

**Section D: Supportive Services Plan
Instructions**

1. Submit the MHSA Supportive Services Information, Section D, Items D.1 through D.16, as listed on the Application Index & Checklist.
2. Enter required information into the yellow box marked "Response".
3. Items D1 through D9 must be circulated for local review for 30 days.

Item D.1 Development Summary Form (Attachment B)

Instructions: Complete and submit the Development Summary Form (Attachment B)

RENTAL HOUSING DEVELOPMENT SUMMARY FORM

County Mental Health Department: County of Los Angeles Department of Mental Health

Name of Development: Westmore Linden

Site Address: 1250 S. Westmoreland Ave.

City: Los Angeles State: CA Zip: 90006

Development Sponsor: _____

Development Developer: West Hollywood Community Housing Corporation (WHCHC)

Primary Service Provider: WHCHC and Affordable Living for the Aging (ALA)

New Construction Acquisition/Rehabilitation of an existing structure

Type of Building: Apartment Building Single Family Home
 Condominium Other

Total Development		MHSA Funds	
Total Number of Units:	93	Total Number of MHSA Units:	15
Total Cost of Development:	\$28,448,550	Amount of MHSA Funds Requested:	\$1,425,000
		Capital:	\$
		Capitalized Operating Subsidies:	\$

Other Rental Subsidy Sources (if applicable): _____

Target Population (please check all that apply):

Adults Transition-Age Youth Older Adults

County Contact

Name and Title: Reina Turner, Division Chief

Agency or Department Address: 695 S. Vermont Ave., Los Angeles, CA 90005

Agency or Department Phone: (213) 251-6558

Agency or Department Email: rturner@dmh.lacounty.gov

Item D.2 Development Description

The Development Description should provide a narrative (approximately two pages) that includes:

1. Name and location of the proposed housing development;
2. Service goals of the development;
3. Characteristics of tenants to be served;
4. Type of housing to be provided (new construction or acquisition/rehab.);
5. How the building(s) in which housing and services will be provided will meet the housing and service needs of the MHSAs tenants (location, building type, layout, features, etc.);
6. Name of primary service provider, property manager, and other development partners; and,
7. Summary of the anticipated sources of development financing. (Name sources only, do not include dollar amounts.)

Response:

1. Westmore Linden will be located at 1250 S. Westmoreland Avenue, Los Angeles, CA 90006 two blocks east of Vermont Avenue in the Koreatown/Pico-Union neighborhood.
2. Services at Westmore Linden will be delivered to address the unique needs of both homeless older adults and chronically homeless older adults with mental illness. WHCHC and ALA recognize that homeless adults experience physical health challenges, higher rates of mortality and shrinking social support networks. The supportive service staff will provide intensive case management, crisis intervention, service coordination, transportation coordination and any services necessary to assist tenants in maintaining independent housing while ensuring a safe and vibrant community for all residents.
3. Westmore Linden will consist of 93 affordable rental units for very low- and low-income older adults with 15 units set aside as permanent supportive housing for homeless older adults earning no more than 30% of AMI.
4. Westmore Linden will be a new construction apartment building developed by West Hollywood Community Housing Corporation.
5. Westmore Linden is located in a densely urbanized area of Los Angeles characterized by being almost entirely built-out, with a mix of commercial and residential uses and transportation options. The project will provide regular, voluntary supportive services for the residents free of charge and will be on-site to the greatest extent possible. Westmore Linden comprises 13 studios, 79 on-bedroom units, and one (1) two-bedroom manager's unit. Westmore Linden will be designed to meet the needs of its residents and will include the following:
 - On-site Supportive Services Space – at least two (2) social services offices for on-site case management and counseling. This will provide a space for private one-on-one services. Westmore Linden will also include a community room with a kitchenette which will be conducive to tenant meetings, group services, and healthy cooking demonstrations.
 - On-site Supportive Services Space – a courtyard garden and BBQ area. The garden will be available to all tenants and will include raised (36" AFF) planters in wheels to maximize usability for older adults.
 - Handicap Accessibility – Westmore Linden will be completely accessible for residents with physical disabilities including hearing and sight impairments. WHCHC will work with a Certified Accessibility Specialist (CASP) during the design and construction phases to ensure that Westmore Linden meets all local and federal accessibility requirements. All floors of Westmore Linden will be serviced by an elevator and handicap parking spaces will be provided.

- Security – Westmore Linden will be completely secured. There will be a single, gated vehicular entrance into the property from Westmoreland Avenue. Access will be restricted to tenants and their guests only at all times.
6. WHCHC will be the lead service provider at Westmore Linden and Affordable Living for the Aging (ALA) will be the lead partner agency. Barker Management Company will manage the building.
 7. Westmore Linden will seek 9% Low Income Housing Tax Credits. Construction financing for Westmore Linden will be provided by Affordable Housing Sustainable Communities program (AHSC), the Affordable Housing Program (AHP) of the Federal Home Loan Bank, and a convention construction loan. West Hollywood Community Housing Corporation will also defer a portion of its fee during construction. Permanent financing will also be provided by Mental Health Services Act (MHSA), Affordable Housing Sustainable Communities program (AHSC), and the Affordable Housing Program (AHP) of the Federal Home Loan Bank.

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:

WHCHC's Westmore Linden project meets the priorities and goals identified in the Three-Year Program and Expenditure Plan by targeting older adults, an underserved population with unique needs.

Onsite supportive services will assist tenants to achieve housing stability and, once stabilized, pursue personal growth and self-sufficiency in their recovery. During the assessment process, staff will work with tenants to identify their immediate needs and long-term goals.

Independent living in permanent supportive housing is the best housing model for older adults experiencing homelessness and co-occurring disorders. Permanent supportive housing will serve as a platform from which tenants can access needed services to support their autonomy and ability to age in place.

When a MHSa tenant experiences challenges, onsite staff will work with the tenant's primary mental health provider to coordinate care. The social worker will advocate on the tenant's behalf to mitigate issues with property management and other tenants. Through one-on-one counseling and onsite programming, tenants will receive education on how to be a good tenant and how to create natural supports within their new community both inside and outside the property.

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 target population for Westmore Linden is older adults age 62 and older. Tenant income is expected to be at or below 30% of AMI. The 15 MHSA units will be set aside for older adults who are homeless or at risk of homelessness and who are mentally ill, most having varying degrees of substance or alcohol use, childhood abuse, educational illiteracy, and physical disabilities.

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. Applicants will initially complete the Los Angeles County Department of Mental Health standardized MHSa Housing Program – Tenant Certification Application. Once the Certification Application form has been completed it will be forwarded along with a complete and signed release of information form to the LAC-DMH Housing Policy & Development (HP&D) unit for processing. MHSa tenant Certification Applications will be submitted to the county by the local housing coordinators and will be submitted in a secure and appropriate manner as to protect the applicants' health information.
2. Interested parties will collect and submit the necessary MHSa paperwork to the HP&D unit indicating that the applicant is being referred to the Westmore Linden property.
3. Once approved, HP&D staff will notify the interested party who will notify WHCHC and Barker Management Company so they can contact the applicant and proceed with the housing application and income verification. HP&D staff will return, via secured communication, the approved MHSa certificate. WHCHC and Barker Management will include the approved certification in the tenant's social service file.

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. Fifteen (15) of the units at Westmore Linden are reserved for MHSa tenants, and tenants will need to meet MHSa Housing Program definitions of homelessness, income eligibility guidelines, and qualifying mental health diagnoses.
2. MHSa applicants will initially complete the Los Angeles County Department of Mental Health (LAC-DMH) standardized MHSa Housing Program Tenant Certification Application. Once the Certification Application has been completed it will be forwarded along with a completed and signed release of information form to the LAC-DMH Housing Policy and Development (HP&D) unit for processing. HP&D staff will review the application to confirm the prospective tenant's eligibility specifically that the prospective applicant is a DMH client and meets the MHSa Housing Program income and homelessness/at-risk of homelessness criteria. If there are uncertainties as to whether the applicant meets eligibility criteria the Certification Application will be completed and submitted per the DMH guidelines.
3. Once the prospective tenant is certified to have met threshold eligibility criteria by the HP&D, they will be notified and placed on the DMH HP&D Master Referral List for Westmore Linden. If there are immediate vacancies in the development, WHCHC and ALA staff will work with the prospective tenant to complete and submit the property management company's applications and provide/update needed verifications as required by the property management company. The property management company will notify the prospective tenants who have successfully completed this aspect of the application process of the unit availability. The property management company will staff members that are well-trained in eligibility requirements and program procedures. All qualified applicants that are not able to move-in will be placed on a waiting list and shall receive a letter informing them of their status. Applicants on the waiting list must indicate their desire to remain on it every six (6) months. Those applicants not selected for occupancy shall be provided with written notification stating the reasons for their ineligibility and a copy of the Grievance and Appeal Procedures. The waiting list will be maintained and updated, and applicants on the waiting list shall be interviewed in the order of the time-date listing.
4. All applicants for assisted housing will be screened according to the criteria set forth in the Property Management Plan. Applicants will be provided with third (3rd) party verification forms which are to be filled out by the income provider or the applicant. Orientation meetings will be held with groups of applicants who have or will provide third-party verifications of income and who appear eligible. Staff will

assist applicants who have limited fluency in English by answering questions or providing forms in the native language of the applicant. The next step will be to conduct an interview with the prospective tenant and shall include representative of the Property Management Company and/or WHCHC if desired. The interview shall include not only those items listed in the Property Management Company's Interview Checklist, but shall explain the practices and guidelines. Applicants who are deemed suitable for occupancy shall have the opportunity to inspect the unit to be rented and shall sign an inspection form and a rental agreement. Incoming residents will be required to execute the standard Residential Lease including all addenda prior to move-in. At the time of signing, all provisions of the Residential Lease shall be explained to the lessee. If the incoming resident does not speak English, every effort will be made to have a translator explain the Residential lease and other documents to the resident. The Property Management agent will also explain to residents such matters as project residency standards, Resident Rules and Guidelines, the manner and place for submitting service requests, maintenance and household hints.

Eligible MHSa tenants must be older adults, meet homeless or at-risk of homelessness criteria as described in the MHSa Housing Program Application, have qualifying mental health diagnosis and have low or very-low income. Verifications of homelessness, qualifying mental health diagnosis and income will be required. Eligible tenants must successfully complete criminal background screening.

5. Applicants not selected for occupancy shall be provided with written notification stating the reasons for their ineligibility and a copy of the Grievance and Appeal Procedures.
6. All applicants are made aware in writing of their right to reasonable accommodation in the application and screening process. An applicant that is denied due to adverse credit and criminal report can request in writing meeting with management and owner's representatives to further consider review of their application. Property Management is aware that the Special Needs applicants whose adverse credit and criminal background as a direct result of their disability must be given priority in the consideration of their application. Management will work closely with the housing authorities and service providers to ensure that all applicants have access to and can maintain housing.

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;

Westmore Linden is located in the City of Los Angeles, SPA 4, at 1250 S. Westmoreland Ave., 90006 (two blocks east of Vermont Ave. & Pico Blvd.) in the Koreatown/Pico-Union, neighborhood and will provide 92 units of affordable rental housing to low- and very low-income older (62 years and older). Westmore Linden has a mixed target population including fifteen (15) units reserved for homeless older adults, and 77 units for non-special needs adults.

The "2015 Greater Los Angeles Homeless Count Report" published by the Los Angeles Homeless Services Authority indicates that on any given night there were 44,359 homeless individuals, the highest in the nation. The highest concentrations of homeless individuals, approximately 11,681, are located in SPA 4 with over 13% of homeless individuals being over the age of 55. According to the HUD Fair Market Rents, in 2015 a 1-bedroom apartment in Los Angeles is about \$1,103, yet the maximum amount of SSI for a single individual is \$889. The National Council on Aging (NCOA) reports "1 in 3 older adults is economically insecure." Lacking the appropriate enrollment benefits and resources older adults are eligible for, can create burdens of stress by having to choose between paying rent, food, or medicine. Access to community resources and benefits enrollment centers to increase tenant stability, along with life skills and personal development workshops, will help maintain our tenants safely housed and independent.

The Department of Health and Human Services (DHHS) estimates that 70% of adults 65 and over will require long-term care in their later years. The NCOA reports 80% of older adults have at least one chronic condition, and 68% have at least two. For those with chronic conditions and disabilities, locating accessible housing will be critical. By providing self-management programs and exercise activities, we can focus on providing the skills to be able to have tenants improve their quality of life. Having access to 24/7 on-site medical care, through the Assisted Living Waiver Program, will be an added benefit for those with a higher level of care to prevent premature institutionalization and reducing their health care costs.

According to The American Association of Geriatric Psychiatry, the most common conditions among older adults include anxiety, severe cognitive impairment, and mood disorders such as depression. Depression affects more than 20% of older adults at some time in their lives, as reported by the CDC in 2015. As a result of this disorder, depression can vary in levels of severity, which "impairs social and occupational functioning, resulting in poor functioning and social isolation." (LA Healthy Aging Report, 2015) Because many of these depressive disorders go undiagnosed, access to supportive services including therapy, will play a major role in the mental health wellness of an older adult.

Given the diversity of Los Angeles, "almost 60 percent of adults do not consider English to be their primary language used at home" (The 2015 Los Angeles Healthy Aging Report, 2015). By providing culturally competent staff to assist with translation services and advocate on behalf of a tenant who would normally be unable to communicate their needs will be vital in accessing available resources.

Another critical piece in allowing an older adult to lead an independent life, include transportation and mobility. In order to participate in community resources and access support,

older adults will be challenged with transportation and mobility needs. Transportation availability located close to their housing and community services at a low cost to older adults, can increase an individual's independence.

2. The supportive service provider's initial and ongoing process for assessing the supportive service needs of the MHSa tenants;

WHCHC's resident services department has developed and implemented a Healthy Aging Program Initiative (HAPI), a supportive program designed to specifically target adults over the age of 55, with a focus on those over the age of 75 and/or those with a higher level of need. Resident Services staff will play a key role in providing preventative health information and programs that reflect the needs of a very distinct older adult population. Residents entering our housing units as healthy and independent individuals or have physical and emotional needs can encounter increasing health issues as they continue to age in place, which might impair their ability to live independent, high quality lives in their units. As a result, the need for additional supportive services with advanced age is crucial. Each RSC will play a major role in delivering services to help our residents live with dignity and respect. WHCHC's Resident Service Coordinator (RSC) will conduct an assessment, with quarterly follow ups, and collaborate with the resident to provide referrals and monthly educational/social programming tailored to their needs. HAPI is composed of various objectives: lifelong learning programs, physical health needs, mental health services, an assessment to understand and meet resident needs, community collaborations, and capacity building for staff.

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

Objective three of HAPI includes connecting tenants to on-site mental health services. Our approach is to help older adults address and manage mental health issues. In collaboration with local MSW schools in Los Angeles, mental health interns will be able to provide residents with individual therapy and promote programs to help those with mental health needs, cope. When a RSC is conducting an assessment and determines the need for mental health services, the RSC will then refer the tenant to the on-site LCSW to assign the tenant to one of three mental health interns. MSW interns will provide on-site culturally competent mental health services to address needs of the tenants by assessing, providing crisis counseling, weekly individual and couples therapy, and lead monthly chat groups for socialization. These chat groups will vary in lengths and cover topics such as: anger management, hoarding, anxiety/depression, etc. In addition, on-site caregivers will have access to respite care and support from the mental health interns.

b) Physical health services (including prevention programs)

Objective two of HAPI includes forming partnerships with local hospitals to provide access to routine and preventative health and dental care. Presently, WHCHC has partnered with Cedars Sinai Medical Center and ALA has partnered with St. Vincent's Medical Center, Good Samaritan Medical Center and Silverlake Medical Center. Some of the services provided are quarterly on-site educational seminars, health fairs, clinical vitals, and other relevant workshops to raise awareness of chronic diseases and prevention to tenants in senior buildings. By enrolling in one of their Medicare Advantage plans, tenants will have access to a comprehensive individualized medical care network, which includes: a primary care physician, nurse, psychiatrist, pharmacist, social worker, health care navigator, and a

care manager. WHCHC has also partnered with CareMore, a Medicare Advantage Health Plan that provides innovative approaches to the complex problems of aging. Many Care Centers have senior focused gyms and it is the goal to serve caregiver and families by providing support, education, and access to services. CareMore's holistic approach to the wellness of older adults protects the limited financial resources of older adults and the Medicare Program through innovative methods of managing chronic disease, frailty, and end of life. CareMore partners with projects similar to Westmore Linden to provide education and information in the area such cooking demonstrations, exercise and other health-related services to provide our older adults with a sense of dignity. Collaborations with Partners in Care (PIC) will provide fall prevention, chronic disease self-management, and other evidence based programs, on-site. For tenants who may benefit from a higher level of care, WHCHC will partner with a Home Health Agency (HHA), such as the Caring Connection, to participate in CA's Assisted Living Waiver Program (ALWP). Depending on state funding, Westmore Linden, would be certified to have access to on-site medical services including: 24/7 nursing staff, case manager, activities coordinator, and access to transportation services to medical appointments. WHCHC will be exploring other options, such as the PACE program (The Program for all-inclusive care for the Elderly.)

c) Employment/vocational services

Employment services may include job skills training, job readiness, job placement, and job retention services. For tenants to supplement their fixed incomes, employment services workshops will be made available monthly to re-introduce tenants on ways to increase their incomes. WHCHC will collaborate with Retired Seniors Volunteer Program (RSVP) for those tenants who wish to volunteer their time before returning to the workforce.

d) Educational opportunities and linkages

Educational services may include adult education courses, computer training, and school enrollment. WHCHC will collaborate with St. Barnabas Senior Services (SBSS), whose one of many services is to provide educational enrichment programming. Additionally, the RSC will work with other community partners to bring on-site educational monthly workshops and services to Westmore Linden.

e) Substance abuse services

Substance use services may include relapse prevention and support groups. WHCHC will work with community partners to provide inpatient or outpatient referrals. The RSC and Affordable Living for the Aging (ALA) will collaborate with Homeless Healthcare LA's Community Assessment Services Center (CASC) and directly contracted LAC DMH providers to provide substance abuse services, as needed.

f) Budget and financial training

Objective one of HAPI includes Lifelong Learning programs and activities for tenants to promote active and engaged learning. Areas of focus for activities/programs include: social, emotional, cognitive, physical, health advocacy, economic security, and creative workshops to enhance the sense of purpose and meaning. Housing formerly homeless older adults, may require additional intensive living skills such as: paying rent on time, keeping units clean, and how to be a good neighbor, to help them reintegrate into a stable housing environment. Additional workshops on: opening a bank account, hygiene and grooming, cooking skills, and other life skills will be provided on-site by the RSC, on an ongoing basis.

g) Assistance in obtaining and maintaining benefits/entitlements

The RSC will assess tenants for eligible benefits such as: Medicare/Medi-Cal, SSI/SSDI,

Cal Fresh, IHSS, etc. to assist with benefits and enrollment applications.

h) Linkage to community-based services and resources

The RSC will do one-on-one/door-to-door outreach to engage residents with programs and services. With the goal of fostering self-sufficiency and empowerment, the RSC will seek to establish the trust and rapport necessary to assist residents to make appointments with case managers, health care services and other providers depending on the residents' requirements and abilities. The RSC will work to develop outreach engagement strategies specific to the target populations based on disability, mobility issues, the need for confidentiality and autonomy, fiscal and financial challenges, and developmental levels. As part of the service plan implementation, the RSC will also assess changes in functioning due to mental and physical illness, medications, and age. RSCs will conduct a comprehensive assessment within 7 days after move-in and quarterly follow-up assessments of all residents to evaluate changes in their health and mental health, financial situation, support networks and general well-being, so that the residents can continue to function effectively in the permanent housing environment.

In collaboration with tenants' primary care physicians and mental health professionals, an on-site case manager (for the formerly homeless tenants) will conduct assessments, create treatment plans, and deliver intensive case management. The case manager will have experience working with the target population, homeless older adults, and will be well-versed in Medicaid, Medicare, and managed care programs so as to guide and assist tenants as they navigate complex, changing systems of care. The case manager will assist tenants in managing a range of issues from setting up utility services, navigating resources, helping a tenant who struggles with issues such as hoarding, among some of the few services available. The ultimate goal is to work with the tenant to remain stably housed and supported.

Referrals for tenants to local agencies include a continuum-of-care approach from the initial intake process throughout the resident's tenancy. Outreach begins at the initial application and lease-up and is formalized in a documented individualized service plan as part of the comprehensive assessment conducted with each resident within the first ten days of occupancy. Ongoing referrals continue as part of the service plan, as per the tenants' needs for services. All service plans are recorded in resident files and WHCHC's ClientTrack database with pre-set follow-ups and advocacy for tenants who are challenged by the system or denied services. The RSC and Case Managers are the primary points of contact for the residents. Residents will access services through the RSC and Case Managers, and if advocacy is needed, the RSC and/or Case Manager will engage the agencies, as appropriate. Releases of confidentiality for appropriate referrals will be incorporated into each resident's service plan. Referrals are given in the one-on-one sessions with tenants. Linkages can be provided to residents through workshops and resident meetings in the form of advertisement, trainings, workshops, in-services with agencies.

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;

ALA will provide a part-time case manager to support 15 formerly homeless older adults. The staff -to-tenant ratio of 1 to 30 is appropriate for this population given the additional service coordination services available onsite and the anticipated partnerships with tenants' primary mental health clinicians.

WHCHC, as the lead service provider, will staff Resident Service Coordinator(s). The RSC(s) is primary contact for the tenant, coordinating the provision of on-site and off-site, direct and

indirect services, including, but not limited to, case management, information and referrals, and social activities.

ALA, as lead partnering agency, will staff a Case Manager for delivering intensive case management services to 15 formerly homeless older adults. The case manager will collaborate with the RSC. ALA's Clinical Supervisor will supervise the PT case manager during weekly phone and in-person meetings. The Clinical Supervisor is located off-site 2.0 miles from Westmore Linden. ALA will staff the PT case management position with an individual who can fluently communicate with tenants. ALA works with a nearby geriatrician who accepts a number of tenants' health care plans (LA CARE, etc.) and is affiliated with Silver Lake Medical Center, Good Samaritan Hospital and St. Vincent's Medical Center.

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;

The RSC will conduct annual evaluations through a variety of tools including one-on-one interviews, focus groups, and both paper and online surveys, etc. Property management staff conducts its own annual evaluation. Staff will meet and compare feedback to design and implement service and operations changes as appropriate. Regularly scheduled resident meetings, special building-wide events, and public suggestion boxes give tenants additional opportunities to provide feedback to staff. The RSC and Case Manager will collaborate to form a Community Advisory Group to inform onsite programming and provide guidance to staff.

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;

Applicants for the project will be made aware that project includes voluntary supportive services through the property's marketing materials and initial outreach. The initial introduction to the Enhanced Management Program is conducted at the lease-up of all residents to the property. The initial outreach strategy will be initiated by the RSC to build trust and establish rapport and a high level of comfort with the tenants. Initial resident meetings, orientations and groups will be introduced at the opening of the property and will include items such as monthly newsletter of events in the building. The RSCs assigned to the individual tenants will do the one-on-one/door-to-door outreach to engage the residents with services. The RSC will assist residents in making appointments with Case Managers as needed depending on the residents' needs and abilities in order to foster self-sufficiency and empowerment. WHCHC will also work with on-site and off-site service providers to develop outreach strategies specific to the target population and how best to engage them based on disability, mobility issues, issues of confidentiality and autonomy, fiscal and financial challenges, developmental levels, and levels of functioning which may change over time due to mental and physical illness, medications, and age. RSCs will conduct a comprehensive assessment within seven days after move-in and quarterly follow-ups of all tenants to assess their varying degrees of change and need, including financial aid and/or need for higher levels of care.

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;
N/A

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 MHTA tenants who do not speak English and how communication between the property manager and the non-English speaking MHTA tenants will be facilitated;

As the lead service provider, WHCHC will provide services that are culturally-specific and linguistically appropriate. WHCHC employs RSCs who speak English and Spanish, reflecting the demographics in the 90006 zip code. For Asian Americans-speaking tenants, staffing, programming and communications will reflect the needs of these tenant populations. Written communications from the RSC, or resident manager, such as intake forms, workshop flyers, and off-site event invitations, will be translated for any non-English speaking tenants. Likewise, services will be tailored to be appropriate for and sensitive to the needs of our senior tenants. WHCHC has a long history of providing services to the senior community at our Laurel-Norton, Hayworth, and Detroit Senior buildings.

9. Describe the process to ensure effective communication between the service provider and the property manager regarding the status of MHTA 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,

Onsite social services staff employed by WHCHC and ALA will host monthly meetings with Barker Management's resident manager and his/her regional supervisor. Social services staff will invite a representative from the Department of Mental Health (DMH) as needed. This person may be affiliated with the DMH's Older Adult Services Bureau or the HP&D unit. Social services staff will prepare the agenda and distribute it prior to the meeting. Meeting topics will include outstanding tenant issues, vacancy reports, and announcements about in-service trainings.

On a more frequent basis, social service staff will meet with the resident manager to discuss MHTA tenant issues that require immediate attention.

WHCHC provides guidelines within its Enhanced Management Program for assisting with the initial applications of and handling reasonable accommodation requests made by persons with disabilities. Reasonable accommodation requests will be reviewed by staff in property management, asset management and resident services for all persons with disabilities to ensure comprehensive accommodations are guided by fair housing laws. Through the Enhanced Management model utilizing property management policies and the capacity of the project, reasonable accommodation requests will be granted on a case-by-case basis and the accommodations will reflect the rules and regulations of fair housing guidelines and operating subsidies for the project, e.g. Section 8, HOPWA, etc. through the due process as arbitrated by property management. Resident Services will always advocate for disabled residents without exception under the guidelines of the lease and requests can be based on input from outside agencies, housing authorities, and family members.

Conventional policies and practices of eviction procedures will be enforced by the property management company based on lease agreements and rules governed by the landlord, WHCHC. Standard procedures for notices and violations will be issued by property management, but will notify resident services and the onsite case manager based on individual cases specifically with disabled residents. Intervention strategies will be developed to circumvent eviction procedures and offer alternative outcomes for residents with disabling conditions, such as referrals and attrition to higher levels of care and/or treatment, if needed. One of the goals of the Enhanced Management Program is to identify eviction prevention opportunities.

10. If proposing to develop Shared Housing units within a Rental Housing Development, attach "House Rules".

N/A

Response:

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.

Supportive Services Chart

List all the services to be provided to MHSA tenants in the MHSA Rental 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.

Supportive Service	Target Population	Service Provider(s)	Service Location
List each service separately (e.g., case management, mental health services, substance abuse services, etc.)	Name the target population(s) that will be receiving the supportive service listed.	List the name of the proposed service provider.	Indicate where the service is to be provided - onsite or offsite. For offsite services, indicate the means by which residents will access the service.
1 Resident Services- Individual Service Plans	All Populations	WHCHC	Onsite
2 Mental Health Services	All Populations	Local MSW schools: UCLA, USC, CSULA	Onsite
3 Case Management	Homeless Seniors	Affordable Living for the Aging (ALA)	Onsite
4 Substance Use Services	All Populations	WHCHC/ALA	Onsite
5 Physical Health Services (including prevention)	All Populations	Cedars Sinai Medical Center, St. Vincent's Medical Center, Good Samaritan Medical Center, Silverlake Medical Center, Partners in Care, & Caring Connection (through Assisted Living Waiver Program)	Onsite/Offsite (transportation for offsite health care services provided by ALWP)
6 Employment/Vocational Services	All Populations	WHCHC/ALA	Onsite
7 Education	All Populations	WHCHC/ALA	Onsite
8 Financial Literacy	All Populations	WHCHC/ALA	Onsite
9 Benefits Assistance	All Populations	WHCHC/ALA	Onsite
10 Transportation Planning	All Populations	WHCHC/ALA	Onsite
11 Legal Assistance	All Populations	WHCHC	Onsite

MHSA Housing Program Rental Housing Application

ATTACHMENT C

12	Peer Advocacy	All Populations	WHCHC	Onsite
13	Social Activities	All Populations	WHCHC	Onsite
14	Medication Management	All Populations	WHCHC	Onsite
15	Information and Referrals	All Populations	WHCHC	Onsite

Primary Service Provider: WHCHC and Affordable Living for the Aging (ALA)

(Indicate the primary service provider, i.e., entity responsible for providing services to the tenants of the MHSA Housing Program units, and for overall implementation of the Supportive Services Plan, including coordination between multiple service providers where applicable.)

Item D.9 Design Considerations for Meeting the Needs of the MHSA Tenants

Describe the following:

- 1 Physical space, including common areas, outdoor areas, landscaping, physical access to the property, security;
- 2 Supportive services space (if any), including any quiet area on site for tenants to meet service staff;
- 3 How the MHSA units will be designed to provide appropriate accommodations for physically disabled MHSA tenants, if appropriate.

Response:

Westmore Linden comprises 13 studios, 79 on-bedroom units, and one (1) two-bedroom manager's unit. Westmore Linden will be designed to meet the needs of its residents and will include the following:

- On-site Supportive Services Space – at least two (2) social services offices for on-site case management and counseling. This will provide a space for private one-on-one services. Westmore Linden will also include a community room with a kitchenette which will be conducive to tenant meetings, group services, and healthy cooking demonstrations.
- On-site Supportive Services Space – a courtyard garden and BBQ area. The garden will be available to all tenants and will include raised (36" AFF) planters on wheels to maximize usability for older adults.
- Handicap Accessibility – Westmore Linden will be completely accessible for residents with physical disabilities including hearing and sight impairments. WHCHC will work with a Certified Accessibility Specialist (CAsp) during the design and construction phases to ensure that Westmore Linden meets all local and federal accessibility requirements. All floors of Westmore Linden will be serviced by an elevator and handicap parking spaces will be provided.
- Security – Westmore Linden will be completely secured. There will be a single, gated vehicular entrance into the property from Westmoreland Avenue. Access will be restricted to tenants and their guests only at all times.