

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 project's goals and target population, individuals who are homeless or chronically with a serious mental illness, are consistent with the LACDMH's Mental Health Services Act (MHSA) Community Services and Supports (CSS) Plan as it pertains to targeting one of the focus groups identified in the CSS Plan; providing integrated healthcare including substance abuse, physical health, and mental health services; and establishing collaborative efforts with community partners. LACDMH recognizes and prioritizes the need to increase capital investments in housing developments to expand the number of affordable, permanent supportive housing units for DMH clients across the County of Los Angeles.

The project will provide permanent, supportive housing in Service Planning Area 2 that fosters independence and self-reliance, but still allows access to additional supportive services that are appropriate to the needs of both homeless and chronically homeless older adults. The Project will make available 15 units to qualified chronically homeless through the MHSA Housing Program. These units will have very low rents, which will be at or below 15% of the area median income.

The services provided through the proposed supportive services plan will provide an enriched living experience for tenants to improve and maintain physical and mental health, gain increased independence, and live in a safe and secure housing environment. The activities of daily living such as securing food, protection from the elements, social relationships, employment and even adherence to mental health treatment goals, are significantly more difficult to manage without stable housing. Permanent housing is the optimum environment for stability.

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:

1. 15 units of the project will be dedicated to Older Adults (age 62 and older) with mental illness.
2. For the DMH MHSA dedicated units, the income level is at or below 15% AMI
3. The target population will be individuals who are at least 62 years of age and older. It is anticipated that this target population will have primary health, mental health and/or co-occurring substance use disorders. Due to the chronic homelessness, the population may have healthcare conditions including mental health needs that were undetected and/or untreated for a number of years that will be need to be assessed and treated. In addition, this population may lack income or medical coverage to meet their needs; therefore, they will require assistance with benefit establishment and resource management. These individuals lack support system including, but not limited to, estrangement from their friends and families.

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:

1. Prospective tenants will be directed to complete a MHSA Housing Certification Packet in conjunction with their mental health services provider – see attached. The mental health services provider will assist the prospective tenants with the MHSA Housing Certification application and forward the completed application packet to DMH.

Department of Mental Health
Housing Policy & Development
Attn: Housing Coordinator
695 S. Vermont Ave., 10th Floor
Los Angeles, CA 90005
Fax: (213) 637-2336

2. DMH 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. If the applicant is found to be ineligible, the applicant may request reconsideration if the conditions that resulted in the denial have changed or there are mitigating factors. DMH will log and track the referral information and the approval status in a database that is maintained by DMH.
3. Prospective applicants meeting all eligibility requirements will be certified by DMH and the certification form will be forwarded to JSCO. For record keeping purposes, DMH shall keep a hard copy file of the MHSA certification packet.

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, including the criteria that will be used to determine a prospective MHSA tenant's eligibility for occupancy in the development;
5. The appeals process for individuals who are denied tenancy in an MHSA unit; and,
6. 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. The Developer/Borrower is advised to seek legal counsel to ensure that the Tenant Certification/Referral Process complies with fair housing laws.

Response:

1. As the designated mental health provider for the project, SFVCMHC will refer prospective tenants for the 15 MHSA units.

SFVCMHC or other referring agency shall assist the prospective tenant complete and submit the MHSA Housing Certification Application packet to DMH.

DMH will refer certified prospective tenants to JSCO for occupancy consideration. JSCO will direct the prospective tenant to complete a rental application and relevant documentation to begin the screening process.

2. JSCO will accept all applicants.

Applications will be stamped, dated as they are received, and then sorted for family size, income level and eligibility status.

A background check including credit and criminal history will be conducted on all applicants.

Tenants will be given the opportunity to ask for reasonable accommodation, if applicable.

JSCO will inform the applicant in writing of the rejection or approval of their rental application.

Once the determination has been made, JSCO will notify applicants who are rejected, in writing, and the applicants will be informed of their option to appeal this decision.

DMH will be copied on all correspondence notifying a DMH referral that their application has been rejected.

With the approval of the applicant, the referring case manager will also be notified.

3. Applications will be stamped, dated as they are received, and then sorted for family size, income level and eligibility status. JSCO on-site staff will maintain one waiting list for the entire Project. Applicants will be placed in the order of their application date and time, with a notation of priority determination. During the initial leasing of the project, those that are not selected as a resident will remain on the waiting list, and

shall receive a letter informing them of their status with an estimate of when the next unit of the size and income designation they seek, based on previous turnover histories for similar housing projects, may be available. The resident manager is responsible for notifying the applicant at the top of the waiting list of an upcoming vacancy. If that applicant turns down the unit, management will proceed to the next person on the waiting list. If an applicant on the waiting list rejects two units offered to him/her, the applicant will be removed from the waiting list. JSCO will collaborate with SFVCMHC case management staff to notify the applicant of an available unit. After receiving the notification letter, applicants have ten days to respond to management regarding the available apartment. If there is no response, a second notice will be mailed and the applicant will have an additional five days to notify management of his/her decision.

4. In addition to the DMH MHS A Certification process, the screening process shall be conducted by JSCO to verify program eligibility that applicants meet the disability and homelessness criteria. At the request of the applicant, their mental health provider will assist with reasonable accommodation requests and/or accompany the applicants to the interviews with JSCO. Applicants are required to provide third party verification for their disability and homeless status. The applicant's case manager will verify the applicant's homeless status based on their personal knowledge of where the resident currently resides whether it be on the streets, emergency housing or a transitional housing program. If eligibility is based on a disability, the applicant's health provider must verify the disability status for his/her client.
5. If the prospective tenant did not meet the MHS A Housing Program criteria and was denied certification based on the review of their application by DMH HP&D Unit. DMH will so notify the Case Manager.

If the applicant could not meet one or more of the rental application's selection criteria, the applicant may submit information regarding mitigating circumstances. Mitigating circumstances shall be verified. The verifier must corroborate the reason given by the applicant for past unsuitable behavior, and indicate that the prospect for lease compliance in the future is acceptable, because the reason for their unacceptable behavior is either no longer in effect or otherwise controlled.

If an applicant's rental application is rejected, he or she must submit an appeal to JSCO no later than fourteen (14) days after the rejection letter is received. With the applicant's permission, JSCO will notify the referring agency of the status of the applicant's application if the application is rejected. Units may not be held during the appeals process. If the appeal is successful, the tenant will be offered the next available unit.

If the applicant and/or the family still feel that the denial of their application for tenancy has not been resolved they can contact the Patient's Rights Office, Los Angeles County Department of Mental Health. Their office hours and telephone number are posted in prominent locations at every program site. They may also do this at any time during the application process.

6. All units at Winnetka Senior Apartments will comply with the disability requirements set forth in Section 504 of the U.S. Rehabilitation Act and HUD Code of Federal Regulations, Title 24, part 8, subpart C. As such, the project shall be designed and constructed to be readily accessible to and usable by individuals with disabilities and no qualified individual with disabilities shall be denied access to, use of, or participation in the facility because of the individual's disabilities.

Tenants will be given the opportunity to ask for reasonable accommodation. Reasonable accommodations will be provided to meet the needs of disabled applicants, including applicants with both physical and/or mental disabilities. All requests for reasonable accommodations will be addressed through the onsite property management office, and all forms for these requests may be obtained at this office. The on-site service coordinator, case managers and the network of mental health providers or any available support system will work with the prospective resident to assist in this process, if needed.

Item D.7 Supportive Services Plan

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, attach "House Rules".

Response:

1. As indicated in Item D.4 – 3, the MHSA units will target chronically homeless older adults, 62 years of age and older, served through DMH who are frequent users of hospital emergency rooms and in-patient services for physical and/or mental healthcare, have a co-occurring substance abuse disorder, and have untreated physical and/or mental health needs. This targeted population is likely to need assistance with navigating various social service systems to obtain permanent supportive housing, benefit establishment, and physical, substance use and mental healthcare. Most importantly, this group will require intensive case management services in the transition from living on the streets or in emergency shelters to having permanent housing. The 15 MHSA eligible units will be dedicated to chronically homeless older adults with a mental illness whose annual income not to exceed 15% of the Area Median Income (AMI) as defined by HUD.
2. When residents first move into the Winnetka Senior Apartments, they will participate in a new tenant orientation with a PATH Ventures Service Coordinator. At this orientation, tenants will learn about the services offered at the Winnetka Senior Apartments and be oriented to community amenities such as the senior center, grocery store and public transportation lines. Tenants will be notified that all services are voluntary and will be given the opportunity to work with on-site case management staff to address specific functional, health care including physical and mental health, case management and social needs. This initial assessment, conducted by PATH will be central to the rapport building process, ensuring a smooth transition into housing and understanding the individualized needs of the new tenant. Once the initial assessment is completed, the case manager will work with the tenant and his/her family to develop an Individual Services Plan (ISP). The ISP is based on the needs assessment conducted at intake, and includes goals established by the tenant such as accessing health care, addressing mental health and substance abuse issues, and goals for personal growth. As part of the ISP, the case manager will provide tenants with access to on-site and off-site resources, including residential activities, life skills workshops, self-help and peer support groups, and a full range of supportive services. ISP's will be updated regularly, with client re-assessments and ISP updates occurring at least every six months. PATH, as the onsite supportive services provider, employs an integrative and individualized approach to providing services. ISPs are developed by and for the resident, with the assistance of the case manager, and are designed around the specific needs of the individual. All supportive services necessary to meet the goals of each ISP, whether they are provided by PATH or others, are integrated to create a seamless service delivery system. PATH is committed to working with its supportive services partners to ensure a seamless service delivery system that will address the anticipated needs of the target population. PATH services focus on the whole person and their physical, emotional, mental, and social needs. The on-site supportive services team will provide the services directly or in collaboration with other social services partners to connect residents with the full range of health care, substance abuse treatment, mental health care, and other support services they need. PATH emphasizes community-building activities, including social/recreational activities, to foster optimism and hope, combat isolationism, and to encourage each individual to develop their own support network among neighbors, community members, friends, and family. In these ways, residents can become thriving members of the community.
3. Services provided by PATH and SFVCMHC will include: Case management and service coordination; volunteer coordination; community building, social, and recreational activities, including resident council; outreach and engagement of residents; assistance with independent living skills, including money management; linkages to employment and educational services linkages to mainstream resources, health care, dental care, substance abuse, and mental health services; self help groups/peer services. PATH will establish Memorandum of Understandings (MOU) with service partners & monitor compliance with MOUs. PATH in conjunction with SFVCMHC will also act as primary liaison between property management, owners, service providers, and residents, including mediating between residents and property management in the event of complaints or behavioral problems which may lead to eviction and facilitate a healthy living environment for all residents. On-site activities facilitated by peers/residents, staff, and volunteers could include movie nights, game nights, reading groups/book clubs, spiritual groups, holiday celebrations, arts

and crafts, field trips, cooking classes and nutrition counseling, AA/NA meetings, anger management/non-violent conflict resolution classes, a monthly Resident Council meeting, group meetings focusing on specific issues including mental illness, homelessness, families, independent living, faith, and more. PATH staff will facilitate introductions between residents and the local neighborhood councils, neighborhood watches, police advisory boards, park advisory boards, community centers, recreation centers, and community-based organizations and encourage residents to seek out community organizations and activities that interest them. PATH will recruit and coordinate a variety of on-site activities through partnerships with area non-profit agencies, faith communities and public entities.

- a. Mental Health Services: SFVCMHC's Full Service Partnership program and Older Adult Field Capable Clinical Services (FCCS) through LA County Department of Mental Health (DMH), will provide extensive mental health services coupled with case management. Mental Health services (1.0 FTE) will be in-kind and delivered on-site and wherever needed. Mental health service will include psychiatric assessment, medication support, individual and group therapy and field-based case management focused on mental health wellness, recovery and housing stability. The program also provides Licensed Vocational Nurses (LVN) and/or Licensed Psychiatric Technician (LPT) to assist residents with maintaining medication stability, healthy living and increased access to medical care. All treatment staff members make a minimum of one monthly visit to their residence to assess living conditions and safety that are addressed with the resident.
- b. Linkages to Health Care through North East Valley Health Corporation (NEVHC), a Federally Qualified Health Center, will provide on-site primary health care services via a mobile clinic to all eligible residents. NEVHC will provide insurance outreach, education and enrollment assistance, screening and treatment for health conditions, immunizations, select labs and pharmaceuticals, health education and case management including referrals to other clinical, behavioral health or substance use treatment providers as appropriate. NEVHC will also provide access to their community clinics for additional services such as x-ray or medical nutritional therapy. Additional referrals and linkages to primary health providers will be made on an as needed and appropriate to the needs of the individual tenant.
- c. The service coordinator will conduct volunteer assessments of interested residents and will help connect interested tenants to appropriate volunteer opportunities or other meaningful activities. Residents will have access to SFVCMHC's Vocational Rehabilitation Program, Valley Employment Services. This agency has a long-standing contract with Department of Rehabilitation and has successfully worked with the SFVCMHC's older adult consumers to assess work readiness, train and place older adults in appropriate work environments.
- d. The service coordinator will work with residents to connect them with educational opportunities through local colleges and adult education programs.
- e. Using a Stages of Change and Harm Reduction approach, PATH staff recognizes the range of options and interventions needed to help individuals achieve their substance abuse treatment and recovery goals. Substance Abuse treatment services delivered directly by case management staff includes: individual counseling and support using a motivational interviewing approach, individual and group meetings that address recovery planning and relapse prevention strategies, Dual Recovery Anonymous (DRA) based facilitated groups, outpatient and inpatient provider referral and treatment options. If these services do not meet the need of the tenants, other identified substance abuse treatment services will be offered on-site or a warm handoff will be provided to link the tenant to the level of substance abuse treatment desired. There will be a 0.5 FTE Recovery Specialist on site to provide additional recovery services.
- f. The PATH's Resident Services Coordinator will identify a partner to provide money management training to residents. In addition, case managers will work with tenants, as part of regular meetings, who wish to develop personalized money management plans, budgets, and savings as part of the personalized independent living plan. Tenants who do not possess these skills will learn how to create realistic budgets and stick with them, as well as pay their bills on time.

services to help overcome the issue. In the event of rental arrears, PATH has established a revolving loan fund to provide residents with short-term rental assistance in order to prevent an eviction. Winnetka Senior Apartments will utilize the Critical Time Intervention model (CTI) as the crisis intervention provided to residents, in addition to our comprehensive services package. In addition, the MHSA tenants will be enrolled in SFVCMHC's FSP/FCCS programs that provide 24/7 services to address any crisis that may occur. SFVCMHC maintains an After Hours on call Response System. This combination of intensive wrap-around supportive services, community building, and ongoing communication allows service staff to identify warning signs and resolve tenant issues before they become crises through mediation and service referrals.

7. Not Applicable

8. Winnetka Senior Apartments will receive culturally and linguistically appropriate services that address their immediate and on-going needs. One of the primary actions that will be taken is to recruit staff members who can effectively relate to, and are representative of, the individuals who will reside at the Winnetka Senior Apartments and its surrounding community. Given that the apartment complex is located in a densely populated and diverse neighborhood, it is anticipated that a significant portion of tenants will demonstrate similar demographic characteristics. The hiring of bilingual staff members who speak Spanish, Tagalog, and other languages spoken by residents will be a priority. When we encounter clients with other language needs, we use a telephone language line for assistance. In addition, we have a network of agencies that assist our hearing-impaired clients. The staff also will possess experience in working with homeless individuals, low-income seniors, those with mental illness and/or substance abuse problems, and/or other highly vulnerable populations, which will enable the staff to more effectively, identify tenants' needs and offer assistance. To foster understanding and promote diversity, staff will also intend to plan various cultural events throughout the year.

9. PATH and SFVCMHC will conduct weekly case management and service coordination meetings, monthly in-service skill-building trainings, quarterly meetings with partner service providers, and monthly meetings with property management staff. PATH will serve principal point of contact for communication and coordination of supportive services

10. Not Applicable

Item D.8 Supportive Services Chart (Attachment C)

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.

