

## HOME SAFE PROGRAM EVALUATION CRITERIA, REQUIRED ELEMENTS AND APPLICATION TEMPLATE

### **A. PURPOSE**

The California Department of Social Services (CDSS) is seeking applications from counties and tribes wishing to implement a Home Safe program. Assembly Bill (AB) 1811 (Chapter 35, Statutes of 2018) created this new state-funded, county or tribe-administered program to support the safety and housing stability of Adult Protective Services (APS) clients by providing housing-related assistance using evidence-based practices for homeless assistance and prevention. The Home Safe program is funded with monies appropriated in the California state budget and are available from July 1, 2018, through June 30, 2021. The program requires counties and tribes to provide a dollar-for-dollar match for all state funds allocated, which may be met by cash or in-kind contributions. These match contributions must be in direct support of the Home Safe program. Please refer to Attachment Three for more information about match requirements.

### **B. APPLICATION AND ALLOCATION PROCESS**

County and tribal agencies interested in applying for Home Safe program funding must submit a program application according to the requirements specified below in Section D, Required Elements. The CDSS will evaluate program applications on a competitive basis according to the evaluation criteria specified in Section C below. County and tribal agencies demonstrating the greatest ability to implement a successful Home Safe program on or before July 1, 2019, will be prioritized for funding.

It is important to note that county and tribal agencies will have the opportunity to explain their current and/or anticipated capacity to implement a Home Safe program in their program application. All components are not required to be fully developed when the application is submitted. However, any items identified by the applicant agency within the application or CDSS after receipt of the application that require further program development must be sufficiently developed by the end of April 2019 and in place for program operation no later than July 1, 2019. CDSS will work with those entities requesting to establish a Home Safe program throughout the Program Development Phase to identify any information needed in order for CDSS to authorize full utilization of the program allocation. More information on the allocation and approval process is outlined below.

*Allocation Process*

CDSS acknowledges that Home Safe programs must have the total program funding amount available early in the program planning stages in order to develop comprehensive programs. Therefore, CDSS will notify counties and tribes approved for funding and provide the **full program allocation** in the allocation letter. However, counties may only access a portion of the funds immediately, to be used for program development activities during the Program Development Phase. The remainder of the allocation will be available to programs upon final approval by the CDSS. Approval will be granted on a rolling basis as counties and tribes demonstrate required program implementation milestones are met. Note: the dollar-for-dollar match requirement is applicable to all Home Safe program funds, including the program development funds that will be made immediately available.

During the Program Development Phase programs will be required to work with the CDSS in order to demonstrate the completion of program development and implementation milestones. Programs must be ready to begin accepting applications and serving eligible individuals no later than **July 1, 2019**. Program development activities may include, but are not limited to: staff time associated with finalizing program design, defining program policies and procedures, establishing formal community partners, refining program budgets, finalizing contracts as necessary, and other activities and milestones identified by the county, tribe, or CDSS that are required to be completed before program implementation and operation may occur. Additional information, including fiscal claiming instructions and the amount of funding available for program development activities will be released with full program allocations in early 2019.

The full program allocation will be made available to programs upon completion of their Program Development Phase. CDSS will authorize programs on a rolling basis, on or before July 2019, to use the full program allocation. Authorization will be based upon programs demonstrating the ability to meet specific program milestones, as defined by the applicant in the program application and through interaction with CDSS during the Program Development Phase. In order to meet this timeline, funded programs will be required to submit any applicable written program updates or budget revisions no later than **May 1, 2019**.

Following is a summary of the application, allocation and approval process described above:

Timeline	Description
<b><u>December 3, 2018</u></b> <i>Applications Due</i>	Counties and tribes submit complete applications by December 3, 2018. Within the proposal, counties and tribes will identify key areas and components that are in progress which will be further developed during the Program Development Phase with corresponding timelines for completion.
<b><u>December – January</u></b> <i>CDSS Application Review</i>	CDSS will review applications and identify key areas and components that will be of importance during the Program Development Phase.
<b><u>January 2019</u></b> <i>Program Approvals and Allocations Announced</i>	Home Safe program allocations will be announced. Allocations letters will include the full program allocation amount and the portion of funding immediately available for program development activities. Fiscal claiming instructions will be released.
<b><u>January – February, 2019</u></b> <i>Program Development Phase</i>	CDSS will work with each awardee on any specific requirements and program development milestones that must be met during the Program Development Phase. This may include updated plans (revisions or additional detail) and/or budget refinement, etc. Programs will be notified by the end of February 2019 of CDSS-determined milestones.
<b><u>May 1, 2019</u></b> <i>Final Submission of Program Updates</i>	Last day to submit any final information to demonstrate milestone achievement (as applicable).
<b><u>February – June, 2019</u></b> <i>CDSS Authorization to Begin Utilizing Full Program Allocation</i>	CDSS will authorize use of the full/remaining program allocation as awardees confirm completion of all required milestones (on a rolling basis) but no later than June, 2019.
<b><u>July 1, 2019</u></b> <i>Program Operation Begins</i>	Home Safe programs will be expected to begin accepting referrals and serving clients no later <b>July 1, 2019</b> .

### C. CRITERIA FOR EVALUATION

Funding allocations will be determined through a competitive process. It is possible that applicants may not receive funding or may not receive the full amount of their request. Program plans shall follow all applicable federal and state law, including Welfare and Institutions Code [\(WIC\) Section 8255](#), and [WIC Sections 15770 and 15771](#). Refer to Attachment One, Program Overview, for detailed program requirements pertaining to Home Safe and Housing First, as well as recommended practices pertaining to each of the criteria identified below. In evaluating county and tribe requests, the CDSS will give priority to those programs that:

1. Demonstrate local need, including the extent to which APS clients experience homelessness or the imminent risk of homelessness due to abuse, neglect, self-neglect or financial exploitation;
2. Demonstrate the ability to plan and implement a housing assistance program that utilizes evidence-based practices in homeless assistance and prevention. Note: Programs that target short-term housing assistance for clients at imminent risk of homelessness and/or those who recently became homeless, while adequately referring individuals who have experienced longer term and/or chronic homelessness to other housing interventions with the capacity to provide longer-term housing assistance, will be prioritized.
3. Demonstrate the capacity to quickly design and implement a program in which the APS agency collaboratively engages with local county or tribe program partners. Partnerships should include the local homelessness Continuum of Care (CoC) and coordinated entry system, to ensure a range of services are available to Home Safe participants and appropriate referrals can be made for individuals that require longer-term housing assistance.
4. Demonstrate the ability to maintain records, collect data, track both qualitative and quantitative outcomes, and participate in CDSS coordinated, research and evaluation efforts, as required in [WIC Sections 15570 and 15771](#);
5. Demonstrate the ability to engage with CDSS and utilize the Program Development Phase for program development and implementation planning in order to operate the program on or before July 1, 2019.

## D. REQUIRED ELEMENTS

Using the template below and the Criteria for Evaluation specified in Section C, respond to the questions to demonstrate your capacity to implement a successful Home Safe program. In the instances where further development is needed in order to demonstrate full capacity, please note the current status and describe what elements will be developed further in order to finalize. Include the anticipated completion date for any items that require additional development. CDSS will work with counties and tribes to identify development milestones that must be met prior to program operation. Program plan updates, additions or revisions (if applicable) must be submitted to CDSS no later than May 1, 2019.

For each component below, describe (1) what is currently being done in your community/program, (2) what you are planning to implement for Home Safe purposes, and (3) areas that need to be developed further with anticipated completion dates (if applicable).

**1. Describe the problem of homelessness for individuals served by your APS system. Include as much detail as possible regarding the monthly average number of individuals with an open APS case. Include information (if available) on number of individuals facing imminent risk of homelessness or recently homeless and individuals that have experienced longer periods of homelessness or those more likely to require longer term interventions who would be referred by Home Safe to other programs due to abuse, neglect, self-neglect, or financial exploitation. Briefly describe the current capacity for your APS system to respond to this need and how the Home Safe program would impact that need. Note: Home Safe should aim to provide short-term assistance to individuals with an imminent risk of homelessness or those who recently became homeless. Home Safe will refer individuals that require longer term assistance (e.g. individuals who have experienced longer term and/or chronic homelessness) to the local homelessness system for higher levels of housing intervention. The data provided above will inform the anticipated case load of Home Safe participants receiving short-term homeless assistance versus the number of individuals who will instead be referred to other housing interventions within the community.**

**Response: There are simply not enough resources in Humboldt County to support APS clients threatened by homelessness.**

Humboldt is a rural county spanning approximately 3,568 square miles, with a population of 136,754. (US Census Bureau). According to the 2017 census, Humboldt County residents living in poverty total 20% of the population which is higher than the statewide average of 13.3%. There is a shortage of affordable housing and an increasing senior

population. A 2017 Point In Time (PIT) count conducted by the Humboldt Housing & Homeless Coalition (HHHC), recorded 644 Humboldt County adults with no children in the household self-identifying as homeless.

The PIT count recorded 207 Humboldt County adults staying in emergency shelter, 36 in transitional shelter, and 401 without any shelter. 302 of the adults counted were categorized as chronically homeless. For Home Safe purposes, these individuals would likely be referred to other housing interventions within the community. This leaves 342 adults potentially eligible for Home Safe. The PIT count recorded 324 beds within Humboldt County's temporary housing programs available to households without children. Of those, 201 were available through the local Coordinated Entry System.

Adults with children have access to programs such as California Work Opportunity & Responsibility to Kids (CalWORKs), and Child Welfare Services (CWS), thus are unlikely to become clients of Adult Protective Services (APS). Individuals with disabilities have access to services through Social Security and Regional Centers. Persons homeless with a serious mental illness and persons homeless with HIV/AIDS also have access to state-funded housing programs that many APS clients do not. Services are needed to fill in the gaps for vulnerable elders and adults that do not meet criteria for other programs. Home Safe will establish a new streamlined collaboration between Humboldt County APS and the DHHS Housing Unit/Continuum of Care (CoC). A dedicated APS social worker and Housing social worker will collaborate to assess eligibility and access Home Safe funded resources to prevent and address homelessness including rental, security and utility assistance, legal assistance, deep cleaning, repairs, goods such as adaptability devices and other services. Home Safe will establish and fund a new Social Worker III position in APS to provide brief case management to support client stability.

Rapid rehousing services for the recently homeless and preventative efforts to reduce the number of adults becoming homeless in the first place are crucial in order to contain the problem of homelessness in Humboldt County. Having dedicated staff working towards this goal will increase program fidelity and ensure the right services/resources are provided. In addition to hiring a Social Worker with the skills to develop positive working relationships with the Home Safe population and build a bridge between APS and Housing/CoC, existing APS and Housing/CoC staff time will also be fully or partially rededicated to provide housing-related services.

**Current APS caseload and potential for Home Safe applicants:**

With Home Safe funding, APS will be able to provide a number of services, many upstream and preventative, that have not previously been funded and hence provided. Because these services have not been previously available, they have not been tracked further, LEAPS (the case management system used by Humboldt County APS) does not currently

have functionality to identify clients who are chronically or imminently homeless. Developers have communicated that they will be making updates to the reporting function of the program for counties who are awarded Home Safe funding. Nonetheless, data currently recorded in LEAPS is not available or is limited and thus does not adequately or clearly indicate the number of individuals who could be served by Home Safe. The following data was gathered through LEAPS SOC 242 and Monthly Compliance reports, case review and staff survey regarding APS cases open between April and September 2018.

The number of Humboldt County APS referrals assigned for investigation in any given month between April and September 2018 averaged 73. Humboldt County APS currently has 7 Social Workers available to investigate these referrals, with an average caseload of 21 assignments per worker. The number of APS referrals received and assigned monthly varies substantially from month to month. Only those referrals that are within APS jurisdiction and meet the APS guidelines for abuse and neglect are assigned for investigation.

Of the referrals received between April and September 2018, 27 regarded clients who were homeless or living in a motel. Of those, 13 were assigned for investigation. On average these cases took 23 days to resolve and close. Although APS always resolves immediate safety concerns, some of these clients inevitably remained homeless and were ultimately re-referred to APS. On 11/13/2018 all Humboldt County APS Social Workers were surveyed regarding their LEAPS Work In Progress, which included 84 open investigations. Of the clients they had already made contact with, 2 were imminently homeless, 6 were recently homeless, 6 were chronically homeless, and 1 had been recently housed.

Based on the above analysis, current APS caseloads, and available casework records and data, we estimate approximately 10% of the average monthly caseload will be referred to Home Safe. An average of 73 assigned cases per month  $\times 0.10 = 7.3 \times 24 \text{ months} = 175$  individuals who will likely be referred to Home Safe.

Of those 175, approximately 47 (or 73%) will receive referral services only. This number was obtained by looking at the 2017-18 Fiscal Year (FY) emergency assistance payments. Historically, APS clients needing a higher level of case management and intervention around housing have multiple cases opened within a 1-2 year timeframe. These clients often end up utilizing APS emergency assistance for motel fees and after-hours care providers. During the 2017-18 FY APS had 19 such clients, up three from the previous year. Assuming the caseload increases at a similar rate, we can anticipate a total of 47 over the next two years. During this time, APS clients will continue to receive emergency services currently funded through the APS budget. The Home Safe funding spent on these clients would be limited to staff time in order to process the intake and refer them to a more appropriate resource.

While immediate safety threats are always addressed, the current inability to provide deeper support including preventative supports to maintain or rapidly reestablish housing results in high recidivism in some cases. Anticipated Home Safe supports will allow for new collaboration with Housing/CoC and upstream, preventative interventions not funded or previously available to APS clients. It is anticipated that this collaboration and intervention will result in an overall reduction in recidivism and related costs. It's worth noting that the cost of recidivism impacts APS but also spans many other Departments and systems including Law Enforcement, Mental Health Departments and Emergency Services including hospitals, ambulance services, and Fire Departments.

**Yurok Tribal collaboration and anticipated caseload growth:**

Humboldt County contains 95,000 acres of Native American Tribal lands belonging to eight federally recognized tribes. DHHS administrative staff reached out to representatives from each Tribe, inviting them to collaborate in the planning and implementation of Home Safe to ensure services are accessible to Tribal communities. This is an open-ended invitation and will remain in place throughout the duration of the grant period. The Yurok Tribe has agreed to collaborate with Humboldt DHHS staff in the planning and implementation of Home Safe (see attached Letter of Support from the Yurok Tribe).

The Yurok Tribe is rich and vibrant but also experiences challenges with housing. Affordable housing and related housing resources are very limited in Humboldt County and even more so in the remote Yurok Reservation. More than a quarter of Yuroks 65 and older on the Reservation live below the federal poverty level. (U.S. Census Bureau, 2012-2016 American Community Survey 5-Year Estimates). We anticipate our developing partnership and the enhanced resources available through Home Safe will begin to build a bridge and compliment the Tribe's current Elders Advocate Program by increasing the number of APS referrals for Yurok Elders and vulnerable adults who are at risk of homelessness or are homeless as a result of abuse, neglect, and financial abuse or self-neglect. Twenty five percent of the direct financial assistance made available through Home Safe will be "earmarked" for Yurok clients.

LEAPS does not have the ability to track tribal affinity with regards to APS referrals. The caseload demographics are limited to race, and indicate that 6% of referrals are for persons identified as Native American. Humboldt County APS received an average of 105 referrals per month between April and September 2018, so an average of 6.3 for Native American individuals. Based on data compiled by the tribe, it is very conservatively estimated at least 84 Yurok tribal community members suffered from abuse or neglect over the past six months. This number supports topical data from APS Social Workers indicating the reporting rates within the Yurok Tribe have generally been low. With Home Safe funding, we expect the number of Yurok referrals to increase, which would increase the overall number of people who



will be served by the Home Safe program. It is difficult to estimate how much of an increase, but if we divide those 84 estimated abuse/neglect victims by 6 we get 14 per month. If we assume 10% of the caseload would be referred to Home Safe, that is 1.4 per month, or an additional 34 people. Accounting for the fact that only 73% of these individuals would require short-term intervention to re-establish or maintain housing, that is an additional 25 people.

**Target number of individuals to serve:**

200 estimated individuals to receive housing services

56 estimated individuals to receive referral services only

The Humboldt County Home Safe program aims to support the safety and housing stability of elders and vulnerable adults who have been referred to APS and are experiencing homelessness or are at imminent risk of homelessness due to abuse, neglect, self-neglect or financial exploitation. It will create and support new collaboration between APS and Housing/CoC programs. The grant will assist APS clients to maintain their housing or “rapidly re-house” by providing services including heavy cleaning/pest control or structural improvements to increase ADA accessibility, short-term rental or utility assistance, legal assistance and brief case management services. Home Safe will increase the County’s ability to provide preventative services, lowering recidivism and reducing the need for costly, county-funded crisis intervention services such as emergency and law enforcement response, emergency placement and care and hospitalization.

**2. Describe how your county or tribe plans to structure a Home Safe program that utilizes evidence-based practices in homeless assistance and prevention by responding to the items listed below. For each item, describe who will complete this function including if the function will be completed in-house or contracted out and whether the program will expand currently available services or if new services will be implemented. For in-house functions, describe the staff’s ability and background knowledge to be successful in completing these functions. For contracted functions, indicate the entity or entities with which your county or tribe is considering contracting. For areas that need to be further identified or developed, please indicate the steps that will be taken to achieve this area of program design and the timeline associated with each step.**

*2a. Describe your process for assessing each individual’s housing needs, including how your program has or plans to implement an assessment and prioritization tool for your Home Safe program, such as the Prevention Vulnerability Index-Service Prioritization Decision Assistance Tool (PVI-SPDAT), the VI-SPDAT, or other CDSS-approved assessment tool. Describe how this assessment and prioritization process will inform individual plans to assist the individual in meeting identified needs, consistent with the APS case plan. Describe how this plan will be developed with*

*client input as well as in coordination with a multidisciplinary team that may include housing program providers, mental health providers, local law enforcement, legal assistance providers, and others as deemed relevant by the adult protective services agency. For areas that will require further development, include the progress goals and anticipated timelines. For example, if the program will need to gain access to the assessment tool and train staff on how to use the assessment tool, include that level of detail and expected timeline for completion.*

**Response:**

**Current APS referral/intake process:**

Humboldt County follows standardized procedure to meet all mandated functions of APS. Housing needs are standardly screened for at intake and addressed during the subsequent investigation and assessment. Housing needs not identified at the intake stage are addressed when they become apparent during the course of the case. APS refers clients to the Community Switchboard for linkage to temporary shelter resources and agencies who assist with housing searches and rental applications. In emergency situations APS refers to the local Rescue Mission (night shelter) or provides short term assistance such as a motel room and when needed, emergency care providers. APS links clients, usually through a referral process, to other community resources. These include: In Home Support Services (IHSS), the Senior Resource Center, medical case management agencies such as Programs of All-Inclusive Care for the Elderly (PACE), and services to locate new housing such as Section 8 or relocation services through the Transportation Assistance Program (TAP). When clients lack capacity to navigate these systems, consultation and a referral to the Public Guardian are initiated.

**Proposed Home Safe Program structure:**

The Home Safe program will greatly enhance the services the county is able to provide, expand on the number of individuals served by local housing programs and increase the level of support they receive during this process. Increased funding to address housing needs will allow the county to more thoroughly respond to crises and provide earlier intervention to prevent crises from occurring. Equally important to financial assistance, Home Safe will build a much needed bridge between APS and the DHHS Housing Unit/CoC. Both programs are well developed but to date, a streamlined process and a “warm hand-off” for APS clients has not been developed. As a result, some of the most vulnerable people in our community are left to navigate the complex CoC with not enough support.

Also of great importance, The Yurok Tribe and APS intend to collaborate closely to plan and implement Home Safe. This is the beginning of what we hope will be a strong and lasting partnership aimed at keeping Yurok Elders safe and

well. The Home Safe planning period will be used to begin the development of this partnership which will be solidified over time.

**Program Development activities:**

APS and Housing/CoC will redirect existing staff duties and use related overhead costs (salary, benefits, office equipment, and so on) for the required match. The positions that will be redirected to Home Safe are: two Social Worker IVs (1.0 FTE), one Program Manager II (0.10 FTE), one Staff Services Analyst I (0.05 FTE), one Vocational Assistant (0.30 FTE) and two Office Assistants (0.20 FTE).

The Program Manager and Analyst will work closely with dedicated Social Workers and their Supervisors to develop appropriate policy & procedures for the assessment process. Humboldt County has adopted Housing First principles and our Housing/CoC were early adopters and champions of Housing First approaches. All APS workers will be trained or refreshed on Housing First approaches and methods and these will be a fundamental part of Humboldt's Home Safe program. APS is in the process of implementing Structured Decision Making (SDM). SDM will be utilized throughout Home Safe casework. Case management techniques specific to the Home Safe population will be reviewed and resources identified for the services the program intends to offer. Housing/CoC staff are trained and skilled users of the VI-SPDAT – this training and knowledge will be expanded to APS staff. These processes can begin as soon as funding awards are announced, and should take no more than 90 days to complete.

Office Assistants and Vocational Assistants will be trained on intake procedures for proper documentation and routing of potential Home Safe referrals. As client circumstances can change drastically during the course of an investigation and new needs and concerns can emerge, all Social Workers will receive basic Home Safe training so that they will have the ability to identify potential Home Safe applicants at any step in their investigative process. This process can begin after program policy and procedure are developed, corresponding training materials compiled, and existing core staff are trained. It will be completed by the July 1, 2019 implementation date.

Home Safe will fund one dedicated FTE 1.0 Social Worker III. This SW III will be a new addition to the APS team and will provide brief case management to clients referred to Home Safe. The SW will be trained to all APS policy & procedures, introduced to agency partners and community resources including Housing/CoC and Yurok Human Services staff, and oriented to the Home Safe program structure, housing first philosophy, SDM, and the VI-SPDAT. The hiring process is expected to be completed in late March, and full training completed by the July 1, 2019 implementation date.

**Home Safe program process:**

Services will begin with an APS referral. Intake workers will be trained to gather information about housing needs at initial referral and ensure detailed documentation is entered in the electronic case file. Supervisors will review cases and utilize Home Safe criteria to assign cases to the dedicated Home Safe Social Worker. The assigned Social Worker will engage the client, assess/investigate and plan interventions. The VI-SPDAT will be completed by the Social Workers during this phase of the case. Qualifying clients will be referred to the Home Safe program.

Clients requiring only one-time financial or brief assistance to stabilize or reestablish housing will remain assigned as APS cases and will receive appropriate in-house assistance including:

- Rental deposit/move in cost assistance.
- Arrears payments for rent and/or utilities.
- Housing stabilization such as heavy cleaning/pest control or structural improvements to increase ADA accessibility.
- Credit repair/budgeting assistance.
- Purchase of tangible items such as assistive devices or appliances to maintain independent living.
- Other services as deemed necessary which require short-term, minimal intervention.

Clients requiring a short period (1 to 3 months) to stabilize will be assigned to the Home Safe SW III for brief case management and linkage to the Housing Unit and CoC.

Humboldt County APS regularly utilizes a Multi-Disciplinary Team (MDT) process for high needs clients and has recently developed a specialized MDT for investigations that have risen to criminal cases, referred to as the Elder and Vulnerable Adults Services Team (EVAST). EVAST includes the District Attorney's office, other law enforcement officials and APS social workers and supervisors. These MDT processes will be expanded to include Home Safe. MDTs will review housing needs, case plan and provide brief case management through the CoC process. The Home Safe MDT will be attended by representatives from APS, DHHS Housing Services, and other persons working with the client in a professional capacity such as community and Tribal service providers, case managers, clinicians, medical personnel, law enforcement.

If the results of the investigation, MDT and/or VI-SPDAT indicate the client will require temporary short-term case management in order to acquire housing, the case will be assigned to a dedicated APS Social Worker III, and a Housing/CoC Social Worker for advanced Home Safe services which may include:

- Interim/temporary housing assistance.
- Housing navigation/search assistance.
- Enhanced case management/service coordination for mental health assistance, legal services, life skills training, conflict mediation/landlord engagement or other items as appropriate.

None of the services listed above should have an anticipated timeline of more than 6 months. Priority will be given to those cases with anticipated case closure/wrap-up of all services within 3 months. APS will continue to work with clients that require longer term supportive services and intervention, including housing. Unanticipated delays/events may require the extension of services, to be approved by the supervisor on a case-by-case basis. APS cases are required to remain open until the risk of harm is reduced and client is safe. Clients whose Home Safe services are discontinued due to timing out of the program will still remain assigned an APS Social Worker until the investigation is completed.

Humboldt County APS and DHHS Housing Unit staff are an outstanding team of professionals that are able to collaborate effectively with each other, develop positive inter-agency and outside partner relationships, and engage with clients in a constructive way. Many APS Social Workers hold Masters Degrees and/or have background experience with public service. They are familiar with County procedures and programs and skilled in safety planning and assessment techniques. DHHS uses UC Davis coursework for introductory and on-going training. The agency as a whole is committed to cultural humility and ensuring staff competency with regards to working with Native American partners and clients. All staff positioned in the Adult System of Care are supported and receive regular, high-quality supervision. In addition to utilizing this existing team, APS intends to hire a SW III who will be dedicated to Home Safe clients and bring knowledge and experience related to working with elders, vulnerable adults, and/or the homeless. They will be expected to demonstrate an ability to analyze situations and adopt effective courses of action, establish and maintain client rapport, have knowledge of interviewing techniques and problem-solving methodology, among other qualifications.

Humboldt County government is committed to creating opportunities for improved safety and health by focusing on prevention and moving beyond collaboration to align efforts and activities. Part of the County's Strategic Plan is to protect vulnerable populations and Housing First fits into this framework. County staff are truly passionate about helping people live better lives. The funding, resources and services available to Home Safe clients are valuable, but having a team of service providers who can empower, encourage and advocate for those clients, who will treat them with dignity and respect, that is priceless.

*2b. Describe the county or tribe's strategy for implementing: (1) housing navigation or search assistance to recruit landlords and assist individuals in locating affordable or subsidized housing; (2) enhanced case management when necessary; (3) mental health assistance, as necessary or appropriate; and (4) housing stabilization services including ongoing landlord engagement, case management, public systems, assistance, legal services, tenant education, eviction protection, credit repair assistance, life skills training, heavy cleaning, conflict mediation when necessary and appropriate, or other items the program identifies, as appropriate. For areas that will require further development, include the progress goals and anticipated timelines.*

**Response: DHHS has infrastructure that could rapidly and easily put services in place for elders and vulnerable adults by linking APS to the existing DHHS Housing Unit/CoC.**

Due to the relatively high number of unsheltered individuals experiencing chronic homelessness in Humboldt County, they have historically received priority for available housing funds. Other groups receiving specialized services and priority status are persons living with HIV/AIDS or a serious mental illness (SMI), as well as those who became disabled before the age of 18. There are numerous victims of elder or dependent adult abuse and neglect who are recently or imminently homeless and have mental health challenges not rising to the level of an SMI. There are those who became disabled later in life, or those with serious medical conditions not categorized as a disability. Home Safe funding would assist DHHS in filling a gap that exists in housing support for persons identified by APS that do not fall into the population groups currently being served.

Humboldt County DHHS is an integral part of the HUD Continuum of Care CA-522: Humboldt Housing & Homeless Coalition (HHHC). DHHS acts as the Collaborative Applicant in the annual CoC application and provides staff time, financial and operational support. The HHHC is a coalition of agencies, individuals, housing providers, businesses, health and education services, persons experiencing homelessness, advocates and other groups with interest in ending homelessness. The HHHC received its first HUD-CoC funding in 2004 and since then has received \$8.5 million for Humboldt County housing programs and services.

The HHHC has developed and implemented a Coordinated Entry System (CES). DHHS Mental Health (MH), Public Health (PH) and Social Services (SS) all participate with other local housing providers in the CES to select unhoused persons of highest priority as vacancies, particularly in Permanent Supportive Housing (PSH) units become available. Priority is determined by VI-SPDAT, intake assessment, Chronically Homeless (CH) status, number of encounters with hospital emergency departments, mental health facilities such as the Crisis Stabilization Unit (CSU)/Semper Virens (SV), and law enforcement. A CES meeting is held each month for housing service providers to consider the group with

highest priority for PSH units. At this meeting, other factors may be considered by the group: current health status; recent changes in family, income, health or housing situations; and ability to maintain independent living, with support.

DHHS PH houses CH persons living with HIV/AIDS in its PSH Project, the HIV/AIDS Re-Housing Team (HART), with supportive services provided by PH Health Education Specialists. DHHS MH houses CH persons with serious mental illness in its PSH Project, Humboldt Housing, and provides supportive services by assigning MH Clinicians, Case Managers and Peer Specialists to clients in PSH. DHHS SS provides housing and support to a variety of individuals and families as part of its CalWORKs Housing Action Program (HAP), Housing and Disability Advocacy Program (HDAP), annual Winter Shelter voucher program and provides some assistance to families in the CWS system.

DHHS operates the Housing Unit as part of Integrated Services. The Housing Unit adheres to the principles of Housing First in all operations. This Unit develops and maintains relationships with internal partners, landlords and housing developers and directly assists CH persons with serious mental illness by outreach and engagement, finding housing and financial assistance, providing housing stabilization services, and working with housing developers to build new PSH units in the County and securing financial subsidies to provide Tenant Based Rental Assistance (TBRA). The Housing Unit operates the HUD CoC Rapid Rehousing project known as Best Chance and manages housing funding from other sources including County of Humboldt and City of Eureka, private foundations and Partnership Health Plan of California. The Housing Unit has worked with more than 60 property owners and managers to secure quality affordable housing on the private market. There are more than 140 persons with their own apartments identified as PSH that receive ongoing services to assure their housing is retained. All tenants have leases in their own name and rent is subsidized to limit their personal rent expense to not more than 30% of their income. Tenants pay their portion of rent to their landlord and DHHS sends subsidies directly to the landlord. Security deposits are covered for eligible persons through the multiple sources of funds available.

Housing staff provide assistance to persons seeking housing by:

- Assisting the client in securing needed documents such as birth certificates, photo ID, proof of income, verification of disability and length of time homeless
- Enrolling the person in Homeless Management Information System (HMIS) and CES if they are not already on the list
- Maintaining a supply of current applications for all subsidized housing in the County
- Aiding the client to complete and pay for applications and credit checks
- Assuring the client gets on Housing Authority rental and Section 8 lists and receives copies of notifications to be sure client is aware

- Providing education on tenant/landlord rights and responsibilities and preparation for rental interviews with prospective landlords
- Assisting with credit repair if identified as a barrier to obtaining housing
- Encouraging landlords to accept clients and maintaining good relationships with them by being available for problems that may develop and assisting in resolution
- Working directly with developers to build more affordable PSH. 40 new units have been completed so far and 156 new units funded and in pipeline for completion by early 2020; will apply for No Place Like Home and other funding available.

Staff aid participants in retaining housing by:

- Providing case management services
- Home visiting to assure maintenance needs are resolved and the client is secure and safe
- Deep cleaning and damage repair when necessary
- Life skills training
- Providing access to social and recreational activities and volunteer opportunities
- Connecting participants to community supports such as the Food Bank, clinics and primary health care, support groups, senior services, legal services, PACE, and community wellness activities
- Mediating conflicts with other residents, neighbors and property managers
- Assist the participant in obtaining household supplies and furniture
- Assure understanding of lease terms and violations that may lead to eviction
- Helping participants maintain and/or increase income.

*2c. Describe your procedures for determining the need for and providing housing-related financial assistance including short-term housing assistance, security deposit assistance, utility payments, moving cost assistance, and interim or temporary housing assistance. With respect to financial assistance, describe: (1) the anticipated maximum and average amount of financial assistance to households; (2) the anticipated maximum and average duration of financial assistance; and (3) any criteria you will use to evaluate continued participation in, or renewal of, financial assistance. For areas that will require further development, include the progress goals and anticipated timelines.*



**Response: Referrals from APS Home Safe will have access to already established sources of rental assistance and others in the process of development that will be available in late Summer 2019.**

The DHHS Housing Unit/CoC currently participates in the CES, enrolls individuals into HMIS and administers the VI-SPDAT, as needed. All DHHS Adult Services programs can do this for their clients experiencing homelessness, as can other community service providers. Persons experiencing homelessness can get enrolled by dialing 2-1-1 to reach a community switchboard and complete an intake process over the phone. Enrollees are ranked into priority groups depending upon intake, assessment and score on the VI-SPDAT. When vacancies occur in PSH, candidates are drawn from the highest priority pool (with CH currently receiving the highest priority) by Housing/CoC staff. Since the intake assessment and VI-SPDAT are self-reported, the first step is verification: documenting the level of need and determining if the participant falls into any of the current populations that have funding to support their rent and services. These are composed of: persons homeless with a serious mental illness, persons homeless with HIV/AIDS, homeless families that are eligible for CalWORKS and persons homeless with a disability currently receiving General Relief while awaiting decision on SSI or SSDI award.

Even if an individual is not eligible for funding, Housing/CoC staff may still assist with the housing search and gathering information such as the applicant's income, proof of disability, documentation of CH and housing history to assist in determining the level and type of support needed. Security deposits are universal for all participants if needed. Rental support is indicated for clients in the target groups that are also low income: 30% of Area Median Income. The amount per month is calculated in the same method used by the Housing Authority and assures that no participant pays more than 30% of their income for rent. All units supported must rent at or below the annual Fair Market Rent schedule for Humboldt County. Since the County must rely on the private market for all units, all participants are also screened by the landlord or property manager. The landlords DHHS has developed relationships with typically will overlook some problems in credit and rental histories because they know Housing/Coc staff are available to assist with any problems that might develop.

Persons using HUD-funded PSH have open ended dates of assistance that only end if client is evicted for violating terms of lease, passes away or moves out of County, accepts alternative housing, abandons unit without notification for more than 30 days, or receives a Housing Authority rental or Section 8 certificate. All housing participants are re-evaluated annually for continued need and level of support.

The Rapid Rehousing program, Best Chance, has a maximum period of assistance of two years or until expiration of HUD grant assistance. Persons can be assisted by Best Chance who are CH with any disability, not only SMI or

HIV/AIDS. Some participants in other funding programs will be given rental assistance for periods of 3 to 6 months with possible extension when circumstances warrant.

Other financial assistance to help clients into housing includes paying off or working with creditors to clear debt that creates a barrier to acceptance by the landlord. Typically, this is limited to payment of past due utility bills so services can be started in their new home. Help is provided for moving costs such as labor, dump fees and household cleaning equipment and supplies.

The above processes can be replicated with a Housing Social Worker dedicated to processing Home Safe referrals. Those individuals identified as needing case management and supportive services for longer than 3-6 months may be connected to PSH or other housing interventions within the community, while still assigned to an APS Social Worker for the duration of the abuse/neglect investigation.

**3. Describe the current ability or plan to maintain strong partnerships in order to ensure that participants receiving Home Safe services have access to a broad range of existing social and homeless services. Include information on how individuals who require longer-term assistance will be referred to community partners who will provide higher levels of housing intervention. For areas that need to be further identified or developed, please indicate the steps that will be taken to achieve this area of program design and the timeline associated with each step.**

*3a. Describe the range of services currently available to APS clients in your community, including services that are available to specifically address needs related to the participant's housing crisis, such as emergency shelters, residential centers and in-home protection. Provide as much detail as possible including number of cases utilizing these services and amount of funds spent to do so, if available. Also include any rapid rehousing and permanent supportive housing programs or resources available to the Home Safe population in your community.*

**Response: Home Safe funding will help to provide short-term case management services to assure that participants have support to retain housing.**

Most rapid rehousing and permanent supportive housing programs currently available to APS clients are accessible to populations that have funding streams that can provide the supportive services needed to assure housing retention: persons with serious mental illness or HIV/AIDS, families eligible for CalWORKS and persons on General Assistance that are in the SSI process. APS referrals that fall into these groups can receive housing assistance if income eligible.

There are two Rapid Rehousing projects operating in the County. One, Best Chance, is operated by DHHS. The second is operated by Arcata House Partnership, a local nonprofit, and uses Emergency Solutions Grant funding for rental and deposit support. Persons referred by APS that are disabled and income eligible may be assisted by these programs. Arcata House Partnership operates a 20-bed secular shelter with 24/7 staffing that is available for persons referred by APS when beds are vacant. Eureka Rescue Mission, a faith-based shelter and transitional housing program, has accepted APS referrals until other housing can be secured. These are the only emergency shelters available in Humboldt County.

DHHS will be using some of the recent State funding dedicated to reducing homelessness to fill in gaps that occur when APS referrals are not Home Safe eligible or members of other targeted groups. Specifically, HEAP funds will be used to support security and utility deposits, short term rental assistance until HEAP ends in 2021, rental application and credit check fees, assistance with housing search and securing documentation as needed. These funds will be available in January 2019 and would already be in place if Home Safe funding is awarded.

The DHHS Housing Unit is working with a local housing developer, Danco Properties, to complete a 27 unit project of individual small 1 and 2 bedroom homes. It is anticipated this will be ready for occupancy in late 2019. The unit is also working with the Eureka-Humboldt Housing Authority on a project-based Section 8 voucher program that could support APS referrals of any age with long term rental assistance. Similarly under development is a 40 unit senior housing project that could accommodate APS referrals that are above age 62.

Other programs APS clients in the midst of a housing crisis may be referred to are IHSS, the Senior Resource Center, medical case management agencies such as PACE, or relocation services through the County Transportation Assistance Program (TAP). APS may also cross-report to Law Enforcement and collaborate with the DA's office to address criminal cases.

Humboldt County is a community of "people helping people" and there are numerous non-profits, government organizations and other service organizations accessible to APS clients as well as others in-need. These include crisis services such as Humboldt Domestic Violence Services, the Victim Witness Program and 2-1-1 Humboldt; Advocacy, Education, Employment, Financial & Legal Services such as the California Dept of Veterans affairs (CalVET), College of the Redwoods, Job Market/Employment Development Dept. (EDD), Social Security Administration, Family Law Self-Help Center; caregiving services such as Redwood Coast Regional Center (RCRC), Adult Day Health Care of Mad River and Elite Caregivers; end of life services such as Hospice of Humboldt and Resolutions Care, food resources

such as free dining facilities, food pantries and meals on wheels; medical resources such as United Indian Health Services, Making Headway Center for Brain Injury Recovery; and many more.

*3b. Describe how the Home Safe program plans to be part of the greater homelessness system in your community by working in collaboration with the homelessness CoC to ensure that homeless APS clients in need of supportive housing are referred to the local homeless CoC for appropriate services.*

**Response: Home Safe presents an opportunity to build on existing relationships between Humboldt County APS and DHHS Housing/CoC and create formalized collaboration and linkage to better serve the community through housing and safety.**

Humboldt County has a well-developed coordinated entry system, managed by the local CoC, the Humboldt Housing and Homeless Coalition (HHHC). Both Humboldt County APS and Housing/CoC are rapidly growing program areas that serve some of the most vulnerable people in our county. HHHC holds regular meetings which are comprised of several organizations, service providers, developers, government agencies and leaders, faith-based organizations and community members dedicated to end homelessness. One of the goals for the Humboldt County Home Safe program is for APS to have a more visible presence with this group. APS staff would be attending HHHC meetings and providing input on the needs of elders and vulnerable adults. This will establish relationships and develop processes to assist those who do not qualify for existing programs. Humboldt County DHHS already provides administrative support to the HHHC through the Housing Unit. These staff members have been and will be engaged throughout the development of this project, and will be rededicating a member of their staff in order to focus on Home Safe referrals.

*3c. Describe the status of your community's coordinated access/entry system, how the Home Safe program plans to integrate into it and how you envision leveraging current resources to maximize the benefits available to APS clients who are homeless or facing imminent risk of homelessness.*

**Response: Humboldt County DHHS is an integrated agency. Positive working relationships between the three branches -Social Services, Mental Health and Public Health- are already in-place.**

As a rural county with limited resources and a population spread over a large geographical area, it is imperative that we be multi-faceted, develop inter-agency partnerships and collaborate with outside agencies in order to meet the needs of our community. The Home Safe program will follow this model to increase APS collaboration with Housing/CoC. Existing Housing/CoC staff are experienced in assisting individuals with SMI, as well as children and families, through the CES. Focusing on elders and vulnerable adults suffering from abuse and/or neglect will be a new development. It is

anticipated that those clients at imminent risk of homelessness may be served in-house at APS without needing to access the CES beyond the initial intake process. These clients will access Home Safe funding for services such as heavy cleaning, arrears for rent/utilities, specialty household equipment/modifications, etc. Clients referred to Housing/CoC will be those recently homeless needing assistance to search for housing. Historically these APS clients have had a difficult time navigating CES, and will benefit from Social Workers able to provide case management services.

**4. Describe the program's capacity to properly collect and provide qualitative and quantitative data and track progress and outcomes related to housing stability as well as the county or tribe's ability to participate in CDSS coordinated, research and evaluation projects. For areas that need to be further identified or developed, please indicate the steps that will be taken to achieve this area of program design and the timeline associated with each step.**

*4a. Describe the program's ability to collect and report robust data on program referrals and participant information including but not limited to demographics, housing needs, service receipt, and housing outcomes throughout Home Safe.*

**Response: Humboldt County APS and Housing/CoC has access to the technology to collect robust data.**

Humboldt County DHHS has a Research and Evaluation Unit that is able to consult and assist with the development of data tracking tools such as custom Excel spreadsheets. We also have a large Information Technology & Systems staff able to assist with the installation of software, and the development of specialized Outlook mailboxes or shared network folders that will increase the ability of program staff to communicate and share data. All staff receive annual training on confidentiality and appropriate management of Personal Healthcare Information.

HMIS is utilized by CES, which is managed by the Housing Unit. There is a community switchboard available for fielding calls, although Housing staff can also receive referrals directly from APS. The Coordinated Entry System within HMIS has the ability to track data such as demographics, housing needs, service receipts, and housing outcomes and can be made accessible to the APS staff dedicated to Home Safe. Currently, the system is only used for people who are literally homeless. The system does have the ability to track data for people who are imminently homeless and existing staff would only need to be trained on how to complete the intake process for that population.

LEAPS is the case management software used by APS, managed by JUMP Technology. Developers have communicated that more reporting functions will be added during the development phase of Home Safe for those counties receiving funding. The JUMP team is very responsive to individual requests for assistance and it is anticipated

they will work closely with counties to ensure their needs are met regarding data collection for program referrals and participant information. The JUMP team also provides trainings and other resources when any changes/updates to the program are made. Given this, we do not anticipate problems integrating any new processes into staff's current work flow.

*4b. Describe the program's ability to complete and submit regular monthly reports in a timely and accurate way, understanding the data will be used to evaluate program performance and outcomes.*

**Response: Humboldt County APS and Housing/CoC has existing staff who can rededicate their efforts and skills to serve the Home Safe population.**

The Analyst working on behalf of Home Safe has extensive experience collecting program data for monthly reports, as do most analysts employed by DHHS. DHHS Adult Services encompasses not only APS but In-Home Supportive Services (IHSS), the Veterans Services Office, and Public Guardian. Information on these programs is compiled by the Analyst and maintained regularly for the purpose of generating a detailed monthly report composed of caseload and compliance statistics, funding/staffing changes, clerical activity, trainings completed, and more. Individual programs also receive monthly reports that include statistics and progress reports for each worker. Most data is obtained by running reports similar to the SOC 242 in case management software programs such as LEAPS and CMIPS II, or by downloading it directly from the state. Individual programs will also compile data on spreadsheets designed specifically for this purpose and submit to the Analyst on a monthly basis. The data is meticulously analyzed and any discrepancies are researched and addressed with supervisors so as to provide the most accurate picture of program performance and outcomes. Humboldt County APS and Housing/CoC are confident that these same procedures can be adopted in order to keep the state apprised of the Home Safe program's progress.

*4c. Describe the program's ability to execute necessary Data Use Agreements (if applicable) and/or contracts to effectively work with the department and program evaluators.*

**Response: DHHS has the ability and experience to execute data use agreements and contracts.**

DHHS has units serving our integrated system that include Information Systems, Contracts, Quality Assurance and Compliance. DHHS has executed several agreements for data sharing with local health and service providers including County-wide HMIS and ActMD, a shared case management platform, and is part of the local Health Information Exchange managed by the North Coast Health Improvement and Information Network. DHHS contracts with Service

Point for HMIS and licenses are distributed throughout DHHS units that interact with persons experiencing homelessness.

*4d. Describe your plan for utilizing a Homeless Management Information System (HMIS) to both input and extract data. Explain whether or not the county or tribe currently has access to the local HMIS and if not, how and when the county or tribe plans to get this access prior to the implementation of their Home Safe program.*

**Response: Home Safe project staff can be easily added to the already operational Humboldt County HMIS system and reports specific to APS referrals can be extracted.**

Humboldt's HMIS stores data about Humboldt's CoC homeless population, helps to understand who are the homeless, if/how that changes over time, how the CoC can address the needs of the homeless, and how the CoC, over time can reverse the homeless trend. HUD requires that any entity receiving a HUD grant must use an HMIS.

The HHHC uses a HUD-approved data collection system to record data from clients using the services of agencies funded by HUD CoC or Emergency Solutions Grant (ESG) grants. Some HHHC organizations not funded by HUD that provide services to homeless individuals and families use this data system voluntarily to provide a more comprehensive picture of needs and services.

The HHHC uses a system known as ServicePoint (Bowman) that is used by many other CoCs in the country and in California. HUD CoC funds pay for the use of this system and for costs of implementation, staff training, and reporting. Any agency that provides services to end homelessness and agrees to enter data is provided with computer equipment, training, licenses and software necessary to participate. DHHS accepts and manages these funds for the HHHC and contracts with Bowman for the software, and with a Systems Analyst for daily management and support, training, reporting and direct contact with Humboldt County HHHC agencies.

The HMIS currently implemented across Humboldt County's CoC allows HHHC to:

- Collect system-wide, standardized data for accurate, real-time reporting on the total number of homeless individuals in Humboldt County, the length and causes of their homelessness, and their demographic characteristics and needs;

- Better understand people's longitudinal homeless experiences by tracking the services they receive throughout the duration of their homeless episode(s);
- Enable agencies to better meet clients' needs by improving service co-ordination, determining client outcomes, providing more informed program referrals and reducing their administrative burden;
- Improve research for evidence-based decision making, such as program design and policy proposals; and
- Help shorten the length of time people are homeless and direct them through the system of care more efficiently and with more understanding;
- Provide a Coordinated Entry System (CES).

The system maintains client confidentiality but allows for aggregate reporting by the agency. Eventually, all service providers can be linked and able to share information about clients in real time. This will increase the ability to provide coordinated care and assure that services are provided to those most in need and not duplicated. Full implementation and information sharing also enhances the ability for coordinated intake and assessment, one of the new requirements for CoCs under the HEARTH Act.

All DHHS programs have access to HMIS and more can be added by simply purchasing additional licenses. DHHS Housing Unit staff are highly skilled in use of HMIS and available to train and assist new users. Data can be entered and reports can be produced at a project level or for all or groups of selected programs. The Housing Unit regularly issues reports using data extracted from this system.

DHHS Housing and Adult Services also use a robust care coordination software package known as ActMD. This program allows all persons involved in providing services to a particular client to communicate in real time simultaneously about activities involving the client. This encourages efficiency because tasks can be combined and shared, a record is kept of what has been done thus far and what still needs attention. Far fewer services are duplicated. ActMD currently provides “alerts” to assigned care managers when their client enters the psychiatric hospital or the crisis stabilization unit. Soon, “alerts” will also be provided if a client receives emergency care at a hospital or is admitted to a hospital. In the future, the system can issue “alerts” if a client enters jail. ActMD also acts as a repository for all forms (blank) used by various programs, blank rental applications for all subsidized housing and for frequently used completed documents that clients need such as copies of photo ID, proof of income, master rental applications,



and birth certificates. The program is web-based and can be easily accessed when doing work out of the office by a licensed user. Home Safe staff will be licensed and added to ActMD for care coordination purposes of APS referrals.

**5. Outside of items identified above, describe any other steps that will need to be taken in order to begin full program operation on or before July 1, 2019. For example, include items related to securing/identifying match funds, developing or finalizing formal partnerships with local housing agencies, budget development, Board of Supervisor approval, (if applicable) or any additional requirements necessary to establishing a new county or tribe program. For each step, identify an appropriate timeline. Indicate if you believe your agency will be able to begin serving clients prior to July 1, 2019, and if so, your expected date of planned implementation and level of services to be provided.**

**Response: Additional activities conducted during the development phase will include:**

- 1. Board of Supervisors approval** – The Humboldt County Board of Supervisors is required to approve that the Director may accept and sign off on any grant awards over \$10,000. This process includes review by the Contracts Unit, adding an agenda item to a scheduled board meeting and obtaining signatures from the County Assessor's Office. This process can begin as soon as funding awards are announced, and should take no more than two months to complete.
- 2. Reaching out to local tribes for collaborative opportunities** - Humboldt County DHHS regularly partners with local tribes to provide culturally appropriate services. APS has reached out to representatives from each of these tribes inviting them to collaborate with our county on making Home Safe services more accessible to tribal communities. We will extend this invitation throughout the duration of the grant. We are hopeful for the opportunity to work with local Tribes and the Yurok Tribe has expressed interest (See attached letter of support). This will be new relationship building for APS specifically and will take time but will not prohibit implementation. Should other Tribes express interest – at any point – we will welcome the opportunity for relationship and collaboration.

**6. Please complete Funding Request, Budget Details, and Director/Tribal Government Certification (Attachment Four).**

**7. Please complete the attached Template to Demonstrate Base Funding (Attachment Five).**



**HOME SAFE PROGRAM  
FUNDING REQUEST, BUDGET DETAILS, AND CERTIFICATION**

**I. HOME SAFE PROGRAM CONTACT**

*Please complete the information below for the appropriate point of contact for the Home Safe program application. This will be CDSS' first point of contact for all questions.*

County/Tribe Name and Agency: Humboldt County DHHS – Adult Services

Contact Name and Title: Amanda Winstead, Deputy Director, Adult Services

Address: 824 Harris St. Eureka, CA 95501

Email: [awinstead@co.humboldt.ca.us](mailto:awinstead@co.humboldt.ca.us) Phone: (707)268-2990

**II. PROGRAM FUNDING REQUEST**

*Please fill out the total amount of funding the county or tribe is requesting from the State, the total amount of match and the total program budget for the duration of the program (beginning with program planning and implementation through June 30, 2021).*

Program Funding Breakdown	
Total State Home Safe Funding Requested	\$ 671,696.70
Total County/Tribe Home Safe Funding Match	\$ 671,696.70
<b>Total Program Funding (add state and match funds)</b>	<b>\$ 1,343,393.40</b>
Estimated total number of individuals that will be served by Home Safe with the total funding (state and match funds)	256
Amount of the total program allocation that will be needed for the <i>Program Development Phase</i> <sup>^</sup>	\$ 9,698.78

<sup>^</sup>Program Development Funds are a subset of the total program allocation and will be made available to approved programs upon notification of the Home Safe allocation amount. Include details in your application, including an estimated cost breakdown for development activities, and describe what the county/tribe plans to do with these funds to support program development activities" (e.g., staffing, contracts, HMIS access, etc.). See Attachment Two for additional details.

**III. COUNTY WELFARE DIRECTOR AND/OR TRIBAL GOVERNMENT CERTIFICATION**

**I certify that the County/Tribe will administer the Home Safe Program pursuant to the conditions set forth by the California Department of Social Services. I certify that the information completed above and attached is true and correct.**

Print Name: Connie Lee Beck

Signature: 

Date: 12-3-18

**A. Anticipated Home Safe Program Development Phase Budget**

Complete amount of funding the Home Safe program plans to budget for each category in bold below.

	Match Funded Home Safe	State Funded Home Safe
<b>Staff Time</b> (e.g.: development of formal contracts, program policy development, county counsel time, staff training, etc.)	<b>See below narrative</b>	
<b>Software</b> (e.g.: HMIS, assessment tools, other tracking software, etc.)		<b>Total \$75.00</b>
<b>Other</b> (e.g.: development of outreach and marketing materials, consultant fees, contracted costs associated with program development, etc.)		<b>Total \$9623.78</b>
<b>Total Amount</b>	<b>\$0.00</b>	<b>\$9,698.78</b>

\*\*\*Humboldt County DHHS will utilize existing staff during the development phase and absorb any associated costs. The new SW III's start date is anticipated for late-March, but the employee will be receiving general APS training during the second quarter of the development phase and not begin work on Home Safe until implementation.

**B. Anticipated Home Safe Program Operation Budget**

Complete amount of funding the Home Safe program plans to budget for each category in bold below.

	Match Funded Home Safe	State Funded Home Safe
<b>Administration &amp; Evaluation</b> (e.g. program management, overhead costs, benefits, data tracking, evaluation activities)	<b>Total: \$150,841.56</b>	<b>Total: \$23,123.80</b>

<b>Housing-Related Case Management</b> (e.g. housing case managers, eviction protection/legal aid, housing navigation services)	<b>Total: \$396,063.94</b>	<b>Total: \$158,799.12</b>
<b>Financial Assistance</b> (e.g. arrearages, short-term rental support, deep cleaning, temporary housing)	<b>\$124,791.20</b>	<b>\$480,000</b>
<b>Total Amount</b>	<b>\$671,696.70</b>	<b>\$661,922.92</b>

**C. Total Anticipated Home Safe Budget**

	Match Funded Home Safe	State Funded Home Safe
<b>Total of A Plus B (above)</b> (Note: Match funded portion must be equal to or greater than state funded portion)	<b>\$671,696.70</b>	<b>\$671,696.70</b>

**D. Target Number of Individuals to Serve**

Estimated number of individuals to receive housing services	<b>200</b>
Estimated number of individuals to receive referral services only	<b>56</b>
<b>Estimated total number of individuals to serve</b>	<b>256</b>

**E. Match Funds Details**

List each source of match funding below.

	Source (Name of Entity)	Type (cash, in-kind, etc.)	Description of match	Amount
1.	DHHS	In-Kind	Salary & benefits of rededicated staff	<b>\$474,033.34</b>
2.	DHHS	In-Kind	Overhead & other expenses	<b>\$72,572.16</b>
3.	DHHS	In-Kind	Program Specific Software	<b>\$300</b>
4.	DHHS	In-Kind	Direct Program Costs/financial assistance	<b>\$124,791.20</b>

	Source (Name of Entity)	Type (cash, in-kind, etc.)	Description of match	Amount
5.				
6.				
<b>Total Amount of Match</b> <i>Total amount should be consistent with match amounts completed on pages 1 and 2.</i>				<b>\$671,696.70</b>

Home Safe Program  
Template to Demonstrate Base Funding (Supplement not Supplant) Requirement

County or Tribe Name: Humboldt County DHHS - Adult Services

County/Tribe Contact Name and Phone Number: Amanda Winstead  
Deputy Director, Adult Services  
(707)268-2990

The purpose of this template is to identify the funds expended by the county or tribe during Fiscal Year (FY) 2017-18. This information will be used to determine the base funding relevant to the Home Safe Program, pursuant to [Welfare and Institutions Code section 15771\(f\)](#).

**Instructions:** Use the table below to **document amounts expended by the county or tribe during FY 2017-18 for the purposes identified below**. Include amounts that meet ALL three criteria below:

- Funds expended on clients who would have been Home Safe eligible participants if the Home Safe Program was available; and
- Are related to the provision of services to elder and dependent adults who experience abuse, neglect, and exploitation and otherwise meet the eligibility criteria for adult protective services; and
- For the purpose of providing housing-related supports to eligible individuals.

Counties and tribes shall provide the current population served, the current activity, expenditure amounts spent on the activity in FY 2017-18 and the program code utilized, if applicable. Refer to Attachment One for a description of the eligible population and definition of services. An example is provided in the first row, for your reference.

Even if a county did not expend funds on Home Safe related activities in FY 2017-18, this attachment must be submitted with “zero” dollars as verification that the county completed this analysis.

Current Population Served	Current Activity	Expenditure Associated with Population and Activity for FY 2015-16	Program Code Utilized to Claim Expenditure (if applicable)
<b>Example:</b> Adult Protective Services clients	APS – Case Management	\$10,000	Extraneous (if county funded); PC 570 (if 2011 realignment funded)
Adult Protective Services Clients	APS – Emergency Assistance/short-term housing assistance	\$5,455.21	PC 570
Adult Protective Services Clients	APS – Emergency Assistance/short-term care provider	\$1,332	PC 570

<b>Current Population Served</b>	<b>Current Activity</b>	<b>Expenditure Associated with Population and Activity for FY 2015-16</b>	<b>Program Code Utilized to Claim Expenditure (if applicable)</b>

\*\*\*Humboldt County APS does not have any programs in-place similar to Home Safe. We have not yet been tracking specific expenses for recently and imminently homeless individuals. Any funds expended for the purpose of providing housing-related supports to APS eligible individuals come out of the County's very limited Emergency Assistance budget. The majority of clients who utilize these services are high-needs and have required longer-term case management services. They would not be ideal candidates for the Home Safe program.





# YUROK TRIBE

190 Klamath Boulevard • Post Office Box 1027 • Klamath, CA 95548

November 29, 2018

Will Lightbourne, Director  
California Department of Social Services  
Housing and Homelessness Bureau  
744 P Street Sacramento CA 95814

Mr. Lightbourne:

I am writing to express the Yurok Tribe's support for the Humboldt County Department of Health and Human Services (HHS) Adult System of Care Department's application for funding under the CWDA Adult Protective Services Home Safe Program.

Despite the strong Yurok cultural value of respecting and caring for our Elders, abuse and neglect of Elders and dependent adults has increased, due largely to epidemic levels of illicit and illegal drug use in our communities. In 2017, as part of the strategic planning process for the Yurok Tribe's Comprehensive Victims Assistance Program, the Tribe conducted a community needs assessment survey. In that survey, ten percent of respondents indicated that either they themselves, a family member or a friend had been a victim of elder abuse within the last six months. 28.5% of respondents reported that Elder Abuse was the greatest safety concern within the tribal community. In recent years, homelessness among elders and dependent adults has become a significant problem for the Yurok Tribe. Sadly, this situation is not unique to the Yurok Tribe—the problem exists in many native communities in Humboldt County.

Humboldt HHS Adult System of Care Department is committed to using a significant proportion of this funding to prevent and address homelessness among elders and dependent adults in Native American communities in the County. The Tribe and Humboldt HHS will collaborate on the planning and implementation of the Home Safe Program to ensure that the program and staff are culturally competent to work in Native American communities.

Over the years, the Yurok Tribe and Humboldt County have worked to develop collaborations in areas of mutual interest. Yurok Tribal Court, under Judge Abby Abinanti has forged strong working relationships with Humboldt County Law and Justice Departments, including a Joint Powers Agreement with Humboldt Superior Court establishing the first joint jurisdiction dependency court in California. We see this grant as the first step in building a long-term partnership with the Humboldt HHS Adult System of Care Department.

Thank you for your consideration of this proposal.

Sincerely,

A handwritten signature in dark ink, appearing to read "Joseph L. James", with a stylized flourish at the end.

Joseph L. James, Chair  
Yurok Tribe