COUNTY OF SAN LUIS OBISPO
DEPARTMENT OF SOCIAL SERVICES

FY 2022 HUD CoC Program – Supplemental Application (Renewals, Renewal/Expansions, New Bonus Projects)

On August 1, 2022, the U.S. Department of Housing and Urban Development (HUD) released the Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care (CoC) Program Competition.

The County of San Luis Obispo is requesting proposals for the FY 2022 Continuum of Care Program competition administered by HUD, and will be accepting applications for renewal projects, as well as new bonus funding projects.

All FY22 Continuum of Care Program applicants will need to submit a supplemental application in addition to the HUD application submitted in e-snaps.

Please submit Supplemental Applications by email to ss_homelessgrants@co.slo.ca.us or deliver to George Solis at the County Department of Social Services, 3433 S. Higuera, San Luis Obispo, CA. Both the esnaps and Supplemental Application must be received no later than **Wednesday, August 31, 2022, at 5pm**

Additionally, additional documents described on page 13 of this RFP must be submitted by email or in person no later than August 31, 2022.

I. PRIMARY APPLICANT INFORMATION

Organization Name	Community Action Partnership of San Luis Obispo County, Inc. (CAPSLO)
UEI Number	GBL8FWWVCLC5
Contact Person/Title	Elizabeth "Biz" Steinberg/CEO
Phone Number	(805) 544-4355
Email	esteinberg@capslo.org
Address	1030 Southwood Drive
City, State, Zip	San Luis Obispo, CA 93401

II. PROJECT

Project Name	
Application Type	◯ Renewal ◉ Renewal Expansion ◯ New Bonus Project (Non DV Bonus Project)

III. EXPERIENCE

1. **Describe the experience of the applicant and sub-recipients (if any) in working with the proposed population and in providing housing similar to that proposed in the application.**
See attachment E.
2. **Describe experience in effectively utilizing federal funds including HUD grants and other public funding, including satisfactory drawdowns and performance for existing grants as evidenced by timely reimbursement of subrecipients (if applicable), regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants.**
See attachment E.
3. **What is the date of the organization's most recent audit?** *(Attachment requirement)* *Please submit a copy of the organization's most recent audit by email (ss_homelessgrants@co.slo.ca.us) or in person to George Solis at DSS no later than August 31, 2022.*
See attachment A.
4. **Housing First and/or Lower Barrier Implementation** *(Attachment requirement)* **Describe experience with utilizing a Housing First approach. Include:** **1) eligibility criteria;** **2) process for accepting new clients;** **3) process and criteria for exiting clients.** **Must demonstrate there are no preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, self-disclosed or perceived sexual orientation, gender identity or gender expression.** **Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure that project participation is terminated in only the most severe cases.** *Existing projects should submit a copy of the project's relevant policies and procedures by email (ss_homelessgrants@co.slo.ca.us) or in person to George Solis at DSS no later than August 31, 2022.*

See attachment E.

5. **Describe how Housing First protocols will be incorporated into the proposed project and what will you do to ensure that people can succeed in programs that cannot have service participation requirements or prerequisites.** *Housing First is a model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions (such as sobriety or a minimum income threshold). Transitional housing and supportive service only projects are considered using a Housing First model for the purposes of this application if they operate with low barriers, work to quickly move people into permanent housing, do not require participation in supportive services, and, for transitional housing projects, do not require preconditions for moving into the transitional housing (e.g., sobriety or minimum income threshold) but do provide or assist with access to such supportive services if needed and requested by program participants.*

The CES is Housing First oriented, individuals are quickly housed without preconditions or service participation requirements. CES does not screen people out for assistance due to perceived barriers to housing or services, including, but not limited to, too little or no income, active or a history of substance use, domestic violence history, resistance to receiving services, the type or extent of disability-related services or supports that are needed, history of evictions or poor credit, lease violations or history of not being a leaseholder, or criminal record – with exceptions for state or local restrictions that prevent projects from serving people with certain convictions. All participating agencies are adherent to this approach. As CES expands to additional agencies, CAPSLO will provide targeted technical assistance to ensure its programs align with this approach.

In addition, the ensuring that individuals can be linked successfully with housing resources such as RRH and PSH, they are also linked with wraparound services throughout the housing and stabilization process. Often, the agency that routed the individuals to housing will coordinate with the households, landlord, and/or other housing providers to ensure that they can maintain the housing and increase linkages to supportive services while in housing. One such example is the partnership of THMA and other providers. TMHA provides wraparound services for their clients before and after housing placement. When they are provided with a CES referral for housing, the referring agency works with TMHA to ensure goodness of fit for housing and provides additional support for clients while in housing by providing any elected resources to continue housing stability, such as legal assistance, referral to mental health or substance use care, physical health care, etc. These linkages are not required for services by any CES participating agency, but they are continually offered based on the need to help individuals maintain housing.

IV. Design of Housing & Supportive Services

6. Describe the needs of the clients to be served.	
See attachment E.	
7. (PSH, RRH & Joint TH-RRH Projects) Describe the type and scale of all the supportive services that will be offered to program participants to ensure successful retention in or help to obtain permanent housing, regardless of funding source, meets the needs of clients to be served.	
8. (Coordinated Entry Projects) Describe how the proposed project will align with the County's existing Coordinated Entry System.	
See attachment E.	
9. For the proposed project, please estimate the expected % of households that will experience an increase in earned income from program start to program exit:	10 %
10. For the proposed project, please estimate the expected % of households that will experience an increase in non-employment income from program start to program exit:	30 %

11. For the proposed project, please estimate the expected % of households that will experience an increase in total income from program start to program exit:	40 %

IV. Leveraging Housing Resources

12. **For permanent housing applications (PSH) (RRH) (TH-RRH)**, describe how the project will utilize housing subsidies or subsidized housing units not funded through the CoC or ESG programs. (Housing subsidies or subsidized housing units may be funded through any of the following sources: Private organizations; State or local government, including through the use of HOME funding provided through the American Rescue Plan; Public Housing Agencies, including through the use of a set aside or limited preference; Faith-based organizations; or Federal programs other than the CoC or ESG programs.)

Applicants must attach letters of commitment, contracts, or other formal written documents that demonstrate the number of subsidies or units being provided to support the project. For a new permanent supportive housing project, provide at least 50 percent of the units included in the project; or for a new rapid re-housing project, serve at least 50 percent of the program participants anticipated to be served by the project.

13. **For permanent housing applications (PSH) (RRH) (TH-RRH),** describe the current strategy used to recruit landlords and show how well it works at identifying units across the entire CoC area, including areas where the CoC has historically not been able to finds units.

14. **For permanent housing applications (PSH) (RRH) (TH-RRH),** identify any new practices that have been implemented to recruit landlords in the past 3 years and the lessons learned from implementing those practices.

15. **For permanent housing applications (PSH) (RRH) (TH-RRH)**, describe how you will use data to update your landlord recruitment strategy.

IV. Leveraging Healthcare Resources

16. **For permanent housing applications (PSH, (RRH) (TH-RRH)**, **describe how the project will utilize healthcare resources to help individuals and families experiencing homelessness. (Sources of health care resources include: Direct contributions from a public or private health insurance provider to the project (e.g., Medicaid), and Provision of health care services, including mental health services, by a private or public organization (including FQHCs and state or local health departments) tailored to the program participants of the project, direct partnerships with organizations that provide healthcare services, including mental health services to individuals and families (including FQHCs and state and local public health departments) experiencing homelessness who have HIV/AIDS). Eligibility for the project must comply with HUD program and fair housing requirements. Eligibility criteria cannot be restricted by the eligibility requirements of the health care service provider).**

Applicants must attach formal written agreements and must include: value of the commitment, and dates the healthcare resources will be provided. In the case of a substance abuse treatment or recovery provider, it will provide access to treatment or recovery services for all program participants who quality and choose those services; or the value of assistance being provided is at least an amount that is equivalent to 50 percent of the funding being requested for the project, which will be covered by the healthcare organization. In-kind resources must be valued at the local rates consistent with the amount paid for services not supported by grant funds.

V. Addressing Severity of Needs

17. **Estimated percentage of participants to be served that are chronically homeless:**	30 %
18. **Estimated percentage of participants to be served that have low or no income:**	100 %
19. **Estimated percentage of participants to be served that have history of victimization/abuse, domestic violence, sexual assault, childhood abuse:**	15 %

VI. Timeliness

> **20. Describe plan for rapid implementation of the program, documenting how the project will be ready to begin housing the first program participant. Provide a detailed schedule of proposed activities for 60 days, 120 days, and 180 days after grant award. Please also estimate the average time from a client's program entry to housing placement.**

See attachment E.

VII. Project Effectiveness

21. Coordinated Entry Participation- Minimum percent of entries projected to come from CE referrals	800
22. Projected number of households to exit to permanent housing	100

VIII. Equity Factors

23. Project has under-represented individuals (BIPOC, LGBTQ+, etc) in managerial and leadership positions	⦿ YES ◯ NO
24. Project's organizational board of directors includes representation from more than one person with lived experience (per 24 CFR 578.75(g) Participation of Homeless Individuals)	⦿ YES ◯ NO

25. Describe how your organization has identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population.

Those with severe and persistent mental illness and substance abuse disorders are quite often over-reprsesented in the population of those experiencing homelessness. The feedback we have received over the years is that the program requirements of CAPLSO were at odds with the needs and abilities of those populations. Over time this resulted in high barriers to services. Many participants were suspended due to behaviors stemming from those barriers, and negative perceptions in the homeless services community were established. Specifically, policies that mandated chores, sobriety or treatment for the use of services, suspensions without the ability to resume services, and unclear rules regarding resuming services were identified. These were realized as barriers through staff meetings, client focus groups, and strategic discussions regarding best service delivery practices.

This process has evolved into a continual improvement process that staff implements with participants to review all policies and processes, complimented by a planned process to use all data gathered by programs to analyze how outcomes might vary by special populations who are experiencing homelessness (those who are chronically homeless, those with disabilities (mental health, substance abuse, developmental), LGBTAQ+, BIPOC, older adults, etc..)

26. Describe the actions the organization has taken or will take to eliminate the identified barriers.

CAPSLO's Homeless Services Department, based on this feedback and analysis, removed or modified these barriers to be more aligned with the philosophies of Harm Reduction and Housing First. For example, CAPSLO eliminated the requirements for all participants to breathalyze and drug test upon entry to the night program roughly three years ago because it resulted in many individuals being barred from services or increased their time experiencing homelessness further and only targeted individuals who had known addiction issues. One year ago, these barriers were reduced further to those with behavioral issues on site and were then placed on contracts for drug testing and breathalyzing. After further feedback, these program requirements were completely eliminated. CAPSLO continues to offer drug tests and breathalyzing as a service to participants if they so elect for their own recovery. They are no longer used to determine someone's ability to access services.

27. Describe the actions the organization will take to serve subpopulations that the CoC has identified as being underserved.

See attachment E.

IX. Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decision Making and Providing Professional Development and Employment Opportunities.

28. Describe and provide examples of Professional Development (e.g. internships, continuing education, skill-based training) and employment opportunities provided to individuals with lived experience of homelessness by your organization.
CAPSLO has a long track record of professional development of former participants; many staff persons employed by CAPLSO are former participants. The core mission of CAPLSO is to address the underlying issues of poverty in SLO county. One of the most effective ways to do that is through employment and opportunities for training and advancement. Specifically, in homeless services, some roles are designed to elevate those with lived experience, such as the role of peer advocate. This role has been a hallmark of CAPLSO homeless services for several years and is an effective pathway for those with lived experience to start a career in homeless services. In addition to the direct employment of those with lived experience, CAPSLO partners with myriad local education and workforce development programs to link participants with these opportunities. 32% of all referrals in CES were from employment-related programs, including programs designed for career advancement.
29. Do you have a mechanism for obtaining feedback from program participants? Please describe (e.g. annual focus groups, consumer advisory panels, etc.).
There are multiple pathways that CAPLSO takes to obtain and integrate feedback from program participants. CAPLSO implements an annual client satisfaction survey with questions designed to improve the programs and services. Example questions are: "I value the program service(s) I received; I found the program service(s) helpful; Staff were kind and caring; Staff met my needs; I was helped promptly; Do you feel better able to meet your or your family's needs in the past year as a result of CAPSLO's services?" These results are reviewed by the CAPLSO planning department and provided to CAPLSO leadership to improve the services delivered. In addition, CAPSLO's Homeless Services Department facilitates client feedback groups to review new or ongoing policies and program regulations to ensure goodness of fit and appropriateness. One recent example of this was the revision of the program policies for 40 Prado that involved client focus groups to better understand client support for policies designed to best sustain a harmonious communal living situation. The CES program in the upcoming year is focused on integrating participant feedback on an ongoing basis in both an annual survey and through target focus groups facilitated by evaluation partners throughout California.

30. Do you agree to work with the CoC's Working Group for the Unsheltered Homelessness Set Aside	⦿ YES ◯ NO

X. Addressing the Needs of LGBTQ+ Individuals

31. Does your agency have anti-discrimination policies in place.? *(if so please provide copy as an attachment)*

CAPSLO does have this in place. Specifically, see sections in the attachment F: 10.6 CAPSLO's Position & 10.7 Abusive Conduct.

32. Describe what actions your organization will you take to ensure that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination?

We provide training for all staff and ensure that all subcontracted agencies have anti-discrimations training. In addition, we work to ensure that all participants can voice concerns when potential harassment or discrimination occurs. There are frequent reviews of staff interactions and actions to ensure that discrimination is not occurring. Specifically, within CAPSLO's Homeless Services Department, all participants can fill out (verbally or physically and with options for anonymous submission) a conflict resolution form. This form is transcribed into our database (coded to a generic profile if anonymous) and is reviewed by the appropriate management team. The resolution is recorded in our database. If an issue arises more than once or is profoundly severe, it is escalated to the appropriate management role within CAPSLO.

Provision, denial, and exit from services are reviewed monthly. Special attention is given to those who are in underserved or protected classes. In cases where it is at the very least unclear if there was any discrimination based on these or any other protected factors, an investigation is undertaken by CAPSLO management in documented communication with the CAPLSO Human Resources team.

XI. Alignment with the San Luis Obispo Countywide Plan to address homelessness

33. Describe how the project will align with a Line of Effort to support the San Luis Obispo Countywide Plan to address homelessness (2022- 2027).

The CES project complements nearly all aspects of the San Luis Obispo Countywide Plan to address homelessness due to the all-encompassing nature of CES, which connects all aspects of the homeless services system through efficient pathways and works with all programs to ensure that participants are correctly matched to resources. For example, the goal of CES is to implement a completed housing resources system to allow for automatic resource (housing) matching best facilitates objectives in LOE 1 & 2 by developing an inventory and would reduce the length of time of people experiencing homelessness, facilitate the development of regional community standards, including housing program entry/exit criteria, and would expand diversion efforts through CE by creating an accessible housing list will give staff/clients the ability to find housing quicker.

However, the most aligned LOE to this program is LOE 3: "Improve and expand data management efforts through HMIS and coordinated entry system to strengthen data-driven operational guidance and strategic oversight." Primarily the first objective of this LOE is to create a coordinated entry system that is open and accessible to all. This program and proposed bonus expansion allow this to be achieved by expanding and improving the existing CES without other major changes. This efficiency cannot be offered in many other LOEs. Additionally, a main goal of the CES revamp is to move CES as much as possible into the HMIS system, again - this is fully aligned with the LOE's summary timeline in year 1.

At its core, CES is only as good as the data system it is interlaced within and the system's data quality. An overarching goal of CES and LOE 3 is to improve and streamline the data collection and coordination processes of services in SLO County. More specifically, Objective B.11. can be achieved through a functional CES with expanded providers and better data entry, as CES is designed to give governing bodies (including HUD) an analytical overview of how all the various functions of a homeless services system work together to end homelessness.

X. Attachments

Attachment A – Organizations most recent audit (Required)

Attach a copy of the organizations most recent audit no later than August 31, 2022

Attachment B – Project's Policies and Procedures (Required)

Attach a copy of the project's Housing First Policies and Procedures no later than August 31, 2022

Attachment C – Leveraging Housing Resources Commitment

PSH, RRH, Joint TH-RRH Applicants must attach letters of commitment, contracts, or other formal written documents that demonstrate the number of subsidies or units being provided to support the project. For a new permanent supportive housing project, provide at least 50 percent of the units included in the project; or for a new rapid re-housing project, serve at least 50 percent of the program participants anticipated to be served by the project.

Attachment D – Leveraging Health Care Resources Commitment

PSH, RRH, Joint TH-RRH Applicants must attach formal written agreements and must include: value of the commitment, and dates the healthcare resources will be provided. In the case of a substance abuse treatment or recovery provider, it will provide access to treatment or recovery services for all program participants who quality and choose those services; or the value of assistance being provided is at least an amount that is equivalent to 50 percent of the funding being requested for the project, which will be

covered by the healthcare organization. In-kind resources must be valued at the local rates consistent with the amount paid for services not supported by grant funds.

Attachment E – Supplemental Answers to Questions (Optional)

If you need more room to answer any of the application questions, please attach the additional information here. Include the question number for each question being answered.

For other additional or optional attachments, please label them clearly (e.g. Attachment E – "Title").

XI. APPLICATION SUBMISSION:

Supplemental Applications will be due to Homeless Services Unit, County of San Luis Obispo Department of Social Services, August 31, 2022, 5PM.

Applicants may submit digital or hard copy applications to the locations below:

1. Soft Copy – email to SS_HomelessGrants@co.slo.ca.us
    Subject line: FY 2022 HUD CoC Unsheltered Set Homelessness Aside Supplemental Application – (Applicant Name)

2. Hard Copies – Mail or Drop-off
    Attn: Homeless Services Unit
    County of San Luis Obispo Department of Social Services
    3433 South Higuera Street
    San Luis Obispo, CA 93403

Community Action Partnership of San Luis Obispo Co. Inc.

CAPLSO, Homeless Services Division
Housing Frist Policy
Last revised: 08/2022

For CAPSLO "Housing First" means that we seek to provide housing without preconditions and with as little barriers as possible, rather than a reward or something to be earned. Our overarching goal is to connect homeless people to permanent housing as quickly as possible. Meeting the client "where they're at," our work is focused on the development of a case plan that is oriented toward their success in obtaining or maintaining housing, which is predicated by consumer choice and self-determination. Our services support the client in identifying the barriers to stable housing that they are experiencing, and assisting them with services to address these fundamental challenges. Each level of service adheres to Housing First practices, which are embedded in policies, procedures, and staff training.

Through this Housing First lens, we engage clients in a progressive process that takes our clients through engagement, assessment, diversion, and addressing immediate needs (such as food and sheltering) as we work with the client with housing stabilization planning, including financial management. We embrace partnerships that we have with other Housing First Organizations, such as 5 Cities Homeless Coalition, El Camino Homeless Organization, Salvation Army, and Transitions Mental Health Association, among others.

CAPSLO offers services as needed and requested on a voluntary basis and does not make housing contingent on participation in services. Within the Housing First framework, our approach with clients is based on the following principles: Trauma Informed; Housing Focused; Harm Reduction; Person Centered; & Strengths Based.

1. Describe the experience of the applicant and sub-recipients (if any) in working with the proposed population and in providing housing similar to that proposed in the application.

In 2016, CAPSLO, 5 Cities Homeless Coalition (5CHC), and El Camino Homeless Organization (ECHO) were awarded funding for the Coordinated Entry System (CES) to provide a system of screening, diversion, and case management services to homeless individuals and families throughout the county. Together with county staff, the partners have developed an integrated system that prevents duplication of services and streamlines access to the most appropriate service provider to meet client needs. Since its inception in 2017, this collaborative program has served approximately 5,000 households. This expansion of the CES builds upon the success and the lessons learned from the past six years of CES in SLO County. This bonus will include five additional agencies, Transition Mental Health Association (TMHA), Salvation Army, LUMINA, and the Center for Family Strengthening (CFS), and will strive to include all other agencies such as SLO County Behavioral Health and Family Care Network (FCN), among other groups. These other providers in SLO county provide outreach, shelter, navigation, and housing resources to those experiencing homelessness, although on a much smaller scale than the CES agencies. This expansion will allow SLO County CES to address its largest barrier – the bifurcation of the homeless services system and CES between CAPSLO, ECHO, and 5CHC and those agencies not part of the CES. By including these providers, CES will now provide a foundation for prioritizing services for those who are unsheltered, have experienced homelessness for the longest time, and have multiple and severe service needs that inhibit their ability to identify and secure housing on their own quickly. The new agencies bring a wealth of expertise and various services that address broader housing stability issues, including medical, mental health, substance use, and employment challenges.

Since 1989, the Community Action Partnership of San Luis Obispo County (CAPSLO) has provided comprehensive services that shelter, feed, support, and offer case management to individuals and families to end their experience of homelessness, helping them achieve self-sufficiency. CAPSLO's 40 Prado Homeless Services Center provides 24/7 services, 124 beds allocated for individuals and families experiencing homelessness, a 4-day/week clinic administered by CHC (a community partner), and mental health care onsite five days/week co-administered by CAPSLO and SLO County Behavioral Health.

2. Describe experience in effectively utilizing federal funds including HUD grants and other public funding, including satisfactory drawdowns and performance for existing grants as evidenced by timely reimbursement of subrecipients (if applicable), regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants.

Since its designation as the county's federal Community Action Agency in 1965, CAPSLO has been awarded countless government grants. For over 17 years, CAPSLO has consistently received US Department of Housing and Urban Development (HUD) funding, successfully providing services to San Luis Obispo County's homeless population. CAPSLO also receives funding through the US Departments of Health and Human Services (HHS), Energy, Agriculture, and Veterans Affairs (VA). State grants include Community Services Block Grants (CSBG), and

those through the Departments of Housing Community Development, HHS, and Social Services (DSS). Numerous County of SLO grants is received annually. With over 225 grants awarded each year, CAPSLO is meticulous in completing the required program activities and outcomes as requested by the funder and has a long record of passing all audits/reviews with no findings.

With the necessary infrastructure to successfully implement and monitor complex grants and contracts, CAPSLO undergoes an agency-wide, rigorous audit process annually, including inquiry and observation to understand and evaluate CAPSLO'sinternal controls, confirmations, interim testing, and compliance audits, and substantive, procedural analysis. Critical audit areas include compliance with federal and state awards, program and support services expenses, accounts payable and accrued liabilities, program revenue and unearned deferred revenue, cash, property, equipment, and long-term debt.

CAPSLO's Finance Department will be responsible for processing payment requests. They have a long history of working with the County of San Luis Obispo in submitting payment requests for many grants from various County departments.

4. Housing First and/or Lower Barrier Implementation (Attachment requirement) Describe experience with utilizing a Housing First approach. Include: 1) eligibility criteria; 2) process for accepting new clients; 3) process and criteria for exiting clients.   Must demonstrate there are no preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, self-disclosed or perceived sexual orientation, gender identity or gender expression. Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure that project participation is terminated in only the most severe cases.

1. All current CES agencies CAPSLO, ECHO, and 5CHC work in partnership to follow a Housing First, low barrier approach to accepting clients through Coordinated Entry. There are no preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, self-disclosed or perceived sexual orientation, gender identity or gender expression. The additional agencies also follow this philosophical guidance, with Salvation Army implementing effective street-to-home engagement at multiple locations throughout the county. TMHA has extensive experience in implementing Housing First practices through its Full-Service Partnership teams, mental health teams, and the administration of the Housing Now program, which houses the most vulnerable in SLO County into Permanent Supportive Housing (PSH) in a Housing First framework. FCN and FRC use a client-centered approach with their families, placing families back into permanent housing with supportive services. FCN is the only administrator of the Brining Families Home & Housing Focus Program Programs in SLO county, which both operate on a Housing First approach.

2. Through a shared database, Client Track (CT), the three agencies move clients seamlessly through assessment, engagement, and eligibility to ensure they obtain/maintain housing and remain stable. CT enables the three organizations to safely share client information to reduce duplication of services and ensure continuity. Clients have a much broader potential for sustained success through their combined efforts. However, this system is not open to other agencies. In the previous grant year, CAPSLO, ECHO, and 5CHC worked to modify all intakes to a

universal intake, combining and simplifying all agencies' intakes and Coordinated Entry Assessment. The intake is interchangeable between the agencies. For example, if an individual or a family comes to 5CHC for an intake and then the following day comes (without coordination between providers) to any participating CES Agency, they would only have to review and sign the agency-specific rules and ROI for intake. They would not have to repeat any general intake information (demographics, income, disability, benefits status, legal history, etc.). This has made our work easier and more client-centered.

With the universal intake, the expansion will allow SLO county to move CES out of CAPLSO's ClientTrack and into the HMIS system, giving all agencies access to this program. CAPSLO is already working with the HMIS vendor to mirror clietntrack's database in HMIS to allow for easy data communication. It is an achievable goal that, as of June 2023, CES would be able to inhabit HMIS, and all agencies would have access to the Coordinated Entry Assessment. Once a client is assessed, they are considered part of the CES. After this assessment, there is enough information to best match these families or individuals to the appropriate intervention (diversion, prevention, RRH, Interim Housing, PSH, etc.). When necessary, and once these first steps are accomplished, the individual/family is referred to a Case Manager for more intensive assistance in finding housing. As part of their assessment process, case managers would administer the ViSPDAT to determine a household's vulnerability. By using a combination of a needs assessment and a VI tool, the CES in SLO County can match and prioritize households for the most appropriate intervention. Utilizing low-barrier, opt-in, housing-focused case management is a hallmark of housing-first programming and is something the SLO County CES has required and will continue to require. However, since many homeless services providers were not part of the CES in SLO County, it has been difficult to ensure that low-barrier, housing-first frameworks are implemented county-wide. This expansion will ensure that all services offered to those experiencing homelessness in SLO County are part of established Homeless Services Providers and can universally access services without preconditions.

3. All participants are provided the tools to problem-solve their housing situation. Since there are limited case managers in SLO County, only those who are VISPDAT scoring a 3 and above will be assigned to a housing-focused case manager. Clients may be referred to Adult Protective Services (APS), THMA FSP, County Behavioral Health, or any other appropriate referral based on their needs. Households are exited from services when they have continually refused services, violated the program rules such as an act of violence to another participant or staff), have exited to non-supportive housing options, or cannot be located. Individuals are not exited from services in CES due to mental health, substance abuse, mental disability, or other disabling conditions.

6. Describe the needs of the clients to be served.

CES funding has not substantively increased since 2016, when these three agencies (CAPSLO, 5CHC, & ECHO) initially applied for CES funding. After seven consecutive years, the cumulative effect of the lack

of increased funding has not allowed these agencies to sustain CES without expanding to include all agencies in SLO County and increasing funding for staff to manage and implement CES. For example, CES served roughly 1,700 households in grant year 21-22; however, in HMIS, over 5,000 households are being served by all agencies in SLO County. CES provides a no-wrong door approach that allows agencies to meet all participants' needs through referral and coordination between providers. The increased funding will support additional staffing efforts within the additional CES participating agencies and allow SLO CES to develop a process to onboard new agencies as needed in the coming years.

Although safety procedures during the pandemic forced the county's shelters to lower capacity, the economic crisis that accompanied the pandemic has increased the need for homeless services. This project seeks to meet the needs of all clients experiencing homelessness in SLO County. The CEP service is an assessment and potential diversion tool to ensure that all those experiencing homelessness are connected with the most appropriate and needed services to resolve their experience of homelessness quickly. These needs are diverse, and all referrals are tracked as a result of the CE Assessment.

Mental health, benefits enrollment, and documentation possession is substantive and consistent barriers for this population. In an analysis of CEP data in the last three years detailed in the chart below, the largest, historically identified need (25% in 2021) is to increase/gain public benefits and/or obtain required documents to secure permanent housing or other resources. In a massive shift to the system, the referrals to housing and employment programs increased dramatically. Previously, the number of referred-to-housing remained low because of all the documentation needed to obtain housing and the lack of connection to the housing system. In the past year, the CES in SLO focused efforts to increase housing linkages and effectively utilized Emergency Housing Vouchers (EHV) provided by HUD. The EHVs required less work for staff to make referrals, thus increasing the referrals to housing resources. Additionally, staff at all CES participating agencies embraced a diversion/problem solving approach - which increased referrals and uncovered increased housing needs of households.

Table 1: CES Client Needs & Referral by Year

2019, 2020, 2021 and 2022
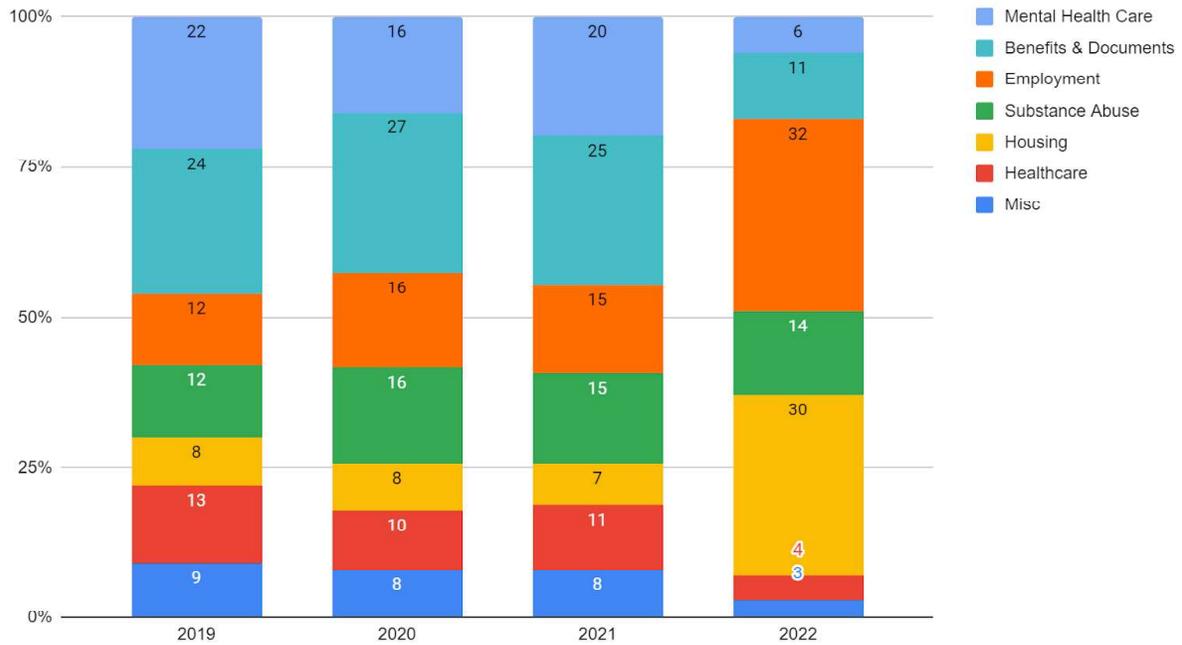
All CES providers (CAPSLO, ECHO, 5CHC, TMHA, Salvation Army, CFS, & LUMINA) provide housing navigation services, assisting with identifying immediate and long-term housing solutions, providing crisis management, coordinated entry, accessing benefits that are important to housing stability, case management, and providing on-site access and referrals to medical, mental health and substance use disorder services.

CAPSLO's 40 Prado Homeless Services Center provides comprehensive 24/7 services to the unsheltered and working poor, including access to a Community Health Center on-site medical clinic, day services, case management, meals, showers, laundry, kennels, a 124-bed nightly shelter, a 6-bed Recuperative Care Program, multiple Safe Parking sites, a Warming Center during inclement weather, and other support services. It is one of the county's providers of behavioral health therapy for those struggling with substance abuse and mental health issues and supportive services to veterans. In Summer 2021, CAPSLO completed the construction of the county's only medical withdrawal treatment center for those without private insurance, raising a combination of private and government support to fund construction fully.

ECHO operates a 50-bed transitional and emergency shelter; provides street outreach, showers, and meals to the unsheltered homeless; and opened a North County Paso Robles Emergency COVID-19 Prevention Shelter to add beds for homeless individuals to safely shelter in place 24/7, with services including case management, meals, laundry, and linkages to community resources. ECHO operates a winter shelter in Atascadero serving 60 people each season and a six-unit apartment building housing homeless residents for up to three months while they recuperate post-hospital discharge, including

COVID-19 convalescence.

With its specific focus on rapid re-housing and homeless prevention programs, 5CHC receives referrals for housing support from community-based organizations throughout the county to provide housing case management for those facing homelessness and homeless residents. Other services provided by 5CHC that are targeted to South County residents include winter warming center shelter, benefits determination and streamlining access, street outreach and engagement, a client resource center (mailing address, computer access, printer, phone, internet), transportation, and utility assistance, family reunification opportunities, and documentation assistance.

5CHC also offers a countywide Homeless Youth Program, which targets homeless youth aged 16-24, providing support for immediate needs, education and job development, and housing assistance. Partners in this program include Lucia Mar Unified School District, Cuesta Community College, SLO County Office of Education, and local law enforcement.

CAPSLO, 5CHC, Salvation Army, TMHA, and ECHO use outreach workers who coordinate with several community-based organizations to build relationships of trust and respect, which is key for individuals experiencing homelessness who are often service-resistant or have traumatic experiences with services/providers. The outreach teams meet clients "where they are at" both physically, mentally, and socially. Services are provided without a precondition for race, gender, age, sexual orientation, sobriety, mental health or health treatment, legal standing, or past provider experience.

Outreach workers provide key items of daily living to gain the respect and trust of individuals who experience homelessness; this can be water and food, sleeping bags, referrals to emergency shelters, transportation to appointments, referral to needed services, and work towards resolution of their experience of homelessness. Without this component of the Outreach and CEP, the system could not meet the current need and match those needs with the best fit for services. This program increases the capacity of services/housing for homeless persons and persons at-risk of homelessness in the County not only by conducting outreach in the community but by coordinating and collaborating with other community-based organizations that serve homeless persons and those at risk of homelessness, such as HomeShare SLO, Los Osos Cares, Paso Cares, CAPSLO's Head Start and Child Care Resource Connection, and Family Resource Centers throughout the county.

CAPSLO works closely with the countywide Community Action Teams (CAT) and TMHA. The SLO City CAT & TMHA have provided tremendous assistance in helping individuals move out of the area and back to their families when appropriate, providing transportation or assistance in accessing transportation to family members throughout the state. Adult Protective Services has also played a vital role in personally accompanying frail individuals back to their homes if needed to ensure a safe and smooth transition.

8. Describe how the proposed project will align with the County's existing Coordinated Entry System.

This grant application continues and expands the current CES in SLO County. This system has been established to increase efficiency in delivering services and resources to those experiencing homelessness in SLO. In the previous grant year (2021-2022), it was established that CES in SLO needed

to be enhanced to meet the growing needs of the SLO system of services and the increasing number of households experiencing homelessness. In 2020, CES system characteristics were established to ensure that CES would continue evolving to meet SLO's needs. The CES participating agencies have met and established six specific improvements to the current CES to remain aligned with the system characteristics outlined in the CES Policies and Procedures. There are components (such as data warehousing, lack of transparent routing and matching) in the CES system in SLO that operate in a fragmented fashion and are unable to meet the requirements as outlined by HUD, the SLO CoC, and the community needs that are being brought to light. These areas of improvement are:

1. Improved and clear CES Policy Oversight
2. Updated CES Privacy Policies & Database integration with HMIS
3. Improved Client-centered Prioritization
4. Automated housing matching with a Housing database
5. Clarifying roles and responsibilities of CES Management Entity
6. Integration of additional service providers and systems within CES

A large amount of the efforts will be in clarifying the roles and responsibilities of all homeless services providers, per HUD requirements. HUD outlines three entities: CES, Management, Policy Oversight, and Evaluation. Currently, the Community Action Partnership of San Luis Obispo (CAPSLO) is the designated CES management entity, and County DSS & HSOC are the designated policy oversight entities.

It is critical at this point that the structures of the CES remain intact while there is a revamp of processes and roles, as there are multiple workflows, nonprofit-based MOUs, and database systems that need to be integrated and linked to allow for a vast improvement of the CES in SLO County.

20. Describe plan for rapid implementation of the program, documenting how the project will be ready to begin housing the first program participant. Provide a detailed schedule of proposed activities for 60 days, 120 days, and 180 days after grant award. Please also estimate the average time from a client's program entry to housing placement. (2,868)

While there are major gaps and needed improvements, there is a proven record of success within this partnership of CAPSLO, ECHO, and 5CHC. Utilizing the CES, a homeless individual or family can arrive at the three agencies' doors, be entered into the system, receive needed services, and then be referred to the best-suited agency to meet their needs. In this way, the entire homeless services system can reduce duplication of services and more efficiently end someone's experience of homelessness. However, without increased participation of partner agencies, CES in SLO County will continue to be fragmented and not as helpful as possible to homeless households. Last year we focused on improving our outcomes at CES. However, it became clear that this was not possible without a clear planning process for improvement and more providers providing critical housing-related work.

90 days: Reconvening CEP roundtables to ensure service pathways are efficient and working. Have at least two monthly meetings for CES. Increase CES capacity by bringing community partners to join the CEP (TMHA, LUMINA, Salvation Army, CFS, etc.).   Within 90 days of the new grant year, these agencies will be oriented to CES and will work within CES to increase the number of individuals in CES to increase housing referrals. This will be measured by the increased number of participants in CES and more

complete referral pieces of information provided. Have a clear data pathway between all systems tracking CES, with a workgroup established to house as much CES data as possible in HMIS. For data that cannot be housed in HMIS, a clear strategy will be established to link known records to allow CES to function as a unified system.

120 days: Work with all providers to establish monthly meetings focused on key components of the CES. These meetings will use relevant client and outcome data to make decisions on program and referral improvements. By 120 days into the grant year, CES will convene a monthly steering meeting, a monthly TAY CES meeting, a family CES meeting, and a CES meeting for individuals. These meetings will review all housing linkages and mast lists for successful or unsuccessful matching. Case conferencing will be implemented for unsuccessful matches to explore better-matched housing resources or to re-match to housing resources they declined in error. Additionally, a housing inventory will be established with local PHAs and landlord/property management groups to allow for accurate inventory and automatic matching of participants to housing resources.

180 days: Establishment of new CES policies and procedures that include pathways of accountability for all participating agencies to embrace – Housing First as outlined by HUD and required by CES. Clear policies for integrating additional service providers allow for continued expansion for CES to streamline services.

27. Describe the actions the organization will take to serve subpopulations that the CoC has identified as being underserved.

CAPSLO is committed to continuing and expanding this work, not just in interim housing but in all programs (including CES). This commitment involves four legs, accurate and meaningful data collection, intentional training and program policies, frequent and diverse venues for current and former participant feedback, and documented quality improvement mechanisms.

Initially, there need to be clear definitions around all data collection in all programs that are clear and coherent so that each staff understands differences between services, incident reports, how to document program exits, etc.. Oftentimes, those who are underserved in a CoC are engaged by program staff who are not as adept in data collection and often do not prioritize this. This initial barrier is best addressed through clear definitions and determining the most efficient and meaningful data collection points - that is, data will only be collected to help a person obtain housing and to determine what steps are taken or not taken to help them achieve this goal.

Training is critical for correct data collection and effective policies and procedures. CAPLSO will continue implementing a training program that brings in national and regional experts for staff training and partnered agencies. This annual training program includes training on trauma-informed care, housing first, harm reduction, client-centered care, fair housing, lived experience panels, etc.

CAPSLO and its partner agencies will commit to a multivenue approach to get feedback from current and former participants with mechanisms to integrate this feedback to improve services. This leads into the last leg - a quality improvement process - in which CAPLSO will move from an informal process to a formalized process throughout all programs.

August 30, 2022

Mr. Devin Drake
Dept. of Social Services Director
San Luis Obispo County
3433 South Higuera
San Luis Obispo, CA 93401

Re: Coordinated Entry Program – Collaboration with Center for Family Strengthening

Dear Mr. Drake,

Center for Family Strengthening the nonprofit home for the Medically Fragile Homeless Program has entered into a Memorandum of Understanding with the Community Action Partnership of San Luis Obispo. The role of Center for Family Strengthening is to provide coordinated entry services as detailed in the Continuum of Care Grant #CA1628L9D141802 between June 1, 2022, and May 31, 2023.

Per the conditions of the grant, Center for Family Strengthening certifies that it will provide a cash match of $3,000 through private donations and other fundraising activities.

Please feel free to contact me should I be able to answer any additional questions.

Sincerely,

Lisa Fraser

Lisa Fraser, Executive Director
Center for Family Strengthening
lfraser@cfsslo.org   805.543.6216

CAPSLO
Community Action Partnership of San Luis Obispo Co. Inc.

Wednesday, August 31, 2022

Devin Drake, Director
Department of Social Services
County of San Luis Obispo
3433 South Higuera St.
San Luis Obispo, CA 93401

Dear Mr. Drake:

Per the conditions of FY 2022 Continuum of Care Grant Program, Community Action Partnership of San Luis Obispo Co., Inc. (CAPSLO) certifies that it will provide a match as detailed below:

Type	Source	Contributor	Value
Cash Match	Private Donations	Private Donations	$17,000.00

Sincerely,

John "Jack" Lahey, MSW
Homeless Services Director