

From: [Pauli Halstead](#)
To: [BOS Public Comment](#)
Cc: [Alison Lehman](#); [Ed Scofield](#); [Sue Hoek](#); [Hardy Bullock](#); [Heidi Hall](#); [Lisa Swarthout](#); [Ryan Gruver](#); [Phebe Bell](#); [Mike Dent](#)
Subject: For January 24th Meeting, Public Comment Re: Ranch House
Date: Monday, January 16, 2023 5:05:44 AM
Attachments: [2. Full Budget Template by Phase Worksheet 12.31.21 \(1\).xlsx](#)
[03. Supplemental Application.xlsm](#)

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Since June of 2021, the following are the costs of the Ranch House project, *prior* to the Board of Supervisors approval. It seems premature to be spending this money prior to approval, unless it is expected that the BOS will just rubber stamp the project, without addressing and correcting the many problems associated with the property, which have now been brought to everyone's attention.

*Note the **\$689.91**: 2/16/2022-Perk & Mantel *re-inspection* fee for Ranch Project.

Also attached is the No Place Like Home Grant. It's important, prior to voting on this project, that there be a signed contract in place with AMI Housing delineating exactly what services they will be providing.

The NPLH contract reveals *a total of 1 support person* (presumably to deliver medications to clients). It would be wise to ask just how much daily support service will be on-site for the entire time clients are housed at the Ranch House. In the past support services have sorely been lacking. Now, with the plan to add three more clients, *daily on-site support services need to be guaranteed by someone*, (AMIH or Behavioral Health).

It might be good to find out why AMIH no longer has a live-in manager at the Coach n Four in Grass Valley, (currently housing 9 clients), and why that project has come to a halt. What happens to these projects down the road? Are the clients just left to fend for themselves?

Pauli

Cost Timeline

Billed to Health & Human Services

\$11,912.50: 6/9/2021-Wallis Design Studio Architects

- invoice 2021051. Pre-Design Services, Schematic Design Services.

\$8,927.50: 7/28/2021-Wallis Design

- invoice 2021072. Schematic Design, Consulting, Civil Engineering, Landscape Architect.

\$4,226.25: 10/7/2021-Wallis Design

- invoice 2021121. Civil Engineering, Septic System Design

\$27,922.75: 12/3/2021-Wallis Design

invoice 2021168. Schematic Design, Design Development, Construction Document, Structural Engineering, Septic System Design, Permit Applications, Environmental Compliance Start Up, CEQA Compliance.

\$18,412.80: 12/29/2021-Wallis Design

- invoice 2021184. Construction Documents, Structural Engineering, Mechanical and Plumbing Engineering, Presentation Renderings, Permit Applications

\$589.91: 1/12/2022.

- invoice 143662. OSSE Incl. Site Approval, EH Archive Fee-Well and OSSE

\$30,655.34: 1/28/2022-Wallis Design

- Invoice 2022014-Civil Engineering, Structural Engineering, Fire Sprinkler Engineering, Cost Estimating Geotechnical Services, Landscape Architect, Septic System Design.

\$15,608.80: 2/3/2022-Approved, Mike Dent

- invoice 142806. Fee for Planning Department Rezoning

\$6,237.74: 2/3/2022-Approved Mike Dent

- invoice 220383. Plan Check Fee

\$21,846.54: 2/7/2022-Ranch House Planning, invoice total report

\$689.91: 2/16/2022-Perk & Mantel *re-inspection* fee for Ranch Project

\$1,379.82: 2/17/2022-Ranch House Permits, invoice total report

\$11,646.00: 2/28/2022-Wallis Design

- invoice 2022027. Environmental Compliance, Project Management Meetings, Generator Addition, Hiring Excavator, Community Room Addition, Low-Voltage Plan, Project Management Plan.

\$5,274.85: 3/31/2022-Wallis Design

- invoice 2022052. Cost Estimating, Geotechnical Services, Septic System Design, Permit Applications, Environmental Compliance, CEQA, Project Management Meetings & Coordination.

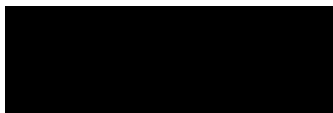
\$2,940.50: 5/31/2022-Wallis Design

- invoice 2022093. Permit Applications, Environmental Compliance, CEQA, Project Management Meetings, Construction Development Services, Architect's Contingency.

\$167,581.30 Total as of 5/31/2022

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Pauline Halstead



BHCIP & CCE APPLICANT INFORMATION		
Applicant Name and Contact Information	County of Nevada	Mike.Dent@co.nvada.ca.us
County or Tribal Nation	Nevada County	
Organization Name:	Nevada County	
Name of Proposed Project:	Ranch House Permanent Supportive Housing Project	
Projected Start Date:	March 9 2021	
Contact Name, Email & Phone:	Mike Dent	(530) 265-1410
Assessor Parcel Number (APN)	04-140-67-000	
Assessor Parcel Number (APN)		
BHCIP & CCE GRANT BUDGET INFORMATION		
<i>Project Development Costs by Phase</i>		
	Funded by Grant	Funded by Match
FEASIBILITY/DUE DILIGENCE		
Owner Administration (10% autofill)	\$0	lock cell
Legal		
Architect		
Consultants (Specify)		
Engineers		
Construction Manager/Owner's Rep		
SIR (Site Investigation Report)		
Site Surveys (soils & enviro)		
Other Feasibility / Due Diligence Costs		
Contingency (10% autofill)	\$0	lock cell
Total Feasibility Costs	\$0	\$0
PRE-DEVELOPMENT - (CCE ONLY)		
Owner Administration (10% autofill)	\$0	lock cell
Legal		
Architect (Schematic Design)		
Construction Manager/Owner's Rep		
Engineers		\$70,000
Constultants (Specify)		
Constultants (Specify)		
Other Pre-Dev Costs (Specify)		
Other Pre-Dev Costs (Specify)		
Other Pre-Dev Costs (Specify)		
Contingency (10% autofill)	\$0	lock cell
Total Pre-Development Costs	\$0	\$70,000
DEVELOPMENT PLANNING		
Owner Administration (10% autofill)	\$0	lock cell
Legal		

Architect (DD and CD's)		\$96,000
Construction Manager/Owner's Rep		
Civil Engineer		
MEP Engineer		
Structural Engineer		
Constultants (Specify)		
Constultants (Specify)		
Other Dev Planning Costs (Specify)		
Other Dev Planning Costs (Specify)		
Other Dev Planning Costs (Specify)		
Contingency (10% autofill)	\$0	lock cell
Total Development Planning Costs	\$0	\$96,000
LAND COSTS/ACQUISITION		
Owner Administration (2% autofill)	\$1,177	lock cell
Land Cost or Value		
Demolition	\$58,839	
Legal		
Broker Fee		
Appraisal Fee		
Construction Manager		
Closing Costs		
Land Lease Rent Prepayment		
Contingency (5% autofill)	\$3,001	lock cell
Total Land Costs	\$63,017	\$0
Existing Improvements Value (for Match)		
Off-Site Improvements		
Total Acquisition Costs	\$63,017	\$0
REHABILITATION		
Owner Administration (5% autofill)	\$0	lock cell
Legal		
Construction Manager/Owner's Rep		
Site Work		
Structures		
General Requirements		
Contractor Overhead		
Contractor Profit		
Prevailing Wages		
General Liability Insurance		
Relocation Costs		
Project Inspection		
Signage and Marketing		
FFE (Furniture/Fixtures/Equipment)		
Urban Greening		
Other Rehabilitation: (Specify)		
Other Rehabilitation: (Specify)		
Other Rehabilitation: (Specify)		

Owner's Contingency (20% autofill)	\$0	lock cell
Total Rehabilitation Costs	\$0	\$0
NEW CONSTRUCTION		
Owner Administration (5% autofill)	\$106,402	lock cell
Legal		
Construction Manager/Owner's Rep		
Site Work	\$637,755	\$50,000
Structures	\$1,214,102	\$791,055
General Requirements	\$170,140	\$50,000
Contractor Overhead	\$26,775	\$19,141
Contractor Profit	\$47,136	\$60,000
Prevailing Wages		
General Liability Insurance	\$32,141	\$4,700
Project Inspection		
FFE (Furniture/Fixtures/Equipment)		
Singage & Marketing		
Urban Greening		
Other New Construction: Hard Cost Contingency		\$51,560
Other New Construction: Soft Cost Contingency		\$25,944
Other New Construction: (Specify)		
Other New Construction: (Specify)		
Other New Construction: (Specify)		
Owner's Contingency (20% autofill)	\$446,890	lock cell
Total New Construction Costs	\$2,681,342	\$1,052,400
CONSTRUCTION PERMITS & FEES		
Owner Administration (10% autofill)	\$2,744	lock cell
Bond Premium	\$27,441	
Builders Risk Insurance		
Title and Recording		
Permit Fees		\$50,000
Local Development Impact Fees		
Employment Reporting		
Other Const. Permits & Fees (Specify)		
Other Const. Permits & Fees (Specify)		
Other Const. Permits & Fees (Specify)		
Owner's Contingency (10% autofill)	\$3,019	lock cell
Total Construction Permits & Fees	\$33,204	\$50,000
RESERVES		
Operating Reserves (Rehabilitation)		
Transition Reserves (Move-in)		\$23,136
Total Reserves Amount	\$0	\$23,136
OTHER PROJECT COSTS		
Post Construction Commissioning		
Marketing/PR/Communications		
Move-in fees		
Accounting/Reimbursable		

CDFI Fees		
Other Costs: (Specify)		
Other Costs: (Specify)		
Other Costs: (Specify)		
Other Costs: (Specify)		
Owner's Contingency (10% autofill)	\$0	lock cell
Total Other Project Costs	\$0	\$0
DEVELOPER COSTS		
Developer Overhead		\$50,000
Consultants/Processing Agents		
Project Administration		\$70,600
Other Developer Costs: (Specify)		
Total Developer Costs	\$0	\$120,600
Developer Fee (6%)	lock cell	lock cell
TOTAL PROJECT COSTS	\$2,777,562	\$1,412,136
Match % of Total Costs	51%	
Total Contingency	\$452,910	lock cell
Total Reserves	\$0	lock cell

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mike.dent@co.nevada.ca.us

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Total Costs	Notes
\$0	
\$0	
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\$687,755	
\$2,005,157	
\$220,140	
\$45,916	
\$107,136	
\$0	
\$36,841	
\$0	
\$0	
\$0	
\$0	
\$51,560	
\$25,944	
\$0	
\$0	
\$0	
\$446,890	
\$3,733,742	
\$2,744	
\$27,441	
\$0	
\$0	
\$50,000	
\$0	
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\$3,019	
\$83,204	
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\$50,000	
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\$70,600	
\$0	
\$120,600	
\$166,654	
\$4,356,352	<i>TOTAL includes Developer Fee</i>

\$452,910	
\$23,136	

Supportive Services Plan (SSP) §203

Rev. 9/25/19

Instructions: All Projects that include Supportive Housing units must complete a Supportive Services Plan for the NPLH units. The checklist below shall serve as a guide to ensure that the Supportive Services Plan is complete.

Part I.	Tenant Selection Narrative
Yes	Section 1: Tenant Selection Criteria
Part II.	Lead Service Provider (LSP) Detail
Yes	Section 1: Lead Service Provider (LSP)
Yes	Section 2: Best Practices in Service Delivery
Part III.	Supportive Services Detail
Yes	Section 1: Supportive Services Chart
Yes	Section 2: Supportive Services Coordination
	Section 3: Verification from Appropriate Public or Non-Profit Funding Agency
Part IV.	Tenant Safety and Engagement
Yes	Section 1: Tenant Engagement
Yes	Section 2: Safety and Security
Part V.	Staffing
Yes	Section 1: Staffing Chart
Yes	Section 2: Staffing Ratios
Part VI.	Supportive Services Budget
Yes	Section 1: Supportive Services Budget Table & Cost Per Unit Table
Yes	Section 2: Budget Narrative and Funding Commitments
Yes	Section 3: Service Funding History Table
Part VII.	Collaboration and Reporting
Yes	Section 1: Collaboration
Yes	Section 2: Reporting Requirements Certification

Part I. Tenant Selection Narrative

This section asks for a detailed description of the tenant selection process. Using the titled sections below, the narrative should be as specific as possible, delineating the roles of property management and the Lead Service Provider and how these functions will be coordinated. Your description should clearly and conclusively document processes to ensure NPLH tenant households occupy NPLH Assisted Units following tenant selection and Housing First Practices.

Section 1: Tenant Selection Criteria

1. Target Tenant Population and Eligibility Criteria

a. Do you use Housing First Practices? Yes

b. Describe the criteria that will be used to ensure that tenants are eligible to occupy the NPLH Assisted Units.

Eligibility requirements for the Ranch House NPLH units will be consistent with eligibility requirements for HUD funded Permanent Supportive Housing: (1) Chronic Homeless Status as verified by analysis of HMIS and Point-In-Time count data, specific provider-based verifications, and up to 25% self report/family verification; (2) Documentation verifying the presence of a severe and persistent mental illness (3) Verification of income that meets low-income requirements

c. Description of the Target Population to be served, and identification of any additional subpopulation target or occupancy preference for the NPLH Project that the Applicant wishes to undertake beyond what is permitted under the Target Population requirements. **NOTE: Any additional subpopulation targeting or occupying preference for an NPLH Project must be approved by the Department prior to construction loan closing and must be consistent with federal and state fair housing requirements.**

The Target Population will be adults or older adults with a serious mental disorder who are chronically homeless, or at risk of chronic homelessness, including persons with co-occurring mental and physical disabilities or co-occurring mental and substance use disorders. The Target Population will be identified through Nevada County's Coordinated Entry (CES) process, with prioritization on those scoring highest on the standardized vulnerability index pending verification of the criteria outlined above.

d. If not stated in question (b) in this section, describe the criteria relating to the applicant's income eligibility, and eligibility as a member of the Target Population as defined under Section 101 of the NPLH Guidelines.

e. Describe any additional eligibility criteria other than those indicated above, i.e., information needed to determine if Applicant can comply with lease terms. **NOTE: Selection criteria designed to assess anything other than the ability to comply with lease terms generally run afoul of fair housing laws designed to protect equal access to housing for people with disabilities. See [Between the Lines, A Question and Answer Guide on Legal Issues in Supportive Housing Chapter 4.](#)**

Ability to comply with lease terms is the only other requirement for eligible tenants.

f. Identify all disclosures that will be provided to applicants/tenants. Example: Megan's Law disclosures.

Move in and lease procedures will be conducted by the Ranch House Apartment's resident manager. At move in, the resident manager and resident review and sign the lease, along with reviewing and receiving all addenda including the Ranch House Apartments Handbook. If not provided earlier, the resident manager receives the required rental payment and security deposit. The future resident reviews and signs an eviction policy document that explains in writing the process for eviction. The resident manager provides a welcome orientation to the Ranch House Apartments including how to submit maintenance and repair requests and assists the residents to connect the utilities. The resident manager checks if the resident has household or furniture needs and provides referrals if needed. Megan's Law disclosures will be discussed with tenants at move-in and appropriate steps will be taken to ensure notification to other tenants.

g. Describe how the local Coordinated Entry System (CES) is selecting tenants? If the local Coordinated Entry System is not yet operational, describe the plan to use it for tenant selection when it is established. Including the name and contact information for the system.

Tenants will be selected off the CES "by-name list" that ranks individuals by vulnerability. Every week, a case conferencing meeting comprised of multiple service providers utilizes the by name list to conduct eligibility assessments and assign lead agency support based on eligibility for various services. For example, a highly vulnerable person who indicates they have children in the household would be assigned a CalWORKS Housing Support Program case manager for further assessment and case management. Individuals or Households on the list who meet chronic homeless status and indicate having mental illness are assigned an outreach case manager for further engagement and initial verification of eligibility for PSH housing including the NPLH units at the Ranch House Rehabilitation Project. CES system operated by Connecting Point, 208 Sutton Way, Grass Valley CA 95945 Contact: Tim Giuliani, Program Manager, (530) 274-5601 img@connectingpoint.org

2. Marketing/Outreach

a. Will Applicant commit to use a Coordinated Entry System (CES) to fill all of the NPLH Assisted Units based on use of a standardized assessment tool which prioritizes those with the highest need for Permanent Supportive Housing and the most barriers to housing retention? (provide description of system below).

The CA-531 (CoC) and all participating providers utilize a universal standardized assessment tool for use in participant intake, assessment, and referral process. The tool utilizes a scoring paradigm to assist with documenting program participants' needs and prioritizing services. All CoC projects use this assessment tool for all prospective program participants. Individuals can "enter" the CES by contacting Connecting Point/2-1-1, through the Outreach team or by going to any service agency where they can either do the assessment with agency staff or agency staff can assist them in calling Connecting Point/2-1-1. CA-531 employs a progressive assessment approach. Progressive assessment stages the asking and sequencing of assessment questions such that prospective program participants are asked only those questions directly related to service enrollment and prioritization decisions necessary to progress the participant to the next stage of assessment or determine a referral to a service strategy. Through the assessment process, persons requesting shelter are screened for other safe and appropriate housing options (temporary or permanent) and to resources which will help them obtain or maintain their housing. Persons who have appropriate housing options and resources are diverted from emergency shelter and referred to wrap around or supportive services that would provide the immediate connection to services that would allow for problem solving and linkage, if the program participant so desires. In addition to housing options, all persons are screened for potentially critical health and safety needs to determine those with the most severe needs including: Housing (emergency, transitional or permanent), medical and safety benefits, nutrition assistance, income supports and supportive services. The assessment process is standardized, with uniform decision-making by all assessment locations and staff. The CES system operates using a program participant-centered approach, allowing program participants to freely refuse to answer assessment questions and/or refuse referrals.

b. If a separate alternate system must be used to refer persons At-Risk of Chronic Homelessness, a minimum of 40 percent of the NPLH Assisted Units must be reserved for persons who qualify as Chronically Homeless and a maximum of 30 percent of the NPLH Assisted Units may be reserved for persons who are At-Risk of Chronic Homelessness. All referrals must be based on a prioritization of those with the highest need for Permanent Supportive Housing, and the most barriers to housing retention (provide description of system below).

N/A

3. Housing First Characteristics

a. Please confirm compliance by checking all of the characteristics that apply to the NPLH units in the Project:

Tenants have a lease and all the rights and responsibilities of tenancy, as outlined in California's Civil, Health and Safety, and Government codes	Yes
Tenant has his/her own room or apt. and is individually responsible for selecting a roommate in any shared tenancy	Yes
Tenant may stay as long as he/she pays his or her share of rent and complies with the terms of his/her lease	Yes
Unit is subject to applicable state and federal landlord tenant laws	Yes
Participation in services or program compliance is not a condition of permanent housing tenancy	Yes
Tenant screening and selection practices that promote accepting applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services	Yes
Applicants are not rejected on the basis of poor credit or financial history, poor or lack of rental history, criminal convictions unrelated to tenancy, or behaviors that indicate a lack of "housing readiness"	Yes
Supportive services that emphasize engagement and problem solving over therapeutic goals and service plans that are highly tenant-driven without predetermined goals?	Yes
The use of alcohol or drugs in and of itself, without other lease violations, is not a reason for eviction?	Yes
In communities with coordinated assessment and entry systems, incentives for funding promote tenant selection plans for supportive housing that prioritize eligible tenants based on criteria other than "first-come-first-serve," including, but not limited to, the duration or chronicity of homelessness, vulnerability to early mortality, or high utilization of crisis services. Prioritization may include triage tools, developed through local data, to identify high-cost, high-need homeless residents	Yes
Case managers and service coordinators who are trained in and actively employ evidence-based practices for client engagement, including, but not limited to, motivational interviewing and client-centered counseling	Yes
Services are informed by a harm-reduction philosophy that recognizes drug and alcohol use and addiction as a part of tenants' lives, where tenants are engaged in nonjudgmental communication regarding drug and alcohol use, and where tenants are offered education regarding how to avoid risky behaviors and engage in safer practices, as well as connected to evidence-based treatment if the tenant so chooses	Yes
The project and specific apartment may include special physical features that accommodate disabilities, reduce harm, and promote health and community and independence among tenants	Yes

Part II. Lead Service Provider (LSP) Detail

Section 1: LSP

The County or other LSP is the entity that has overall responsibility for the provision of supportive services & implementation of the Supportive Services Plan. The County or other LSP provides comprehensive case management services (individualized services planning & the provision of connections to mental health, substance use, employment, health, housing retention) and may also coordinate with other agencies that do so.

1. County/LSP Name:	Nevada County Behavioral Health			
Relationship to Applicant:	County Department			
How long has the County/LSP been providing services to homeless:	11	Years	0	Months
How many Projects have the Applicant and LSP completed together? (Provide list of completed Projects when submitting)				
2. List any additional agencies that will be providing comprehensive case management services to residents. Describe population(s) they will serve and how their services will be coordinated by the LSP.				

Agency Name	Populations the Agency will serve	How Services will be Coordinated
Turning Point Community Programs	Full Service Partnership (FSP) clients	Contracted FSP provider, standing weekly multi-disciplinary supportive services meetings
FREED Center for Independent Living	NPLH tenants with physical and mental disabilities	Contracted SSI/SSDI benefit advocacy, standing weekly multi-disciplinary supportive services meetings
SPIRIT peer empowerment center	PSH program participants who prefer peer support	Contracted Peer Support Specialists and disability advocates, standing weekly multi-disciplinary supportive services meetings

Section 2: Service Delivery

1. Fully describe in the yellow cells below for each question how the best practices may be utilized in the service delivery model. Include a description of policies and periodic training plans. For the clinical interventions in this section, include a description of how the intervention is used and describe training. **NOTE: Do not include definitions of these practices.**

Benefits counseling and advocacy, including assistance in accessing SSI/SSP, enrolling in Medi-Cal, outreach, access, and recovery; Staff trained prior to lease up?	Yes
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Supportive Services Plan (SSP) §203

Rev. 9/25/19

Nevada County maintains a contractual relationship with FREED Center for Independent Living for services related to benefits advocacy and assistance in accessing SSI/SSDI benefits. FREED staff are a part of the core CTI team. FREED case managers and advocates attend weekly multi-disciplinary case conferencing meetings that focus on tenant stability. FREED case managers will work with Ranch House tenants and, in some cases, may provide primary supportive services. The County also contracts with FREED for its "friendly visitor" program for people recently discharged from hospitals or other institutional settings and a for a program that provides home modifications for a wide range of needs related to disabilities that restrict movement or require assistive technologies. Nevada County has contracted with FREED for disability advocacy services since 2017 and for other services since 2011. All contracted FREED staff are currently trained in CTI, WRAP Planning, and utilize a person-centered approach. Benefits advocacy staff are trained in the SOAR model. FREED receive regular yearly training in EBPs including CTI, WRAP planning, Motivational Interviewing and specialized training related to living and coping with disabilities. FREED staff are often peers in that they live with disabilities and can share with client's specific experiences and learned skills.

Critical Time Intervention: Staff trained prior to lease up? Yes

Nevada County has a core CTI team comprised of 8 staff members from 3 local organizations: 4 outreach case managers, 1 substance use counselor, 1 housing navigator, 1 peer support specialist, and 1 registered nurse. The CTI team manages engagement, linkage and supportive services in a time bound, phased services model that focuses on building an individualized community-based network of supports for its clients. The CTI team leads the weekly multi-disciplinary case conferencing team. The core team is supported by a CTI supervisor. Additionally, embedded CTI-informed staff are in multiple organizations and departments. CTI forms the foundation for client engagement and linkage across the Nevada County continuum. The CTI team ensures referral and linkage to services and works with a broad array of providers to plan supportive service needs that are client centered and focused on deep community supports not limited solely to traditional supportive service agencies and can include supports identified by the clients through the engagement and coordination process.

Trauma-Informed Care: Staff trained prior to lease up? Yes

A Trauma Informed training is scheduled for all case management staff on June of 2020. Currently only substance use treatment staff are trained in Trauma Informed practices.

Motivational Interviewing: Staff trained prior to lease up? Yes

Motivational Interviewing (MI) is a core evidence-based practice utilized by Behavioral Health staff and all contracted partners. All Behavioral Health Case managers and contracted service providers who conduct case management activities receive an initial motivational interviewing training and yearly trainings aimed at maintaining the practice and honing its effectiveness. MI will be utilized throughout engagement as potential tenants are working with case managers and peer supports to identify individual supports and transition from the street to stable housing. MI will also be used to assist clients who are actively using substances to assess motivation for change over time.

Voluntary Moving-on strategies: Staff trained prior to lease up? Yes

In line with CTI, Nevada County case managers and contracted supportive services staff work with clients to establish community supports and transition tenants from PSH to mainstream vouchers like Housing Choice. Tenants always have the option to transition in place. Regardless of the subsidy type, tenants can continue to receive supportive services. Case Management staff are trained to work with clients to achieve stability through the services of their choice. CTI service delivery focuses on identifying and establishing community-based supports be they family-based, church-based or through affinity-based organizations like Project Heart, a recovery oriented organization focused on forming peer-to-peer supports between people who are in recovery from substance use issues.

Safety and security of staff and residents: Staff trained prior to lease up? Yes

Security and safety are a primary responsibility of the AMIH property management staff. All staff members will be aware of security concerns and trained to ensure that all security protocols are met. The Ranch House Apartments will have separate locks and keys for each tenant. There will be a security camera on site to monitor the property and to ensure safety of tenants. During the day the resident manager will be responsible for coordination of security. Supportive services staff will work with tenants throughout the week during normal business hours, providing for regular presence at the complex. Supportive Services staff will have the direct contact for the resident manager to make them aware of safety and security concerns. The resident manager will walk the site weekly checking the exterior of the units, the common areas, and the areas next to the fence lines surrounding the complex.

Peer Support (include length of time Peer Support program used, if applicable): Staff trained prior to lease up? Yes

Peer support services are contracted through both the property manager and through SPIRIT Peer Empowerment Center. Peers employed by the property manager assist tenants in daily living tasks and recreational activities. Peer support is available to assist tenants in any number of day to day needs including transportation and assistance with accessing services. Contracted SPIRIT peer supporters provide opportunities for tenants to go deeper into peer support, offering self-advocacy trainings and WRAP wellness planning both onsite and at the SPIRIT Peer Empowerment Center. Peer Supports from both AMIH and SPIRIT regularly attend case conferencing meetings adding lived experience to deliberations regarding client service needs.

Case conferencing: Staff trained prior to lease up? Yes

Case conferencing is a core practice for all county-based agencies and nonprofits that provide homeless services or supportive services and a foundational aspect of supportive services coordination for all PSH, FSP and the Housing First, independent-living master-leased housing program (Bridges to Housing). The Case conferencing team (called the Housing Resource Team, the HRT, or colloquially "the heart") is comprised of Nevada County Behavioral Health (including substance use disorder staff), Turning Point FSP, AMIH, Hospitality House Shelter, SPIRIT, FREED, Adult Protective Services, Connecting Point- Coordinated Entry and CalWORKS HSP. Additional providers are invited to the meeting on an as-needed basis, regularly including the Public Defender's office, local hospital staff, and Veterans groups including the VA, VOA and the local veterans' services officers. The Team is led by the core CTI team, the Homeless Outreach and Medical Engagement (HOME) team.

Communicating the Applicant's and LSP's program philosophy, values, and principles: Staff trained prior to lease up? Yes

Nevada County and contracted service providers communicate program philosophies and values to tenants through written documents that explain their rights and focus the service providers responsibility, privacy policies, and ethical obligations. Case management staff are supervised regularly to focus on meeting clients and tenants where they are at and engaging them utilizing nonjudgmental and nonviolent communication strategies. In this way, staff become the front line in communicating organizational values. It is through the staff interactions with clients and tenants that these principles are best communicated and reinforced over time.

Rent by residents during periods of hospitalization: Staff trained prior to lease up? Yes

Nevada County maintains a flexible housing assistance pool for use in circumstances where tenants are unable to pay their portion of rent or for other circumstances that prohibit tenants from paying rent. This includes hospitalizations. All case managers are aware of the circumstances that are eligible for flexible assistance. Weekly case conferencing identifies these issues early on and case managers can access funds prior to the tenants being issued a lease violation for failure to pay rent.

Resident Privacy and Confidentiality: Staff trained prior to lease up? Yes

Nevada County case managers and all contracted supportive services staff are required to take a yearly HIPAA training. Case conferencing meetings in which tenants service provisions are discussed require Release of Information forms for all disclosures related to Protected Health Information. In cases where releases are not able to be attained, some cases merit the deidentification of tenants so that high level coordination can occur without violating the tenants rights.

How the supportive services staff and property management staff will work together to prevent evictions, to adopt and ensure compliance with harm reduction principles, and to facilitate the implementation of reasonable accommodation policies from rent-up to ongoing operations of the Project: Staff trained prior to lease up? Yes

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Housing stability is a central objective of AMIH, and services provided will focus on assisting participants to remain stable in their community. Supportive service providers connecting and engaging with tenants at Ranch House Apartments will create a program that is designed to provide the necessary support so that these tenants will be able to overcome their previous barriers that contributed to homelessness. Core to this program is the collaboration of supportive services and property management staff to guide residents in the following areas:

- Household management skills: managing costs, complying with the conditions of a lease.
- Understanding the consequences of lease violations and eviction prevention.
- One-on-one coaching in house cleaning, cooking and shopping, use of utilities, household appliances and plumbing, home decorating.
- How to live with housemates and in shared living environments.
- Managing visitors and guests: the joy of showing off a new home, housewarming, visiting with significant others, ensuring personal space is respected by others.
- How to request that someone is added to the lease or allowed to move in.
- How to develop good relationships with neighbors.
- Maintenance: familiarity with maintenance requests and work orders, how to communicate with property management staff.
- Managing their disabilities

Issues that may emerge include house cleaning and maintenance of the unit, clinical issues related to mental illness or substance use, conflict with housemates, neighbors, timely payment of rent, and tenants' feeling of safety or comfort in their unit. These issues should be discussed in team meetings and addressed by staff with participants. AMIH staff will respond promptly and appropriately to requests or concerns of supportive services staff. The resident manager may contact supportive services staff because of difficulties with the tenant related to lease violation issues or may raise concerns if they have not seen the tenant recently or have observed patterns of behavior that concern them. Coordination between property management staff and support services is essential when issues arise to ensure that all reasonable efforts are taken to assist the tenant to maintain housing.

General service provider and property manager communication protocols: Staff trained prior to lease up? Yes

Property management staff will notify the lead supportive services provider when a tenant is displaying behaviors that could jeopardize tenancy such as failure to pay rent or conflicts with property management or other tenants; Notify all Parties of any potential changes to the regular operations of the housing site, or any potential changes or losses of funding that could impact the operations of the housing site; Notify lead supportive service provider immediately of any critical incidents that result in emergency service response or police action resulting in arrest, loss of life or serious bodily harm; Report any unusual or uncharacteristic tenant behavior to onsite Supportive Services staff or Mental Health Services staff (if no onsite service coordination) in a timely manner. Participate in regular and ongoing (weekly) team meetings which includes a standardized agenda. These meetings should include at a minimum: significant and relevant changes, rent changes, events and activities scheduled at the property, legal notices received by residents, lease violations, eviction updates, resident issues and move-in and outs, as well as Resident Services outreach efforts, referrals, and outcomes.

Making Applicants aware of the reasonable accommodations procedure: Staff trained prior to lease up? Yes

AMIH is committed to ensuring that there is clear communication with residents regarding the function of the property. Information regarding maintenance, security, and opportunities for supportive services will be provided in writing to each unit and posted in a central location. If tenant has a request for reasonable accommodations that relates to the accessibility or functionality of a given unit as the result of a disability, AMIH will work FREED to assess the unit for the appropriateness of modifications and/or other assistive technologies. Prior to lease, the property manager and supportive services staff will work with tenants to assess if the client's needs require access to a specific unit (upstairs vs downstairs etc.)

Receiving and resolving tenant grievances: Staff trained prior to lease up?

All tenants at Ranch House or any AMIH managed property have the right to file a complaint, grievance and appeal if you are not satisfied with any action taken, staff decision, or if they believe they have experienced discrimination or abuse. The following procedures are intended to provide an effective, impartial and expedited procedure to resolve differences in a manner satisfactory to all parties. All documentation related to a grievance or appeal will be kept in a separate file for quality assurance review by the Executive Director of AMIH. (Excerpted from AMIH Grievance policy):

1. Complaint- Prior to filing a formal grievance, you should bring your concern to the attention of the staff member involved to resolve the issue, or to the Executive Director. A complaint may be verbal or written and must be logged according to agency policy, whether received by phone, in person or in writing. Upon request by either you or the case manager, the staff member's supervisor may be present for the discussion.
2. Grievance- If the situation is not resolved; a grievance must be submitted within two business days in order to request further review of your complaint. The steps of the grievance procedure are as follows:
 - You are encouraged to describe your concern in writing and submit it to the case manager's supervisor.
3. Appeal- If the decision is not satisfactory; you may file an appeal to seek a secondary review. The steps of the appeal are as follows:
 - You must describe your concern in writing and submit to AMIH Executive Director
 - The Executive Director will contact you to schedule an appointment to discuss the appeal
 - Within 5 (five) business days of the discussion a written explanation of the decision, including any action taken will be sent to you

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Appropriate responses to tenant crisis: Staff trained prior to lease up?

All property, case management and peer staff and trained in crisis intervention. Nevada County maintains a Crisis Stabilization Unit located at the Regional hospital. The CSU is a warm and welcoming environment that allows individuals in crisis to receive counseling and therapy and medication if needed. Individuals can stay at the CSU overnight if needed. Nevada County also runs the Insight Respite Center where a tenant can enjoy longer term stay (up to 2 weeks) with supportive peer-based services provided onsite. Tenant supportive services will have many options for appropriately addressing tenant crisis. If onsite intervention is ineffective or the safety of other tenants are at risk the CSU will be available for placement. If hospitalization occurs, tenants can access insight respite prior to returning to their unit, if requested.

Retention of tenants regardless of use of substances: Staff trained prior to lease up?

No tenant will be evicted from units based on substance use. Compliance with standard lease terms is all that is required to retain a unit. In the event that substance use issues are causing behaviors that are jeopardizing lease compliance, property management staff and supportive services staff will address these issues directly with tenants to create a plan to becoming lease compliant. At this time, substance use treatment (inpatient or outpatient) may be offered but will not be required. Within the Housing First model, there are times when the roles and responsibilities of property management and supportive services staff may overlap, particularly when dealing with nuisance behaviors, landlord/tenant challenges, and other challenges. In these circumstances, the goals of supportive services staff and property management staff may be different. In these circumstances we remember the shared goals of housing stability for participants and maintaining safe communities and involve Managers and/or Directors as needed to resolve tensions or challenges quickly and to the satisfaction of everyone involved.

Cultural and linguistic competency for persons of different races, ethnicities, sexual orientations, gender identities, and gender expressions: Staff trained prior to lease up?

Yes

The County's Cultural Competency and Linguistic Proficiency Work Plan is revised yearly with input from County service staff and contracted provider staff. The goals of the plan address regular assessment of how the County and its contracted providers are meeting objectives in the plan related to serving the following populations: Latino, LGBTQ, Seniors, Vets, Transitional Age Youth, Homeless, and Co-occurring Disorders. NCBH has a standing Cultural Competency Committee Meeting that meets every month. These meetings are attended by County Behavioral health staff and representatives from all contracted providers including the contracted property management provider. Nevada County Behavioral Health staff, triage staff, and all contracted providers, including the property manager have access to the two (2) language lines through AT&T and Language Line. These services provide phone translation and, if needed, translation services for documents or direct service (in person). All documents that are provided to clients/consumers are also available in Spanish (Nevada County threshold language) and in their own language upon request. All documents that are provided to clients/consumers are also available in audio versions. NCBH has staff that speak languages other than English. Property management staff will have access to phone translation services funded by NCBH. This includes translation for written documents.

Part III. Supportive Services Detail

Section 1: Supportive Services Chart

Required Services: List and describe all services under Section 203(c) of the NPLH Guidelines required to be offered to tenants of the NPLH Assisted Units. The chart must include each of the services listed. Attach the agreement for each of the services listed.

Resident Service	Service Description	Service Provider(s)	Relationship to Applicant	Agreement	Off-site Service Location
List each service separately	Describe service, including the frequency and degree to which services are provided.	Provider's Name	Applicant, separate division of Applicant's organization, or a Project Partner	If service will be provided by a non-Applicant entity, indicate type of agreement under which service will be provided.	If service is on-site, leave blank. Enter distance, in miles, to off-site service and list resident commuting options. Reasonable access is access that does not require walking more than one-half mile.
Case management with individual service plans	Case Management services will be coordinated by NCBH staff and its contracted FSP provider Turning Point in conjunction with the property manager, AMIH. Case management activities will include assessment, individualized services and support plans, crisis intervention, tenant/client advocacy, housing plan development, linkage and consultation, substance abuse evaluations and referral, employment assistance, and benefit assistance. All tenants will have access to a 24/7 crisis triage line. Additional case management coordination will occur as needed at the weekly Housing Resources Team (HRT).	HOME team, NCBH, Turning Point, AMIH	Division of Applicant's Org and Project Partner	Contract	
Peer support activities	Both the SPIRIT Peer Empowerment Center and AMIH (Property Manager) will provide tenants access to peer support services both on-site and in the community. Peer Support Specialists will be engaged in the Housing Resource Team meetings. Tenants will have the option of receiving case management and support services from SPIRIT Peer Support Specialists or AMIH peer supporters if they do not wish to engage with case managers. Coordination of the community space by the resident manager will allow these providers to host various peer support groups on site (i.e. music peer support groups, creative expressions, recreational activities, anxiety & depression support groups, etc.). The property manager, AMIH, will also provide optional Peer Supporters to tenants with a focus on household management skills, financial management, good neighbor practices and other areas related to adjustments the tenants are making after being housed.	AMIH, SPIRIT	Project Partners	Contract	
Mental health care	Therapy, assessment, psychiatric care, medication management, crisis intervention. Tenants will be offered medication outreach services for prescription medication management that can be delivered directly.	NCBH, Turning Point	Division of Applicant's Org and Project Partner	Contract	Off-site Service Location. Nevada County Behavioral Health. 5 miles. Case managers will transport to appointments, optional

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Substance use services	Nevada County has entered into the Drug Medi-Cal Organized Delivery System (ODS) waiver, greatly expanding access to substance use disorder (SUD) treatment services. All tenants in NPLH units will be able to access outpatient and inpatient substance use disorder treatment based on their assessed necessary level of care. NCBH will take lead on assessment for SUD services and through a contracted partnership with Granite Wellness Center will coordinate referral to inpatient facilities and/or various outpatient services. Common Goals Inc. also runs daily outpatient groups. Case managers will coordinate with Medically Assisted Treatment (MAT) providers to ensure access to prescribed treatment medications	NCBH	Division of Applicant's Org	Commitment Letter	Off-site Service Location. Nevada County Behavioral Health. 5 miles. Case managers will transport to appointments, optional bus transport
Support in Linking to Physical Health Care	Case Managers, Peer Supporters and property management staff will work with tenants to schedule transportation to appointments through the provision of bus passes or via coordination with Logisticare, a benefit that is covered by the managed care plans offered in the county.	HOME team, NCBH, Turning Point	Division of Applicant's Org and Project Partner	Contract	
Benefits counseling and advocacy	SSI/SSDI benefits advocacy will be offered by SOAR-trained staff contracted through FREED. SOAR-trained staff at FREED will be available to meet tenants in their homes or in their offices Monday through Friday 8-5 pm daily at the FREED office located 5 miles from the project. FREED staff will work with tenants to assist with disability applications and transportation coordination for evaluations and other required appointments related the disability determination process. County Department of Social Services (DSS) eligibility staff will be accessible for CalFRESH, MediCAL and CALWorks assistance through bi-monthly in home visits or at the DSS office located .5 miles from the proposed project.	FREED, Nevada County Social Services	Division of Applicant's Org and Project Partner	Contract	Off site at the FREED office located 4 miles from the site. For Scheduled appointment, tenants can request transportation from case managers or peer supporters. FREED offices are located on a main bus route
Basic housing retention skills	Life skills classes, one-on-one in-house support	NCBH, TPCP, AMIH	Division of Applicant's Org and Project Partner	Contract	

Encouraged Services: List and describe all services under Section 203(d) of the NPLH Guidelines encouraged to be offered to tenants of the NPLH Assisted Units. If multiple services will be provided in the service categories provided below, attach any additional description. Empty spaces are available at the bottom of the table for the applicant to describe services not listed.

Resident Service	Service Description	Service Provider(s)	Relationship to Applicant	Agreement	Off-site Service Location
List each service separately	Describe service, including the frequency and degree to which services are provided.	Provider's Name	Applicant, separate division of Applicant's organization, or a Project Partner	If service will be provided by a non-Applicant entity, indicate type of agreement under which service will be provided.	If service is on-site, leave blank. Enter distance, in miles, to off-site service and list resident commuting options. Reasonable access is access that does not require walking more than one-half mile.
Services for persons with co-occurring mental and physical disabilities or co-occurring mental and substance use disorders not listed in the above table	FREED offers recurring support groups for co-occurring mental and physical disabilities and will host those groups at the supportive services center. Granite Wellness Center will offer tenants support for co-occurring mental illness and substance use disorder utilizing the Living in Balance Co-Occurring Disorder Curriculum. Turning Point will offer co-occurring mental illness and substance use disorder services through their RISE support group.	FREED, Granite Wellness Center, Turning Point	Project Partner	Contract	5 miles. Case manager transport, bus, or through coordination with FREED transport van
Recreational and social activities	Monthly social activities will be offered. These activities will encourage group interaction and social connection and will be organized by the resident manager. Tenants who are engaged in case management services will also be offered the opportunity to engage in a wide variety of recreational and social activities coordinated by their case managers and AMIH staff (i.e. bowling, basketball, camping, group dinners, etc.).	AMIH, SPIRIT	Project Partner	Contract	on site and through coordinated transportation

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Educational services	Tenants engaged in case management services will receive support with education if this is an identified goal (i.e. online college courses, assistance in enrolling and completing community college courses, acquiring a GED etc).	NCBH, Turning Point, SPIRIT, AMIH	Division of Applicant's Org and Project Partner	Contract	
Employment services	Tenants engaged in case management services will receive support with obtaining employment if this is an identified goal. Tenants will be able to become certified peer support specialists through free 8-12 week trainings offered at either the supportive services center or the SPIRIT Peer Empowerment Center.	NCBH, Turning Point, SPIRIT	Division of Applicant's Org and Project Partner	Contract	Onsite. Offsites tenants can access Onestop services located 4 miles from the project site. Transportation by but or with services workers will be available
Obtaining access to other needed services	Food services: Interfaith Food Ministry & Nevada County Food Bank provide free food distribution to low-income residents, which will include the target NPLH population. Basic medical care for tenants via the HOME team registered nurse. Nevada County Veterans Services will also provide weekly on-site outreach and engagement with tenants who have veteran status. Nevada County Probation will provide onsite check-in.	NCBH, Turning Point, SPIRIT, AMIH	Division of Applicant's Org and Project Partner	Contract	Food bank located 6 miles from project site. Transportation options include through case managers and bus transit

File Name:	LSP Agreement	Lead Service Provider Contract, Agreement, or Letter of Intent	Hard Copy and on USB?	Yes
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Section 2: Supportive Services Coordination

1. Describe the accessibility of community services to which you propose linkages, whether they are on-site or in close proximity to the Project, including the hours they are available, and the frequency, travel time and cost to the tenant for transportation required to access the services to include both public transportation and private transportation services (e.g. van owned by the provider). Additionally, describe how the supportive services will be provided in a manner that is culturally and linguistically competent for persons of different races, ethnicities, sexual orientations, gender identities, and gender expressions. This includes explaining how services will be provided to NPLH tenants who do not speak English, or have other communication barriers, including sensory disabilities, and how communication among the services providers, the property manager and these tenants will be facilitated. Additionally, describe how services will accommodate trauma-based, barriers to services. Provide documentation, in the form of Memorandum of Understanding, Memorandum of Agreement, letters of support or contracts demonstrating who will be responsible for ensuring access to services and how accessibility will be accomplished if not already included in agreement provided for service provision.

Case Managers will provide as much on-site support service as possible. Case managers frequently transport client/tenants to medical appointments, food distribution centers, shopping, and other activities. All service providers listed in this application have company vans that operate Monday through Friday, 8am-5pm. Case workers work with clients to schedule LogistiCare transport if case managers are unavailable. Peer staff often step in for transport needs when case managers are not available. The main county building and campus (The Eric Rood Center) is located less than a mile from the site. This campus includes Eligibility services for CalFRESH and Medi-Cal as well as the County Library facility. The proposed site will have a bus stop provided. The bus runs 6 days a week, 3 times a day.

2. Describe which community/county/state funded programs will be utilized to meet the needs of the residents, particularly if those residents are dependents of tenants.

Mental Health Services Act funds (PEI, CSS and Innovation) are the primary funds used to support supportive services and housing-based programs. Benefits Advocacy will be provided through state funded Housing and Disability Advocacy program. The County also provides county general funds to the Coordinated Entry provider to ensure functionality of the system. Housing and Urban Development Permanent Supportive Housing Funds will be utilized for operations support and rental assistance. The County also has allocated state CESH, HEAP, and HHAP funds for rental assistance and flexible housing funds.

3. Is the Applicant currently working with the with the CoC in the area? Yes

If No, please explain:

N/A

Section 3: Verification from Appropriate Public or Non-profit Funding Agency

All applications where the County is **not** the LSP shall include a verification from an appropriate funding entity (either public or non-profit) knowledgeable about the supportive service needs of the Target Population, indicating that the proposed services are appropriate to meet the needs of the Target Population. The verification shall endorse the primary service provider as a known provider of support services to the Target Population. The Development Sponsor and/or Service Provider are not eligible to provide the Funding Agency Verification.

Please use the attached Supportive Service Verification form from the appropriate public or non-profit agency. Please submit one verification if serving different subpopulations of NPLH tenants who qualify as Chronically Homeless, Homeless, or At-Risk of Chronic Homelessness. If appropriate, a single funder may provide a verification for multiple populations (i.e. a County Department of Health Services could provide a verification for a Project serving individuals who are Chronically Homeless, Homeless, or At-Risk of Chronic Homelessness). Please be sure to indicate on the verification form the subpopulations to which each verification applies.

Part IV. Tenant Safety And Engagement

Section 1: Tenant Engagement

Applicant should describe strategies to engage residents in services, services planning/operations, and in building community and facility operations. **NOTE: The tenant engagement plan is distinct from the marketing and outreach efforts for attracting applicants to the Project.**

1. Will the services engagement outreach strategy include:

Outreach to applicants and residents?	Yes	Door-knocking?	Yes	Leafleting?	Yes
Assessment prior to leasing?	Yes	Peer contacts?	Yes	Outreach to organizations that work directly with target population?	Yes

Other strategies? Please describe:

Tenants will have access to supportive services at community locations and on site. Services will be offered in a manner consistent with tenant choice and customized to individual needs. Tenants services are built around the philosophy that the Tenants themselves can make the decision on what supports and resources they will need to achieve goals and live independently. Nevada County Behavioral Health and Turning Point Community Programs (contracted FSP provider) are committed to the principles of the "self-help" and "consumer-driven" models of outreach and engagement. Staff, clinicians and case managers are trained in Assertive Community Treatment (ACT) and Critical Time Intervention (CTI) which values the tenants own capacity to achieve independence and rehabilitate and recover from long term homelessness. With added support from Peer Support

2. Describe the strategies to engage residents in social interaction, building operations, and community involvement within the Project.

The Ranch House site will include a community room that will have games, television and other amenities for tenant use. The Community room will be next to a small laundry room. Tenants will be able to interact in these shared areas. Additionally, the resident services manager and supportive services staff will provide transportation to quarterly outings or onsite recreational activities like picnics, BBQs or game days.

3. Describe the strategies to engage residents in planning and delivery of resident's services.

Each tenant will work with supportive services staff of their choice to develop a housing stability plan tailored to the tenants needs and desires. Residents can request to be in attendance at any meeting wherein their stability plan or services needs will be discussed.

4. Describe how the physical building space supports social interaction and the provision of services.

The building will be a two-story complex with three units on the ground floor and three on the second floor. All units will be walk ups where the door to the unit is outside as opposed to in hallway. A shared community room will be on the ground floor along with laundry facilities. The building itself is located on a large open parcel with plenty of space for a garden or just spaces to be outside. Each unit will be similar in layout with a small bedroom and bathroom area that is separate from the kitchen/living room area. The interior of the units will be outfitted with all appliances including refrigerator, microwave, and range. The materials used for the interiors will be selected with high durability in mind. All units will have a window for natural light.

5. If planning on conducting tenant satisfaction surveys, describe types of questions asked, how they are reviewed, outcomes measured, and how often survey will be conducted.

Not developed yet.

6. Describe the strategies to engage residents in services, services planning/operations, and in building community and facility operations.

AMIH property managers maintain an open-door policy for tenants. Tenants will be provided with office hours where the resident manager will be on site and available to tenants to give suggestions or request changes to policies.

Section 2: Safety and Security

1. Summarize the written policies and procedures on privacy and confidentiality of residents.

Nevada County case managers and all contracted supportive services staff are required to take a yearly HIPAA training. Case conferencing meetings in which tenants' service provisions are discussed require Release of Information forms for all disclosures related to Protected Health Information. In cases where releases are not able to be attained, some cases merit the deidentification of tenants so that high level coordination can occur without violating the tenants' rights.

2. Summarize the written policies and procedures on sign in/out procedures, fire/safety drills, and posted local contacts in case of emergency.

There are no sign in or out procedures. Local contacts for emergency services and property management staff will be posted in the community room at locations of high visibility. At move in and every sixth months thereafter, the resident manager will review with each tenant fire safety and evacuation procedures.

3. Describe the building design safety features for ensuring resident and staff safety (include lighting, entrance/exits, locked doors, common area locations).

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Each tenant will be issued keys to their units at move in. A discrete on site security camera will be utilized in a manner consistent with promoting tenant safety. Emergency evacuation routes will be posted in units and in the common room. The common room will have an automatic lock as tenants exit. The common area will be located on the bottom floor.

4. Summarize the written policies and procedures on ensuring staff safety.

Written staff safety policies and procedures are in development at this time.

5. Summarize the written policies for addressing violations of resident/staff safety by residents or staff.

Written policies for addressing violations of staff safety policies and procedures are in development at this time.

6. The service plan and property management plan submitted with the application must impose no restrictions on guests that are not otherwise required by other project funding sources or would not be common in other unsubsidized rental housing in the community. Describe the guest/visitor policy for residents.

At lease up, tenants agree to be responsible for the action and behavior of all guests. If tenants have guests who are staying with the tenants they are required to get approval from the resident manager if the stay is to exceed one week. Tenants are required to inform the resident manager if any person staying in the unit is under the age of 18 or is a minor dependent of the guest.

7. Summarize the written policies for coordination with property management for resolution of tenant issues and implementation of policies and practices to prevent evictions and to facilitate the implementation of reasonable accommodation policies.

Nevada County and AMIH embrace the Housing First model for serving PSH participant households. This means that people with barriers to housing may require multiple attempts in housing before becoming stable. Just because one unit does not work out does not mean no unit will. It also means that if someone is not violating the terms of their lease, they should not be evicted, even if they are not participating actively in supportive services. In this way, eviction is a last resort. It is understood that the residents of PSH programs are likely to experience some challenges but evicting them from the program is a step that AMIH takes only after we determine that all other options have been exhausted. Along these lines, eviction from Housing First programs are reserved for "last resort" situations. Some examples of circumstances that can lead to eviction include: violence or threats toward staff or other participants; abandonment of unit and total disconnection from service staff; multiple, serious and irresolvable lease violations, like nonpayment of rent, disturbances in the apartment, violation of guest policies, or other circumstances that lead to landlord issuing violation notices, and for which attempts toward resolution have not been successful.

Property management staff and supportive services staff will use these written questions to work through issues and to plan a course of action prior to beginning the eviction process:

Is the situation a violation of the lease agreement? Participant households may display challenging behaviors, but those behaviors should typically only trigger an exit if they are a violation of the lease agreement. The most common example here is refusal to participate in services. If someone does not respond to their case manager but is otherwise in compliance with the terms of their lease, they should not be evicted. If someone is generally difficult and hard to deal with but pays rent and keeps to him/herself at home, they should not be evicted. However, if someone's refusal to engage with staff leads to the violation of a program rule, such as not allowing for a re-inspection of the unit or refusing to receive income, an eviction may be necessary for AMIH to remain compliant with program rules.

A determination will be made if the situation is resolvable. Many situations – even those involving lease violations – can be resolved, and do not need to result in an eviction. For instance, if someone's behaviors are sufficiently disruptive as to trigger a lease violation, program staff may be able to work with him/her to mitigate the behaviors, such that the person can remain housed. Alternatively, the behaviors may be less disruptive in another unit, so it may be possible to move the person without terminating them. If a resolution is legal, feasible, and acceptable to both the participant and the AMIH, then resolving the issue will be the goal before proceeding with eviction.

Have prior attempts been made to resolve the situation, without success? While some situations can be resolved after one or two attempts, it is not expected that program staff continue to try to resolve a problem that never gets fixed. For example, it might be reasonable to re-locate someone to another unit if they have continual problems with their neighbors that cannot be resolved. However, if that person continues to have problems with neighbors after multiple relocations, it may be more appropriate to find a different type of housing or program.

Does this person have any other options? Even when the decision is made to terminate someone, it may be possible to make other arrangements that are better than evicting someone into homelessness. Does this person have any friends or family that may be able to house them for a while? Is this person needing a higher level of care?

If a resident must be terminated, s/he must receive written notice containing a clear statement of the reasons for eviction, as well as the opportunity to discuss the eviction with someone other than the staff member who made the initial eviction determination.

8. Summarize the written policies for coordination with property management for integration of the Target Population with the general public.

N/A. Units are 100% NPLH target population

Part V. Staffing

Section 1: Staffing Chart

List all staff positions that will provide services to the tenants of the NPLH Assisted Units. Include County, other LSP, or Development Sponsor staff positions, and any staff positions of partnering organizations who have committed time to the Project. Include the services coordination staff. For each position, list the position title, minimum requirements, the full-time equivalent (FTE), the organization under which the position resides, and the location (on-site or off-site). Do not include staff which serve non-NPLH Units. If a staff position serves both tenants in NPLH and non-NPLH units, include only that portion (i.e., % FTE) of the staff position dedicated to NPLH Assisted Units. Attach a copy of each position's duty statement, if these documents are available.

NOTE: All staff positions listed here must be reflected in the Supportive Services Budget Table. Be sure to indicate which staff position will be responsible for Homeless Management Information System data entry. If the cost of supportive service position is included as part of the Project's operating budget and the position will serve NPLH units, that position must be included in this chart.

Title	Minimum requirements	Total FTE:	1.1	Employing Organization	Location
List each staff position	List min. required staff preparation include (education & experience) NOTE: Doesn't take place of the job description or duty statement.	Indicate FTE staff positions for NPLH units (half-time is 0.5 FTE)		This could be the County, another LSP, Sponsor or a Project Partner	Select "On-Site" or "Off-Site"

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Case Managers	Behavioral Health Worker 1: completion of twelfth grade and experience working in a social work, behavioral health or substance abuse program dealing with individuals' emotional and mental problems. Completion of college course work from an accredited college or university in psychology, social work, counseling or related field is preferred. Behavioral Health Worker 2: Completion of 60 units of college course work from an accredited college or university in psychology, social work, counseling, substance abuse, or related field and one year of experience providing substance abuse or counseling services to individuals with emotional and mental and/or substance abuse problems	0.5	Lead Service Provider	On-Site
Peer Support	Lived experience with mental illness. Previous experience with case management services or understanding of case management principles. Willingness to work with individuals experiencing mental health issues and homelessness	0.2	Lead Service Provider	On-Site
HMIS Admin.	2 years of experience in database management, running reports, and tracking outcomes. Proficient in Excel or Access	0.15	Project Partner	Off-Site
Resident Services Coordinator	Bachelor's degree in social work or social services related field required, Master's preferred. 2 years demonstrated experience in a supervisory capacity. 2 years demonstrated experience working with persons experiencing chronic homelessness and mental illness	0.25	Project Partner	On-Site

File Name:	Duty Stmt1, Duty Stmt2, Duty Stmt3, Duty Stmt4	Staff Duty Statements (all providers, if available)	Hard Copy and on USB?	Yes
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Section 2: Staffing Ratios

1. Indicate the overall services staffing level for the Project by complete ing the calculation below.		
a.	Total NPLH Assisted Units	6
b.	Total FTE Service Staff from he Staffing Chart for the NPLH Assisted Units	1
c.	Number of NPLH units per FTE Staff Person (a÷b)	6

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2. Complete case manager staffing ratio chart. Include all case mgmt. staff in staffing & budget forms, requires FTE case mgr. to resident ratios be appropriate to specific NPLH populations, as determined by the County or other LSP.

Population Type	Chronic Homeless	Homeless	At-Risk of Chronic Homeless
Case Mgr. Ratio	1:6	1:6	1:6

Part VI. Supportive Services Budget

Section 1: Supportive Services Budget Table.

NOTE: If the cost of supportive services is included as part of the Project's Operating Budget (as documented in the UA) and the funds will serve NPLH units, this position/expense item and the dollars associated with it (or that portion connected to the NPLH units) must be included in this Supportive Services Budget Table.

Income Source/Program Name	Amount	Type	Status	% of Total Budget
Mental Health Services Act (Prop 63)	\$61,169.00	In-kind	Committed	56.66%
Medical Reimbursement	\$36,791.99	Cash	Committed	34.08%
Housing and Disability Advocacy	\$10,000.00	In-kind	Committed	9.26%
				0.00%
Total Revenue:	\$107,960.99			100.00%

Expense Item	Amount	Type	Status	% of Total
Staff Salaries: List by title of position. (This list must match the Staffing Chart above.)				
<i>Case managers</i>	\$20,325.00	In-kind	Committed	22.58%
<i>Peer Support</i>	\$5,134.00	In-kind	Committed	5.70%
<i>HMIS Administrator</i>	\$5,616.00	In-kind	Committed	6.24%
<i>Resident Services Coordinator</i>	\$13,000.00	In-kind	Committed	14.44%
<i>Fringe Benefits</i>	\$18,491.00	In-kind	Committed	20.55%
Total Staff Expenses	\$62,566.00			69.52%
<i>Tenant Transportation</i>	\$6,480.00	Cash	Intend to Fund or Provide	7.20%
<i>Equipment</i>	\$672.00	Cash	Intend to Fund or Provide	0.75%
<i>Supplies</i>	\$2,400.00	Cash	Intend to Fund or Provide	2.67%
<i>Travel</i>	\$2,182.00	In-kind	Intend to Fund or Provide	2.42%
<i>Office Rent/Occupancy Costs (don't include rent/leasing costs for SH units)</i>	\$0.00			0.00%
<i>Training</i>	\$2,000.00	In-kind	Intend to Fund or Provide	2.22%
<i>Consultants: List by Function</i>	\$0.00			0.00%
<i>FREED - Benefits advocacy, friendly visitor, unit modifications indirect</i>	\$10,000.00	In-kind	Committed	11.11%
<i>Other Expenses (type in expense description)</i>	\$3,700.00	In-kind	Intend to Fund or Provide	4.11%
<i>Other Expenses (type in expense description)</i>				0.00%
<i>Other Expenses (type in expense description)</i>				0.00%
Total Expenses	\$90,000.00			100.00%

Supportive Services Cost Per Unit: Permanent supportive housing best practice suggests a range between \$5,000 - \$10,000 annually in services per household, depending upon the intensity of the needs of the target population. Complete the following calculation about supportive services cost per unit for the Project. If the supportive services cost per unit, as calculated below, differ from industry practice, provide a narrative explanation. The Project must meet/address the industry standard.

Supportive Services Expense Per Unit Calculation Table

a. Total NPLH Assisted Units	6
b. Total Supportive Services Expenses	90000
c. Total Supportive Services Expenses per Unit: (b ÷ a)	15000

Section 2: Budget Narrative and Funding Commitments

1. Describe how budgeted amounts are adequate to provide services described in Supportive Services Plan and in Services Staffing Table:

Nevada County has based the above budget amounts on an analysis of its current PSH program. A similar shared living house (6 bedroom Winter Haven Project based PSH) was used as a comparable program to base cost projections and staffing levels for the Ranch House. Nevada County's rural environment does increase costs associated with travel.

2. Document committed funds with letter from committing agency that includes the items below. Documented services/funding must appear in Supportive Services Budget Table.

a) Project name; b) Description of services to be funded or provided; c) Dollar value of funds or in-kind services. If cash is provided, state funding source; d) Funding term or service provision; e) A description and history of agency/organization providing funding or services.

File Name:	SS Fund Ltr1, SS Fund Ltr2, SS Fund Ltr3, etc...	Attach letter(s). Include: Project name; description of services; dollar value of funds or in-kind services; if cash is provided, state funding source; funding term; description & history of agency/org. providing funding or services.	Attached and on USB?	Yes
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3. For funding that is not yet committed, specifically describe the experience filling major services funding gaps in similar housing.

N/A

4. Describe in specific terms the plan to fill any service gaps that occur during Project life due to expiration of grants, partner withdrawals, cancellation of a commitment or any other reason. Describe experience filling service gaps caused by loss of major funding sources.

The County Board of Supervisors has designated homelessness as an "A Priority" and has committed general fund in the amount of \$250,000 a year through FY 21-22. Some of these funds are not yet committed and can be drawn on in the event that committed sources are interrupted or overutilized. HHSA staff have also set aside intergovernmental transfer and realignment funds to support homeless programs and initiatives over the next five years. In 2019/20, the County will utilize allocated Homeless Housing, Assistance and Prevention Program funds to further support for the homeless housing initiative, the master leasing program and to support the development of additional affordable housing in the community. The County and its Regional Housing Authority partner are looking to leverage housing choice vouchers in PSH units to provide an alternative rental support for tenants. This includes working together to apply for recently announced HUD funding for expanded housing vouchers for chronically homeless individuals under 55 with disabilities. While Nevada County has, to date, not lost any major funding sources, in 2018 the local shelter, a vital partner in the plan to address homelessness, lost \$200,000 in Emergency Shelter Grant funding. Not only did the County commit funds to the shelter's general operation to backfill the loss, the County added funds to expand capacity. The County has built a strong CoC that is in full support of PSH housing programs. Nevada County is very effective at providing services that are Medi-Cal billable. In the last year, the County has implemented the ODS waiver to provide ongoing funding for Substance Use Treatment. Lastly, the County has a strong relationship with the local hospital which has provided a commitment to explore potential grants available to the hospital to support homeless programs and work with the County to explore managed care organization funding for homeless services.

Supportive Services Plan (SSP) §203

Rev. 9/25/19

Section 3: Service Funding History Table: The purpose of this section is to document the funding history of the LSP. The LSP shall document a history of securing supportive service funding sufficient for the Department to make a determination that the provider will be able to access funds from the programs that fund the services identified in the Supportive Services Chart. List only funding obtained in the last five years. Complete the table containing the information required below:

Funding History for: (LSP)	Nevada County Behavioral Health				
Source of Funds/Funding Program	Purpose of Award (Use of Funds)	Amount	Award Date & Funding Term	Population(s) Served	
MHSA Innovation	Homeless Outreach, Services and Medical	2 Million	2018, 5 years	Homeless	
MHSA PEI and CSS	Case Management and Peer Support Services		ongoing	Homeless and Housed residents with MI	
SAMHSA - Grants to benefit homeless individuals	Homeless Outreach and Substance Use	2 million	2018, 5 years	Homeless	
Medical ODS Waiver funds	Residential Substance Use Treatment		ongoing	County Residents with SUD issues	
Proposition 47	Jail diversion housing for Chronic homeless with high recidivism	2.4 million	2019, 5 years	Chronically Homeless High Recidivism	

Part VII. Collaboration and Reporting

Section 1: Collaboration

Industry practice indicates that services are often best delivered by entities with specialized expertise. Consequently, effective projects are based on collaboration among organizations with different types of service expertise, or by specialized divisions within an organization. Counties should document collaboration between two or more service providers. Applications will be deemed to meet the collaboration criteria if the application documents a commitment from a service organization other than the Applicants or affiliates of the Applicants to provide a portion of the services to project residents. Cooperation among specialized intra-organizational service programs, groups, or departments may also qualify as collaboration.

Based on the contracts attached between the Applicant and non-affiliated service providers, explain the collaboration between the Applicant and the service providers. Include a short narrative describing the collaborative relationship with the outside service provider or an intra-organizational service program, group, or department that is listed in the Supportive Service Chart. Describe the specific services with which the collaborative entity will be involved.

The "heart" of collaboration is at the weekly case conferencing meetings. The County has assisted all service providers in accessing HMIS and Coordinated Entry. These meetings are multi-disciplinary and focused on outreach/engagement, access to services, and collaboration of service needs in line with fluctuating needs of individual clients. These meetings include: FREED disability advocates and case managers, Behavioral Health and Turning point case managers, Veterans groups like the Volunteers of America, the Veterans Administration and the local Veterans Services Officer, Community Beyond Violence - domestic violence provider, and substance use treatment access workers Hospitality House Shelter staff, and AMIH property management staff. Each meeting is 90 minutes and is facilitated with action steps that maintain accountability.

Section 2: Reporting Requirements Certification

Applicant certifies that not later than 90 days after the end of each Project's fiscal year, the Applicant shall submit an independent audit for the Project prepared by a certified public accountant and in accordance with the requirements noted in the Project's regulatory agreement and the Department's current audit requirements, which are posted to the Department's website and which may be amended from time to time. §214(c) On an annual basis, the County shall submit the data listed in §214(e) for each of its NPLH Assisted Units. The County shall work with each Project's property manager and Lead Service Provider to gather the data. The data may be, but is not required to be, gathered from the local Homeless Management Information System (HMIS). §214(d) The data shall be submitted in electronic format on a form provided by the Department. The County, the property manager and the Lead Service Provider shall work together to resolve any data quality concerns to the best of their ability prior to submission of the data to the Department.

Yes

Dated:	1/6/2020
Statement Completed by (please print):	Phebe Bell
Signature:	
Title:	Director
Agency or Department:	Nevada County Behavioral Health
Agency or Department Address:	500 Crown Point Circle
Agency or Department Phone:	(530) 470-2784