled with discretion and good professional judgment, and in accordance with applicable laws related to the confidentiality of patient information, including, but not limited to the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") and Welfare and Institutions Code section 5328.

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| Making Applicants aware of the reasonable accommodations procedure: Staff trained prior to lease up? | Yes |
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If a prospective tenant has been determined to be ineligible they will be notified so that they may have an opportunity to provide further information, ask for a reasonable accommodation or engage the appeal process. Upon lease-up, the property manager will explain to new tenants the roles and responsibilities of property management and the tenant's case manager, property management will obtain written permission from tenants to refer them to their case manager should any behaviors such as failure to pay rent or to follow terms and conditions of the lease or house rules place their housing in jeopardy. Case Management staff will be trained to assist tenants with the following:

- Explaining and filling out the reasonable accommodation or grievance form
- Obtaining documents to substantiate the grievance or reasonable accommodation request.
- Seek alternative housing to prevent a formal eviction that would make the tenant ineligible for Housing Authority rental subsidy assistance.
- Attending the property management meeting with the tenant
- If applicable advocate for the tenant
- If applicable provide referrals to legal services
- If applicable attend meetings with the tenant and outside agencies
- In the case of approved accommodation requests that necessitate alternate housing within or outside of ACOF's portfolio
- Assist in finding alternative housing
- Assist in making selection through the provision of bus tokens for site visits and interviews

Receiving and resolving tenant grievances: Staff trained prior to lease up?

Yes

All parties agree that open lines of communication are essential to ensure mutual accountability in carrying out each of the separate roles and functions. Tenant grievances will be managed according to County, U.S. Vets and Property Management policies and procedures. Grievances will be addressed as they arise and at the monthly meetings held with the County, U.S. Vets and Property Management.



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| Appropriate responses to tenant crisis: Staff trained prior to lease up?  | Yes |
| Any emergent crises, not needing law enforcement or ambulance, will be managed by Supportive Services staff. Property Management and tenants may reach Supportive Services staff after-hours and on weekend through their on-call system.   |     |
| Retention of tenants regardless of use of substances: Staff trained prior to lease up?  | Yes |
| Liberty Lane will create an environment that aims to support tenants with multiple risk factors so they may stabilize in permanent housing and thrive long term. Liberty Lane will operate using Housing First principles to serve tenants without precondition. Supportive Services staff will develop personal wellness plans to assist tenants in identifying personal goals and to identify strategies for housing retention regardless of the tenant's desire to engage in behavioral health services and/or sobriety. Tenants that use substances will be encouraged to engage in services to assist them in moving toward wellness. Behaviors that lead toward lease violation will be addressed. Tenants will not be evicted because of substance use alone.  |     |
| Cultural and linguistic competency for persons of different races, ethnicities, sexual orientations, gender identities, and gender expressions: Staff trained prior to lease up?  | Yes |
| Numerous opportunities for staff to receive training in a myriad of culturally competent topics are available in order to provide effective, equitable and respectful quality care and services that are responsive to diverse cultural practices. DBH requires all clinical staff and contractors to receive 6 hours of training per year in cultural competency. All staff will have had a minimum of 3 hours of training within the first 6 months of being hired. Additionally, all staff will be trained on how to access interpreters and will have paperwork available in Spanish, Vietnamese and English available immediately and other languages as needed.   |     |
| U.S. Vets programs and services mirror the population served by taking into account as many variables as possible including language, cultural/ethnic identification, race, religion, gender, sexual orientation, age, marital status, household/family composition, medical/mental health conditions, educational level, political beliefs, and socioeconomic status. U.S.VETS offers services to all eligible clients regardless of their backgrounds and circumstances and does not tolerate discrimination or harassment. U.S.VETS practices the Code of Ethics of several institutions to include the National Association of Social Workers and trains its staff to understand culture and its function in human behavior and society, recognizing the strengths that exist in all cultures. U.S.VETS' staff receive monthly service provider and veteran-related training to include the following topics: Housing First, Motivational Interviewing, Trauma-Informed Care, SOAR, Post-Traumatic Stress Disorder, Traumatic Brain Injury, Combat Trauma, Sexual Trauma, Suicide Prevention, Boundaries & Ethics, Cultural Competency, etc. To ensure underserved populations are reached, U.S. VETS coordinates with the local Continuum of Care to ensure high priority is placed on serving the most vulnerable. U.S. VETS has specialized programs and/or staff trainings for several sub-populations of the veteran community to include female veterans, non-custodial fathers, transgender veterans, and those with high barriers due to age, disabilities, unemployment histories, and/or criminal backgrounds. Additionally, staff gain knowledge of the resources readily available to address veterans' needs by participating in workshops, collaborative meetings, Stand Down Events, and Resource Fairs. U.S.VETS also has qualified staff who act as Field Instructors educating and supervising students who are in Bachelor and Master Degree programs for Social Work, Counseling, Human Services, to include those with a military social work subconcentration and other fields to help train the next generation of service providers while bringing added resources to the veterans through placement of interns at its facilities. U.S.VETS holds several weekly conference calls for its various leadership groups across the country to include Executive Directors call, Clinical Directors, Program Managers, Operations Managers, and other regular calls at least once a month for SSVF Coordinators, Workforce Coordinators, and Activities Coordinators. These groups also each have a team conference at least once a year to share and train on best practices. U.S. VETS has several employees to include Case Managers, Veteran Support Specialists, Veteran Service Coordinators/Assistants, and Outreach staff who are veterans as well as its CEO, COO, CFO, VP of Human Resources, and VP of Programs who are veterans. Staff receive training at orientation and annually and/or through periodic supervision sessions with a manager. |     |

### Part III. Supportive Services Detail

#### Section 1: Supportive Services Chart

**Required Services:** List and describe all services under Section 203(c) of the NPLH Guidelines required to be offered to tenants of the NPLH Assisted Units. The chart must include each of the services listed. Attach the agreement for each of the services listed.

| Resident Service                              | Service Description  | Service Provider(s)                   | Relationship to Applicant  | Agreement   | Off-site Service Location   |
|---|--|---------------------------------------|--|---|---|
| List each service separately                  | Describe service, including the frequency and degree to which services are provided.   | Provider's Name                       | Applicant, separate division of Applicant's organization, or a Project Partner | If service will be provided by a non-Applicant entity, indicate type of agreement under which service will be provided. | If service is on-site, leave blank. Enter distance, in miles, to off-site service and list resident commuting options. Reasonable access is access that does not require walking more than one-half mile. |
| Case management with individual service plans | Case management, individual goal/service planning. Completed within first month and updated as needed  | Department of Behavioral Health (DBH) | Division of Applicant's Org  | Memorandum of Understanding   |   |
| Peer support activities                       | Coaching, teaching and accompanying tenants to meetings or services  | Department of Behavioral Health (DBH) | Division of Applicant's Org  | Memorandum of Understanding   |   |
| Mental health care                            | Assessment and Evaluation, treatment and referrals, crisis intervention and counseling, individual and group therapy. Offered on-going and as needed | Department of Behavioral Health (DBH) | Division of Applicant's Org  | Memorandum of Understanding   | On-site and local clinics. DBH Phoenix Clinic are within 8 miles. Door to door transportation can be arranged through health plan or Supportive Services staff.   |

| Supportive Services Plan (SSP) §203  |  |                                       |  |   | Rev. 9/25/19  |
|--|--|---------------------------------------|--|---|---|
| Substance use services   | Substance Use Disorder Treatment   | Department of Behavioral Health (DBH) | Division of Applicant's Org  | Memorandum of Understanding   |   |
| Support in Linking to Physical Health Care   | Medical assessment and wellness, including linkage to other medical and dental care, and medication management available on-going. Can attend appointments with tenant as needed.                                  | Department of Behavioral Health (DBH) | Division of Applicant's Org  | Memorandum of Understanding   |   |
| Benefits counseling and advocacy   | Assistance in accessing mainstream benefits, including SSI/SSP and enrolling in Medi-Cal. Will offer upon referral to project and ongoing as needed.   | Department of Behavioral Health (DBH) | Division of Applicant's Org  | Memorandum of Understanding   |   |
| Basic housing retention skills   | Emergency assistance with food and clothing, independent living skills development, apartment maintenance and upkeep, cooking, laundry, and money management and financial education offered on-going.             | Department of Behavioral Health (DBH) | Division of Applicant's Org  | Memorandum of Understanding   |   |
| <b>Encouraged Services:</b> List and describe all services under Section 203(d) of the NPLH Guidelines encouraged to be offered to tenants of the NPLH Assisted Units. If multiple services will be provided in the service categories provided below, attach any additional description. Empty spaces are available at the bottom of the table for the applicant to describe services not listed. |  |                                       |  |   |   |
| Resident Service   | Service Description  | Service Provider(s)                   | Relationship to Applicant  | Agreement   | Off-site Service Location   |
| List each service separately   | Describe service, including the frequency and degree to which services are provided.   | Provider's Name                       | Applicant, separate division of Applicant's organization, or a Project Partner | If service will be provided by a non-Applicant entity, indicate type of agreement under which service will be provided. | If service is on-site, leave blank. Enter distance, in miles, to off-site service and list resident commuting options. Reasonable access is access that does not require walking more than one-half mile. |
| Services for persons with co-occurring mental and physical disabilities or co-occurring mental and substance use disorders not listed in the above table   | Clinical services, case management, peer support services and formal services, e.g., Department of Rehab on-going and as needed.   | Department of Behavioral Health (DBH) | Division of Applicant's Org  | Memorandum of Understanding   |   |
| Recreational and social activities   | Community building, social gatherings, picnics and barbeques, holiday themed parties, movies and outings throughout the week.  | Department of Behavioral Health (DBH) | Division of Applicant's Org  | Memorandum of Understanding   |   |
| Educational services   | Tuition and financial assistance with books and supplies, case management and supports for all members of the family needing assistance with education related activities will be provided on-going and as needed. | Department of Behavioral Health (DBH) | Division of Applicant's Org  | Memorandum of Understanding   |   |
| Employment services  | Job coaching, basic job skills development, relationship building, leadership development, job finding will be on-going and as appropriate.  | Department of Behavioral Health (DBH) | Division of Applicant's Org  | Memorandum of Understanding   |   |
| Obtaining access to other needed services  | Referrals and access to food and clothing, veterinarian care, etc. as need arises.   | Department of Behavioral Health (DBH) | Division of Applicant's Org  | Memorandum of Understanding   |   |
|  |  |                                       |  |   |   |



| Supportive Services Plan (SSP) §203   |                      |  |  |  | Rev. 9/25/19              |
|---|----------------------|--|--|--|---------------------------|
|   |                      |  |  |  |                           |
| <b>File Name:</b>   | <b>LSP Agreement</b> | Lead Service Provider Contract, Agreement, or Letter of Intent |  |  | Hard Copy and on USB? N/A |
| <b>Section 2: Supportive Services Coordination</b>  |                      |  |  |  |                           |
| <p>1. Describe the accessibility of community services to which you propose linkages, whether they are on-site or in close proximity to the Project, including the hours they are available, and the frequency, travel time and cost to the tenant for transportation required to access the services to include both public transportation and private transportation services (e.g. van owned by the provider). Additionally, describe how the supportive services will be provided in a manner that is culturally and linguistically competent for persons of different races, ethnicities, sexual orientations, gender identities, and gender expressions. This includes explaining how services will be provided to NPLH tenants who do not speak English, or have other communication barriers, including sensory disabilities, and how communication among the services providers, the property manager and these tenants will be facilitated. Additionally, describe how services will accommodate trauma-based, barriers to services. Provide documentation, in the form of Memorandum of Understanding, Memorandum of Agreement, letters of support or contracts demonstrating who will be responsible for ensuring access to services and how accessibility will be accomplished if not already included in agreement provided for service provision.</p>  |                      |  |  |  |                           |
| <p><b>Accessibility to Community Services</b><br/> Most services will be provided to tenants on-site. For those that need to receive off-site services (more than a ½ mile from the project site), case managers and/or property management staff will have the following options to assist tenants:</p> <p>Transportation to all clinical services (both mental health and substance use disorder) can be arranged through the health plan as part of their benefit. When this option is not available, other arrangements can be made that include bus passes, shuttles and Supportive Services staff transporting.</p> <p>Mental Health Services – No-Cost Door-to-Door Transportation arranged through Medi-Cal HMO<br/> Phoenix Community Counselling, Open M-F 8a – 5p, Located in San Bernardino – 20 minute drive, 60 minute bus ride</p> <p>Peer Support<br/> Our Place Clubhouse – Community Services, Open M-F 9-3p, Located in Loma Linda – 10 minute drive, 40 minute bus ride</p> <p>Substance Use Disorder Outpatient Treatment<br/> Recovery Services, Located 9 miles away – 20 minute drive, 60 minute bus ride</p> <p><b>Services Competency</b><br/> The project is committed to providing supportive services that are culturally and linguistically competent for persons of different races, ethnicities, sexual orientations, gender identities, and gender expressions. Services will be provided to NPLH tenants who do not speak English, or have other communication barriers, including sensory disabilities. The project is committed to facilitating appropriate communication among the services providers, the property manager and tenants through regular, structured meetings as discussed in the Communication Protocols section of the Service Plan document.</p> <p>The use of interpreters via telephonic and video communication is available as well as arranging for in-person interpreters as needed.</p> <p>Each tenant will be engaged and linked to appropriate services. These services will most likely begin on-site with an eye toward community integration. The speed of which the transition happens will depend on a variety of factors including the level of trauma that the tenant has experienced and other history with linkages in the past.</p> |                      |  |  |  |                           |

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2. Describe which community/county/state funded programs will be utilized to meet the needs of the residents, particularly if those residents are dependents of tenants.

DBH will utilize the following programs to assist in providing services to the NPLH tenants:

• **Mental Health Services** – Phoenix Community Counseling (DBH Clinic) in San Bernardino is within 10 miles of the project site. This clinic treats children, Transition-Age Youth (TAY), adults and older adults.

Services available at clinic include: ☐ Assessment ☐ Medication Support Services ☐ Group and Individual Therapy ☐ Case Management ☐ Skills Building Groups

• **Substance Use Disorder Services** – Treatment is available to Adolescents and Adults. Location of services depends on the level needed. Transportation can be arranged through the tenant's HMO and with Supportive Services Staff.

o Services available include: ☐ Assessment ☐ Outpatient Services ☐ Medication Assisted Treatment ☐ Detox Services ☐ Residential Services ☐ Recovery Centers/Aftercare ☐ Perinatal Services

• **Employment Services** may be accessed through Phoenix Community Counseling 10 miles away. Linkages to the Department of Rehabilitation Services can also be made through the Phoenix Community Counseling Employment Services.

• **Schools** – Redlands-Yucaipa Joint Unified School District

U.S.VETS has extensive experience operating and collaborating with community-based programs that meet the needs of residents in affordable housing projects. U.S.VETS receives government and private funding to operate Rapid Rehousing and Homeless Prevention programs for veteran families to include the VA-funded Supportive Services for Veteran Families (SSVF) Program. U.S.VETS also receives funding through the Department of Labor Homeless Veteran Reintegration Program (HVRP) and the State of California Veteran Employment Assistance Program (VEAP) as well as private funding to provide Workforce Development services for veterans and their families to include job training and employment placement. U.S.VETS will build upon experience operating these and other programs and collaborate with existing SSVF, HVRP, VEAP, and other grantees in the community to assess and connect residents to these services. U.S.VETS also has extensive experience coordinating care with the VA HUD-VASH team (tenant-based or project-based if allocated). U.S.VETS' works closely with the local VA departments and programs to include the Mental Health department, Addiction Treatment program, Healthcare for Homeless Veterans social workers, Benefits office, Justice Outreach, Veteran Supportive Employment Program, and Vet Centers. U.S.VETS will also assist residents in accessing programs through other community partners as well as county and state-funded programs such as Housing Authority/County offices to include Section 8 program; State welfare department to include Temporary Assistance for Needy Families (TANF) and the Special Needs Assistance Program (food stamps); and Affordable Care/Medical/Medicare.

3. Is the Applicant currently working with the with the CoC in the area?

Yes

If No, please explain:

### Section 3: Verification from Appropriate Public or Non-profit Funding Agency

All applications where the County is not the LSP shall include a verification from an appropriate funding entity (either public or non-profit) knowledgeable about the supportive service needs of the Target Population, indicating that the proposed services are appropriate to meet the needs of the Target Population. The verification shall endorse the primary service provider as a known provider of support services to the Target Population. The Development Sponsor and/or Service Provider are not eligible to provide the Funding Agency Verification.

Please use the attached Supportive Service Verification form from the appropriate public or non-profit agency. Please submit one verification if serving different subpopulations of NPLH tenants who qualify as Chronically Homeless, Homeless, or At-Risk of Chronic Homelessness. If appropriate, a single funder may provide a verification for multiple populations (i.e. a County Department of Health Services could provide a verification for a Project serving individuals who are Chronically Homeless, Homeless, or At-Risk of Chronic Homelessness). Please be sure to indicate on the verification form the subpopulations to which each verification applies.

### Part IV. Tenant Safety And Engagement

#### Section 1: Tenant Engagement

Applicant should describe strategies to engage residents in services, services planning/operations, and in building community and facility operations. **NOTE: The tenant engagement plan is distinct from the marketing and outreach efforts for attracting applicants to the Project.**

1. Will the services engagement outreach strategy include:

|                                       |     |                |     |  |     |
|---------------------------------------|-----|----------------|-----|--|-----|
| Outreach to applicants and residents? | Yes | Door-knocking? | Yes | Leafletting?   | Yes |
| Assessment prior to leasing?          | Yes | Peer contacts? | Yes | Outreach to organizations that work directly with target population? | Yes |

Other strategies? Please describe:

Town Hall meetings, Veterans Council meetings, and social/recreational mixers will also be used to engage tenants.

2. Describe the strategies to engage residents in social interaction, building operations, and community involvement within the Project.

Social and educational programs will be developed and implemented by tenants, staff, and volunteers to foster community within the development and help tenants become comfortable with the services staff. On-site activities facilitated by peers, services staff, and volunteers may include movie nights, game nights, reading groups/book clubs, spiritual groups, holiday celebrations, arts and crafts, field trips, cooking classes and nutrition counseling, AA/NA meetings and anger management/non-violent conflict resolution classes. At least once per month tenants will have the opportunity to participate in one or more of these activities. Site staff will also facilitate introductions between tenants and the local neighborhood councils, neighborhood watches, police advisory boards, park advisory boards, community centers, recreation centers, and community-based organizations and encourage tenants to seek out community organizations and activities that interest them.

3. Describe the strategies to engage residents in planning and delivery of resident's services.

Social and educational programs will be developed and implemented by tenants, staff, and volunteers to foster community within the development and help tenants become comfortable with the services staff. On-site activities facilitated by peers, services staff, and volunteers may include movie nights, game nights, reading groups/book clubs, spiritual groups, holiday celebrations, arts and crafts, field trips, cooking classes and nutrition counseling, AA/NA meetings and anger management/non-violent conflict resolution classes. At least once per month tenants will have the opportunity to participate in one or more of these activities. Site staff will also facilitate introductions between tenants and the local neighborhood councils, neighborhood watches, police advisory boards, park advisory boards, community centers, recreation centers, and community-based organizations and encourage tenants to seek out community organizations and activities that interest them.

4. Describe how the physical building space supports social interaction and the provision of services.

Liberty Lane will be designed to encourage and support social interaction and services provision. The community room, computer lab, manager's office and case managers' offices are located in close proximity to each other and are located near the main entrance to the property, mailboxes, and elevator. Co-locating these uses encourage resident interaction, participation in activities, and uses of services.

5. If planning on conducting tenant satisfaction surveys, describe types of questions asked, how they are reviewed, outcomes measured, and how often survey will be conducted.

ACOF conducts tenant satisfaction surveys of tenants at all ACOF buildings every 2 years. Questions include opinions about services, property management, tenant and family health and happiness, and gaps in service delivery. The results are analyzed and management staff look at ways to improve supportive services and property management. The results are also shared with the tenants at each building once the results are tabulated. Often the surveys lead to bringing on additional groups or activities, such as a community garden or a specific outing.

6. Describe the strategies to engage residents in services, services planning/operations, and in building community and facility operations.

Social and educational programs will be developed and implemented by tenants, staff, and volunteers to foster community within the development and help tenants become comfortable with the services staff. On-site activities facilitated by peers, services staff, and volunteers may include movie nights, game nights, reading groups/book clubs, spiritual groups, holiday celebrations, arts and crafts, field trips, cooking classes and nutrition counseling, AA/NA meetings and anger management/non-violent conflict resolution classes. At least once per month tenants will have the opportunity to participate in one or more of these activities. Site staff will also facilitate introductions between tenants and the local neighborhood councils, neighborhood watches, police advisory boards, park advisory boards, community centers, recreation centers, and community-based organizations and encourage tenants to seek out community organizations and activities that interest them.

## **Section 2: Safety and Security**

1. Summarize the written policies and procedures on privacy and confidentiality of residents.

All property management and services staff are required to sign a "Statement of Confidentiality" to safeguard the security and privacy of all information contained in tenants' records. Staff assure that all records are housed in a locked file cabinet in a locked room are secure and confidential. All information concerning any Tenant or Applicant is privileged information, and may not be shared with any unauthorized individual without the expressed written consent of the tenant.

2. Summarize the written policies and procedures on sign in/out procedures, fire/safety drills, and posted local contacts in case of emergency.

Sign in/out procedures: Vendors are required to sign-in/out. Tenants and visitors are encouraged to also sign in and out are not required to do so. On site security help oversee this policy.

Fire/Safety Drill Policy: Evacuation drills are conducted at least twice every year by property management at expected or unexpected times and under varying conditions to simulate the unusual conditions that occur should an evacuation be necessary.

Posted local/emergency contacts: As an integral part of the building's emergency communication network, local/emergency contact information and signage is posted by property management throughout the properties and fire and disaster rules are issued to tenants at move-in. We also have in place a 24-hour emergency answering service that tenants are encouraged to utilize, noting that in case of an emergency to call "911". During our monthly community meetings discussions are held with tenants to routinely explain safety procedures and protocols.

3. Describe the building design safety features for ensuring resident and staff safety (include lighting, entrance/exits, locked doors, common area locations).

The on-site property manager performs daily walks to ensure safety. This includes checking the interior and exterior lighting, entrance and exit signage and locks on doors and common areas. Buildings will have a security camera system, secured parking area, and 2 entry/exit doors in each office. Property managers are trained to know the building shut-off valves. We encourage the tenants that, for protection, the outside doors must remain locked at all times. In addition, it is extremely important that tenants keep their apartment door locked. If a tenant has guests and/or visitors coming to visit, they should enter the building through the main lobby entrance only. To provide the best possible security, we promote the neighborhood watch system.

4. Summarize the written policies and procedures on ensuring staff safety.

The property manager takes steps to ensure staff safety by regularly providing in-service staff trainings. Staff also works closely with local law enforcement agencies and on-site security personnel. Internal processes include the distribution and frequent training on the ACOF Employee Handbook that provides detailed written policy and procedures to ensure staff safety. This handbook has many written procedures to ensure staff safety, such as a security policy and emergency procedures.

5. Summarize the written policies for addressing violations of resident/staff safety by residents or staff.

The property manager will govern and manage the buildings in accordance to the lease and the House Rules. Should a tenant violate any portion of the lease, ACOF must address that violation(s) in a timely manner by giving the tenant one of the following: a verbal warning, a written warning, a notice to perform or quit or a notice to quit. The type of notice will depend on the type of behavior the exhibited. If the behavior is considered minimal such as throwing trash on the floor, the Property Manager should give the tenant a verbal warning and ask for them to correct the behavior immediately. Should the tenant continue the nuisance behavior, the Property Manager should follow with a written warning. Should the behavior continue and not remedied the tenant should be given a notice to quit, as deemed appropriate.

6. The service plan and property management plan submitted with the application must impose no restrictions on guests that are not otherwise required by other project funding sources or would not be common in other unsubsidized rental housing in the community. Describe the guest/visitor policy for residents.

Guest and visitors are welcome to visit tenants. Tenants are responsible for informing their guests and visitors of the House Rules and Regulations and ensure that they conduct themselves accordingly. Tenants are responsible for any violations of the Lease and/or House Rules by their guests and/or visitors. In addition, the tenant will be charged for any and all damages caused by their guests and/or visitors.

7. Summarize the written policies for coordination with property management for resolution of tenant issues and implementation of policies and practices to prevent evictions and to facilitate the implementation of reasonable accommodation policies.

ACOF has developed a 5-step process for resolution of tenant issues in our grievance procedure.

### **Step 1**

If the tenant believes that the property management or services staff has acted in a manner that adversely affected him/her or that management has not complied with the terms of the lease, we urge the tenant to speak directly with the person(s) with whom they disagree.

### **Step 2**

If the tenant's issue remains unresolved, he/she may complete a Formal Meeting Request form. The form is available in community areas at all properties. The form can be turned in to either the case manager or the property manager. A meeting will be scheduled within 5 business days of receipt of the tenant's written request, and a proposed resolution will be provided in writing 5 business days after their meeting. We believe that most areas of concern can be resolved by having meeting and working together to create a solution.

### **Step 3**

If the tenant does not believe the issue has been resolved after discussing and meeting with on-site staff, the tenant can contact the supervisor responsible for property management or services at the site within 10 business days of receiving your written response to the Step 2 grievance form.

### **Step 4**

If the tenant does not believe his/her concern has been adequately addressed after Step 1, Step 2, and Step 3, the tenant can request a Step 4 Grievance Resolution Review form from either their case manager or the property manager. This goes to the Supervisor of the Department.

### **Step 5**

If the tenant disagree with the determination of the grievance, he/she may submit an appeal via letter to ACOF's Grievance Resolution Board requesting reconsideration.

8. Summarize the written policies for coordination with property management for integration of the Target Population with the general public.



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NPLH units will be integrated throughout the development, with no distinction from the other units.

## Part V. Staffing

### Section 1: Staffing Chart

List all staff positions that will provide services to the tenants of the NPLH Assisted Units. Include County, other LSP, or Development Sponsor staff positions, and any staff positions of partnering organizations who have committed time to the Project. Include the services coordination staff. For each position, list the position title, minimum requirements, the full-time equivalent (FTE), the organization under which the position resides, and the location of the position (on-site or off-site). Do not include staff which serve non-NPLH Units. If a staff position serves both tenants in NPLH and non-NPLH units, include only that portion (i.e., % FTE) of the staff position dedicated to NPLH Assisted Units. Attach a copy of each positions duty statement, if these documents are available.

**NOTE: All staff positions listed here must be reflected in the Supportive Services Budget Table. Be sure to indicate which staff position will be responsible for Homeless Management Information System data entry. If the cost of supportive service position is included as part of the Project's operating budget and the position will serve NPLH units, that position must be included in this chart.**

| Title                    | Minimum requirements  | Total FTE:   | 2.5 | Employing Organization  | Location                       |
|--------------------------|---|--|-----|---|--------------------------------|
| List each staff position | List min. required staff preparation include (education & experience) <b>NOTE: Doesn't take place of the job description or duty statement.</b>   | Indicate FTE staff positions for NPLH units (half-time is 0.5 FTE) |     | This could be the County, another LSP, Sponsor or a Project Partner | Select "On-Site" or "Off-Site" |
| Case Manager             | Clinic Supervisor - Must be licensed in the State of California as one of the following: Marriage and Family Therapist, Licensed Clinical Social Worker, or Psychologist. Two years post-license experience as a licensed therapist in behavioral health or social services setting AND one year as a lead worker or full-scope supervisor in a clinical setting.                             | 0.25   |     | Lead Service Provider   | Off-Site                       |
| Case Manager             | Clinical Therapist I - Can be licensed or pre-licensed. Pre-licensed must be eligible for state waiver, obtain a California license and promote to licensed staff within six years of first registration with state Board of Behavioral Sciences.   | 1  |     | Lead Service Provider   | On-Site                        |
| Case Manager             | Social Worker II - Must meet one of the following: 30 semester units of completed coursework from an accredited college in behavioral or social science or 60 semester (90 quarter units) of completed coursework from an accredited college, which includes 15 semesters (23 quarter) units in behavioral science.   | 1  |     | Lead Service Provider   | On-Site                        |
| Peer Support             | Peer & Family Support - High School Diploma, GED equivalent or certification in Consumer Readiness and a California identification Card or Driver License and 4160 hours of paid or volunteer experience in mental health, social or human services and certification of completion in Mental Health Worker Training Program which must be completed prior to end of the probationary period. | 0.25   |     | Lead Service Provider   | Off-Site                       |

|            |  |   |                       |     |
|------------|--|---|-----------------------|-----|
| File Name: | Duty Stmt1, Duty Stmt2, Duty Stmt3, Duty Stmt4 | Staff Duty Statements (all providers, if available) | Hard Copy and on USB? | Yes |
|------------|--|---|-----------------------|-----|

### Section 2: Staffing Ratios

1. Indicate the overall services staffing level for the Project by completing the calculation below.

|    |   |      |
|----|---|------|
| a. | Total NPLH Assisted Units   | 39   |
| b. | Total FTE Service Staff from the Staffing Chart for the NPLH Assisted Units | 2.5  |
| c. | Number of NPLH units per FTE Staff Person (a÷b)                             | 15.6 |

| Supportive Services Plan (SSP) §203   |  |   |                             |                      | Rev. 9/25/19       |
|---|--|---|-----------------------------|----------------------|--------------------|
| 2. Complete case manager staffing ratio chart. Include all case mgmt. staff in staffing & budget forms, requires FTE case mgr. to resident ratios be appropriate to specific NPLH populations, as determined by the County or other LSP.  |  |   |                             |                      |                    |
| Population Type   | Chronic Homeless                                 | Homeless  | At-Risk of Chronic Homeless |                      |                    |
| Case Mgr. Ratio   | 1:20   | 1:20  | 1.2                         |                      |                    |
| Part VI. Supportive Services Budget   |  |   |                             |                      |                    |
| Section 1: Supportive Services Budget Table.  |  |   |                             |                      |                    |
| NOTE: If the cost of supportive services is included as part of the Project's Operating Budget (as documented in the UA) and the funds will serve NPLH units, this position/expense item and the dollars associated with it (or that portion connected to the NPLH units) must be included in this Supportive Services Budget Table.  |  |   |                             |                      |                    |
| Income Source/Program Name  |  | Amount  | Type                        | Status               | % of Total Budget  |
| CoC   |  | \$208,469.00  | Cash                        | Committed            | 75.00%             |
| CoC   |  | \$69,490.00   | Cash                        | Committed            | 25.00%             |
|   |  |   |                             |                      | 0.00%              |
|   |  |   |                             |                      | 0.00%              |
| <b>Total Revenue:</b>   |  | <b>\$277,959.00</b>   |                             |                      | <b>100.00%</b>     |
| Expense Item  |  | Amount  | Type                        | Status               | % of Total         |
| Staff Salaries: List by title of position. (This list must match the Staffing Chart above.)   |  |   |                             |                      |                    |
| Clinical Supervisor   | FTE 0.25   | \$24,779.00   | Cash                        | Committed            | 8.91%              |
| Clinical Therapist I  | FTE 1  | \$62,250.00   | Cash                        | Committed            | 22.40%             |
| Social Worker II  | FTE 1  | \$60,526.00   | Cash                        | Committed            | 21.78%             |
| Peer & Family Support   | FTE 0.25   | \$9,744.00  | Cash                        | Committed            | 3.51%              |
| Fringe Benefits   |  | \$81,660.00   | Cash                        | Committed            | 29.38%             |
| <b>Total Staff Expenses</b>   |  | <b>\$238,959.00</b>   |                             |                      | <b>85.97%</b>      |
| Tenant Transportation   |  |   |                             |                      | 0.00%              |
| Equipment   |  |   |                             |                      | 0.00%              |
| Supplies  |  |   |                             |                      | 0.00%              |
| Travel  |  |   |                             |                      | 0.00%              |
| Office Rent/Occupancy Costs (don't include rent/leasing costs for SH units)   |  |   |                             |                      | 0.00%              |
| Training  |  |   |                             |                      | 0.00%              |
| Consultants: List by Function   |  |   |                             |                      | 0.00%              |
| Subcontractors/Partners (list by Entity & Service Type)   |  |   |                             |                      | 0.00%              |
| Other Expenses (Client Support Services)  |  | \$39,000.00   | Cash                        | Committed            | 14.03%             |
| Other Expenses (type in expense description)  |  |   |                             |                      | 0.00%              |
| Other Expenses (type in expense description)  |  |   |                             |                      | 0.00%              |
| <b>Total Expenses</b>   |  | <b>\$277,959.00</b>   |                             |                      | <b>100.00%</b>     |
| Supportive Services Cost Per Unit: Permanent supportive housing best practice suggests a range between \$5,000 - \$10,000 annually in services per household, depending upon the intensity of the needs of the target population. Complete the following calculation about supportive services cost per unit for the Project. If the supportive services cost per unit, as calculated below, differ from industry practice, provide a narrative explanation. The Project must meet/address the industry standard.   |  |   |                             |                      |                    |
| Supportive Services Expense Per Unit Calculation Table  |  |   |                             |                      |                    |
| a. Total NPLH Assisted Units  |  |   |                             |                      | 39                 |
| b. Total Supportive Services Expenses   |  |   |                             |                      | 277959             |
| c. Total Supportive Services Expenses per Unit: (b ÷ a)   |  |   |                             |                      | <b>7127.153846</b> |
| Section 2: Budget Narrative and Funding Commitments   |  |   |                             |                      |                    |
| 1. Describe how budgeted amounts are adequate to provide services described in Supportive Services Plan and in Services Staffing Table:<br>The Department's many years of experience with providing mental health services to consumers has shown that the ratio to household and expenditures are appropriate with this type of service. Additionally, we are ensuring ample budget is available to the consumers with the Client Support Services Flexible Spending budget as should an unusual need arise the Department will be able to provide assistance to the consumer        |  |   |                             |                      |                    |
| 2. Document committed funds with letter from committing agency that includes the items below. Documented services/funding must appear in Supportive Services Budget Table.  |  |   |                             |                      |                    |
| a) Project name; b) Description of services to be funded or provided; c) Dollar value of funds or in-kind services. If cash is provided, state funding source; d) Funding term or service provision; e) A description and history of agency/organization providing funding or services.   |  |   |                             |                      |                    |
| File Name:  | SS Fund Ltr1, SS Fund Ltr2, SS Fund Ltr3, etc... | Attach letter(s). Include: Project name; description of services; dollar value of funds or in-kind services; if cash is provided, state funding source; funding term; description & history of agency/org. providing funding or services. |                             | Attached and on USB? | Yes                |
| 3. For funding that is not yet committed, specifically describe the experience filling major services funding gaps in similar housing.<br>N/A   |  |   |                             |                      |                    |
| 4. Describe in specific terms the plan to fill any service gaps that occur during Project life due to expiration of grants, partner withdrawals, cancellation of a commitment or any other reason. Describe experience filling service gaps caused by loss of major funding sources.<br>The funding sources being utilized for services are Short Doyle Medi-Cal and MHSA (Mental Health Services Act). There is no indication that the Medi-Cal program will expire. With the MHSA funds, there are prudent reserves required to be set aside for any unforeseen changes in funding. |  |   |                             |                      |                    |
| Section 3: Service Funding History Table: The purpose of this section is to document the funding history of the LSP. The LSP shall document a history of securing supportive service funding sufficient for the Department to make a determination that the provider will be able to access funds from the programs that fund the services identified in the Supportive Services Chart. List only funding obtained in the last five years. Complete the table containing the information required below:  |  |   |                             |                      |                    |
| Funding History for: (LSP)  |  | County of San Bernardino Department of Behavioral Health  |                             |                      |                    |
| Source of Funds/Funding Program   | Purpose of Award (Use of Funds)                  | Amount  | Award Date & Funding Term   | Population(s) Served |                    |

# Supportive Services Plan (SSP) §203

Rev. 9/25/19

|   |   |       |                |   |
|---|---|-------|----------------|---|
| San Bernardino County Department of Behavioral Health is under contract with the state Department of Health Care Services to provide specialty mental health services to the Medi-Cal population in San Bernardino County. As the contracted Mental Health Plan, we are funder of all specialty mental health services. DBH is also, by contract, the organized delivery system for substance use disorder treatment. DBH operates under the 1915b and 1115 Medicaid waivers. DBH is also the funder of Full Service Partnership programs that serve the Permanent Supportive Housing severely mentally ill population. | To serve the behavioral health needs of those with serious mental illness and substance use disorders who are residing San Bernardino County. | ##### | 2014 - Ongoing | Consumers living in San Bernardino County with serious mental illness and/or substance use disorders. |
|   |   |       |                |   |
|   |   |       |                |   |
|   |   |       |                |   |
|   |   |       |                |   |

## Part VII. Collaboration and Reporting

### Section 1: Collaboration

Industry practice indicates that services are often best delivered by entities with specialized expertise. Consequently, effective projects are based on collaboration among organizations with different types of service expertise, or by specialized divisions within an organization. Counties should document collaboration between two or more service providers. Applications will be deemed to meet the collaboration criteria if the application documents a commitment from a service organization other than the Applicants or affiliates of the Applicants to provide a portion of the services to project residents. Cooperation among specialized intra-organizational service programs, groups, or departments may also qualify as collaboration.

Based on the contracts attached between the Applicant and non-affiliated service providers, explain the collaboration between the Applicant and the service providers. Include a short narrative describing the collaborative relationship with the outside service provider or an intra-organizational service program, group, or department that is listed in the Supportive Service Chart. Describe the specific services with which the collaborative entity will be involved.

DBH will be the lead service provider and does not intend to contract with any other providers at this time. DBH is responsible for providing mental health and/or substance use disorder services to County residents who are experiencing mental illness and/or substance use disorders. DBH provides treatment services and education for communities and residents of the County of San Bernardino through contracts with community based organizations and County operated clinics with the goal of promoting prevention, intervention, recovery, and resiliency for individuals and families.

DBH, U.S. Vets and ACOF will work collaboratively to promote the success, stability and retention of tenants at Liberty Lane. The organizations will work together creating an opportunity for planning and strategizing to ensure that Case Management and Property Management work as a team.

### Section 2: Reporting Requirements Certification

Applicant certifies that not later than 90 days after the end of each Project's fiscal year, the Applicant shall submit an independent audit for the Project prepared by a certified public accountant and in accordance with the requirements noted in the Project's regulatory agreement and the Department's current audit requirements, which are posted to the Department's website and which may be amended from time to time. §214(c) On an annual basis, the County shall submit the data listed in §214(e) for each of its NPLH Assisted Units. The County shall work with each Project's property manager and Lead Service Provider to gather the data. The data may be, but is not required to be, gathered from the local Homeless Management Information System (HMIS). §214(d) The data shall be submitted in electronic format on a form provided by the Department. The County, the property manager and the Lead Service Provider shall work together to resolve any data quality concerns to the best of their ability prior to submission of the data to the Department.

Yes

Dated:

1/8/2019

Statement Completed by (please print):

Signature:

Title:

Agency or Department:

Agency or Department Address:

Agency or Department Phone:

Chief Executive Officer

County of San Bernardino

385 N. Arrowhead Avenue, 5th Floor San Bernardino, CA 92415

909-387-5418





## County Administrative Office

**Gary McBride**  
Chief Executive Officer

December 17, 2019

Dora Leong Gallo, President and Chief Executive Officer  
A Community of Friends (ACOF)  
c/o Redlands Supportive Housing, L.P.  
3701 Wilshire Blvd., #700  
Los Angeles, CA 90010

Re: Redlands Supportive Housing

Dear Ms. Leong Gallo,

On December 17, 2019, the Board of Supervisors of the County of San Bernardino approved a commitment of: (1) HOME Investment Partnerships (HOME) funds in the amount of One Million Five Hundred Forty-Seven Thousand Dollars (\$1,547,000) (the "County HOME Loan"); (2) County Special Needs Housing Program Funds in the amount of One Million Fifty Thousand Dollars (\$1,050,000) (the "County SNHP Fund Loan"); (3) County Housing Asset Funds Program Funds in the amount of One Million Fifty Thousand Dollars (\$1,050,000) (the "County Housing Asset Fund Loan"); (4) County Housing Funds in the amount of Two Million Four Hundred Fifty-Three Thousand Dollars (\$2,453,000) (the "County Housing Fund Loan"); (5) County Neighborhood Initiative Program Funds in the amount of Six Hundred Thousand Dollars (\$600,000) (the "County NIF Fund Loan", and collectively with the County SNHP Fund Loan, County Housing Asset Fund Loan, and the County Housing Fund Loan, the "County Affordable Housing Loans") for the Redlands supportive housing development.

The project is located in the City of Redlands, San Bernardino County, and includes the development of an 80-unit low income supportive rental housing community. If Redlands Supportive Housing, L.P., secures an allocation of Low Income Housing Tax Credits, the development will increase affordable housing opportunities in the County of San Bernardino.

The funds are available as a loan under the following terms:

Interest Rate: 3%

Term of Affordability: 57 years from construction closing

Term of the Loan: 57 years from construction closing

Repayment: Annual payments based on 50% of residual receipts as defined in the loan agreement. When other public funding is involved, County of San Bernardino will negotiate the payment of residual receipts.

Collateral: Deed of Trust and Regulatory Agreement.

### BOARD OF SUPERVISORS

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**Gary McBride**  
Chief Executive Officer

**REDLANDS SUPPORTIVE HOUSING**

**DECEMBER 17, 2019**

**PAGE 2 of 2**

A loan agreement and ancillary documents will be considered by the Board of Supervisors once Redlands Supportive Housing, L.P. secures an allocation of Low Income Housing Tax Credits. The County Affordable Housing Loans will be subject to meeting all the County of San Bernardino requirements and acceptance of due diligence documentation. The County Affordable Housing Loans are nonrecourse and not funded from tax-exempt bond proceeds.

If you have any questions, please contact Felicia Brown-Smith at (909) 387-4303.

Sincerely,

A handwritten signature in black ink, appearing to read 'G. McBride', is written over the printed name.

**GARY McBRIDE**  
**CHIEF EXECUTIVE OFFICER**