## COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH

## ADULT JUSTICE, HOUSING, EMPLOYMENT & EDUCATION SERVICES
## HOUSING POLICY & DEVELOPMENT UNIT

## MENTAL HEALTH SERVICES ACT (MHSA) HOUSING PROGRAM
## CERTIFICATION APPLICATION REVIEW AND REFERRAL PROCESS (revised 8-5-09)

Certification Application Submission

A MHSA Housing Certification Application must be completed for each applicant before they move into an MHSA funded unit. Send completed Certification Applications to:

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

To ensure confidentiality and adequate protection of health information, applicants must sign a Department of Mental Health (DMH) or agency-specific authorization for request or use/disclosure of Protected Health Information (PHI) form authorizing DMH to provide the Certification Application information to the project sponsor (including the property management company). A copy of the signed authorization form must be submitted along with the Certification Application.

Certification Application Review

Housing Policy & Development (HP&D) will review the Certification Application to confirm that the applicant is:

1. Eligible to receive MHSA services in Los Angeles County (per Welfare and Institutions Code 5600.3);
2. Homeless or at risk of homelessness as defined by MHSA guidelines; and
3. A client of DMH.

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.

DMH certified applicants will be placed on a Master Referral List maintained by HP&D. HP&D will periodically contact the referring agency to determine the client's continued interest in an MHSA funded unit. If the DMH certified applicant is unable to be contacted, they will be removed from the list but may reinstate their active certification status at any time by having the referring agency contact HP&D to provide updated eligibility information, if applicable.

DMH Certified Applicant Referrals

1. HP&D will refer DMH certified applicants to MHSA funded projects based on the information contained in their Certification Application.
2. Project sponsors will place the DMH certified applicants on their prospective tenant list.
3. Project sponsors will notify the DMH certified applicants and the referring agency, if different, of the availability of a unit and give them a specified timeframe within which to respond.
4. If the project sponsor is unable to make contact with the DMH certified applicants directly or through the referring agency within the specified timeframe, they may be removed from the project sponsor's prospective tenant list, but will remain on HP&D's Master Referral List.
5. If a DMH certified applicant indicates interest in an available unit, the project sponsor's housing application process will be initiated and HP&D will be notified.
6. On a quarterly basis, HP&D will send a current list of all DMH certified applicants referred to MHSA Housing Program project sponsors with any updated status information to reconcile for tracking purposes. Each project sponsor will review the list and update the status of each referred DMH certified applicant, if applicable, within 5 working days.

# MHSA Housing Certification Application

## Section 1. Referral Source

☐ MHSA Housing Program ☐ MHSA Housing Trust Fund ☐ Both

FOR OFFICE USE ONLY
Date Received ____/____/____
☐ Approved ☐ Denied Date ____/____/____
Initials_____

Referring Agency

Address / City / Zip Code

Contact Name / Phone

Email

## Section 2. Applicant Information

Name / Phone Number/Message Number / Date

Social Security Number / Date of Birth / Gender

Mailing Address (Address Where Mail Can Be Received) / City / Zip Code / IS Number

## Section 3. MHSA Eligibility Criteria (check all that apply)

- ☐ Adult or older adult with a severe and persistent mental illness (as defined in Welfare and Institutions Code 5600.3)
- ☐ Child/adolescent with severe emotional disturbance (as defined in Welfare and Institutions Code 5600.3)
- ☐ Individual has a co-occurring mental health and substance abuse disorder
- ☐ Current mental health service provider: _____
- ☐ Tenant has declined mental health services

## Section 4. Homeless or At Risk of Homelessness Status (check all that apply)

Length of most recent episode of homelessness:_____

- ☐ Living on the streets
- ☐ Living in an emergency shelter or in transitional housing
- ☐ Living in an institutional setting (e.g. jail, juvenile hall/camp, psychiatric hospital or IMD) and will be homeless upon release
- ☐ Lacking a fixed, regular and adequate nighttime residence
- ☐ Temporarily living in a residential care facility
- ☐ Facing eviction & unable to identify a new residence
- ☐ Living in an overcrowded setting in which they do not hold a lease
- ☐ Living in substandard housing subject to an official notice to vacate
- ☐ Paying more than 50% of income in housing costs
- ☐ "Doubling up" or "couch surfing" due to economic hardship
- ☐ Living in motels, hotels, trailer parks or camp grounds
- ☐ Victim of domestic violence who is unable to obtain housing
- ☐ Other (please explain):_____

## Section 5. Income

**Sources (check all that apply):**

☐ SSI ☐ VA ☐ Unemployment
☐ SSDI ☐ Social Security ☐ None
☐ SDI ☐ CalWORKS ☐ Other (list below): _____
☐ GR ☐ Wages/salary

**Benefit Establishment Status (if applicable):**

Type of benefit:_____
Date Application Submitted ____/____/____ ____Pending ____Denied ____ Appealed
Type of benefit:_____
Date Application Submitted ____/____/____ ____Pending ____Denied ____ Appealed

## Section 6. Desired Location

**Address of Unit Requested (if known):**

Street Address / Unit/Apt.

City / State / Zip

**Requested Service Area(s):**

☐SA 1: Antelope Valley ☐SA 2: San Fernando/Santa Clarita Valleys ☐SA 3: San Gabriel Valley ☐SA 4: Metro ☐SA 5: West ☐SA 6: South ☐SA 7: East ☐SA 8: Harbor

## Section 7. Household Size

**(attach additional page if necessary)**

☐ 1 person ☐ 2 people ☐ 3 people ☐ 4 people ☐ Other _____

If more than one person is checked above, complete the following:

| | | |
|---|---|---|
| Name: | Name: | Name: |
| Relationship: | Relationship: | Relationship: |
| Date of Birth: | Date of Birth: | Date of Birth: |
| Age: | Age: | Age: |

**Signed Authorization to Disclose Client's Protected Health Information attached ☐ Yes ☐ No**

This confidential information is provided to you in accordance with State and Federal laws and regulations including but not limited to applicable Welfare and Institutions Codes, Civil Codes and Health Information and Portability Act (HIPPA) Privacy Standards. Duplication of this information for further disclosure is prohibited without the prior written authorization of the client/authorized representative to whom it pertains unless otherwise permitted by law.

**Applicant Signature** / **Date** / **Signature of Representative from Referring Agency** / **Date**

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

## 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. **How an individual applies to the county to become certified as eligible for an MHSA unit:** The County of Los Angeles Department of Mental Health (DMH) has developed a standardized application and certification process for the LA County Mental Health Services Act Housing Program. The MHSA Housing Program staff will certify applicants as MHSA Housing Program eligible; creating a single point of certification for the MHSA funded units. The referring agency is responsible for gathering the supporting documentation of an applicant's eligibility utilizing the standard MHSA Housing Program Certification and Referral Application. Required documents include a release of information authorizing the referring agency to share certification information with the MHSA Housing Program. It is expected the referring party will assist the applicant as needed in completing the certification application, as well as any additional requirements related to the project screening process. Support Service Workers/Personal Services Coordinators of the identified Full Service Partnership or FCCS (or referring agency if the applicant is not enrolled in an FSP) will provide support throughout the entire application and project screening process.
2. **How certification of eligibility will be documented, provided to the individual applicant, and maintained by the county:** The MHSA Housing Program staff will review the application and supporting documentation for completeness and certify the applicant meets the Los Angeles County MHSA Housing Program eligibility criteria. These criteria must all be met in order to be MHSA Housing Program eligible. If the application is incomplete, the MHSA Housing Program staff will contact the referring agency to request missing information. The standardized Tenant Certification and Referral Application is designed for the referring party to complete in collaboration with the potential tenant. The application is designed to assess the applicant's eligibility for an LA County MHSA Housing Program funded unit and assist in determining housing needs and preferences (i.e., household size and tenant housing preference)
3. **How certification of eligibility will be provided to the property manager/development:** Western Seniors Housing Property Management company will accept applications during lease up of a new development and as vacancies in projects with MHSA Housing Program units become available, following the outreach and marketing outlined in the Marketing Plan. The Full Service Partnership(s) (FSP) and Field Capable Clinical Services (FCCS) providing services at MHSA housing projects will work with the other supportive service providers to meet the challenge of attracting eligible applicants. The DMH and its contractors will use culturally competent efforts to outreach to and engage members of the target population, including those among unserved or underserved ethnic communities and other minority populations, and will utilize a variety of proven outreach strategies to connect with and refer potential tenants to permanent supportive housing. Outreach will include visiting areas known to be places where homeless adults spend their days and nights. In addition to soliciting applications from individuals reached through direct outreach methods, LA County DMH MHSA Housing Program staff will accept referrals from an extensive county-wide network of varied government and nonprofit organizations and service agencies. Other sources of referrals will include, but certainly not be limited to law enforcement; local shelters, food programs and other nonprofit and government agencies that provide outreach and services to the homeless; hospitals, mental health facilities and other health care providers; local veteran's agencies; religious organizations; ethnically and linguistically diverse community-based organizations, and self-referrals.