

## Exhibit C

# Holland & Knight

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August 29, 2022

*Via E-mail*

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Re: Libre Commons Project - 63 W. Shaw Avenue

Dear Ms. Gonzales and Ms. Clark:

We represent the applicants for the Libre Commons project (the “Project”) located at 63 W. Shaw Avenue in the city of Fresno, California (the “City”). Our West Coast Land Use & Environmental Practice Group focuses particularly on enforcing California’s recently reformed and enhanced housing production laws.

As you know, the Project is a 123-unit new construction multifamily rental building comprised of 42 supportive housing units and 80 units of housing affordable to lower-income households. The Project was and is entitled to by-right, non-discretionary review for two independent reasons: both as a matter of state law pursuant to AB 2162 of 2017 (“AB 2162”), Gov. Code § 65650 *et seq.*, as well as independently pursuant to the City’s own Fresno Zoning Code (“FZC”). We appreciate City staff’s hard work in processing the Project application and approving the Project on June 24, 2022.

We have been informed that the Fig Garden Homeowners Association (“FGHA”), whose residents live outside of the City, have decided to challenge the project approvals by attempting to “appeal” this by-right, ministerial approval, and we further understand the City has noticed the matter for a hearing before the City’s discretionary policy-making bodies on September 7, 2022. As set forth further below, such actions are unlawful. ***We strongly urge the City not to allow a discretionary “appeal” of an approval that was required to issue on a by-right, ministerial basis. To do so would risk violation of important state housing laws.***

The State Legislature and California courts have increasingly noted that excessive discretionary review processes for housing – especially supportive affordable housing – is a key cause of the state’s housing and homelessness crisis. *See e.g., Tiburon Open Space Committee v. County of Marin* (2022) 78 Cal.App.5th 700, 782; Gov. Code § 65589.5(a)(1)(B), (a)(1)(D), (a)(2)(K). It is for these reasons that the Legislature has enacted laws like AB 2162, which require cities to approve supportive housing on a by-right basis, and it is for reasons such as this that the City already provides for ministerial approval of zone-conforming projects such as the Project under its own code.

Given the statewide housing and homelessness crisis, there has never been a more critical time to approve much needed supportive and affordable housing, including the City of Fresno.<sup>1</sup> We understand that City officials often face pressure from those who urge the City to stand in the way of providing housing opportunities for lower-income households. But in this case, the law simply prohibits the City from doing so. We strongly urge the City not to take any further action to advance this unlawful “appeal” of a ministerial approval and instead ensure that the Project, and the much-needed new homes it would create, moves forward swiftly.

**I. There is No Right to Appeal the Project Pursuant to State Law or the FZC Because the Project Approval is Subject to By-Right Ministerial Approval.**

The Project is subject to by-right ministerial approval for two independent reasons: (1) because it is a qualifying supportive housing development pursuant to AB 2162, and (2) because it is entitled to ministerial review pursuant to the City’s own code. Where, as here, approval is “ministerial,” “the agency has no discretionary authority to deny or shape the project.” *Protecting Our Water & Env’t Res. v. Cnty. of Stanislaus* (2020) 10 Cal.5th 479, 493-94 (citation omitted). It is completely inconsistent with a “ministerial” process to allow a discretionary appeal, and so the City should not allow one to occur.

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<sup>1</sup> *See e.g.,* Taub, D., *How to End Fresno Housing Crisis? Build, Build, Says City Leaders*, GV Wire, (May 18, 2022). Available at: <https://gvwire.com/2022/05/18/how-to-end-fresno-housing-crisis-build-build-build-say-city-leaders/>; Anguiano, D., *How the homelessness crisis hit one of California’s most affordable cities*, The Guardian, (April 17, 2022). Available at: <https://www.theguardian.com/us-news/2022/apr/17/homelessness-california-fresno>.

A. There is No Available Appeal Because the Project is Entitled to By-Right Approval Pursuant to AB 2162.

AB 2162 requires localities to provide a “by-right” approval process for qualifying supportive housing projects, and imposes a mandatory, non-discretionary duty on local governments that they “shall” approve such projects. Gov. Code §§ 65650(d), 65651(a), 65653(a). As set forth below, Project meets all such criteria, which are listed in Gov. Code § 65651(a). Accordingly, since the City has no discretion other than to approve the Project on a “by-right” basis, it would not be lawful to allow a discretionary appeal of that approval.

- The Project site’s zoning permits multi-family and mixed-uses. Gov. Code § 65651(a). The Project site is located in the Commercial Mixed-Use (“CMX”) zoning district which permits multi-family and mixed-use projects. FZC, Table 15-1102. The Project satisfies this requirement.
- The Project is subject to a 55-year affordability requirement. Gov. Code § 65651(a)(1). 100 percent of the Project’s units, exclusive of the manager’s unit, will be made affordable to lower-income households. UP Holdings is currently finalizing the covenant agreement that will be recorded against the property to ensure the Project will provide needed affordable and supportive housing until 2077. The Project meets the 55-year affordability requirement.
- 100 percent of the units are dedicated to affordable housing and will receive public funding. Gov. Code §65651(a)(2). 100 percent of the units, exclusive of the on-site manager’s unit, will be dedicated to affordable housing. Additionally, the Project was awarded funding pursuant to the California Department of Housing and Community Development’s (“HCD”) Infill Infrastructure Grant Program of 2019 and No Place Like Home Program. The Project satisfies these requirements.
- At least 25 percent of the units are dedicated to supportive housing for a target population. Gov. Code §65651(a)(3). 42 of the Project’s 123 units, or 34 percent, will be supportive housing dedicated to serving the homeless population, which exceeds the minimum requirement.
- The City has been provided with information regarding supportive service operations, including the entity provided social services, funding source(s), and staffing levels. Gov. Code § 65651(a)(4). The Applicant is partnering with the County Department of Behavioral Health (“Department”) and other service providers that contract directly with the Department to provide onsite and offsite supportive services. Additional information regarding proposed funding sources and staffing levels are contained in a Supportive Services Verification and Plan.<sup>2</sup> This Project meets these requirements.

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<sup>2</sup> See No Place Like Home, Round 4: Supportive Services Verification and Plan, attached herein as “Exhibit A.”

- At least 3 percent of the total nonresidential floor area is dedicated to onsite supportive services limited to tenant uses (e.g., community rooms, case management offices, computer rooms, and community kitchens). Gov. Code §65651(a)(5). The Project contains a total of 21,193 sf of nonresidential floor area. 4,705 sf, or 22.2 percent, of the nonresidential floor area is dedicated to onsite supportive services limited to tenant uses. The Project satisfies this requirement.
- Any replacement unit requirements are satisfied. Gov. Code §65651(a)(6). There are not currently any residential uses on the Project site, or in the five years preceding the Project application, and therefore no “replacement” units are required. In any event, the Project’s more than 120 below market rate units for lower income households would more than satisfy any applicable replacement housing requirements regardless. The Project satisfies this requirement.
- All residential units contain at least one bathroom and kitchen or cooking facilities inclusive of a stovetop, sink, and a refrigerator. Gov. Code §65651(a)(7). All of the Project’s units, inclusive of the manager’s unit, contain a bathroom with basic amenities including a shower and toilet and a kitchen outfitted with a refrigerator, sink, and a stovetop and oven, thereby meeting the minimum requirements.

Since the Project meets all of the above criteria, the Project is entitled to “by-right” approval. There is no way, consistent with this by-right process, to allow a discretionary appeal.

B. There is No Ability to Appeal the Approval Because the Project was Subject to a Ministerial Approval under the Fresno Zoning Code.

Even if the Project were not entitled to by-right approval as a matter of state law (which it is), the Project would still be entitled to by-right, ministerial approval as a matter of City code. The Project site is located in the CMX zoning district, which permits multi-family residential uses. FZC, Table 15-1102. The FZC also considers supportive housing as a residential use that is only subject to the same restrictions as other residential uses of the same type in the same zoning district. FZC § 15-2762. As a by-right use, the Project is only subject to the same development standards as other multi-family uses in the CMX zoning district. *Id.* Fresno, laudably, complies with state law in this respect (unlike other jurisdictions), because Housing Element Law requires that “[t]ransitional housing and supportive housing shall be considered a residential use of property and shall be subject only to those restrictions that apply to other residential dwellings of the same type in the same zone.” Gov. Code, § 65583(c)(3).

FGHA suggests the Project requires a “special permit” requiring a higher level of review and public input. Letter of Appeal (“Letter of Appeal”) (July 8, 2022), p. 2. But FGHA fails to cite to any FZC provision which describes a “special permit” or its procedures. Although the City’s Decision Letter uses the term “special permit,” this appears to be a general reference to the Project approval rather than a reference to a specific entitlement under the FZC. It is possible,

however, that FGHA may have been confused by some City materials which refer to the Project as requiring a “Development Permit,” rather than, as is actually the case, needing only a “Zone Clearance.” *See e.g.*, Decision Letter, p.1.

A Zone Clearance is a ministerial approval which is the only required entitlement for a by-right use such as the Project. FZC § 15-5102(A). A Development Permit is only needed when a project is “ineligible for a Zone Clearance” and requires deviations from applicable development standards through the grant of a Variance or Minor Deviation. FZC §§ 15-5202(A) & (B); *see also* FZC § 15-6802. The Project did not request a Variance or Minor Deviation pursuant to the City’s code triggering any need for a Development Permit. To the extent the Project required any modifications from FZC, the City was required to grant those through the State Density Bonus Law, (Gov. Code § 65915 *et seq.*) (“SDBL”). The SDBL is explicit that invoking SDBL density bonuses or incentives do not trigger any requirement for discretionary approval if one would not otherwise be required. Gov. Code § 65915(f)(5), (j)(1).<sup>3</sup> Consistent with state law, the FZC does not require a discretionary approval for the grant of a density bonus and considers the grant of incentives and concessions to be a ministerial approval. FZC § 15-2202 (B); *see also* FZC § 15-2204 (“Pursuant to Government Code Section 65915, the City **shall** grant a density bonus...”)(emphasis added), 15-2205(A) (“Pursuant to Government Code Section 65915, an applicant is **entitled** to receive incentives and/or concessions...”)(emphasis added).<sup>4</sup>

At the crux of the FGHA’s argument is their dissatisfaction to participate in the Project approvals. *See generally*, Letter of Appeal. But a Zone Clearance does not require specific public noticing or a public hearing. FZC §§ 15-5103, 15-5105. Uses like the Project, which are permitted by-right and conform to applicable development and use standards, are processed through a Zone Clearance. FZC § 15-5101. Additionally, there is no right to appeal a Zone Clearance, as distinct from a Development Permit. *See* FZC § 15-5208.

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<sup>3</sup> We note that the Decision Letter appears to suggest that the Project was provided certain incentives regarding density and height pursuant to the City’s TOD Height and Density Bonus Program. This entitlement is subject to a Development Permit if a project is located in a Mixed-Use zoning district; the project site is within 500 feet of an existing or planned Bus Rapid Transition station or within one-half mile of the Manchester Transit Center; and the project will provide a public benefit such as a public plaza, public or at least 90 percent coverage on a street featuring a Bus Rapid Transit route or other enhanced transit route. FZC § 51-2102. The City’s TOD Height and Density Bonus Program also requires certain findings to be made. The reference to the TOD Height and Density Bonus Program may have been in error because there was no need to rely on this program or incentives due to SDBL’s generous incentives for 100 percent affordable projects. Lastly, we note that the Decision Letter erroneously cites to FZC § 15-2102 as the authority that grants additional density and height, but that provision actually provides the qualifying criteria for the program. Because the Project is able to take advantage of additional density, height and relief from other development standards pursuant to SDBL as a ministerial approval, it is likely that a reference to the City’s TOD Height and Density Bonus program was in error.

<sup>4</sup> Further supporting our assumption that the Decision Letter erred in referring to the application as requiring a “Development Permit” is that the Decision Letter does not contain findings for a Development Permit as required by FZC § 15-5206. Findings are not required for a Zone Clearance. *See* FZC, Art. 51.

Since the Project is subject to ministerial by-right approval pursuant to the City's code, it cannot lawfully be made subject to a discretionary appeal.

## **II. As a Ministerial Approval, the Project does Not Trigger CEQA, and Therefore There is No Appeal Available Pursuant to CEQA.**

The issues FGHA raised in its letter related pursuant to the California Environmental Quality Act (Pub. Res. Code § 21000 *et seq.*) ("CEQA") fail because they are based on the erroneous presumption that the Project was subject to a discretionary approval triggering CEQA. State law is explicit that CEQA is not triggered by a "by-right" or "ministerial" approval. Gov. Code §§ 65583.2(i), 65650(d); Pub. Res. Code § 21080(b)(1). As we explain in detail below, even if the Project *were* subject to a discretionary approval, the issues raised by the FGHA would still fail to demonstrate any noncompliance with CEQA.

### **A. The Project Would Be Entitled to Invoke the Class 32 Exemption from CEQA.**

The FGHA argues the preparation of an environmental impact report ("EIR") is required due to the Project's density, arguing "[i]t is highly questionable if the EIR from the rezone of this property in the rezone process was sufficient and specific enough to increase the project's density by 80%." Letter of Appeal, p. 2. Even in the event that CEQA did apply to the Project, the Project would not need to rely solely on a previous EIR analysis but instead would be entitled to invoke the categorical exemption for infill development. A Class 32 Categorical Exemption is appropriate if: (a) the project is consistent with the applicable general plan designation and all applicable general plan policies as well as with applicable zoning designation and regulations; (b) the proposed development occurs within city limits on a project site of no more than five acres substantially surrounded by urban uses; (c) the project site has no value, as habitat for endangered, rare or threatened species; (d) approval of the project would not result in any significant effects relating to traffic, noise, air quality, or water quality; and (e) the site can be adequately served by all required utilities and public services. Cal. Code Regs., Tit. 14, § 15332.

The City already determined the Project qualifies for this exemption,<sup>5</sup> and FGHA raises no issue with this determination. This exemption would therefore apply even if the Project were not entitled to by-right, ministerial approval.

### **B. Concerns Related CEQA compliance and traffic congestion.**

The FGHA raises a number of concerns related to traffic congestion specifically, the FGHA raises concerns regarding "Shaw Avenue's [existing] Grade F traffic." Letter of Appeal, p. 2. FGHA also asserts that the City "denied" the County of Fresno's ("County") request to conduct a traffic study. *Id.*

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<sup>5</sup> It is likely a Class 32 Exemption was issued due to the accidental mischaracterization of the project as a Development Permit.

It would be inappropriate for the County or the City to require a traffic study to determine traffic impacts because: (1) the Project is not subject to CEQA, and (2) traffic congestion is no longer a means for measuring transportation impacts under CEQA. As of July 1, 2020 transportation impacts are determined based on vehicle miles traveled (“VMT”), which analyzes how much auto travel a project generates rather than how much traffic congestion a project generates. Cal. Code Regs., Tit. 14, § 15064.3(c). FGHA’s recitation of Shaw Avenue’s existing traffic conditions are not otherwise appealable. Further, FGHA fails to show when the County made a request for a traffic study to be conducted, or provide any statutory authority that grants the County the ability to request this study to be conducted.<sup>6</sup> There is no right to appeal the Project due to perceived traffic congestion resulting from the Project.

### **III. Additional Issues Raised by the FGHA Are Not Subject to Appeal**

Although the foregoing alone is dispositive, we respond briefly to other issues raised in the FGHA letter.

#### **A. Concerns Related to Improvements on Shaw Avenue.**

The FGHA asserts that the increased density will result in required street improvements on Shaw Avenue. The FGHA asserts that if density increases, “Shaw Avenue street improvements are required. By any reasonable development standard.” Letter of Appeal, p. 2. FGHA fails to specifically point to any development standard that will trigger the Applicant to perform certain improvements along Shaw Avenue due to Project’s density or how the Project fails to comply with those standards. Therefore, there is no right to appeal the Project due to the FGHA’s unsubstantiated claims that improvements are required on Shaw Avenue.

#### **B. Concerns Related to Fire Access.**

The FGHA claims it is unable to determine whether the Project will provide adequate fire access to the upper levels. The FGHA fails to cite to a specific ordinance, regulation, or standard the Project does not comply with. We further note, the Project was reviewed by the Fire Department for water access, fire hydrants and fire apparatus access to the buildings on the Project site.<sup>7</sup> Decision Letter, p. 14. There is no right to appeal the Project based on unsubstantiated concerns related to fire access.

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<sup>6</sup> We note that while the County made a request to route any Traffic Impact Analysis or Traffic Impact Study to the County, a request to route documents does not equate to a request to conduct such a study. City of Fresno, Development Review Committee Comment (“Committee Comments”), p.5.

<sup>7</sup> We further note that the Fire Department will conduct additional review for compliance with interior fire and life safety requirements at the building permit stage. Decision Letter, p. 14. Because Appellant only raises the issue of adequate access from the exterior of the building, this future review is not relevant to the Appellant’s objections to the Project.



### C. Disclosure of Requested Documents.

The FGHA claims that certain information has not been provided by the City which is required to determine the “applicable, needed, and appropriate development standards” but that it also is “peripherally aware of the project’s development standards.” Letter of Appeal, pp. 1-2. While these two statements appear to contradict each other, it is difficult to understand how this information has been concealed from the FGHA, when zoning information is readily available to the public and accessible on the City’s website.<sup>8</sup> Additionally, the applicable development standards, including those for the CMX zoning district, are provided in the FZC, which is also accessible online.<sup>9</sup>

FGHA also states it has only received “the written portion” of the application and has not received “drawings and support documents.” The Appeal seeks a number of documents including but not limited to Exhibits A, F-1 through F-2. and L-1 through L-2 dated May 23, 2022, and Exhibit O dated April 6, 2022, and Exhibit E dated September 30, 2021 and Traffic Planning’s redlined site plan CP1 dated October 21, 2021. Letter of Appeal, p. 3. The Applicant has provided all materials required by the City in order to process the Project application. The Applicant is otherwise unaware of any prior requests for information made to the City, because these requests were made to the City and not to the Applicant. A request for documents made by the FGHA is not a grounds for appeal.

### IV. Conclusion

FGHA has failed to raise any issue that would allow an appeal of this by-right, ministerial approval. Although we hope there is no need to do so, we do feel compelled to point out that the SDBL provides for a remedy for a housing applicant against any city for failing to approve SDBL requests to which an Applicant is entitled. Gov. Code § 65915(e)(1), (f)(3). We further note that if the City *were* lawfully allowed to subject the Project to discretionary review (which it is not), the City would then be subjecting itself to the requirements of the Housing Accountability Act, Gov. Code § 65589.5, which provide a set of strong remedies against cities for disapproving any housing development project – and especially an affordable supportive housing project – for any of the subjective reasons that FGHA has invoked in its purported appeal. *See California Renters Legal Advoc. & Educ. Fund v. City of San Mateo* (2021) 68 Cal. App. 5th 820, 836, 845.

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<sup>8</sup> Available at:  
<https://cityoffresno.maps.arcgis.com/apps/webappviewer/index.html?id=f744a29c7b904319917194fd412ebb8b>,  
(Accessed: August 22, 2022).

<sup>9</sup> Available at:  
[https://library.municode.com/ca/fresno/codes/code\\_of\\_ordinances?nodeId=MUCOFR\\_CH15CIDECONRE\\_PTIIIAOVDI\\_ART11MIEDIMX](https://library.municode.com/ca/fresno/codes/code_of_ordinances?nodeId=MUCOFR_CH15CIDECONRE_PTIIIAOVDI_ART11MIEDIMX), (Accessed: August 22, 2022).


Rina Gonzales  
August 29, 2022  
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We respectfully urge the City act in accordance with state law and its own City code, reject the purported appeal as unavailable as matter of state and City law, and take no further action to calendar or hear this appeal intended to preclude the Project.

If it would be helpful, we would be happy to set a time to discuss.

Very truly yours,

HOLLAND & KNIGHT LLP

A handwritten signature in black ink, appearing to read 'Daniel R. Golub', with a stylized flourish at the end.

Daniel R. Golub  
Paloma Perez-McEvoy

cc: Robert Holt, Planner III, City of Fresno  
Jessica Berzac, UP Holdings, LLC  
Jared Davis, UP Holdings, LLC  
Matt Brown, YBA Architects  
Betsy McGovern-Garcia, Self-Help Enterprises

Attachments:

No Place Like Home, Round 4: Supportive Services Verification and Plan (“Exhibit A”)

# EXHIBIT A

Supportive Services Plan (SSP) §203		10/15/2021
Instructions: All Projects must complete the Supportive Services Plan below for the NPLH units and attach the requested documents.		
<b>Part I. Tenant Selection Narrative</b>		
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.		
<b>Section 1: Tenant Selection Criteria</b>		
<b>1. Target Tenant Population and Eligibility Criteria</b>		
a. Do you use Housing First Practices?		Yes
b. 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. <b>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.</b>		
<p>The target populations for this project are defined as: single adults and families who are Homeless, Chronically Homeless, or At-Risk of Chronic Homelessness with incomes at or below 30% AMI; and single adults and families with a serious mental disorder or serious emotional disturbance or with a child with a serious mental disorder or serious emotional disturbance, with incomes at or below 30% AMI experiencing homelessness, chronic homelessness, or at-risk of chronic homelessness. Needs among this population include co-occurring substance use disorder and are at high risk of significant health complications if they remain disconnected from housing, health services, and the community.</p> <p>For those populations who meet the definition for Supportive Housing, the project will work with the FMCoC to identify persons served who have matched for permanent supportive housing units by the CES. For the population who meet the definition of Special Needs due to a serious mental illness, the County of Fresno Department of Behavioral Health (DBH) will be the referral source. As a long-standing member of the Fresno-Madera Continuum of Care (FMCoC), the Fresno County Department of Behavioral Health (Department) has gained extensive knowledge and understanding of individuals experiencing various types of homelessness in Fresno County as well as neighboring Madera County. Many of these individuals live with a severe mental illness, a severe emotional disturbance and/or co-occurring substance use disorder and are at high risk of significant health complications if they remain disconnected from housing, health services, and the community. Given the high risk of severe health complications of the Chronically Homeless, Homeless and the At-Risk of Homelessness, the Department intends to focus upon providing NPLH permanent supportive housing to these populations.</p> <p>Also included in the target population of Chronically Homeless, Homeless and At-Risk of Chronic Homelessness are adults who are transitioning from institutions. Such institutions include places of custody for justice-involved individuals such as jail, prison, and juvenile detention centers. Institutions also include places of institutional behavioral health care including a state hospital, psychiatric health facility, psychiatric or behavioral health hospital or unit, hospital emergency room, institute for mental disease, mental health rehabilitation center, skilled nursing facility, developmental center, residential treatment program, residential care facility, community crisis center, board and care facility, or foster care setting.</p> <p>Individuals targeted for housing within the No Place Like Home (NPLH) program will be individuals considered to be Chronically Homeless, Homeless, or At Risk of becoming Chronically Homeless, living with complex and long-term social and mental health conditions. Each individual's history of homelessness and lived experience will require an individualized approach to assessment of strengths, needs and goals.</p>		
c. Describe the criteria relating to the applicant's NPLH status, income eligibility, Homelessness status (Chronically Homeless, Homeless, or At-Risk of Chronic Homelessness), and disability.		
<p>Eligible persons will be matched to units after completing screening tools (VI-SPDAT, Recovery Needs Level (RNL) and Needs Assessment and safety plan). Completed VI-SPDAT will be entered into the HMIS and Fresno/Madera Continuum of Care (FMCoC) Coordinated Entry System (CES) to identify a match and rank based on level of need.</p> <p>Individuals eligible for housing will be homeless individuals considered to be Chronically Homeless, Virtually Homeless, or At Risk of becoming Homeless, living with complex and long-term social and mental health conditions. Each person's history of homelessness and lived experience will require an individualized approach to assessment of strengths, needs and goals. As a long-standing member of the Fresno-Madera Continuum of Care (FMCoC), the Fresno County Department of Behavioral Health (Department) has gained extensive knowledge and understanding of individuals experiencing various types of homelessness in Fresno County as well as neighboring Madera County. Many of these individuals live with a severe mental illness or a severe emotional disturbance and/or co-occurring substance use disorder and are at high risk of severe health complications, including death, if they remain disconnected from housing, health services, and the community. Given the high risk of severe health complications of the Chronically Homeless, Homeless and the At-Risk of Chronic Homeless, the Department intends to focus upon providing NPLH permanent supportive housing to these populations.</p>		
d. Describe any additional eligibility criteria other than those indicated above, i.e., information needed to determine if applicant can comply with lease terms. <b>Note:</b> 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.		
N/A		
e. List the tenant disclosures you provide to applicants/tenants. Example: Megan's Law disclosures.		
This property will comply with all applicable California tenant disclosures.		
f. Describe the criteria that will be used to ensure families will remain housed in the event that the qualifying NPLH Tenant should exit the unit. Address any conflicts with federal regulations or policies that could result in the family's removal and detail how this conflict will be mitigated.		
The family can continue to live in the unit, but the rent will be increased to correspond to their new household AMI level, and that unit will no longer be designated as an NPLH Assisted Unit for as long as they continue to reside there without an NPLH-eligible household member. So there would be no further COSR assistance attributable to that unit or NPLH supportive services costs through the project budget attributable to that unit until someone NPLH-eligible resides there again.		
g. Describe the criteria that will be used to ensure that applicants are eligible to occupy the NPLH Assisted Units. How will credit, rental, criminal history, and substance use be used to determine eligibility for NPLH Assisted Units?		
<p>Tenant screening and selection practices that are designed to "screen-in" rather than screen-out applicants with the greatest barriers to housing will be used. Applicants will not be 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." (not withstanding state and local laws relating to criminal history). A history of substance use and current substance use will not be held against anyone applying for NPLH units. In keeping with 25 CCR Section 8307, the Uniform Multifamily Regulations, "... residents shall not be required to maintain sobriety, be tested for substances or participate in services or treatment, residents will only be required to comply with the terms of their lease, including the ability to live peaceably with their neighbors and to pay their rent on time."□</p> <p>As mentioned above, eligibility for NPLH units will be determined by referrals from the FMCoC. Applicants will be selected based on their status on the Coordinated Entry System list and the score that they received on the Vulnerability Index Service Prioritization Decision Assistance Tool (VI-SPDAT).</p>		

h. Describe any known conflicts and/or the mitigation strategy for when Public Housing Authority (PHA) requirements conflict with Housing First practices, as applicable.			
N/A			
i. If your tenants may include minor children and/or adult dependents of NPLH Tenants, describe any additional criteria that will be used to ensure applicants are eligible to occupy the NPLH Assisted Units.			
N/A			
<b>2. Marketing/Outreach:</b> The following addresses use of the Coordinated Entry System for all NPLH referrals or an alternate comparable system for those At Risk of Chronic Homelessness. Note that use of standard waiting lists is prohibited, in that both of these systems must prioritize referrals based on highest acuity needs, rather than first-come first served.			
a. Describe how the local CES will be used to fill NPLH-assisted units based on the use of a standardized assessment tool which prioritizes those with the highest need for PSH and the most barriers to housing retention. Include the CES agency's name, primary staff person's name, and contact information. If the local CES is not yet operational, describe the plan to use it when it is established.			
Fresno-Madera Continuum of Care (FMCOC) operates the local Coordinated Entry System (CES) and will be the referral source for all units. Individuals experiencing homelessness are assessed using the Vulnerability Index- Service Prioritization Decision Assistance Tool (VI-SPDAT) by any one of a large network of providers based in rural and metro areas of Fresno County. The results of the assessment are prioritized in the CES waitlist.			
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			
<b>3. Housing First Characteristics</b>			
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
<b>Part II. Lead Service Provider (LSP) Detail</b>			
<b>Section 1: LSP</b>			
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.			
<b>1. County/LSP Name:</b>	County of Fresno Department of Behavioral Health		
<b>Relationship to Applicant:</b>	Letter of Commitment		
How long has the County/LSP been providing services to homeless:		41	Years
How many Projects have the Applicant and LSP completed together? (Provide list of completed Projects when submitting)		2	
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.			
<b>Agency Name</b>	<b>Populations the Agency will serve</b>		
Exodus Recovery	Adults with serious mental illness and co-occurring disorders		
Describe how services will be coordinated.			
The Department has contracted with Exodus Recovery to provide housing supportive services as part of an interdisciplinary supportive services plan incorporating onsite and offsite services.			
<b>Agency Name</b>	<b>Populations the Agency will serve</b>		
N/A			
Describe how services will be coordinated.			

<b>Agency Name</b>	<b>Populations the Agency will serve</b>
N/A	
Describe how services will be coordinated.	
<b>Section 2: Service Delivery</b>	
1a. Describe how the clinical interventions listed below will be used in your service delivery model. (Note: Do not include basic definitions of these interventions.) Descriptions must also include periodic training plans including who will be trained, the type of training, cost and how often training occurs.	
Describe benefits counseling and advocacy, including assistance in accessing SSI/SSP, enrolling in Medi-Cal	
Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values. As documented in the contract between the Service Provider and Fresno County DBH, the Service Provider will ensure quality standards and train/evaluate employees to meet the need of identified tenants. Service Provider will provide counseling, advocacy, utilize the SSI/SSDI outreach, access and recovery services (SOAR) process prior to lease up and throughout the term of their contract with Fresno County DBH. California uses the SOAR Online Course ( <a href="https://soarworks.prainc.com/course/ssisdi-outreach-access-and-recovery-soar-online-training">https://soarworks.prainc.com/course/ssisdi-outreach-access-and-recovery-soar-online-training</a> ) to train case managers in the SOAR process. The service provider may choose to follow up using online courses with an in-person review available free of charge.	
Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.	
Benefits counseling and advocacy are included in the agreement with the contracted service provider. As part of the Department's NPLH MOU DBH, the contracted service provider and property management staff will agree and facilitate the implementation of this strategy to assist tenants in accessing all eligible benefits..	
Describe Critical Time Intervention	
The contracted service provider will be trained prior to lease up. Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values.	
Establishing a trusting relationship prior to embarking on any change model is crucial to longitudinal success for individuals with vulnerabilities. Critical Time Intervention is considered a core competency for supportive services. While the Department has not operationalized as of yet any formalized CTI training, the expectation is that the chosen Service Provider will ensure all staff are trained and assessed for competency in this model and will be a condition of the contract. CTI training is available both in-person and as a web-based course through the Center for Advancement of CTI <a href="https://www.criticaltime.org/training-consultation/">https://www.criticaltime.org/training-consultation/</a> . During the ramp up phase of the supportive services contract, the service provider will be expected to arrange for staff to receive initial training and ongoing refresher training in the Critical Time Intervention model and the Service Provider will implement a plan for ongoing training as additional staff are added to the program over time.	
Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.	
While the Department has not operationalized as of yet any formalized CTI training, the expectation is that the chosen Service Provider will ensure all staff are trained and assessed for competency in this model and will be a condition of the contract. CTI training is available both in-person and as a web-based course through the Center for Advancement of CTI <a href="https://www.criticaltime.org/training-consultation/">https://www.criticaltime.org/training-consultation/</a> . During the ramp up phase of the supportive services contract, the service provider will be expected to arrange for staff to receive initial training and ongoing refresher training in the Critical Time Intervention model and the Service Provider will implement a plan for ongoing training as additional staff are added to the program over time.	
Describe Trauma-Informed Care Strategies	
Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values.	
The Department recognizes the impact of trauma on all aspects of an individual's life, including the ability to access and maintain housing. The Department has also designed, adopted and implemented a system of "Guiding Principles of Care Delivery" that provides the framework for the Department's decision-making on all aspects of care delivery including program design and implementation, service delivery, training of the workforce, allocation of resources, and measurement of outcomes.	
Guiding Principle Seven, Trauma-informed and Trauma-responsive, states: "The widespread impacts of all types of trauma are recognized and the various potential paths for recovery from trauma are understood; signs and symptoms of trauma in individuals, families, staff, and others are recognized and persons receive trauma-informed responses; and physical, psychological and emotional safety for individuals, families, and providers are emphasized.	
Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.	
The above principles of trauma informed care are embedded the the DBH Guiding Principles of Care Delivery and are included in the agreement with the contracted service provider. As part of the Department's NPLH MOU DBH, the contracted service provider and property management staff will agree and facilitate the implementation these trauma informed care principles.	
Describe Motivational Interviewing	
The contracted service provider will be trained prior to lease up. Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values.	
Motivational interviewing (MI) is an evidenced-based directive, client-centered counseling style for eliciting behavior change by helping clients to explore and resolve ambivalence. Motivational Interviewing is embedded the Department's Guiding Principles of Care Delivery. The Department believes that the most effective interventions are motivation-based and adapted to the individual's current stage of change. Progression though stages of change are supported through positive working relationships and alliances that are supportive and motivating. This principle provides the foundation for training of staff in motivational interviewing and in the development of skills to support tenants.	
Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.	
Current Department staff are offered instruction in Motivational Interviewing annually. New hires to the Department undergo MI training within the first year of employment. Contracted staff are included in all trainings so the Department can be certain that all individuals seeking services are met with the same level of competency in MI. The awardee will ensure supportive services plans are individualized to a tenant's needs and preferences. Staff will be trained in motivational interviewing to help individuals explore and resolve ambivalence and consider change. Ongoing refreshers will be provided as additional staff are added to the program. Costs for MI training range from \$150 - \$300 per person.	
Describe Voluntary Moving on Strategies	

<p>Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values.</p> <p>With housing resources in high demand, it is essential to support individuals in their progress towards independence and self-determination. If an individual, who no longer requires on site services or supports, expresses motivation to voluntarily move on to a private residence with rental support and aftercare, as documented in the contract between the Service Provider and Fresno County DBH, the awarded Service Provider must be ready to engage and assist that individual to succeed. The Moving on Initiative requires supportive services teams to be skilled in navigating rental supports, appropriate linkages to community services, and have access to case management training on assessment and transition.</p> <p>The specific moving on conversations, services, and supports are tailored to the individual tenant's needs, desires, and preferences for current and future housing and are voluntary. The service provider will be expected to arrange for all supportive services staff to receive the associated training.</p> <p>The Department has entered into an agreement with the Corporation for Supportive Housing (CSH) to, in collaboration with the Department, develop a Fresno County Supportive Housing Institute. An essential function of the Housing Institute will be to provide both Department and Community providers training in essential aspects of housing supportive</p> <p><u>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</u></p> <p>The contracted service provider will be trained prior to lease up. Training in moving-on strategies will be part of the SHI curriculum and made available to the awardee as part of their contract. In addition CSH provides a toolkit for those agencies wishing to develop their own moving on strategies while adhering to proven practices.</p> <p><u>Describe Peer Support</u></p> <p>Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values.</p> <p>Peer support is an important component of the Service Plan. As documented in the contract between the Service Provider and Fresno County DBH, the awarded Service Provider will be required to have paid peer professionals included in the program's multi-disciplinary services team. Current nonintrusive engagement strategies in the Department's existing permanent supportive housing programs include a variety of peer-facilitated activities that allow tenants the freedom and flexibility to engage in conversations with supportive services staff as well as other tenants.</p> <p><u>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</u></p> <p>The contracted service provider that will be trained prior to lease up. In 2019 the Department engaged the services of Resilience Inc., a professional peer development and training organization. With their assistance the Department was able to develop a comprehensive peer training curriculum. The department's contracted providers and community partner agencies were invited to send their peer support specialists to a Department sponsored 80 hour training opportunity. In addition, supervisory staff were invited to a leveling training in which they were instructed in leadership strategies and given tools to work with peer professionals. This training will be established as an expectation for all DBH peer personnel (county and contractors). The service provider's leadership will be expected to demonstrate training in meaningful peer inclusion at program implementation, ongoing refreshers and as additional staff are added to the program. Costs for peer support training range from \$10.00 per course and up to \$1400.00 for a Peer Support Specialist Certification program.</p> <p><u>Describe Case Conferencing</u></p> <p>Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values.</p> <p>As documented in the contract between the Service Provider and Fresno County DBH, the awarded Service Provider will be required to be actively engaged with the property manager, treatment providers, and other social service providers and routinely engaged in case conferencing to ensure that individuals have the most integrated and effective wraparound services. All such consultations and case conferencing will be tenant-driven, tenant included, and voluntary with appropriately executed authorizations to release information in place. As new tenants are welcomed into their new home, the service provider will explain the benefits or coordinated services and case conferencings as part of the</p> <p><u>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</u></p> <p>As part of the No Place Like Home (NPLH) Memorandum of Understanding between DBH, the contracted service provider and property management, all parties will be trained and agree to meet regularly to ensure that individuals have the most integrated and effective wraparound services</p> <p>1b. Describe how the practices listed below will be implemented in your service delivery model, including a description of policies and procedures. Descriptions must also include periodic training plans including who will be trained, the type of training, cost and how often training occurs.</p> <p><u>Describe policy and procedures for safety and security of staff and residents.</u></p> <p>OSHA rules will be posted in staff areas.</p> <p><u>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</u></p> <p>Staff are trained on how to work with high-needs tenants on an ongoing basis. All County employed and Contract employed staff are required to take non-violent intervention training prior to engaging in client activities.</p> <p><u>Describe how Applicant and LSP's program philosophy, values, and principles is communicated.</u></p> <p>Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values.</p> <p>As documented in the contract between the Service Provider and Fresno County DBH, the awarded Service Provider will be required to be actively engaged with the property manager, treatment providers, and other social service providers and routinely engaged in case conferencing to ensure that individuals have the most integrated and effective wraparound services. All such consultations and case conferencing will be tenant-driven, tenant included, and voluntary with appropriately executed authorizations to release information in place. As new tenants are welcomed into their new home, the service provider will explain the benefits or coordinated services and case conferencings as part of the</p> <p><u>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</u></p> <p>As part of the Department's NPLH MOU DBH, the contracted service provider and property management staff will agree on program philosophy, values and principles.</p> <p><u>Describe policies for rent due from residents during periods of hospitalization.</u></p> <p>The contracted qualified service provider will be trained prior to lease up. Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values.</p> <p>DBH understands that individuals housed in this project have a variety of health and behavioral health needs which could require intermittent periods of hospitalization or brief out of home treatment services. To ensure the stability of housing for the individual, policies and procedures will be developed and staff will be trained in them to ensure that hospitalizations do not result in a disruption in the tenant's ability to maintain their lease. Such policies and procedures will include provisions for the payment of rent during hospital stays and brief out of home treatment episodes.</p> <p><u>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</u></p> <p>As part of the Department's NPLH MOU DBH, the contracted service provider and property management staff will agree and facilitate policies regarding rent due during periods of hospitalization.</p> <p><u>Describe policy and procedures for resident privacy and confidentiality.</u></p> <p>Resident privacy and confidentiality is a foundational element of all service delivery. All supportive services staff and property management staff are highly committed to ensuring the protection of tenant confidentiality to the greatest extent possible, making exceptions only for the tenant's long-term wellbeing in extreme situations.□</p> <p><u>Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.</u></p> <p>As part of the Department's NPLH MOU DBH, the contracted service provider and property management staff will agree on principles and policy for resident privacy and confidentiality.</p> <p><u>Describe policy and procedures for services &amp; PM Staff work together to prevent evictions, adopt &amp; ensure compliance with harm reduction principles, &amp; facilitate implementation of reasonable accommodation policies.</u></p>
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Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values.

As documented in the contract between the Service Provider and Fresno County DBH, the awarded Service Provider and Property Management staff will utilize a Blended Management philosophy whereby property management and service staff will meet weekly to address all tenant issues in a timely manner. These meetings will ensure consistent and appropriate communication between all project staff. To address any urgent tenant issues at the PSH Development, staff will connect either in person or by phone to discuss the issue and, if needed, create a new or modified individualized supportive services plan with a tenant. Property management staff and supportive services staff will work as a unified team and will meet weekly to support PSH tenants to reach their goals. When behaviors or other challenges place a tenant at risk for eviction, property management staff will immediately communicate with the supportive services staff. Both property management and supportive services staff will jointly develop policies, procedures, and protocols for the PSH development. This documentation will be mutually agreed upon and revised as needed. Further, communication and understanding roles of property management and supportive services will be improved through cross-training of property management staff and supportive services staff. With a clear understanding of roles and responsibilities between supportive services and property management, the end goal of such communication will be to support and ensure PSH tenants remain housed.

Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.

As part of the Department's NPLH MOU DBH, the contracted service provider and property management staff will agree on program principles and policy to prevent evictions, ensure compliance with harm reduction and facilitate implementation of reasonable accommodation policy.

Describe policy and procedures for communication between property management and service providers.

Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values.

As documented in the contract between the Service Provider and Fresno County DBH, the awarded Service Provider and Property Management staff will utilize a Blended Management philosophy whereby property management and service staff will meet weekly to address all tenant issues in a timely manner. These meetings will ensure consistent and appropriate communication between all project staff. To address any urgent tenant issues at the PSH Development, staff will connect either in person or by phone to discuss the issue and, if needed, create a new or modified individualized supportive services plan with a tenant. Property management staff and supportive services staff will work as a unified team and will meet weekly to support PSH tenants to reach their goals. When behaviors or other challenges place a tenant at risk for eviction, property management staff will immediately communicate with the supportive services staff. Both property management and supportive services staff will jointly develop policies, procedures, and protocols for the PSH development. This documentation will be mutually agreed upon and revised as needed. Further, communication and understanding roles of property management and supportive services will be improved through cross-training of property management staff and supportive services staff. With a clear understanding of roles and responsibilities between supportive services and property management, the end goal of such communication will be to support and ensure PSH tenants remain housed.

Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.

As part of the Department's NPLH MOU DBH, the contracted service provider and property management staff will agree on policy regarding regular meetings to effectively communicate regarding tenant issues that may arise to ensure PSH tenants remain housed.

Describe policy and procedures for making applicants aware of the reasonable accommodation procedure.

Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values.

Another measure of the efforts of property management staff and supportive services staff is to assist qualified individuals in securing and maintaining PSH housing is the recognition and acknowledgment that individual tenants living a severe mental illness may have other conditions. For such reason, the PSH applicants must be provided with reasonable accommodation in rules, policies, practices and services to ensure equal opportunity to use an enjoyment of the property, supportive services, and other associated activities. As documented in the contract between the Service Provider and Fresno County DBH, the awarded Service Provider and Property Management staff will be trained and to ensure the PSH development offers the most opportunities to house eligible applicants, a new, site-specific Memorandum of Understanding (MOU) will be formally executed between the property manager and DBH. The MOU will include language which requires the unique circumstances and conditions of each PSH tenant to be considered and that reasonable accommodations be made. Such reasonable accommodation ensures PSH applicants are provided with every opportunity to succeed in securing housing and retaining

Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.

As part of the Department's NPLH MOU DBH, the contracted service provider and property management staff will agree on policy regarding reasonable accommodation procedures to ensure tenants are made aware of how to request and receive any reasonable accommodations they are eligible to receive.

Describe policy and procedures for receiving and resolving tenant grievances.

Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values.

All grievances are taken seriously and staff are trained to address them. Due to the blended nature of supportive services and property management services provided on-site within the housing project, as documented in the contract between the Service Provider and Fresno County DBH.

The following Grievance policy will be followed:

A written copy of the tenant grievance protocol will be provided to each tenant at the time of admission to the NPLH housing program.

Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.

As part of the No Place Like Home (NPLH) Memorandum of Understanding between DBH, the contracted service provider and property management, parties will agree to the grievance policy to ensure all grievances are addressed in a respectful and timely manner.

Describe policy and procedures for appropriate response to tenant crises.

Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values.

Awarded supportive services staff will be trained to address tenant crises in a respectful and timely manner. All Service Provider and Property Management staff will be trained in non-violent crisis intervention which emphasizes person-centered de-escalation techniques, situational awareness, and crisis intervention strategies. Site-specific policies and procedures will be developed to address the response to tenant crisis in the least restrictive manner possible. Responses will afford tenant's with appropriate choices and options during the crisis while ensuring attention to immediate safety.

In the event a situation requires justice involvement, DBH has developed a robust partnership with local law enforcement agencies. The Department has supported local law enforcement agencies to receive crisis intervention training. In both the metropolitan and rural areas of the county, the Department has partnered mental health clinicians with law enforcement agencies for a co-response to behavioral health related calls. In current DBH permanent supportive housing projects, this partnership has proven effective in ensuring any crisis that escalates to involve law enforcement is supported with the deployment of a trained crisis clinician accompanying the officer. The goal is to provide support and intervention in the most proactive way possible to avoid crises, mitigate risks of additional crisis escalation when a crisis does emerge, and to support staff to ensure that the right level of care and intervention is provided based on evaluation of the tenant's needs and situation.

Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.

As part of the No Place Like Home (NPLH) Memorandum of Understanding between DBH, the contracted service provider and property management, all parties will be trained and agree to protocols that adequately address tenant crises.

Describe policy and procedures for retention of tenants regardless of use of substances.



Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values.

The Department recognizes that harm reduction is a key element of supportive housing that provides successful interventions to reduce problematic effects related to addictive behavior and implemented the following policy regarding use of substances by tenants:

Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.

As part of the No Place Like Home (NPLH) Memorandum of Understanding between DBH, the contracted service provider and property management, all parties will be trained and agree to the above policy regarding use of substances. Ongoing refresher trainings will be provided and as additional staff are added to the program.

Describe policy and procedures for cultural & linguistic competency.

Fresno County DBH will assign a designated team of analysts, utilization review specialist (URS) and a division manager to monitor and assess awardee's adherence to best practices set forth in the contract, ensuring alignment with the Departments Mission, Vision and Values.

DBH recently published the document titled, "Fresno County Department of Behavioral Health Culturally Responsive Plan with Humility." This document meets the requirements to fulfill the Department's mandate to have a Cultural Competency Plan, but above that, and more importantly, this plan provides a framework and strategy to ensure that all services are delivered in a culturally and linguistically appropriate manner for persons of all races, ethnicities, sexual orientations, gender identities and gender expressions. One of the cornerstones of the plan requires all staff and providers be afforded with professional development opportunities which enhance their cultural humility and effectiveness in working with our diverse community. For example, all staff attend annual multi-cultural competency training. As documented in the contract between the Service Provider and Fresno County DBH, the awarded Service Provider will be expected to adhere to the Cultural Competency Plan and training opportunities. The Department also recognizes the importance of ensuring that services are provided in the preferred language of the person receiving services; this includes our supportive services in permanent supportive housing. The Department's hiring practices reflect Fresno County's diverse population. In addition, written materials are available in the three threshold languages in Fresno County (Spanish, Hmong, and English) and made available as needed in other languages. Supportive services staff will utilize certified interpreters for tenants who do not speak English or who prefer services in another language to ensure that all tenants have equal access to services. The services provider has agreed by contract to implement the DBH Cultural & Linguistic competency requirements.□

Describe periodic training plans associated with the above item including who will be trained, the type of training, cost, and how often training occurs.

As part of the No Place Like Home (NPLH) Memorandum of Understanding between DBH, the contracted service provider and property management, all parties will be trained and agree to the DBH Cultural & Linguistic competency requirements. Ongoing refresher trainings will be provided and as additional staff are added to the program.

### 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	Hours	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.	Provide the hours of availability	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	Dedicated case management staff will be assigned to work full time at the site. These case managers will support tenants with all aspects of individual service planning, linkages to resources, and implementation of co-authored service plans. Case managers will be available on-site 40 hours per week. Tenants seeking support may access case management services based on individual need with the expectation that service delivery will vary as individuals learn to navigate independence and build competence in maintaining housing. In addition, for any tenants who choose to participate in behavioral health treatment services, and who choose to integrate those services, the supportive services case manager will act as a bridge between the treatment services and the supportive housing services to create an integrated recovery plan and support team. Individuals with co-occurring substance use and/or physical health issues will	8:00am - 5:00PM Monday - Friday	Fresno County Department of Behavioral Health	Division of Applicant's Org		
Peer support activities	The Supportive services staff will include professional peer support staff employed on a full time basis. These individuals will have life experiences similar to life experiences of the tenants (Substance Use, mental illness, homelessness, physical health challenges). Peer support staff will	8:00am - 5:00PM Monday - Friday	Fresno County Department of Behavioral Health	Division of Applicant's Org		

Mental health care	The supportive services staff will include Case management and peer support professionals on a full time basis. Onsite staff will be trained in Motivational interviewing, trauma informed care, critical time intervention, de-escalation, housing first and harm reduction principles, prison first language and principles, cultural humility and diversity principles and in accessing services not readily available at the property. For supports not available on site, staff will ensure all tenants have access to and are supported in utilizing the Department's robust array of integrated services provided by both contracted and county employed professionals. Participation in mental health services is voluntary and not a requirement for tenancy. Supportive services staff will educate tenants	8:00am - 5:00PM Monday - Friday	Fresno County Department of Behavioral Health	Division of Applicant's Org	Contract	Transportation services to and from physical health care supports (PCP, Hospital, medical/dental/vision appointments, pharmacy visits etc) may be provided by case management staff or through an agreement with Logisticare. Logisticare is a MediCal member benefit that provides transportation services tailored to a members needs. Individuals with physical disabilities may request accomodated transport, individuals with children may request family
Substance use services	All tenants will have access to and be supported in utilizing the Department's newly expanded Organized Delivery System (ODS) for Substance Use Disorder(SUD) services. The Department is currently contracted with over 30 community based organizations providing SUD services throughout the county. The Department also offers a county operated co-occurring mental health and SUD integrated program (Pathways to Recovery). Supportive Service Staff are available 40 hours per week for onsite supportive services. A new benefit with	24/7 Monday - Friday	Fresno County Department of Behavioral Health	Project Partner	Contract	SUD Access line services 800-654-3937 .....Pathways to Recovery 515 S Cedar Ave Fresno CaTransportation services to and from physical health care supports (PCP, Hospital, medical/dental/vision appointments, pharmacy visits etc) may be provided by case management staff or through an agreement
Support in Linking to Physical Health Care	All tenants will be supported in accessing physical health care through linkages offered by supportive services staff. The Department has MOU's in place with both Managed Medi-Cal Health Plans in Fresno County (Anthem Blue Cross and CalViva HealthNet). These MOUs outline care coordination and serve as a platform to ensure that the physical health needs of individuals in behavioral health programs are met. The department and the MHP's have developed a shared bidirectional referral form and intensive case management request form to assist staff in linking individuals to physical health care and	8:00am - 5:00PM Monday - Friday	Fresno County Department of Behavioral Health Contracted Provider	Project Partner	Contract	
Benefits counseling and advocacy	Case management staff working in the permanent supportive housing program will be trained in how to support tenants in accessing/securing any eligible benefits including Medi-Cal enrollment and Social Security benefits and will be SOAR trained. Individuals seeking additional supports may access services through the Social Security Administration, Department of Social Services, National Alliance for Mental Illness, patients rights advocacy, Central California Legal Services	8:00am - 5:00PM Monday - Friday	Fresno County Department of Behavioral Health Contracted Provider	Project Partner		
Basic housing retention skills	Case management staff working in the permanent supportive housing program will work with tenants to determine their level of understanding in regards to skills required to maintain housing. If needs are identified, the case manager will develop a plan with the tenant to assist in building skills. Skills delivered may include life skills/daily life skills education, harm reduction services, recreation and socialization, legal assistance, tenant rights education	8:00am - 5:00PM Monday - Friday	Fresno County Department of Behavioral Health Contracted Provider	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. Attach the agreement for each of the services listed.

Resident Service	Service Description	Hours	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.	Provide the hours of availability	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	All tenants will have access to and be supported in utilizing the Department's newly expanded Organized Delivery System (ODS) for Substance Use Disorder(SUD) services. The Department is currently contracted with over 30 community based organizations providing SUD services throughout the county. The Department also offers a county operated co-occurring mental	8:00am - 5:00PM Monday - Friday	Fresno County Department of Behavioral Health	Project Partner	Contract	SUD Access line services 800-654-3937 .....Pathways to Recovery 515 S Cedar Ave Fresno CaTransportation services to and from physical health care supports (PCP, Hospital, medical/dental/vision			
Recreational and social activities	All tenants will have access to and be engaged in recreational and social activities on-site arranged by the contracted service provider.	8:00am - 5:00PM Monday - Friday	Exodus Recovery	Project Partner	Contract				
Educational services	Fresno County has contracted with Dreamcatchers Educational and Vocational Services (VES) for supported employment and supported education. The new enhanced program will implement the evidence-based Individual Placement and Support (IPS) model. The supportive services staff will support tenants in accessing the Dreamcatchers program as well as serve as an extension of the tenant's vocational support team.	8:00am - 5:00PM Monday - Friday	Fresno County DBH Contracted Provider	Project Partner	Contract	Dreamcatchers Educational and Vocational Services (VES) , 855 N. Abby St Fresno, CA 93701 (2.3 miles away from site). Provides transportation services to and from physical health care supports (PCP, Hospital, medical/dental/vision appointments, pharmacy v			
Employment services	Fresno County has contracted with Dreamcatchers Educational and Vocational Services (VES) for supported employment and supported education. The new enhanced program will implement the evidence-based Individual Placement and Support (IPS) model. The supportive services staff will support tenants in accessing the Dreamcatchers program as well as serve as an extension of the tenant's	8:00am - 5:00PM Monday - Friday	Fresno County DBH Contracted Provider	Project Partner	Contract	Dreamcatchers Educational and Vocational Services (VES) , 855 N. Abby St Fresno, CA 93701 (2.3 miles away from site). Provides transportation services to and from physical health care supports (PCP, Hospital, medical/dental/vision			
Obtaining access to other needed services									
<b>File Name:</b>	<b>LSP Agreement</b>	Lead Service Provider Contract, Agreement, or Letter of Intent			Uploaded to FAAST?				
<b>File Name:</b>	<b>Written Agreements</b>	Copy of written agreements or memoranda of understanding (MOUs) which identify the roles and responsibilities of the County, the project owner, other service providers, and the property manager covering all of the Required and Encouraged Services that are part of the Supportive Services Plan. Please submit one master services MOU or other written agreement for the project. However, if separate agreements will also be entered into with each service provider, the Master document must reference and include these separate agreements.			Uploaded to FAAST?				
<b>Section 2: Supportive Services Coordination</b>									
1. Describe the accessibility of community services to which you propose linkages, whether they are on-site or in close proximity to the Project, 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).									

<p>Case management and supportive services will be available on site. For off-site supportive services not provided at Libre Commons, the Department will support tenants by making transportation available to treatment appointments, recovery supports including the Wellness Center, the Holistic Center and other self-directed recovery focused services. Supportive services staff will provide transportation for tenants directly. Department funded vehicles will be accessible to staff at the site.</p>					
<p>2. 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.</p>					
<p>DBH recently published the document titled, "Fresno County Department of Behavioral Health Culturally Responsive Plan with Humility." This document meets the requirements to fulfill the Department's mandate to have a Cultural Competency Plan, but above that, and more importantly, this plan provides a framework and strategy to ensure that all services are delivered in a culturally and linguistically appropriate manner for persons of all races, ethnicities, sexual orientations, gender identifies and gender expressions. One of the cornerstones of the plan requires all staff and providers be afforded with professional development opportunities which enhance their cultural humility and effectiveness in working with our diverse community. For example, all staff attend annual multi-cultural competency training. As documented in the contract between the Service Provider and Fresno County DBH, the awarded Service Provider will be expected to adhere to the Cultural Competency Plan and training opportunities. The Department also recognizes the importance of ensuring that services are provided in the preferred language of the person receiving services; this includes our supportive services in permanent supportive housing. The Department's hiring practices reflect Fresno County's diverse population. In addition, written materials are available in the three threshold languages in Fresno County (Spanish, Hmong, and English) and made available as needed in other languages. Supportive services staff will utilize certified interpreters for tenants who do not speak English or who prefer services in another language to ensure that all tenants have equal access to services.</p>					
<p>3. Describe how services will accommodate trauma-based, barriers to services.</p>					
<p>The Department recognizes the impact of trauma on all aspects of an individual's life, including the ability to access and maintain housing. The Department has also designed, adopted and implemented a system of "Guiding Principles of Care Delivery" that provides the framework for the Department's decision-making on all aspects of care delivery including program design and implementation, service delivery, training of the workforce, allocation of resources, and measurement of outcomes. Guiding Principle Seven, Trauma-informed and Trauma-responsive, states: "The widespread impacts of all types of trauma are recognized and the various potential paths for recovery from trauma are understood. Signs and symptoms of trauma in individuals, families, staff, and others are recognized and persons receive trauma-informed responses. Physical, psychological and emotional safety for individuals, families, and providers is emphasized."</p> <p>In support of and response to our guiding principles the Department has committed significant resources into the training of clinical staff in the recognition and treatment of trauma. Many of our clinicians have trained certification in Eye Movement Desensitization and Reprocessing (EMDR). The Department supports key clinician attendance at the annual EMDR International Association conference (EMDRIA) and has ensured continued competence by supporting clinical staff who express interest in becoming trainers for community wide clinical partners. It is the intention of the department to continue this commitment to training staff (including staff of the selected Service Provider) in new permanent supportive housing programs as they are developed.</p> <p>Prior to lease up the contract awardee will ensure the permanent supportive housing plan includes either training their staff in EMDR or developing linkages to individual, county or group providers certified in EMDR for the treatment of trauma.</p>					
<p>4. 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.</p>					
<p>The Department will coordinate and refer tenants to food banks and donations for essential items at move in that are not covered by MHSA or other funding sources.</p>					
<p>5. Is the Applicant currently working with the with the CoC in the area?</p>					Yes
<p>If No, please explain:</p>					
<p>N/A</p>					
<p>6. Documentation of Supportive Services Coordination provided 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.</p>					
<p>Documentation Attached?</p>		<p>File Name:</p>			
<p><b>Section 3: Verification from Appropriate Public or Non-profit Funding Agency</b></p>					
<p>All applications where the County is <b>not</b> 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.</p>					
<p>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.</p>					
<p><b>Part IV. Tenant Safety And Engagement</b></p>					
<p><b>Section 1: Tenant Engagement</b></p>					
<p>Applicant should describe strategies to engage residents in services, services planning/operations, and in building community and facility operations. <b>NOTE: The tenant engagement plan is distinct from the marketing and outreach efforts for attracting applicants to the Project.</b></p>					
<p>1. Will the services engagement outreach strategy include:</p>					
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
<p>Other strategies? Please describe:</p>					
<p>2. Describe the strategies to engage residents in social interaction, building operations, and community involvement within the Project.</p>					
<p>All service plans are developed based on direct input from residents based on their goals and needs. Consistent and non-intrusive presence of supportive services staff allows for ample opportunities for supportive services staff to support and assist tenants in their transition from homelessness to housing stability. Recognizing the challenges of this transition, the types and frequency of engagement strategies shall be determined based upon the individual tenant's strengths and needs with respect to their own recovery. Consistent, frequent, and non-threatening contacts with tenants will be made to establish a supportive and trusting relationship with all tenants of the PSH Development, including tenants in pre-contemplative stages of change. On Site Supportive services staff will be trained in Motivational Interviewing, Trauma Informed Care, Recovery principles, Reaching Recovery and ...</p>					
<p>3. Describe the strategies to engage residents in planning and delivery of resident's services.</p>					
<p>DBH recently published the document titled, "Fresno County Department of Behavioral Health Culturally Responsive Plan With Humility." This document meets the requirements to fulfill the Department's mandate to have a Cultural Competency Plan, but above that and more importantly, this plan provides a framework and strategy to ensure that all services are delivered in a culturally and linguistically appropriate manner for persons of all races, ethnicities, sexual orientations, gender identifies and gender expressions. One of the cornerstones of the plan requires all staff and providers be afforded with professional development opportunities which enhance their cultural humility and effectiveness in working with our diverse community. For example, all staff attend annual multi-cultural competency training. The Department also recognizes the importance of ensuring that services are provided in the preferred language of the person receiving services; this includes our supportive services in permanent supportive housing. The Department's hiring practices reflect Fresno County's diverse population. In addition, written materials are standably available in the three threshold languages in Fresno County (Spanish, Hmong, and English) and made availalbe as needed in other languages. Supportive services staff will utilize certified interpreters for tenants who do not speak English or who prefer services in another</p>					
<p>4. Describe how the physical building space supports social interaction and the provision of services.</p>					

The physical design of the PSH development recognizes individuals living with a severe mental illness that are Chronically Homeless, Homeless or At-Risk of becoming Chronically Homeless may have experienced trauma. The physical design of the PSH development responds to this by creating an environment intended to foster community growth and welcoming engagement through trauma-informed design that allows for more comfortable space, interaction, communication and support amongst tenants and service providers. Trauma-informed designed living spaces promote physical, mental and social health. This approach realizes how the physical environment effects individuals, recognizing that it can have physiological and emotional impact upon persons served. The site design includes expanded, open community space for tenant interaction, services and overall community involvement within the living space. The focus of the design is on the center of the living space, where there is naturally lighted open space and community meeting space. Space will also be available for supportive services having a comfortable roomy feel rather than formal office design. Calming and soothing colors reminiscent of nature are incorporated into the physical design and used throughout the living space, helping tenants remain connected to their natural environment. Evidence demonstrates soothing colors help to calm individuals. Where possible, curvilinear rather than hard, sharp lines and edges will be used, including furniture and hallways. Universal designed user-friendly, durable fixtures, equipment and furnishings will also be utilized in the project's physical design. To emphasize the feel of a living space and minimize an apartment feel, maintenance and storage space will be re-located away from the living space. With a client-centered approach to wellness that focuses on a calming open space with much natural light, the design will foster a comfortable, welcoming community space that enhances interaction of PSH tenants and service providers. A dog park and acceptance of pets will also be an integral aspect of

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.

Tenants will be surveyed at least annually with a satisfaction survey, based on a likert scale, to determine levels of satisfaction with the supportive services, property maintenance and management, and other related topics. Additionally, through routine tenant council meetings and other forums, tenants will have ongoing opportunities to provide input into the services and supports available to them. Results of tenant input, including surveys, drive decision-making on program design.

## Section 2: Safety and Security

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

Resident privacy and confidentiality is a foundational element of all service delivery. All supportive services staff and property management staff are highly committed to ensuring the protection of tenant confidentiality to the greatest extent possible, making exceptions only for the tenant's long-term wellbeing in extreme situations.

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

As a Housing First development, tenants are not required to sign in/out. All tenants are given a safety overview during their leasing process, which includes emergency responses. On-site property management staff further assist with addressing emergencies in the moment.

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

The building has been designed with tenant safety as paramount. Sufficient lighting will be provided in all corridors, parking areas, and common spaces. Doors will have individual key access and common spaces will require key access. Cameras will be installed in all common areas, and connected to monitors in the property management office. Two full-time property manager and maintenance personnel will be on-site during normal business hours. Staffing presence will be maintained outside of business hours by the two live-in Community Builders, who will act as first responders in case of any emergencies and facilitate communications between property management and residents. A Fire Safety plan will be implemented and reviewed with all residents on a regular basis.

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

OSHA rules will be posted in staff areas. Staff are also trained on how to work with high-needs tenants on an ongoing basis. All County employed and Contract employed staff are required to take non-violent intervention training prior to engaging in client activities.

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

For both staff and residents, first violations are addressed by an in-person meeting. Further violations are addressed based on the employee handbook/lease, as appropriate. Tenant council will be convened to develop a community understanding of safety principles. Expectations impacting individual and community safety will be reviewed with tenant during new tenant orientation and periodically in tenant council. Any changes to policies impacting tenants will be posted in a common area, accessible to all and in threshold

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.

Daytime guests are always allowed. Tenants will be educated as to the lease requirements for overnight guests who will stay multiple nights. Any deviation from lease requirements require property manager approval.

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

The Property Management company and the two Community Builders are responsible for programming of social activities, enrichment opportunities and other services that are project-wide and open to all residents of the Project. These activities are created partly to promote the integration of the PSH tenants with the other residents of the Project, and to foster a sense of community at the Project. Property Management and the Community Builders will further work with the service team to support PSH tenants as they engage their community at large (i.e. the neighborhood, Clovis residents and entities, etc.). This work will take place primarily through the Blended Management meetings mentioned above, where Property Management and the service team can jointly address any challenges PSH tenants may be facing with regards to their integration within the broader community.

## Part V. Staffing

### Section 1a: Staffing Description

Describe the overall staffing pattern, including the roles and responsibilities for each position listed in the Staffing Chart below. List the target populations served through each

The proposed staffing mix was determined by the recommended ratio of tenants to staff using the Evidenced-Based Critical Time Intervention Case Management Model. This model has shown been shown to reduce the likelihood of recurrent homelessness by more than 60% through providing intensive case management during phase one of their intervention. The proposed staffing pattern includes a .5 FTE Program Director, 1 Clinical Supervisor, 5 Case Managers, 1 Peer Support Specialist and 1 Administrative Assistant. The staffing ratios provided by DBH are only for the 50 NPLH units and do not account for additional staffing that will be required for non-NPLH units in the remainder of the project. DBH has extensive experience providing services to this population. The staffing ratios are reflective of the anticipated needs of residents based on this experience. DBH utilizes this robust level of service to provide the highest possible level of care and improve outcomes for clients.

Following are the roles and responsibilities for each position:

Program Director; Develops, plans, implements and manages the clinical and/or administrative activities within the program. Interviews, selects, evaluates, develops, promotes, and supervises staff; disciplines staff when necessary. Oversees the development, implementation, and assessment of staff training modules, a Staff Development, Training & Education Plan, and new employee orientation for all staff. Oversees and supports cultural competence efforts of the Department of Behavioral Health; reviews and provides recommendations related to the Department's compliance with state and federal requirements related to cultural competence. Oversees Request for Proposals (RFP) for System-wide projects, coordinates vendor selection with System committees, and negotiates contracts with vendors. Organizes, develops, and fosters effective working relationships with behavioral health professionals, agencies, private businesses, clients and their families, and public and private coalitions. Develops and coordinates program operations in collaboration with stakeholders, public and private agencies and organizations, behavioral health and substance use disorder staff, and clients and families. Prepares or reviews correspondence and records; prepares complex and sensitive analytical and statistical reports. Ensures that all behavioral health education and training services comply with federal, state and local regulations. Assists in the preparation and development of the department budget. Directs or participates in departmental studies to determine initial feasibility of adopting new or modified systems and procedures.

Clinical Supervisor: Supervises staff in one or more behavioral health programs. Supervisory responsibilities include interviewing, selecting, training, assigning, directing, monitoring, evaluating and disciplining staff when necessary. Consults with management staff regarding program goals, activities, policies, and procedures as required. Communicates and interprets program goals, policies, and procedures to staff, community agencies, clients, and the public. Assures program policies, protocols, and staff expectations are properly implemented. Develops and implements work schedules to assure proper program coverage. Ensures staff proficiency in behavioral health information and other information systems utilized by the particular program. Reviews records and information related to the delivery of care to individuals and families to assure compliance with departmental and state policies, procedures, standards of care, and billing requirements. Assists management staff in the development and monitoring of program budgets. Assures proper

### Section 1b: 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 of the position (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 positions 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:	4.25	Employing Organization	Location
List each staff position	List min. required staff preparation include (education & experience) <b>NOTE: Doesn't take place of the job description or duty statement.</b>	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"
Program Director	Education: Possession of a bachelor's degree that is acceptable within the United States' accredited college or university system.	0.25		Project Partner	On-Site
Clinical Supervisor	Education: Possession of a bachelor's degree in biology, nursing, public health, social work, or a closely related field that is acceptable within the United States' accredited college or university	1		Project Partner	On-Site
Case Manager	Education: Current and active registration as an Associate Clinical Social Worker or Marriage and Family Therapist Intern with the State of California, Department of Consumer Affairs, Board of	2		Project Partner	On-Site
Peer Support	Peer Support Specialist I applicants must qualify under one (1) of the options listed below:	1		Project Partner	On-Site

File Name:	Duty Stmt1, Duty Stmt2, Duty Stmt3, Duty Stmt4	Staff Duty Statements (all providers, if available)	Uploaded to FAAST?
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## Section 2: Staffing Ratios

1. Indicate the overall services staffing level for the Project by completing the calculation below.

a.	Total NPLH Assisted Units	42
b.	Total FTE Service Staff from the Staffing Chart for the NPLH Assisted Units - Provide only the number of ongoing direct service staff positions that will provide services to the tenants of the NPLH Assisted Units, (for example, case manager, psychiatric nurse, services coordinator, etc.). Do not include supervisors, peer support positions, or HMIS Administration positions.	1.352272727
c.	Number of NPLH units per FTE Staff Person (a÷b)	31.05882353

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	25	9	8

## Part VI. Supportive Services Budget

### Section 1: Supportive Services Budget Table.

In addition to including the direct costs associated with providing supportive services, include the pro-rata costs associated with supervision of the NPLH supportive services staff, and other necessary pro-rata administrative costs, including HMIS data entry costs.

**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
Medi-Cal Federal Financial Participation/Staffing and Project Operations	\$350,000.00	In-kind	Committed	100.00%
				0.00%
				0.00%
				0.00%
				0.00%
				0.00%
				0.00%
<b>Total Revenue:</b>	<b>\$350,000.00</b>			<b>100.00%</b>
Expense Item	Amount	Type	Status	% of Total Budget
Staff Salaries: List by title of position. (This list must match the Staffing Chart above.)				
Program Director	FTE 0.25 \$16,250.00	In-kind	Committed	4.64%
Clinical Supervisor	FTE 1 \$65,000.00	In-kind	Committed	18.57%
Case Managers	FTE 2 \$80,000.00	In-kind	Committed	22.86%
Peer Support Specialist	FTE 1 \$32,000.00	In-kind	Committed	9.14%

Staff Position	FTE								0.00%
Staff Position	FTE								0.00%
Staff Position	FTE								0.00%
Staff Position	FTE								0.00%
Fringe Benefits				\$66,150.00					18.90%
<b>Total Staff Expenses</b>				<b>\$259,400.00</b>					<b>74.11%</b>
Tenant Transportation									0.00%
Equipment				\$20,000.00					5.71%
Supplies				\$6,690.00					1.91%
Travel				\$15,000.00					4.29%
Office Rent/Occupancy Costs (don't include rent/leasing costs for SH units)				\$0.00					0.00%
Training				\$10,000.00					2.86%
Consultants: List by Function									0.00%
Subcontractors/Partners (list by Entity & Service Type)									0.00%
Other Expenses (type in expense description)									0.00%
Other Expenses (type in expense description)									0.00%
Administrative Indirect				\$38,910.00					11.12%
<b>Total Expenses</b>				<b>\$350,000.00</b>					<b>100.00%</b>

**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.

<b>Supportive Services Expense Per Unit Calculation Table</b>	
a. Total NPLH Assisted Units	42
b. Total Supportive Services Expenses	350000
c. <b>Total Supportive Services Expenses per Unit: (b ÷ a)</b>	<b>8333.333333</b>

**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. Include a calculation showing the budgeted transportation assistance amount per NPLH household, if any, and justify its adequacy to meet all transportation needs.

Based on historical data from providing supportive services at other PSH projects, the budget here represents our expected costs for this project.

2. Document committed funds with letter from committing agency that includes the items below. Documented services/funding costs 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.

<b>File Name:</b>	<b>SS Fund Ltr1, SS Fund Ltr2, SS Fund Ltr3, etc....</b>	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.	Uploaded to FAAST?
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3. 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.

DBH will work among its various funding sources to ensure adequate funding for robust on-site services.

4. Specifically describe experience filling major services funding gaps in similar housing.

DBH will work among its various funding sources to ensure adequate funding for robust on-site services.□

**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:

<b>Funding History for:</b> (LSP)	<b>County of Fresno Department of Behavioral Health</b>				
<b>Source of Funds/Funding Program</b>	<b>Purpose of Award (Use of Funds)</b>	<b>Amount</b>	<b>Award Date &amp; Funding Term</b>	<b>Population(s) Served</b>	
MHSA	Villages at Paragon	\$577,195	3/23/21 FY 2020-2025	Chronically Homeless or At-Risk of Homelessness	
MHSA	Villages at Broadway	\$612,626	5/25/21, FY 2021-2025	Chronically Homeless or At-Risk of Homelessness	

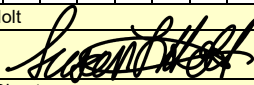
**Part VII. Property Management Plans, Tenant Selection, and Reporting**

**Section 1: Property Management Plans and Tenant Selection**

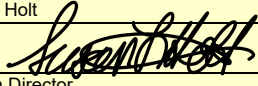
The Property Management Plan and tenant selection policies submitted with the NPLH application will be evaluated for the following consistent with state Housing First requirements. These documents must identify, describe, and utilize Housing First and low-barrier tenant selection processes that prioritize those with the highest needs for available housing. The descriptions of the use of Housing First and tenant selection in this Supportive Services Plan must be consistent with the Property Management Plan and the tenant selection policies. The Property Management Plan and tenant selection policies should address the following and be consistent with state Housing First requirements, as well as and other NPLH requirements:

- 1.Applicant eligibility and screening standards
- 2.Confidentiality
- 3.Substance abuse policy
- 4.Communication between property manager and supportive services staff
- 5.Eviction policies and eviction prevention procedures
- 6.Process for assisting tenants to apply for different forms of cash and non-cash benefits to aid the household in retaining their housing, if needed
- 7.How applicants and residents will be assisted in making reasonable accommodation requests, in coordination with the services provider and persuasive to outside entities, such as Housing Authorities, to ensure that persons with disabilities have access to and can maintain housing
8. Policies and practices to facilitate Voluntary Moving On strategies

**Section 2: Reporting Requirements Certification (REQUIRED)**

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:	01-18-2022	
Statement Completed by (please print):	Susan Holt	
Signature:		
Title:	Interim Director	
Agency or Department:	Fresno County Department of Behavioral Health	
Agency or Department Address:	1925 E. Dakota Ave, Fresno, CA 93726	
Agency or Department Phone:	(559) 600-6899	



Supportive Services Verification		10/15/2021
<p>If the County is not the Lead Service Provider, the County needs to complete the Project Applicant, Lead Service Provider, Project Name and contact information, Target Population, and name of Verifying Funding Agency information sections below. Then submit this form along with a copy of the Supportive Housing Project Plan contained in the application to the appropriate funding agency (public or nonprofit) knowledgeable about the supportive services needs of the targeted population(s). For example, for a Project serving chronically mentally ill people, the funding entity could be the County Department of Mental Health.</p> <p>Submission of this form shall constitute certification by the Applicant that a true copy of the Supportive Housing Project Plan submitted in the application has been submitted to the funding agency named below. The form may be submitted to more than one agency or department if necessary.</p>		
Project Applicant:	County of Fresno	
Lead Service Provider:	Fresno County Department of Behavioral Health	
Project Name:	Libre Commons	
Project Address/Site:	63 West Shaw Avenue	
Project City:	Fresno	
Project County:	Fresno	
Name of Verifying Funding Agency:	Fresno County Department of Behavioral Health	
Target Population(s):	Homeless and at-risk of homeless with serious mental illness	
<p>Public or non-profit funding agency: The project Applicant named above is submitting an application to the State Department of Housing and Community Development (the Department) requesting funding for the project named above under the No Place Like Home (NPLH) program. The application for NPLH funding is subject to the Department's determination that the project qualifies as a Supportive Housing Project. The findings of your agency will be considered in arriving at this determination. Review the attached copy of the Supportive Housing Project Plan, note your findings in the chart below, and complete the signature block below the chart. Attach comments for any "No" and as otherwise necessary.</p>		
We, as signed below, have reviewed the Supportive Housing Project Plan submitted for the project named above.		Yes
The services proposed in the Supportive Housing Project Plan are appropriate to meet the needs of the Target Population(s) named above.		Yes
The project Lead Service Provider is a known provider of support services to the Target Population(s) listed above.		Yes
Dated:	01-18-2022	
Statement Completed by (please print):	Susan Holt	
Signature:		
Title:	Interim Director	
Agency or Department Name:	Fresno County Department of Behavioral Health	
Agency or Department Address:	1925 E. Dakota Ave, Fresno, CA 93726	
Agency or Department Phone:	(559) 600-6899	