Item D.3  Consistency with the Three-Year Program and Expenditure Plan

Describe how the proposed housing development is consistent with the sponsoring county mental health department's approved Three-Year Program and Expenditure Plan. Provide specific information regarding how the development meets the priorities and goals identified in the Three-Year Program and Expenditure Plan.

Response:

The proposed Mosaic Gardens at Huntington Park project is located in Service Planning Area VII of Los Angeles County. Service Planning Area VII has very little housing production and there is a quantifiable need for affordable housing serving the TAY population in this area. The project is consistent with the LACDMH Three-Year Program and Expenditure Plan by providing a continuum of services for Transition Age Youth (TAY) who are homeless or at-risk of homelessness in a permanent supportive housing project. The project will provide MHSA-eligible tenants with supportive services that promote community reintegration and a commitment to recovery and wellness. A minimum of 15 units will be reserved for MHSA-eligible Transition Age Youth households.

Occupancy of these 15 units will be restricted to youths between 18 and 24 years of age who are homeless or are at-risk of homelessness with income no greater than 60% of the area median income and who will pay no more than 30% of their monthly income for rent. Mental health services will be provided through LACDMH network of mental health providers who provide services in Service Planning Area VII.
Item D.4  Description of Target Population to be Served

Describe the MHSA Rental Housing Program target population to be served in the development. Include a description of the following:

1. Age group, i.e., adults, older adults, children, transition-aged youth;
2. The anticipated income level of the MHSA tenants; and,
3. A description of the anticipated special needs of the target population to be served, e.g., physical disabilities, chronic illness, substance abuse, prior housing status, etc.

Response:

The MHSA Rental Housing Program target population that will be served in this project will be Transition Age Youth (TAY), with a serious emotional disturbance or a serious mental illness, between the ages of 18 and 24, and who are homeless or at-risk of homelessness as defined by the MHSA Housing Program guidelines. This population will earn no more than 60% of the area median income and will pay no more than 30% of their monthly income in rent. Many of the TAY population experience homelessness, mental illness, substance abuse, and a lack of resources and living skills. This population usually require assistance with obtaining a high school diploma or completing other educational goals, seeking vocational training or higher education and/or seeking employment opportunities.
Item D.5 Tenant Eligibility Certification

The county mental health department is responsible for certifying the eligibility of individuals, applying for tenancy in an MHSA unit, for compliance with the target population criteria. Submit a narrative description of the following:

1. How an individual applies to the county to become certified as eligible for an MHSA unit;
2. How certification of eligibility will be documented, provided to the individual applicant, and maintained by the county; and,
3. How certification of eligibility will be provided to the property manager/development.

Response:

LACDMH has developed a standardized application and certification process for the Los Angeles County Mental Health Services Act Housing Program.

Application Process

The standardized Tenant Certification and Referral Application is designed to be complete in collaboration with the applicant and referring agency. The application is designed to assess the applicant’s eligibility to receive MHSA services in Los Angeles County, homeless status, income/benefit establishment status, determine housing requirements and housing preference (i.e., household size and tenant housing preference). The referring agency is responsible for assisting the applicant with completing the Tenant Certification Application and any other required documents. An applicant may be referred by various community-based organizations including but not limited to their mental health provider, case manager in an emergency shelter, or by the project sponsor/developer.

After completing the required documents, the referring agency will forward the Tenant Certification Application to LACDMH – Housing Policy & Development (HP&D) Unit for review and processing.

Eligibility Determination

HP&D will review the received documents and determine if the applicant meets the eligibility criteria to be certified to reside in a MHSA funded unit. HP&D will notify the referring agency of the outcome of the Certification Application review and any reasons for denial within 5 business days. The referring agency will communicate the outcome of Certification Application review to the applicant.

Non-certified applicants may re-submit the Certification Application if the reasons that resulted in the denial change. If the project sponsor’s housing application process has already been initiated, the applicant may remain on the project sponsor’s prospective tenant list while they attempt to meet the MHSA eligibility criteria. If the applicant remains unable to meet the MHSA eligibility criteria, the project sponsor may then invite them to apply for any available non-MHSA funded units in the development or refer them to other permanent housing resources.

Certified applicants will be placed on a Master Referral List maintained by HP&D in an ACCESS database and the applicant’s application will be maintained on file. Certified applicants will be referred to the property management agency of the MHSA Housing Program project(s) based on the housing preferences identified on the Certification Application. The certified individuals are then subjected to the screening process established by each project sponsor/developer.
Item D.6 Tenant Selection Plan

Provide a tenant selection plan, specific to the proposed development, that describes the following:

1. How prospective tenants will be referred to and selected for MHSA units in the development;
2. The tenant application process;
3. The procedure for maintaining the wait list;
4. The process for screening and evaluating the eligibility of the prospective MHSA tenants;
5. The criteria that will be used to determine a prospective MHSA tenant’s eligibility for occupancy in the development;
6. The appeals process for individuals who are denied tenancy in an MHSA unit; and,
7. The reasonable accommodations policies and protocols.

NOTE: The Department’s approval of the MHSA Housing Program Application does not ensure that the Tenant Certification/Referral Process is compliant with local, state and federal fair housing laws. Please seek legal counsel to ensure that the Tenant Certification/Referral Process complies with fair housing laws.

Response:

The Mosaic Gardens at Huntington Park Project will receive referrals from LACDMH network of mental health providers and other community-based organizations serving the target population identified for this project. Prospective tenants will also be identified through the established marketing plan. The prospective tenants will be screened to ensure that they meet the eligibility criteria for the MHSA Housing Program.

The information provided below is a summary of the proposed Rental Application process for Mosaic Gardens in Huntington Park.

I. OCCUPANCY STANDARDS

a) Units will be occupied in accordance with the following standards:

<table>
<thead>
<tr>
<th>UNIT SIZE</th>
<th>MINIMUM</th>
<th>MAXIMUM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Studio</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>1 Bedroom</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>2 Bedroom</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>3 Bedroom</td>
<td>3</td>
<td>7</td>
</tr>
</tbody>
</table>

b) Every household tenant will be counted when determining unit size. This includes household members in the military or at school; anyone that will occupy the unit during the upcoming 12 months.

c) The head of household must be 18 years of age or older, unless he or she is an emancipated minor. All household members, age 18 years or over, and emancipated minors, must sign the appropriate consent forms and comply with the verification process.

d) Applicants must be able to maintain the housing unit in accordance with local health standards, with or without assistance.

e) All applicants must have a valid Social Security Number and legal photo ID. Birth certificates and/or proof of guardianship will be required of dependent minors.

f) Personal care attendants will be given a separate bedroom.

g) When a medical hardship is verified to the satisfaction of the managing agent, persons who would generally
share sleeping quarters may be assigned separate bedrooms.

h) Assigned unit must be household's primary place of residence.

i) Total household income cannot exceed 50% of the area median income.

## AFFORDABLE UNITS

<table>
<thead>
<tr>
<th>NO. OF UNITS</th>
<th>UNIT SIZE</th>
<th>AMI %</th>
<th>1 PERSON MAX. INCOME</th>
<th>2 PERSON MAX. INCOME</th>
<th>3 PERSON MAX. INCOME</th>
<th>4 PERSON MAX. INCOME</th>
<th>5 PERSON MAX. INCOME</th>
<th>6 PERSON MAX. INCOME</th>
<th>7 PERSON MAX. INCOME</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>STUDIO</td>
<td>30%</td>
<td>$17,550</td>
<td>$20,500</td>
<td>$23,050</td>
<td>$25,500</td>
<td>$27,650</td>
<td>$28,710</td>
<td>$30,692</td>
</tr>
<tr>
<td>6</td>
<td>1-BR</td>
<td>30%</td>
<td>$17,550</td>
<td>$20,500</td>
<td>$23,050</td>
<td>$25,600</td>
<td>$27,650</td>
<td>$28,710</td>
<td>$30,692</td>
</tr>
<tr>
<td>1</td>
<td>2-BR</td>
<td>30%</td>
<td>$20,500</td>
<td>$23,050</td>
<td>$25,500</td>
<td>$27,650</td>
<td>$28,710</td>
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<tr>
<td>1</td>
<td>3-BR</td>
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<tr>
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<td>$42,700</td>
<td>$46,150</td>
<td>$49,550</td>
<td>$52,950</td>
</tr>
<tr>
<td>2</td>
<td>2-BR</td>
<td>50%</td>
<td>$34,200</td>
<td>$38,450</td>
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<td>$52,950</td>
<td>$56,450</td>
<td>$59,950</td>
</tr>
</tbody>
</table>

*Approximate rental rates based upon current income limits published by U. S. Dept. of Housing & Urban Development and current housing authority utility allowances. Rental rates subject to change.

** Note: the MHSA tenant portion of the rent set at 30% of the current SSI amount, or 30% of total household income, whichever is higher (up to 30% of 50% of area median income)

*** Note: there is also one Manager’s unit, which will be rented at market rates.

All applicants must meet certain underwriting guidelines. This project is subject to the requirements of several funding sources that have made it feasible. The above information reflects these requirements to the best of management’s knowledge at this time but is subject to change if required for compliance with law, regulations or policy changes.

## II. VERIFICATION PROCESS

### A. Financial

1. All income will be verified in writing by the income source indicated on income certification form.
2. All assets, including bank accounts, will be verified in writing.
3. Upon initial occupancy, tenant's income cannot exceed 50% of the area median income as published annually by the U. S. Department of Housing and Urban Development and The California Tax Credit Allocation Committee.
4. Applicants with Section 8 certificates and vouchers will be processed under the same criteria.
5. To protect the property from rent charge loss or delinquency, household's where projected rent obligation will be more than 30% of their household's combined monthly income on rent will not be accepted.
6. Third-party income verification will be required from all sources, including but not limited to:
   a. Employment, Self Employment
   b. Savings and checking
   c. Pension
   d. Disability
   e. Asset verification, property, home, stocks, bonds, annuities, IRA, etc.
   f. Government assistance, A.F.D.C., food stamps, etc.
   g. Social Security
   h. Child Support/Alimony
   i. Non-Tuition Financial Aid.
7. Income calculations are based on the applicant's annual gross (anticipated) income for the following 12 months. Annual gross income includes income from any and all assets.
8. A credit reference will be required for all adult household members over 18 years of age covering the last five years. Any outstanding collections (medical expenses exempt from this standard) may be a basis for denial of applicant. Foreclosure and bankruptcies are also basis for denial. Applicant will be considered for residency if he/she can prove that he/she moved due to divorce and spouse was responsible for all debt.
9. Criminal record checks will be conducted on all adults in the qualified households who have satisfied the income requirements, credit report and tenancy requirements. This process will also apply for attendant care providers that will be occupying the unit. A criminal history or misdemeanor offense(s) could be grounds for denial:
   a. Applicants convicted of acts of violence will be denied occupancy.
   b. Applicants with child molestation and/or sexual misconduct convictions will be denied occupancy.
   c. All applicants with a criminal conviction relating to the manufacturing or sale of illegal drug or controlled substances will be denied occupancy.
   d. Applicants that have been evicted from a federally-assisted housing project within the past 3 years will be denied occupancy.

At the request of an applicant, a reasonable accommodation request will be considered. In addition, with the approval of the applicant, the referring case manager will be given an opportunity to appeal any application denial based on information obtained from criminal record checks. However, all applicants will have to demonstrate that they meet program requirements.

III. WAITING LIST

Offer of Apartment: Applicants will be offered only two apartments. Mitigating circumstances may be taken into account, such as an emergency situation or hospitalization. In such a case, if an applicant cannot accept an apartment during the initial lease-up of the building, the applicant would be placed on the waitlist in chronological order.

A. Applicants will be added to a waiting list in chronological order.
B. In the event that the volume of applications received exceeds the number of available apartments and more than one applicant qualifies for the unit; the application with the earliest date will be approved. The other will go to the top of the list until the next unit is available.
C. When the next 30-day notice is received by management, it will be the responsibility of the site administrator to notify the applicant at the top of the waiting list. If that applicant turns down the unit, management will then proceed to the next person on the waiting list. With the approval of the applicant, the site manager will also notify the referring case manager.
D. If an applicant on the waiting list rejects the two units offered to him/her it is considered to be a withdrawal of the application by the applicant.

IV. GENERAL

A. All applicants will be initially interviewed by a representative of the management agent. The applicant may invite their service provider to accompany them to this interview or other appointments with the property manager.
B. It will be the responsibility of the management agent to inform the applicant and the referring agency or case manager in writing of rejection or approval.
C. Management will notify applicants who are rejected, in writing, and the applicants will be informed of their option to appeal this decision. With the approval of the applicant, the referring case manager will also be notified.
D. All background information obtained from previous landlord or other personal references will be considered in light of the project’s commitment to provide housing for people in transition and with special needs. Applicants with negative background information will have the opportunity to demonstrate that past behavior causing those issues was related to a disability and request reasonable accommodation. The availability of supportive social services that can assist the applicant in meeting the conditions of tenancy may also be considered in evaluating such information.

V. REJECTED APPLICATIONS

A. Applications may be rejected for any of the following:
   1. Blatant disrespect, disruptive or anti-social behavior toward management, the property, or other tenants exhibited by an applicant or family member any time prior to move-in (or demonstrable history of such behavior);
   2. A negative landlord or other reference, encompassing failure to comply with the lease, poor payment history, poor housekeeping habits (when house visits apply), or eviction for cause;
   3. A negative credit report;
   4. Felony conviction; or non-felony conviction relating to the manufacturing or sale of illegal drug or
controlled substances;
5. Rent exceeding 30% of monthly income without a demonstrated ability to pay;
6. Falsification of any information on the application;
7. Family size that does not conform to the stated minimum and maximum sizes;
8. Income exceeding the area median based upon income limits established at the property;
9. A history of poor housekeeping (either reported by prior landlord reference or when house visits apply);

B. Personal History:
1. A history of violent or abusive behavior (physical or verbal), in which anyone in the applicant’s household was determined to be the offender.
2. Current abuse of alcohol or use of illegal drugs (unless required by a doctor’s verification).
3. Anyone in the household is subject to lifetime registration requirements under any state sex offender program.
4. No references from social workers or others involved with the applicant in a professional capacity are submitted if required.
5. Other good cause, including, but not limited to, failure to meet any of the tenant selection criteria in this document.

C. All rejected applicants will have the right to appeal the decision. The appeal must be received by the administrator or managing agent no later than fourteen (14) days after the rejection letter is received. Within 3 working days of receipt of an appeal, the appeal will then be forwarded to the Director of Compliance or the Regional Manager of The Property Management Company and to the assigned Residential Service Coordinator for the property. Appeals based on requested accommodations dealing with issues where applicant is receiving direct assistance from the service provider may be considered as mitigating factors by Property Management.

VI. FAIR HOUSING
The property will comply with all federal, state, and local fair housing and civil rights laws and with all equal opportunity requirements.

EVALUATION OF APPLICANT’S CREDIT REPORT
I. Reasons for rejection (all adult family members must meet same standards)
   A. Prior eviction(s) within the last three years;
   B. Any outstanding collections which exceed $5,000 (medical expenses exempt from this standard);
   C. Bankruptcies filed within last five years.

II. Management/tenant selection reasons to overturn rejection
   A. Eviction / bad credit - if applicant can prove that he/she moved due to divorce or annulment and spouse was evicted later, in court settlement, spouse was responsible for all debt, etc.
   B. If applicant provides proof of adherence to a payment plan for past-due collections.

VII. PREFERENCES
An occupancy preference will be given to applicants who are homeless or currently living in substandard or dilapidated housing. Such standards shall be established by a Code Enforcement Notice or Notice to Comply directive issued by a governmental agency.

VIII. MENTAL HEALTH SERVICES ACT UNITS
All apartment units, excluding the manager’s unit are designated for households who include one adult member who (1) is eligible for services under the Mental Health Services Act (MHSA).

Welfare and Institutions Code Section 5813.5 specifies who is eligible for services under the MHSA, by reference to Welfare and Institutions Code Section 5600.3(b) and (c). As outlined in Welfare and Institutions Code, Eligible applicants must have a serious Mental Illness or Severe Emotional Disorder and be “Homeless” Or “At-Risk of Homelessness” and be eligible to receive services under the MHSA Act.

IX. POLICY ON PRIVACY
The privacy of applicants will be guarded as conferred by the Federal Privacy Act of 1974. This in no way limits the management’s ability to collect such information as may need to determine eligibility, compute rent, or determine an applicant’s suitability for tenancy.
X. PET POLICY
Tenants may not keep any type of pet on the premises, with the exception of those persons with disabilities requiring service animals, or as otherwise required by law.

XI. ACCESSIBLE UNITS
All units are adaptable to meet the needs of tenants with disabilities, as defined by the California Building Code. Eleven (11) units will be accessible for tenants with mobility impairments and one unit will be accessible for tenants with sensory impairments. Preference will be given to applicants who require a unit with the specific design features offered in accessible units in the development. All reasonable efforts will be made to rent accessible units to applicants who require or who could benefit from such units.

In the case of an accessible unit, when no qualified household has applied that requires the design features offered, then the unit will be offered to the next qualified household. This applicant will be required to complete a Lease Addendum form, whereby they agree to transfer to a non-accessible unit within the development should a tenant or applicant require an accessible unit.

The addendum states:
"Tenant acknowledges that the unit now occupied by Tenant was specifically designed and adapted for occupancy for persons living with mobility, visual and hearing impairments needing accessible units. Tenant further acknowledges that Tenant does not need an accessible unit and that Management retains the right to allocate accessible units to those who have the greatest needs for units. Tenant agrees that should another existing tenant, or applicant, need an accessible unit that Tenant, will upon (30) days written notice from Management, move to a different dwelling unit of comparable size and rent. Failure to accept or move to the offered unit shall be deemed material non-compliance with this Occupancy Agreement and be cause for termination of the Agreement."

If after occupying the accessible unit, the physical condition of a member of the household changes and a household member would then benefit from continued occupancy in the accessible unit, the household would not be required to move.

Failure to accept or move to the offered unit shall be deemed material non-compliance with the lease and would be cause for termination of tenancy.

XII. OUTREACH
DMH will provide information about all aspects of the application process in order to eliminate as many obstacles to applying as possible for their clients. This will enable their clients to anticipate and positively address issues such as providing identifications, birth certificates, landlord references, credit reports, criminal background reports and other applicable supportive documentation needed to complete the application process.

In addition during the formal lease up period, DMH will also provide support to individual applicants as requested.

Policy on Non-discrimination
With respect to the treatment of applicants, the Management Agent will not discriminate against any individual or family because of race, color, creed, national or ethnic origin or ancestry, religion, sex, sexual preference, gender identity, age, disability, handicap, military status, source of income, marital status or presence of children in a household, acquired immune deficiency syndrome (AIDS) or AIDS-related conditions (ARC), or any other arbitrary basis. No criteria will be applied or information considered pertaining to an attribute of behavior that may be imputed by some to a particular group or category. All criteria shall be applied equitably and all information considered on an applicant shall be related solely to the attributes and behavior of individual members of the household as they may affect residency.

Reasonable Accommodations
Reasonable accommodations will be made to meet the needs of any disabled applicants, including applicants with physical, sensory, and/or mental disabilities.

Management will apply the same screening criteria to all applicants. However, management is obligated to offer qualified applicants with disabilities additional consideration in the application of rules, practices, or services and structural alterations if said accommodation will enable an otherwise eligible applicant or tenant with a disability an
equal opportunity to access and enjoy the housing program. Note that management is not, however, required to make a reasonable accommodation or physical modification if the accommodation or modification will result in an undue financial burden to the property or if it requires management to alter or change a basic component of the housing program.

If applicant has a physical, sensory, or mental disability, and as a result of this disability there are reasonable accommodations that should be considered in an application, a note is attached to the tenant’s application describing the reasonable accommodation(s) requested. A Reasonable Accommodation Request form may also be completed upon receipt of the application and further information may be required to verify need for reasonable accommodations.
NOTE: A tenant's participation in supportive services may not be a condition of occupancy in MHSA units.

Describe the development's approach to providing supportive services to MHSA tenants. The following information should be provided:

1. A description of the anticipated needs of the MHSA tenants;
2. The supportive service provider's initial and ongoing process for assessing the supportive service needs of the MHSA tenants;
3. A description of each service to be made available to the MHSA tenants, to include where and how the service will be delivered, the frequency of the service delivery and identification of the service provider. A description of the available services and supports should include, but not be limited to:
   a) Mental health services
   b) Physical health services (including prevention programs)
   c) Employment/vocational services
   d) Educational opportunities and linkages
   e) Substance abuse services
   f) Budget and financial training
   g) Assistance in obtaining and maintaining benefits/entitlements
   h) Linkage to community-based services and resources
4. Indicate whether or not there will be an onsite service coordinator, and include the ratio of onsite staff to MHSA tenants. If there is no onsite service coordination, provide a description of service coordination for the development;
5. A description of how services will support wellness, recovery and resiliency. It is anticipated that the supportive services plan for the development will include services that are facilitated by peers and/or consumers. If this is not part of your service delivery approach, please provide an explanation;
6. A description of how the MHSA tenants will be engaged in supportive services and community life. Include strategies and specific methods for engaging tenants in supportive services and the frequency of contact between supportive services staff and MHSA tenants. This description should also include the identification of staff (the responsible service provider) and specific strategies for working with MHSA tenants to maintain housing stability and plans for handling crisis intervention;
7. If the Development is housing for homeless youth, provide a description of services to be provided to meet the unique needs of the population including engagement strategies and peer involvement. In addition, provide a description of how transition-aged youth MHSA tenants will be assisted in transitioning to other permanent housing once they reach 25 years of age;
8. Supportive services must be culturally and linguistically competent. Describe how services will meet this requirement including, when necessary, how services will be provided to MHSA tenants who do not speak English and how communication between the property manager and the non-English speaking MHSA tenants will be facilitated;
9. Describe the process to ensure effective communication between the service provider and the property manager regarding the status of MHSA tenants in the development and any other issues regarding the development, including but not limited to regularly scheduled meetings and the identification of a single point of contact for communication and coordination of supportive services; and,

10. If proposing to develop Shared Housing units within a Rental Housing Development, describe the plan for developing "house rules" and provide a copy of any rules that may be in place at initial rent-up; (Please label and attach as "House Rules").

Response:

1. A description of the anticipated needs of the MHSA residents

The proposed Mosaic Gardens project in Huntington Park will serve the housing needs of TAY population who have a serious emotional disturbance or serious mental illness that are at risk of becoming, or are currently homeless and are being served through the Department of Mental Health. Transition Age Youth who lack support from friends and family; with many having experienced abuse, neglect, and/or abandonment; possessing high mental health needs; and often lack education and/or skill sets needed to live independently. This population will need assistance with navigating various social service systems to get their needs met, and obtaining psychiatric care, mental health services, educational and vocational services, co-occurring disorder services, crisis intervention, medical support, peer support and life skills training to facilitate participants’ road toward wellness and recovery.

The Full Service Partnership (FSP) for TAY (ages 16-25 years old) in Los Angeles County will provide intensive services with 24/7 staff availability to help individuals address emotional, housing, physical health, transportation, and other needs to help them function independently in the community. FSP have several defining characteristics, including providing a wide array of services and supports, guided by a commitment by providers to do "whatever it takes," to help individuals within defined focal populations make progress on their particular paths to recovery and wellness.

This population group is generally too old to be eligible for Children’s Services and is not prepared to live independently. At the age of eighteen, when Children’s Services funding is terminated, these youth are expected to instantly possess the skills, maturity, knowledge, and financial capability to survive independently. Since this targeted population lack family and community support, it is nearly impossible for these young adults to find stable housing.

The need for housing TAYs in the Huntington Park area is significant. The need is demonstrated by the discrepancy between the number of transition age youth that are homeless and other similar housing developments in Los Angeles versus the number of developments available in Service Planning Area VII. According to Penny Lane Centers (a nonprofit dedicated to serving the needs of children and transition aged youth), studies have shown that of those TAYs that have “aged out” (reached 18 years of age), from the foster care system have a significantly increased risk of homelessness, with 22% experiencing homelessness within the first three years of discharge. In addition, the number of youth that have “aged out” of the system in California has increased by 55% from 3,380 to 5,255 over the last ten years (from 1998 to 2008). It is estimated that 15% of foster youth transitioning into adulthood have severe physical or mental disabilities and that 67% of the homeless adolescents experience mental disabilities. Although federal social security income benefits provide an important resource for this population, most lack the knowledge and ability to access resources on their own.

2. The supportive service provider’s initial and ongoing process for assessing the supportive service needs of the MHSA residents

LINC Cares staff will interview and complete needs assessments for each tenant upon move-in and on an annually basis to assess the current and ongoing supportive service needs. In addition, LINC Cares will coordinate with the mental health provider for each tenant residing in order to coordinate the supportive service needs between onsite staff and the mental health provider. LACDMH has several mental health providers in Service Planning Area VII that will provide mental health services for tenants residing in MHSA funded units. These providers’ process for assessing the supportive service needs of the MHSA tenants are
as follows:

**Intake**
Potential tenants who are referred to the project undergo an intake and interview process to assess their needs for hope, wellness and recovery principles in the program. The mental health clinician/case manager performs an Individual Needs Assessment to ascertain the tenant’s educational and work related needs, as well as their emotional, physical, and mental health needs. The mental health clinician/case manager helps the tenant set out a list of goals and discusses rules, regulations, and expectations of the tenant while in the program.

**Assessment**
The Mental Health Service Provider (MHSP) will administer a comprehensive assessment instrument that delves into several areas including: housing history, income information, employment status, substance abuse history, legal issues, family history/social network, education, psychological and mental health history, medical history, medications, cooking, cleaning, budgeting, shopping, and eligibility for services. The majority of these comprehensive assessments will be conducted in a private office. However, if appropriate, the clinician/case managers may also conduct interviews in a tenant’s home to make a more thorough assessment of the tenant’s level of functioning in everyday life. The provider’s clinician/case managers will translate information acquired during the comprehensive assessment to create short- and long-term service plans for each tenant. The tenant will be encouraged to actively participate in the creation of the Individual Service Plan (ISP) in an effort to ensure the plan reflects the tenants own values and preferences. The ISP will outline achievable goals and methods to achieve those goals, with the emphasis on providing greater independence, maintaining housing and improved quality of life for the tenant. The tenant will be encouraged to make the ISP available for the LINC Cares staff.

**Monitoring and Evaluation**
Monitoring and evaluation activities will be undertaken in consultation with the tenant and will be guided by independent living practices. The mental health clinician/case manager, in coordination with participating MHSA tenants will track MHSA tenant service use patterns and direct outcomes, in order to adequately assess the progress of MHSA tenants and amend service plans to maximize tenant improvement. The flexibility of the ISP and on-going re-assessments assure that it is regularly updated and meets the evolving need of the tenant and their previously stated goals. The MHSP will work closely with Mosaic Gardens’ staff to ensure treatment consistency and continuity of care.

Examples of data to be collected include:
1. Residential (What is the resident’s living situation?)
2. Employment (What is the resident’s involvement in paid and unpaid work?)
3. Educational (What is the tenant’s involvement in school or training?)
4. Legal (What is the extent of the tenant’s contact with criminal justice (i.e. citations, arrests))
5. Income (What are the tenant’s financial assets/resources?)
6. Conservatorship (Does the tenant have control over basic life decisions?)
7. Payeeship (Does the tenant have control over his own money?)
8. Incarceration (To what extent has the tenant been incarcerated?)
9. Hospitalization (To what extent has the tenant been hospitalized?)
10. Emergency Crisis Events (To what extent has the tenant used emergency rooms or other forms of emergency care such as, mental health urgent care centers?)

Data sets are then analyzed in conjunction with qualitative and baseline assessments to form a basis of the evaluation for tenant progress relating to their individual service plan. Plans will be updated on a monthly basis, however whenever the tenant experiences a change in any of these areas, staff will complete an update form and enter it into the database.

This method allows management and clinical staff have instant access to updated information regarding the status of a particular tenant and his/her place in a program and it allows support staff to track the number of episodes and days a tenant remains in a particular status.
3. A description of each service to be made available to the MHSA residents, to include where and how the service will be delivered, the frequency of the service delivery and identification of the service provider. A description of the available services and supports should include, but not be limited to:
   a. Mental health services
   b. Physical health services (including prevention programs)
   c. Employment/vocational services
   d. Educational opportunities and linkages
   e. Substance abuse services
   f. Budget and financial training
   g. Assistance in obtaining and maintaining benefits/entitlements
   h. Linkage to community-based services and resources

The LINC Cares staff will outreach to MHSA tenants to engage them in services offered onsite starting from their initial interview. During the interview process, an individual needs assessment will lay out the services offered to tenants to achieve his or her individual goals.

Supportive Services
The following Services Plan includes a variety of services that will be provided at the proposed Mosaic Gardens in the City of Huntington Park. The plan utilizes new and existing synergies between LINC Housing Corporation, Service Planning Area VII providers and other community partners. All services provided are intended to contribute to a safe, healthy, and nurturing environment for all tenants.

a. Mental Health
Providers for the Department of Mental Health have licensed and pre-licensed clinician’s who are trained to ameliorate psychiatric symptoms and related impairments that significantly interfere with functioning of the MHSA tenant in the community, home, school, and/or with self-care. In addition to decreasing the symptoms of mental illness, interventions focus on maximizing the level of a tenant’s and family’s understanding into a given disorder, and on increasing the tenant’s and family’s level of functioning across life domains. Treatment addresses symptoms of anxiety, depression, disruptive behaviors, poor communication and social skills, difficulties with self-care, attention problems, as well as family functioning.

Psychiatric & Medication Support
Medication consultation/evaluation will be offered to improve educational and/or social functioning after non-medication alternatives have been attempted without success. MHSP’s staff of board-certified psychiatrists is located at the provider’s site and are available Monday through Friday. They are also available to respond to crises and other emergencies. Continuity of care is afforded to all MHSA tenants, as each individual MHSA tenant who is prescribed medication receives follow-up care from the same psychiatrist.

Case Management
Intensive case management services will be provided on and off-site to maximize accessibility of services to MHSA tenants. A qualified clinician/case manager will engage and jointly develop a service plan with each tenant as required by Medi-Cal. Case management services include ongoing meetings to track the progress of the tenant’s personal goals through participation in mental health services. The case manager maintains progress notes. These notes will be reviewed during monthly meetings with key staff members. Changes will be made to enhance effectiveness, as recommended by the treatment team. Case management services provided to the TAY population group will be customized to each individual/family.

Independent Living Training (ILT)
All MHSA tenants will be offered rehabilitative groups (facilitated by the clinician/case managers) to develop skills necessary to live independently. The format will be experiential as opposed to the classroom lecture model. Areas covered will include: shopping, meal planning, nutritional counseling, cooking, housekeeping, budgeting money management, utilization of public transportation, use of community resources, laundry, personal relations, tenant responsibility, personal safety, accessing emergency services (i.e. fire, police), education on social issues such as domestic violence and legal rights in searching for apartments, health
maintenance (i.e. eye, dental and physical health) and medication management.

b. **Employment Counseling and Job Placement**

Tenants will be encouraged to develop educational, vocational or employment goals during the initial interview. The MHSP and the onsite residential staff will coordinate assisting tenants with enrolling in school or vocational training, or participating in basic job skills classes that will be offered onsite such as employment readiness classes. In addition, onsite residential staff will identify available community resources to assist tenants in finding employment and/or accessing vocational and educational training.

c. **Education**

The MHSP links the youth to tutoring services for GED testing and/or college subjects as well as other educational services. MHSP works with outside agencies and businesses to provide youth with training and occupational certification classes in a variety of areas. Youth can access community colleges’ and vocational centers’ class catalogues with staff assistance. MHSP staff, if needed, will assist the youth in completing Admittance forms, Financial Aid forms and any supporting information needed by Financial Aid.

d. **Substance Abuse Counseling**

MHSP will provide offsite classes, groups and one-on-one services and/or link them to community resources. Each regimen is tailored to the specific needs of the tenants.

e. **Money Management**

Instruction is provided in areas such as balancing a check book, starting savings plans, developing household budgets, income reporting, and organizing bill payment schedules.

f. **Assistance in obtaining and maintaining benefits/entitlements**

**Information & Referrals**
MHSP's clinician/case managers assist tenants in identifying financial assistance programs for which they may be eligible. Most tenants are eligible for such programs as General Relief, SSI/SSD and/or Temporary Assistance for Needy Families. Also, they may qualify for benefits such as Medi-Cal, Medicare and/or county health services. The case manager assists with the application and provides ongoing assistance throughout the process of obtaining entitlement benefits.

**Legal Services**
In the event tenants require legal services, residential staff will assist in obtaining access to Mental Health Advocates (MHA), Alliance For Children’s Rights and Public Counsel resources.

g. **Linkage to community-based services and resources**

**Community Development**
All tenants will be encouraged to meet with each other in a group setting where all tenants can suggest, discuss, and create communal living policies. MHSP’s clinician caso manager in conjunction with LINC Cares onsite staff will empower MHSA tenants by creating a sense of ownership and pride of their community and surroundings. Residential staff will take the lead to form groups to engage in discussion to foster individual self-confidence and build group organizational skills. As well as develop, implement and review emergency procedures; provide peer support; provide a forum for all tenants to review complaints and issues; and coordinate social activities, such as Holiday dinners, talent showcases, movie nights and outings.

**Childcare Assistance**
MHSP’s case manager assess the needs of youth with children to access childcare benefits and will accompany the parent(s), if requested, in finding suitable childcare programs and family mainstream
benefits. LINC Cares will identify local childcare agencies in the immediate areas and outreach to them in order to facilitate referrals. LINC Cares onsite service staff will make these resources available to tenants upon request.

Parenting Skills Training
MHSP’s Independent Living Skills include basic parenting recommendations. Case manager can also link clients to community resources.

Community-Building Activities
LINC Cares staff will actively work to promote community integration within Mosaic Gardens. Community development activities shall include, but not limited to, encouraging MHSA tenants to participate in community meetings held on site, participate in emergency planning preparation in the event of earthquakes, fire and/or other crises, and all other reasonable services in connection with the building of a community within Mosaic Gardens.

4. Indicate whether or not there will be an onsite service coordinator, and include the ratio of onsite staff to MHSA residents. If there is no onsite service coordination, provide a description of service coordination for the development

Director of Resident Services (Supervision Only): Responsible for overall oversight of the Resident Service Program for Mosaic Gardens, including supervision of RSCs; program development, implementation, and coordination; new staff orientation; ensuring that the development and implementation of the service plan is consistent with program goals and of maximum benefits to the tenants; monitoring and evaluating staff performance and ensuring site coverage; developing and modifying policies and procedures; identifying problems related to resources and personnel management; overseeing production of internal and external reports; overseeing compliance with funders, grievance procedures, and safety and emergency protocol.

Resident Services Coordinator(s) (On-Site, Full-Time): Responsible for overall service coordination and acting as the primary point of contact for tenants and the community at large. Reports to the Director of Resident Services. Responsibilities include: developing and maintaining a professional, warm, and nurturing rapport with all the tenants and their significant family members and property management staff; acting as the main point of contact for MHSP representatives and other service providers; organizing tenant activities, educational programs, lectures, and maintaining notice bulletins ensuring that the language is sensitive to language constraints as well as cognitive and educational skill levels; maintains relationships with collaborating members of the community and other community resources that may be suitable for the tenants.
Experience Level: Bachelor’s degree from a four-year college or university; 1-2 years related experience and/or training.

Case Managers/Service Providers (On/Off-Site, Full-Time): Intensive case management services will be provided on and off-site through each of the MHSP’s to maximize accessibility of mental health services for MHSA tenants. A qualified clinician/case manager will engage and jointly develop a service plan with each tenant. Case management services include ongoing meetings to track the progress of the tenant’s personal goals through participation in supportive services. The case manager maintains progress notes. These notes will be reviewed during monthly meetings with key staff members. Changes will be made to enhance effectiveness, as recommended by the treatment team. Case management services provided to the TAY population group will be customized to each individual/family. Each TAY will have a dedicated case manager who they will be able to reach 24/7.
Experience Level: Master’s Degree or Bachelor’s Degree and 1-2 years related experience and/or training.

In addition to the Resident Services Program staff outlined above, the following staff will be assigned to Mosaic Gardens: a resident manager, a proposed assistant manager, a maintenance technician. Complete descriptions of these positions are available in the Property Management Plan.

The average staff-to-tenant ratio for the MHSA units is 1.5:15 (or 1:10). A part time Resident Service Coordinator will oversee services to the TAY units and all units will have a full time MHSP case manager
assigned to them. Because the MHSP will be accessible 24/7 and will be an ongoing, long term resource for the MHSA TAY, this staffing ratio seems appropriate. The RSC will also be serving the remaining 8 non-special needs units.

5. **A description of how services will support wellness, recovery and resiliency.** It is anticipated that the supportive services plan for the development will include services that are facilitated by peers and/or consumers. If this is not part of your service delivery approach, please provide an explanation.

Mental Health Services that will be provided by a nearby Mental Health Service Provider are designed to emphasize the provision of supportive services that support housing stability, recovery, resiliency, and wellness for all of its MHSA tenants. The program essentially operates the housing development as an in-home services center. There is a strong emphasis on self determination and empowerment while constantly striving toward self-sufficiency. MHSA tenants are encouraged to take proactive measures to address matters related to their health and well-being and, to the fullest extent possible, reintegrate back into the greater community. Industry best practices show that the approach of providing information, education, and support to address most matters is most consistent with developing self-sufficiency to maintain permanent housing. A holistic approach to health and wellness recognizes the physical and emotional needs of its tenants are also extremely important issues to address. Wellness includes offering MHSA tenants a host of services such as classes to learn activities of daily living (e.g. laundry, cooking, money management, etc.), socialization/recreation activities (yoga, tai chi, aerobics, and gardening), art/crafts workshops, recovery meetings, support groups, and more. The MHSP’s clinician/case managers will also link tenants to medical and dental care in addition to the various on and/or off-site services. The plan will respond to the unique needs Transitional Age Youth an integrated platform of MHSA residential and social services. The key to the success of our service plan is that not only is it comprehensive, yet flexible and capable of being refined or revised over time to respond to the tenant’s evolving needs.

Recovery for many tenants means learning to re-socialize with others. To facilitate this process, the MHSP will offer tenants life-skills training as noted above, along with communication skills training and other skill building activities on an as needed basis. MHSA tenants of the project will be assisted by the MHSP’s clinician/case manager them in successfully maintaining permanent housing. The MHSP’s clinician/case manager will be responsible for working with the tenants, teaching them how to maintain the cleanliness of their apartment, and providing life skills training. Services will include ongoing needs assessments and goal development, life-skills training, crisis intervention, support groups, recreational activities, assistance with tenant/property management issues, linkage to educational services, health services, employment services, mental health services, substance abuse services, child care resources, and any other needed services identified by the tenant and/or Mosaic Gardens’ staff. In addition to this, MHSA tenants will have the opportunity to take part in on-going socialization activities like movie night, fitness, game night, bingo, and food bank distributions. Another important element of recovery is community engagement. The MHSA tenants will be linked to the various social events and workshops held on and off-site. MSHA tenants will able to participate in neighborhood activities and attend local neighborhood council meetings, if desired.

6. **A description of how the MHSA residents will be engaged in supportive services and community life.** Include strategies and specific methods for engaging residents in supportive services and the frequency of contact between supportive services staff and MHSA residents. This description should also include the identification of staff (the responsible service provider) and specific strategies for working with MHSA residents to maintain housing stability and plans for handling crisis intervention.

1. **Community Development**

MHSA tenants are encouraged to meet with each other in a group setting where all MHSA tenants can suggest, discuss, and create communal living policies. MHSP’s clinician/case manager will empower MHSA tenants by creating a sense of ownership and pride of their community and surroundings. The MHSP will work with residential staff to form groups to engage in discussion to foster individual self-confidence and build group organizational skills. As well as develop, implement and review emergency procedures; provide peer support; provide a forum for MHSA tenants to review complaints and issues; and coordinate social activities, such as Holiday dinners, talent showcases, movie nights and outings.
2. Childcare Assistance
MHSP's case manager assess the needs of youth with children to access childcare benefits and will accompany the parent(s), if requested, in finding suitable childcare programs and family mainstream benefits.

3. Parenting Skills Training
MHSP's Independent Living Skills include basic parenting recommendations. Case manager can also link clients to community resources.

Community-Building Activities:
MHSP will actively work to promote community integration within Mosaic Gardens. Community development activities shall include, but not be limited to, encouraging MHSA tenants to participate in community meetings held on site, participate in emergency planning preparation in the event of earthquakes, fire and/or other crises, and all other reasonable services in connection with the building of a community within Mosaic Gardens.

The MHSA TAY population, along with the entire Mosaic Gardens community, will also have access to the following services:

- LINC Cares onsite activities – LINC Cares provides many onsite activities including after school and tutoring for school age children.
- LINC Cares Community Building Workshops/Activities - LINC Cares believes that a healthy community is one where its members are actively engaged with one another. With that in mind, LINC cares schedules frequent social and recreational activities such as game and movie nights, holiday luncheons, ice cream socials and family nights.
- LINC Cares Consumer Awareness and Identity Theft Protection- LINC cares strives to educate its tenants how to better protect themselves in from identity thieves and other financial predators.
- LINC Cares Tenant Advisory Committee- LINC Cares tailors its services to the needs of each specific community. To better understand what those needs are, LINC Cares welcomes all comments and suggestions and adjusts the service program as is appropriate.
- LINC Cares Educational Programs (Household Budgeting, Health Workshops, Transportation Orientation, Green Education)- LINC Cares strives to improve the lives of tenants by teaching them how to better manage their health and finances, better understand how living green is as beneficial to them as it is to the Earth, and by teaching them how their larger community can serve them through public transportation and other municipal and private services. Because of the cultural diversity in this area, we recognize that there will be a variety of cultural influences. Service delivery will be tailored so that it honors the unique linguistic needs and cultural opportunities of the tenant population. At least fifty percent of the LINC Cares staff will provide services in both English and Spanish.

7. If the Development is housing for homeless youth, provide a description of services to be provided to meet the unique needs of the population including engagement strategies and peer involvement. In addition, provide a description of how transition-aged youth MHSA residents will be assisted in transitioning to other permanent housing once they reach 25 years of age

Best practices confirm that when a person with a mental illness is able to live in permanent housing connected with supportive services, the potential is greatly increased for that person to live with greater independence and responsibility. By creating an atmosphere of self-determination, supportive services staff are able to ignite the hope for recovery while supporting tenants to make important life decisions that lead to greater empowerment, and engagement in social roles that provide meaning in one’s life. The proposed services plan supports the tenant in achieving and retaining permanent housing status while working forward in one's personal journey of mental health recovery. By encouraging tenants to take part in the development of their own ISP, attend peer support activities, and address personal barriers to their illness, they can take steps toward wellness, enhanced community integration, and self-efficacy.

Mosaic Gardens will provide an ideal opportunity for TAY with Severely Emotionally Disturbed (SED) or Serious Mental Illness (SMI), ages 16-25, who are at risk of or are currently homeless to take back control of their own lives. MHSA tenants of Mosaic Gardens will live in a community with full access to services and
programs that will meet their specific needs, while encouraging independence and financial growth. The project will offer different levels of support depending on the service needs of the MHSA tenants. Services will be offered through a coordinated effort among the owner, mental health provider and Mosaic Gardens’ staff. Experience has taught us that special needs populations tend to stabilize and flourish in an environment that offers a variety of levels of support specifically tailored to their needs. The mental health provider will be fully trained and familiar with the process of implementing this best practice in order to provide the best outcome for the MHSA tenant. All Staff (residential and provider) will also receive on-going training in HIPPA and other privacy/confidentiality laws to assure that their knowledge is consistently up to date. In addition, during the application process applicants will provide a release of information form, authorizing designated parties to access Department of Mental Health certification information. Ensuring confidentiality, the tenant file will be stored in a secure location on-site and only be accessed by authorized on-site service provider staff as indicated per funding requirements. Consents and releases of information will be obtained in order to remain in compliance with current HIPPA regulations.

8. **Supportive services must be culturally and linguistically competent. Describe how services will meet this requirement including, when necessary, how services will be provided to MHSA residents who do not speak English and how communication between the property manager and the non-English speaking MHSA residents will be facilitated**

Because of the cultural diversity of this population in this area, it is recognized that there are a variety of cultural influences. Service delivery will be tailored so that it honors the unique linguistic needs and cultural opportunities of our MHSA tenant population. It is highly recommended that providers employ bilingual staff and conduct sessions in the MHSA tenant’s preferred language of choice. All staff will participate in annual training for cultural sensitivity and cultural diversity.

9. **Describe the process to ensure effective communication between the service provider and the property manager regarding the status of MHSA residents in the development and any other issues regarding the development, including but not limited to regularly scheduled meetings and the identification of a single point of contact for communication and coordination of supportive services; and**

The provision of services at Mosaic Gardens will take place by a coordinated effort through all parties in accordance with HIPPA requirements; an essential component of that coordination is communication. Communication is greatly enhanced by the experience of our valuable service providers and the detailed framework found below. Even the most comprehensive service plan cannot account for every single occurrence imaginable, however, with solid foundation and flexibility our service providers and Mosaic Gardens staff are afforded the ability to adapt and deal with any situation that may come up.

The MHSP will be responsible for oversight of all mental health service programs, providing guidance for service delivery. In addition, the MHSP will maintain itself as a single fixed point of responsibility by coordinating with other agencies that place tenants at Mosaic Gardens. The MHSP is responsible for coordination of support service staff and work side by-side with residential staff to develop a comprehensive approach to meeting MHSA tenants’ needs which focuses on helping MHSA tenants to sustain their housing and addressing concerns from all parties that have interest in Mosaic Gardens (tenants, service providers, etc.) Additionally in the case of an emergency the MHSP will be available 24 hours a day and equipped with the LACDMH emergency line. The MHSP will also be the first point of contact for emergency personnel and service providers, contacting all applicable parties as soon as an issue arises. The MHSP will also outreach to local medical and mental health centers to generate a relationship to become familiar with their processes should an emergency occur. The MHSP case manager is responsible for providing case management services to all MHSA tenants. A major focus of the clinician/case managers will be active and early intervention and prevention, as well as harm reduction to facilitate the MHSA tenant’s growth while keeping them in housing. Duties will include outreach and engagement, needs assessments, case management, developing and implementing MHSA tenant's goal plans, coordinating services, problem solving, crisis intervention and service referrals.

On a bi-monthly basis, MHSP and residential staff will meet to access tenant’s individualized care plan
outcomes and evaluate how well they are addressing the needs of each individual MHSA tenant living at Mosaic Gardens. The MHSP clinician and case manager will also meet on a regularly scheduled basis to review MHSA tenant's progress on a case-by-case basis. Depending on MHSA tenant's progress in achieving the defined goals outlined in their ISPs and/or those in the Mental Health Service Coordination Care Plan, actions will be taken to amend the plans based upon MHSA tenant and staff agreed upon interventions.

10. If proposing to develop Shared Housing units within a Rental Housing Development, describe the plan for developing “house rules” and provide a copy of any rules that may be in place at initial rent-up; (Please label and attach as “House Rules”.)

Not applicable – There are no shared housing units in the proposed development.

Transportation Services:
The MHSP will provide an interactive orientation for tenants to introduce them to the use of different modes of public transportation in the area. Tenants may access bus tokens and receive aid in mapping bus routes, as well as working out other modes of transportation for unique situations. In addition to public transportation, the case manager or service coordinator will be on call 24-hours a day to respond to any tenant who needs transportation. The MHSP's case manager is available to transport tenants to the supportive services that are held off-site.
Submit the Supportive Services Chart (Attachment C). The Chart must list all services that will be provided to MHSA tenants, including any in-kind services essential to the success of the Supportive Services Plan.

**Supportive Services Chart**

List all the services to be provided to MHSA tenants in the MHSA Shared Housing Development, including any in-kind services essential to the success of your Supportive Services Plan. Add additional lines to the Supportive Services Chart as needed.

<table>
<thead>
<tr>
<th>Supportive Service</th>
<th>Target Population</th>
<th>Service Provider(s)</th>
<th>Service Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>List each service separately (e.g., case management, mental health services, substance abuse services, etc.)</td>
<td>Name the target population(s) that will be receiving the supportive service listed.</td>
<td>List the name of the proposed service provider.</td>
<td>Indicate where the service is to be provided – onsite or offsite. For offsite services, indicate the means by which residents will access the service.</td>
</tr>
<tr>
<td>1 Case management</td>
<td>TAY, homeless (or at risk), Mentally ill</td>
<td>LACDMH- SA 7 Provider</td>
<td>Onsite</td>
</tr>
<tr>
<td>2 Mental Health Services</td>
<td>TAY, homeless (or at risk), Mentally ill</td>
<td>LACDMH- SA 7 Provider</td>
<td>Onsite</td>
</tr>
<tr>
<td>3 Psychiatric Services</td>
<td>TAY, homeless (or at risk), Mentally ill</td>
<td>LACDMH- SA 7 Provider</td>
<td>Offsite</td>
</tr>
<tr>
<td>4 Financial Literacy Skills</td>
<td>TAY, homeless (or at risk), Mentally ill</td>
<td>LACDMH- SA 7 Provider</td>
<td>Onsite</td>
</tr>
<tr>
<td>5 Job Search Skills</td>
<td>TAY, homeless (or at risk), Mentally ill</td>
<td>LACDMH- SA 7 Provider</td>
<td>Onsite</td>
</tr>
<tr>
<td>6 Community Building</td>
<td>TAY, homeless (or at risk), Mentally ill</td>
<td>LACDMH- SA 7 Provider</td>
<td>Onsite</td>
</tr>
<tr>
<td>7 Social Activities</td>
<td>TAY, homeless (or at risk), Mentally ill</td>
<td>LACDMH- SA 7 Provider</td>
<td>Onsite</td>
</tr>
<tr>
<td>8 Substance Abuse Services</td>
<td>TAY, homeless (or at risk), Mentally ill</td>
<td>LACDMH- SA 7 Provider</td>
<td>Onsite/Offsite</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LACDMH</th>
<th>Primary Service Provider</th>
</tr>
</thead>
<tbody>
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