



COUNTY OF SAN LUIS OBISPO
DEPARTMENT OF SOCIAL SERVICES

FY 2022 HUD CoC Program –
Supplemental Application (Renewals, Renewal/
Expansions, New Bonus Projects)

On August 1, 2022, the U.S. Department of Housing and Urban Development (HUD) released the Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care (CoC) Program Competition.

The County of San Luis Obispo is requesting proposals for the FY 2022 Continuum of Care Program competition administered by HUD, and will be accepting applications for renewal projects, as well as new bonus funding projects.

All FY22 Continuum of Care Program applicants will need to submit a supplemental application in addition to the HUD application submitted in e-snaps.

Please submit Supplemental Applications by email to ss_homelessgrants@co.slo.ca.us or deliver to George Solis at the County Department of Social Services, 3433 S. Higuera, San Luis Obispo, CA. Both the esnaps and Supplemental Application must be received no later than **Wednesday, August 31, 2022, at 5pm**

Additionally, additional documents described on page 13 of this RFP must be submitted by email or in person no later than August 31, 2022.

I. PRIMARY APPLICANT INFORMATION

Organization Name	Transitions Mental Health Association
UEI Number	QWZ6GNUR3PM7
Contact Person/Title	Mark Lamore, Division Director Homeless Services
Phone Number	805 748-0610
Email	mlamore@t-mha.org
Address	784 High Street
City, State, Zip	San Luis Obispo, CA 93401

II. PROJECT

Project Name	SLO City PSH
Application Type	<input checked="" type="radio"/> Renewal <input type="radio"/> Renewal Expansion <input type="radio"/> New Bonus Project (Non DV Bonus Project)

III. EXPERIENCE

<p>1. Describe the experience of the applicant and sub-recipients (if any) in working with the proposed population and in providing housing similar to that proposed in the application.</p>
<p>See Addendum C (1)</p>
<p>2. Describe experience in effectively utilizing federal funds including HUD grants and other public funding, including satisfactory drawdowns and performance for existing grants as evidenced by timely reimbursement of subrecipients (if applicable), regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants.</p>
<p>See Addendum C (2)</p>
<p>3. What is the date of the organization’s most recent audit? (Attachment requirement)</p> <p><i>Please submit a copy of the organization’s most recent audit by email (ss_homelessgrants@co.slo.ca.us) or in person to George Solis at DSS no later than August 31, 2022.</i></p>
<p>August 24, 2022 no findings/no concerns final report pending</p>
<p>4. Housing First and/or Lower Barrier Implementation (Attachment requirement) Describe experience with utilizing a Housing First approach. Include: 1) eligibility criteria; 2) process for accepting new clients; 3) process and criteria for exiting clients. Must demonstrate there are no preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, self-disclosed or perceived sexual orientation, gender identity or gender expression. Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure that project participation is terminated in only the most severe cases. <i>Existing projects should submit a copy of the project’s relevant policies and procedures by email (ss_homelessgrants@co.slo.ca.us) or in person to George Solis at DSS no later than August 31, 2022.</i></p>

See Addendum C (4)

5. Describe how Housing First protocols will be incorporated into the proposed project and what will you do to ensure that people can succeed in programs that cannot have service participation requirements or prerequisites. *Housing First is a model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions (such as sobriety or a minimum income threshold). Transitional housing and supportive service only projects are considered using a Housing First model for the purposes of this application if they operate with low barriers, work to quickly move people into permanent housing, do not require participation in supportive services, and, for transitional housing projects, do not require preconditions for moving into the transitional housing (e.g., sobriety or minimum income threshold) but do provide or assist with access to such supportive services if needed and requested by program participants.*

TMHA has followed the Housing First model for all of our HUD funded permanent supportive housing programs since 2014. As a component of the Housing First model, program participants are not required to participate in any program services or activities. TMHA offers and/or refer participants to a wide variety of support services including recovery, vocational, educational, physical/mental health, independent housing, socialization, entitlement benefit application programs. Program participants are informed of these services and assisted with appropriate applications/referrals; however, newly referred or current participants are not required to participate in any services to remain eligible for permanent supportive housing.

IV. Design of Housing & Supportive Services

<p>6. Describe the needs of the clients to be served.</p>	
<p>See Addendum C (6)</p>	
<p>7. (PSH, RRH & Joint TH-RRH Projects) Describe the type and scale of all the supportive services that will be offered to program participants to ensure successful retention in or help to obtain permanent housing, regardless of funding source, meets the needs of clients to be served.</p>	
<p>During the participants involvement in the permanent supportive housing program, they will be offered supportive services which can include: independent living skills, financial management/budgeting, substance abuse recovery referrals, general assistance/SSI/SSDI benefit application assistance, food resources, mental/physical health referrals, independent housing search and referral, housing retention assistance, socialization, educational/vocational program referrals and general case management to assist with coordinating and obtaining appropriate services. In the event of lease violations, the participant and program staff will to meet to discuss the infraction and develop a plan to resolve this issue. Should the lease violation continue, written warnings are issued with a clear written plan of action to ameliorate the violation. Should the violation continue, all parties will meet to attempt corrective action with the possible issuance of notices to vacate as required through the California Landlord Tenant Laws.</p>	
<p>8. (Coordinated Entry Projects) Describe how the proposed project will align with the County's existing Coordinated Entry System.</p>	
<p>TMHA's permanent supportive housing programs have participated in the Coordinated Entry System since the inception of the CES. On a monthly basis, our Homeless Services program manager participates in the CES meetings to discuss and obtain referrals for all PSH vacancies. In addition, through the CES/HMIS systems, a dynamic list of potential program participants is available and utilized for the identification and placement of all new program participants.</p>	
<p>9. For the proposed project, please estimate the expected % of households that will experience an increase in earned income from program start to program exit:</p>	<p>10 %</p>
<p>10. For the proposed project, please estimate the expected % of households that will experience an increase in non-employment income from program start to program exit:</p>	<p>25 %</p>

<p>11. For the proposed project, please estimate the expected % of households that will experience an increase in total income from program start to program exit:</p>	<p>25 %</p>
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IV. Leveraging Housing Resources

12. For permanent housing applications (PSH) (RRH) (TH-RRH), describe how the project will utilize housing subsidies or subsidized housing units not funded through the CoC or ESG programs. (Housing subsidies or subsidized housing units may be funded through any of the following sources: Private organizations; State or local government, including through the use of HOME funding provided through the American Rescue Plan; Public Housing Agencies, including through the use of a set aside or limited preference; Faith-based organizations; or Federal programs other than the CoC or ESG programs.)

Applicants must attach letters of commitment, contracts, or other formal written documents that demonstrate the number of subsidies or units being provided to support the project. For a new permanent supportive housing project, provide at least 50 percent of the units included in the project; or for a new rapid re-housing project, serve at least 50 percent of the program participants anticipated to be served by the project.

Several of the SLO City PSH participants are currently residing in housing units owned by the House Authority of San Luis Obispo (HASLO). As per negotiations between TMHA and HASLO the master leases for these units are significantly below market values in San Luis Obispo. In addition, TMHA has developed excellent landlord relationships and currently all of the CoC units are master leased at or below HUD payment standards for the SLO County. Program participants are eligible for either “Move-on”, Mainstream, Emergency, and/or set aside section 8 voucher at the time they are ready to graduate from the program. The section 8 housing subsidy allows the program participants to move to affordable independent housing, creating openings in the program for new program participants. Additional project leveraging includes case management from the State funded Housing Disability Advocacy Program where program participants receive case management with a focus on disability benefit advocacy. Several of the SLO City PSH participants qualified for the Now housing program in which they receive intense case management assistance.

TMHA operates a number of in-house programs including, Supported Employment, Behavioral Health Navigation, Central Coast Hotline, Wellness Centers, and Family Support Services, all of which the SLO City PSH participants can access free of charge.

TMHA collaborates with community partners to provide program participants support services. This partnerships include HASLO, Department of Social Services, Social Security Administration, Department of Vocational Rehabilitation, Behavioral Health, Department of Motor Vehicles, Community Health Centers and CenCal.

13. For permanent housing applications (PSH) (RRH) (TH-RRH), describe the current strategy used to recruit landlords and show how well it works at identifying units across the entire CoC area, including areas where the CoC has historically not been able to find units.

TMHA has owned and operated a variety of supportive housing units throughout San Luis Obispo County for over 35 years. As a result of our long standing relationships with property owners, we are able to procure needed housing units during program expansion. One of the largest SLO affordable property owners works closely with TMHA and currently we share over 25 master leased units at or below the current section 8 payment standard. In addition, TMHA has been awarded two separate No Place Like Home grants resulting in 14 new permanent housing units in the City of San Luis Obispo. As we continue to develop new housing units, we will be reaching out to existing and new property owners to identify new affordable housing units both in the South and North Counties.

14. For permanent housing applications (PSH) (RRH) (TH-RRH), identify any new practices that have been implemented to recruit landlords in the past 3 years and the lessons learned from implementing those practices.

Recently, our County was awarded Emergency Housing Vouchers which included significant financial incentives for new and existing landlord to participate in the section 8 housing program. In addition to these incentives, TMHA management has continued to provide support to landlords including: property management, minor repairs, participant damage reimbursement, legal assistance, and dispute mediation with participants and neighbors. We have learned that immediate attention to potential issues often result in a quick amelioration of the problem and fosters a positive relationship with landlords and neighbors.

15. For permanent housing applications (PSH) (RRH) (TH-RRH), describe how you will use data to update your landlord recruitment strategy.

TMHA tracks all landlord information through a property management system, YARDI. This data is used to record, monitor and maintain rent payments, section 8 income, property maintenance and property ownership data. Monthly reports are generated from YARDI to track payment history, security deposits and the number of new and existing landlords. This data provides us with real time information on the number and type of housing units, geographical data and contact information. On a regular basis we use this information to reach out to existing landlords for additional units, and track the concentration of housing units as well as areas needed for expansion.

IV. Leveraging Healthcare Resources

16. For permanent housing applications (PSH, (RRH) (TH-RRH), describe how the project will utilize healthcare resources to help individuals and families experiencing homelessness. (Sources of health care resources include: Direct contributions from a public or private health insurance provider to the project (e.g., Medicaid), and Provision of health care services, including mental health services, by a private or public organization (including FQHCs and state or local health departments) tailored to the program participants of the project, direct partnerships with organizations that provide healthcare services, including mental health services to individuals and families (including FQHCs and state and local public health departments) experiencing homelessness who have HIV/AIDS). Eligibility for the project must comply with HUD program and fair housing requirements. Eligibility criteria cannot be restricted by the eligibility requirements of the health care service provider).

Applicants must attach formal written agreements and must include: value of the commitment, and dates the healthcare resources will be provided. In the case of a substance abuse treatment or recovery provider, it will provide access to treatment or recovery services for all program participants who qualify and choose those services; or the value of assistance being provided is at least an amount that is equivalent to 50 percent of the funding being requested for the project, which will be covered by the healthcare organization. In-kind resources must be valued at the local rates consistent with the amount paid for services not supported by grant funds.

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TMHA collaborates with Community Health Centers, County Behavioral Health, Managed Care, as well as a number of private physicians, psychiatrists and dentist in order to refer our permanent supportive housing participants for medical and psychiatric services. Although we do not have commitment letters, staff has developed strong working relationships with our community health provider to ensure our program participants are able to access affordable health care. Several of TMHA's staff are registered R.N. and licensed partitionarers of the healing arts. These staff member have developed positive working relationships with our community health providers and have been successful in referring our clients for services.

V. Addressing Severity of Needs

17. Estimated percentage of participants to be served that are chronically homeless:	100	%
18. Estimated percentage of participants to be served that have low or no income:	100	%
19. Estimated percentage of participants to be served that have history of victimization/abuse, domestic violence, sexual assault, childhood abuse:	25	%

VI. Timeliness

<p>20. Describe plan for rapid implementation of the program, documenting how the project will be ready to begin housing the first program participant. Provide a detailed schedule of proposed activities for 60 days, 120 days, and 180 days after grant award. Please also estimate the average time from a client’s program entry to housing placement.</p>
<p>The SLO City PSH program is currently in full operation</p>

VII. Project Effectiveness

<p>21. Coordinated Entry Participation- Minimum percent of entries projected to come from CE referrals</p>	<p>100</p>
<p>22. Projected number of households to exit to permanent housing</p>	<p>10</p>

VIII. Equity Factors

<p>23. Project has under-represented individuals (BIPOC, LGBTQ+, etc) in managerial and leadership positions</p>	<p><input type="radio"/> YES</p> <p><input checked="" type="radio"/> NO</p>
<p>24. Project's organizational board of directors includes representation from more than one person with lived experience (per 24 CFR 578.75(g) Participation of Homeless Individuals)</p>	<p><input checked="" type="radio"/> YES</p> <p><input type="radio"/> NO</p>

25. Describe how your organization has identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population.

TMHA operates a number of outreach programs including: PATH, Homeless Outreach Program, Housing Disability Advocacy Program, Mental Health Case Management, SLO PD CAT case managers, SLO Fire Department case manager and Mental Health Advocacy case manager program. As a result of these outreach programs, there was a language barrier identified with our Spanish speaking homeless community members. TMHA has translated program information into Spanish and each of the outreach teams have access to Spanish interpreters when necessary. In addition TMHA supports a diversity, equity and inclusion training committee that assists staff with DEI awareness and recommendations for staff trainings.

26. Describe the actions the organization has taken or will take to eliminate the identified barriers.

This was address in the above question.

27. Describe the actions the organization will take to serve subpopulations that the CoC has identified as being underserved.

Through various outreach programs, staff will identify and encourage Spanish speaking homeless individuals to engage and participate in appropriate service referrals. We have found that by reducing the language barrier, a better rapport can be establish allowing a greater sense of trust which improves the opportunity of a successful connection to support services.

IX. Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decision Making and Providing Professional Development and Employment Opportunities.

28. Describe and provide examples of Professional Development (e.g. internships, continuing education, skill-based training) and employment opportunities provided to individuals with lived experience of homelessness by your organization.

In TMHA's Homeless Services Division, which supports our HUD permanent supportive housing programs as well as County funded Housing Now program, over half of the current full time staff have been identified as having lived experience. Of those staff members, at least 25% have experienced homelessness some time in their life. In addition, we hire peer mentors in many of our housing and support service programs. TMHA strongly supports the hiring and training of persons with lived experience. They have walked the walk and their experience is invaluable when working with our disabled chronic homeless clients.

29. Do you have a mechanism for obtaining feedback from program participants? Please describe (e.g. annual focus groups, consumer advisory panels, etc.).

Program participants and staff meet in groups and individually on a weekly basis to discuss program issues, participant concerns, dispute mediation, suggested program changes, new program activities, and recommendations for improvement. Annually TMHA conducts an agency wide satisfaction survey for all program participants. This is an opportunity for participants to submit any feedback anonymously. The results of the survey are reviewed by program participants, staff, and supervisors and administrators for improvement of services, identification of needed services and program effectiveness.

30. Do you agree to work with the CoC's Working Group for the Unsheltered Homelessness Set Aside	<input checked="" type="radio"/> YES <input type="radio"/> NO
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X. Addressing the Needs of LGBTQ+ Individuals

31. Does your agency have anti-discrimination policies in place.? (if so please provide copy as an attachment)

Please refer to TMHA Employee Handbook, page 6 Harassment, Discrimination and Retaliation Prevention

32. Describe what actions your organization will you take to ensure that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination?

Please refer to TMHA Employee Handbook - TMHA currently provides supportive housing and services to a number of individuals who have identified themselves as LGBTQ+. TMHA strongly discouriges any type of discrimination against staff, clients and family members.

XI. Alignment with the San Luis Obispo Countywide Plan to address homelessness

33. Describe how the project will align with a Line of Effort to support the San Luis Obispo Countywide Plan to address homelessness (2022- 2027).

One of the major components of the County Plan to Address Homelessness is the need for affordable permanent housing with supportive services. This HUD funded 38- bed permanent supportive housing program provides our disabled chronic homeless community members an opportunity to get off the street and receive supportive services while working to resolve some of the issues that led to homelessness. In addition, as individual move-on towards independent housing, program vacancies are available for individuals and families referred from the County Coordinated Entry System.

X. Attachments

Attachment A – Organizations most recent audit (Required)

Attach a copy of the organizations most recent audit no later than August 31, 2022

Attachment B – Project’s Policies and Procedures (Required)

Attach a copy of the project’s Housing First Policies and Procedures no later than August 31, 2022

Attachment C – Leveraging Housing Resources Commitment

PSH, RRH, Joint TH-RRH Applicants must attach letters of commitment, contracts, or other formal written documents that demonstrate the number of subsidies or units being provided to support the project. For a new permanent supportive housing project, provide at least 50 percent of the units included in the project; or for a new rapid re-housing project, serve at least 50 percent of the program participants anticipated to be served by the project.

Attachment D – Leveraging Health Care Resources Commitment

PSH, RRH, Joint TH-RRH Applicants must attach formal written agreements and must include: value of the commitment, and dates the healthcare resources will be provided. In the case of a substance abuse treatment or recovery provider, it will provide access to treatment or recovery services for all program participants who qualify and choose those services; or the value of assistance being provided is at least an amount that is equivalent to 50 percent of the funding being requested for the project, which will be

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covered by the healthcare organization. In-kind resources must be valued at the local rates consistent with the amount paid for services not supported by grant funds.

Attachment E – Supplemental Answers to Questions (Optional)

If you need more room to answer any of the application questions, please attach the additional information here. Include the question number for each question being answered.

For other additional or optional attachments, please label them clearly (e.g. Attachment E – “Title”).

XI. APPLICATION SUBMISSION:

Supplemental Applications will be due to Homeless Services Unit, County of San Luis Obispo Department of Social Services, August 31, 2022, 5PM.

Applicants may submit digital or hard copy applications to the locations below:

1. Soft Copy – email to SS_HomelessGrants@co.slo.ca.us
Subject line: FY 2022 HUD CoC Unsheltered Set Homelessness Aside Supplemental Application – (Applicant Name)
2. Hard Copies – Mail or Drop-off
Attn: Homeless Services Unit
County of San Luis Obispo Department of Social Services
3433 South Higuera Street
San Luis Obispo, CA 93403

Attachment C (1)

1. Describe the experience of the applicant and sub-recipients (if any) in working with the proposed population and in providing housing similar to that proposed in the application

Transitions-Mental Health Association (TMHA) is a community based, private non-profit human services agency. Since 1979, TMHA has developed and operated residential, vocational, and day rehabilitation programs in San Luis Obispo and Northern Santa Barbara Counties for psychiatrically disabled adults, homeless disabled adults, and at-risk youth. Our mission statement: *Transitions-Mental Health Association is a nonprofit organization dedicated to eliminating stigma and promoting recovery and wellness for people with mental illness through work, housing, community and family support services.* In Fiscal Year 2020-21, TMHA provided services to over 5,200 unduplicated clients and/or family members in San Luis Obispo and Northern Santa Barbara Counties. In addition, our agency provided over 10,000 mental health outreach and education contacts.

TMHA services include Mental Health Services Act (MHSA) Full Service Partnerships and Assertive Community Treatment programs, adult and youth oriented mental health housing and treatment programs, vocational services, homeless services, case management, social rehabilitation programs, three Wellness Centers in San Luis Obispo County, two Recovery Learning Communities in North Santa Barbara County, support groups, public outreach and education, and family advocacy services. TMHA operates the Growing Grounds Farms and Growing Grounds Downtown in San Luis Obispo and the Growing Grounds Farm in Santa Maria, three social enterprises that provide the only structured, multi-level vocational training program on the Central Coast for adults with mental illness. The three businesses employ over 200 adults annually. In 2010, TMHA assumed operation of the SLO Hotline, a 24-hour suicide prevention and mental health crisis line.

In 2014, TMHA launched *50Now*, a collaboration between TMHA, the County of San Luis Obispo, and a consortium of local nonprofit partners. Based on a “Housing First” best practice, the program identifies the 50 most vulnerable chronically homeless individuals in the County, then outreaches to them directly in an effort to persuade them to accept both services and permanent supportive housing. *50Now* uses a multidisciplinary team that includes a Recovery Specialist with lived experience, and provides a full range of services that include 24/7 supportive care, case management, and highly individualized treatment. Client outcomes have been overwhelmingly positive, and the Board of Supervisors recently extended and expanded the project, which has become *80Now*.

TMHA has been operating housing programs with in-house property management services for over 40 years. TMHA’s ability to provide multiple levels of service to our target population is fortified by our experience in managing the real estate component of each project. TMHA owns three properties (for a total of 52 beds) in San Luis Obispo County, and two houses and one triplex (for a total of 12 beds) in the city of Santa Maria. Last year, in partnership with the Housing Authority of San Luis Obispo, TMHA completed construction on Bishop Street Studios, a 34-unit project that received Federal Low Income Housing tax credits and currently has 100% occupancy. From program to program, TMHA’s role ranges from that of property manager and landlord to advocate and facilitator in partnership with the local Housing Authority. As the property owner and manager, TMHA is responsible for the continuing maintenance of the residences. More significantly, we serve as a regular touchstone for both tenants and their service providers. Our Property Managers and Housing Assistants respond to complaints

and concerns about the properties, coordinate with supportive service programs when necessary, and are often the point of first alarm if a tenant goes off their medication or becomes symptomatic.

Current TMHA Adult Residential Programs include a 20 bed HUD-funded Permanent Housing Program, 38 beds of HUD-funded permanent supportive housing, and 80 beds of SLO County-funded permanent housing. Many of these programs are for the disabled chronically homeless population, and have successfully operated within the County CoC and Homeless Services Oversight Committee (HSOC) overview to provide permanent housing and supportive services to this targeted population. TMHA has consistently implemented projects in accordance with HUD'S federal regulations, meeting all financial requirements including match, and providing all required data collection, financial tracking, and reporting requirements.

In summary, TMHA operates 153 beds contracted by San Luis Obispo County Behavioral Health (147 adults, 6 transition-age youth); 54 beds contracted by San Luis Obispo County through HUD Continuum of Care funding; 80 beds contracted through San Luis Obispo County Department of Social Services; and 2 beds operated through City of San Luis Obispo Inclusionary Housing funds.

TMHA is a member of the San Luis Obispo County Supportive Housing Consortium, which played an integral collaborative role in the development of the 2018 Consolidated Plan, including substantial input on the Continuum of Care for Homeless Persons Plan. TMHA's housing programs work in accordance with these County initiatives and share the same fundamental goals. TMHA is also a member of the Homeless Services Oversight Council, and an ongoing collaborator on both the Homeless Enumeration Project and is involved in the updating of the current 10 Year Plan to End Homelessness.

The most recent example of success with housing this vulnerable population is the No Place Like Home funded project on South and Branch Streets in San Luis Obispo with six very happy, permanently housed residents. One of them said, "I cannot believe my good luck to be living here in this wonderful place."

Attachment C (2)

2. Describe experience in effectively utilizing federal funds including HUD grants and other public funding, including satisfactory drawdowns and performance for existing grants as evidenced by timely reimbursement of subrecipients (if applicable), regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants.

TMHA has been a subrecipient of HUD housing grants for over 25 years as well as numerous State and local grants from public and private funding sources.

TMHA uses cost accounting to track and bill for program expenses, including federal HUD grants and other public funding. Unless the grant requires billing less frequently, the agency prepares the grant and/or contract billing each month. Once the month is closed, fiscal staff reviews program expenses and revenue and prepares the monthly billing and required back up documentation for the reimbursement request. Invoices, along with supporting documentation, are then prepared and sent to the funder for reimbursement. If questions arise or additional back up documentation is needed, staff respond as quickly as possible so as not to delay reimbursement. If staff need extra time to prepare the monthly billing, then they will reach out to the funder and request an extension. TMHA fiscal staff make every

effort to create positive and collaborative relationships with the funding agency which helps ensure satisfactory drawdowns and performance for the grants.

TMHA just completed a HUD monitoring and there were no findings or concerns. All program information is entered in the HMIS data base and TMHA assists with the HUD annual APR report.

Attachment C (4)

4. Housing First and/or Lower Barrier Implementation *(Attachment requirement)*

Describe experience with utilizing a Housing First approach.

TMHA has operated Housing First/Low Barrier permanent housing program since 2015 when house first/low barrier concepts were determined to be best practice. Prospective clients are referred through the Coordinated Entry System which use the VI-SPDAT vulnerability index to identify the most vulnerable disabled chronic homeless individuals and family members. During the initial intake, the prospective participant is interviewed to ensure they met HUD requirements for program participation. Participants are not barred from program participation due to income, marital status, sexual orientation, gender identity, familial status criminal records or substance abuse. As this is a permanent supportive housing program, participants are able to remain in the housing program for as long as they are eligible for services. Should a participant no longer want to participate or does not require supportive housing services, a joint effort between the participant and program staff is made to developed and support the participant in moving to independent housing. TMHA and the Housing Authority of San Luis Obispo have collaborated for years in assisting eligible program participant to move into affordable independent housing by use of section 8 housing vouchers. Once placed into an independent housing unit, TMHA staff continue to provide supportive services for a minimum of 6 months after leaving the program.

5. Describe how Housing First protocols will be incorporated into the proposed project and what will you do to ensure that people can succeed in programs that cannot have service participation requirements or prerequisites.

Attachment C (6)

6. (1) Describe the needs of the clients to be served.

This program is the result of converting a transitional housing program into the current permanent supportive housing program. Currently the program has 20 beds for disabled chronically homeless individuals and family members. Participants will be referred through a CoC coordinated entry process under the direction of the CoC Homeless Services Oversight Committee (HSCOC). Prioritization will be given to chronically homeless persons experiencing a severity of service needs. Program participants will be assessed and prioritized based on the length of time an individual has resided in a place not meant for human habitation, a safe haven, or an emergency shelter and the severity of the individual's service needs. Severity of the participant's service needs will be determined through a standardized assessment tool such as the VI-SPADT Vulnerability Index. This will be a low barrier, housing first program where participants will not be screened out due to low or no income, substance abuse issues or for legal issues with the exception of agency/State mandated restrictions. T-MHA will continue to collaborate with our CoC community partners including Behavioral Health, Community Hospital Center,

Community Action Partnership of San Luis Obispo, El Camino Homeless Services, 5Cities Homeless Coalition, SLO County Law Enforcement agencies, Department of Social Services and Housing Authority of San Luis Obispo, to conduct community outreach to identify, support and rapidly place chronically homeless individuals into permanent housing.

Once placed into permanent housing, residents will be provided supportive case management assistance where individual goals and objectives will be identified through a client center, best practice process. Support services will include referrals to medical providers, substance abuse programs, mental health services, educational/vocational programs, rental/security deposit assistance, credit repair, independent living skills and general housing stabilization. Program goals/outcomes are expected to be as follows: 75% of participants remaining in permanent housing at the end of the operating year or exiting to permanent housing during the operating year; 75% of participants will maintain or increase their total income from all sources as of the end of the operating year or program exit; 10% of participants will maintain or increase earned income as of the end of the operating year or program exit.