

**MHSA Special Needs Housing Program (MHSA SNHP) Application Support Services Plan**

**Item 1 Development Summary**

Name of Development: Aqua Housing

Site Address: 317 E 17<sup>th</sup> St

City: Santa Ana State: CA Zip: 92706

Development Sponsor: Community Development Partners

Development Developer: Community Development Partners

Primary Service Provider: Mercy House

New Construction  Acquisition/Rehabilitation of an existing structure

Type of Building:  Apartment Building  Single Family Home  
 Condominium  Other

Total Development		MHSA SNHP Funds	
Total Number of Units:	57	Total Number of MHSA SNHP Units:	28
Total Cost of Development:	\$26,095,000	Amount of MHSA SNHP Funds Requested:	\$4,076,800
		Capital:	\$4,076,800
		Capitalized Operating Subsidies:	

Other Rental Subsidy Sources (if applicable): Sec-8 Project Based Vouchers

Target Population (please check all that apply):

Adults  Transition-Age Youth  Older Adults

**County Contact**

Name and Title: Elizabeth Row, LCSW, S.C. I

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**Item 2 Development Description**

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

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

**Response:**

**1. Name and location of the proposed housing development**

Aqua Housing is the proposed new construction of 57 units located at 317 E 17<sup>th</sup> St, Santa Ana, CA 92706. Twenty-eight (28) of these units will be reserved for Special Needs Housing Program residents.

**2. Service goals of the development**

The service goals of the development are to stabilize homeless or those at-risk of homelessness with a serious and persistent mental illness by establishing permanent housing and the ability to live independently and reducing recidivism back into homelessness. The development employs Housing First principles of tenancy combined with access to mental health support, supportive services and on-going tenant education.

Supportive services will be provided on a voluntary basis. Residents will be assertively and respectfully encouraged to participate in the supports and services available to them.

The service delivery model will be based on a number of evidence-based practices that are agile and complementary to one another to meet the needs of a diverse set of residents. The supportive services philosophy and design promotes and supports: housing stability, independence, community building and the development of support networks, and participation in meaningful activities within the broader community.

Regular availability and visibility on-site will reduce the barrier of connecting to a service provider as needed and reduce lengthy delays connecting to services.

**3. Characteristics of the tenants to be served**

The twenty-eight (28) Local Government Special Needs Housing Program (SNHP) supported studio and one-bedroom units will be designated for adult tenants who meet SNHP Housing Program requirements as well as HUD Section 8 Voucher eligibility requirements. Potential residents are homeless or at-risk of homelessness with a serious mental illness as stipulated in the SNHP guidelines. The income levels will be restricted to 30% Area Median Income.

**4. Type of housing to be provided**

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The Aqua Housing project includes the acquisition and demolition of an underutilized, blighted hotel site to construct 57 units of permanent supportive housing targeting homeless and chronically homeless individuals and small families. The project is located at 317 E 17th St. in Santa Ana. The approximately 34,000 square foot development will provide 12 studio and 45 one-bedroom apartment homes (including one manager's unit) with open space, a community room, offices for property management and Mercy House staff who will provide onsite case management and services coordination to each resident. Rent levels at the property will be restricted for 55 years to households earning at or below 60% of the Area Median Income. Additionally, the property will have a Housing Assistance Payment ("HAP") contract in place further restricting eligibility to homeless and chronically homeless people.

The property is situated along the north side of 17th St. with the I-5 freeway bordering the property to the east and single family and multifamily buildings to the west. The building design includes one level of on-grade structured garage with 36 parking stalls along with guest parking near the entrance to the property. There will be two 4-story residential buildings, the first of which will include the management and services offices along 17th St. in the commercial zoned section of the property. Buildings will be connected by a catwalk and serviced by an elevator. Interior units will be improved with energy efficient appliances, low-flow plumbing fixtures, solid surface countertops, vinyl plank flooring, A/C and heat. The owner will pay utilities and a common area laundry will be provided. The project will be financed through federal low-income housing tax credit equity, permanent hard debt, Affordable Housing Program ("AHP") funds, and deferred developer fee. Fifty-six (56) Project Based Section-8 Vouchers (PBVs) from the Santa Ana Housing Authority have been awarded, which will insure all residents have rental assistance and pay no more than 30% of their income. The service provider and property management company will follow a Housing First model and make every effort to help applicants get approved for and then maintain housing. Mercy House will take applicant referrals from the Coordinated Entry System and the Health Care Agency and work with applicants to secure housing. The Project received site plan/design review approval on June 20, 2017, and anticipates an award of LIHTCs in June, 2018. Construction will start October 2019 and the project will be complete January 2020.

### **5. How the building(s) in which housing and services will be provided will meet the housing and service needs of the Mental Health Services Act Special Needs Housing Program (MHSA SNHP) tenants (location, building type, layout, features, etc.)**

The site is situated within 1/3 mile of a public transit bus stop, with service every 30 minutes during peak hours 7-9 am and 4-6 pm Monday thru Friday, 3/4 mile of a public park, within one (1) mile of a library, within 1/2 mile of a neighborhood market, medical clinics, pharmacy and facilities that serve the population targeted to occupy Aqua Housing, as well as other numerous amenities. The Santa Ana Adult and Older Adult Behavioral Health (AOABH) Clinic, where residents can obtain services from OCHCA, is located one half mile from the proposed development. Onsite amenities include offices for MHSA service providers, open space for gardening programs, adaptable and accessible units. Onsite professional property management and community space for educational and health services will be available for tenant use as well.

### **6. Name of primary service provider, property manager, and other development partners**

Community Development Partners will be the developing partner and will partner with the County of Orange Health Care Agency's Adult and Older Adult Behavioral Health (AOABH) Program for Assertive Community Treatment (PACT) or other designated program. The program serves adults 18 years of age and older who are living with a chronic and persistent mental illness and are homeless or at risk of homelessness. The providers offer assessment, linkage, individual and group therapy services, extensive case management, life skills classes, advocacy, medication support, and a variety of recovery services for adults.

Additionally, Community Development Partners will partner with Mercy House Living Centers, a non-profit organization serving all of Orange County. Mercy House will be the primary onsite non-clinical services coordinator.

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Mercy House has operated successful homeless service programs for over 27 years and in that time has served nearly 80,000 individuals. This includes operating a variety of programs ranging from homeless prevention, emergency services and shelters, transitional housing, aftercare programs, rapid re-housing programs as well as permanent supportive housing facilities and residential services program. The diversity of these programs has afforded Mercy House the experience of working with a wide variety of homeless subpopulations including, but not limited to: families, adult men and women, mothers and their children, Veterans, seniors, chronically homeless individuals, persons living with HIV/AIDS, individuals overcoming substance addictions, and those who are both physically and/or mentally disabled.

With more than 27 years of experience in providing services to the homeless, including veterans and the chronically homeless, Mercy House staff has extensive knowledge of the needs and barriers faced by the homeless in our community as well as a variety of resources which may prove helpful to their success. Their primary focus as an agency is providing housing placement and housing stabilization services to homeless and chronically homeless individuals and families.

Supportive services focus on intensive case management to ensure that every client has the chance to succeed and remain in permanent, stable housing. Intensive case management includes individualized service plans designed to identify and address their individual needs and barriers to maintaining permanent housing. Case managers work to create and achieve goals, coordinate services, counseling and support, crisis intervention, intensive assistance with accessing mainstream benefits and other community-based resources.

Services will be delivered on-site by a Residential Clinical Services Coordinator (RCSC) from HCA AOABH Residential Services Team. The RCSC will hold regular hours at the property and will ensure that: the Supportive Services Plan is enacted for supportive housing units; all residents have access to needed services to maintain housing, a sense of community and quality of life; coordinate with partner agencies to be on site as well as assist those seeking access to off-site services, coordinate life skills workshops, host community events to decrease tenant isolation, provide tenant landlord mediation, and conflict resolution between tenants. The RCSC will also hold bi-weekly (or more as needed) meetings with property management, Mercy House staff, and other relevant staff members to discuss any issues which have the potential to jeopardize any SNHP resident's continuing residency in order to organize an intervention. The goal is always to ensure continued permanent residency.

The property manager will be Solari Property Management. The team of Community Development Partners, Mercy House, and Solari have worked on a previous permanent supportive housing development in the City of Santa Ana.

### **7. Summary of the anticipated sources of development financing**

The anticipated sources of financing are 9% low income housing tax credits, permanent mortgage, SNHP funds and deferred developer fee.

**Item 3 Description of Target Population to be Served**

Describe the MHSA SNHP target population to be served in the development. Include a description of the following:

1. Age group, i.e., adults, older adults, children, transition-aged youth;
2. The anticipated income level of the MHSA SNHP tenants; and,
3. A description of the anticipated special needs of the target population to be served, e.g., physical disabilities, chronic illness, substance abuse, prior housing status, etc.

**Response:**

**1. Age group, i.e., adults, older adults, children, transition-aged youth**

Aqua Housing will serve adults and adults with small families. Within the 57-unit development, twenty-eight (28) will target adults who meet the criteria of the SNHP eligibility.

**2. The anticipated income level of the MHSA SNHP tenants**

The anticipated income level of the SNHP tenants will be at or below 30% of the area median income. Most of the tenants are expected to have SSI/SSA as the primary source of income. Additionally, residents will be eligible for a Section 8 Voucher based on assumed income levels.

**3. A description of the anticipated special needs of the target population to be served, e.g., physical disabilities, chronic illness, substance abuse, prior housing status, etc.**

The target population for this program consists of adults, age 18 and above and small families that meet the HUD definition of homeless and chronically homeless including households with a member who has been homeless continuously for at least 1 year or at least four separate occasions in the last 3 years, and who are diagnosed with substance abuse, serious mental illness, developmental disability, PTSD, or chronic physical illness/disability. The SNHP units will target those meeting the HUD homeless or chronically homeless definition with a severe and persistent mental illness.

**Item 4 Tenant Eligibility Certification**

Orange County Health Care Agency is responsible for certifying the eligibility of individuals applying for tenancy in a MHSA SNHP unit for compliance with the target population criteria. Submit a narrative description of the following:

1. How an individual applies to the county to become certified as eligible for a MHSA SNHP unit;
2. How certification of eligibility will be documented, provided to the individual applicant, and maintained by the county; and,
3. How certification of eligibility will be provided to the property manager/development.

**Response:**

The County of Orange Health Care Agency (HCA) in collaboration with OC Community Services (OCCS) has developed a standardized application and certification process for the Orange County Special Needs Housing Program (SNHP). The HCA MHSA SNHP Housing Program is the central point of coordination for SNHP Housing Program certification.

**1. How an individual applies to the county to become certified as eligible for a MHSA SNHP unit**

HCA MHSA Housing Program staff will certify applicants as SNHP Housing Program eligible; creating a single point of certification for the MHSA funded units.

The standardized MHSA/SNHP Tenant Certification and Referral Application is designed for the referring party to complete in collaboration with the potential tenant. The application is designed to assess the applicant's eligibility for an Orange County SNHP funded unit and assist in determining housing need and preference (i.e., household size and tenant housing preference).

Each site specific SNHP Project Property Management company will accept applications during lease up of the Aqua project and as vacancies in projects with SNHP Housing Program units become available. HCA AOABH staff will work with other supportive services providers to meet the challenge of attracting eligible applicants. HCA's service providers and its contractors will use culturally competent efforts to outreach and engage members of the target population, including those among unserved or underserved ethnic communities and other minority populations, and will utilize a variety of proven outreach strategies to connect with and refer potential residents to permanent supportive housing. HCA's Outreach and Engagement Teams regularly visit areas known to be places where homeless adults spend their days and nights. In addition to soliciting applications from individuals reached through direct outreach methods, County HCA MHSA SNHP Housing Program staff will accept referrals from an extensive county-wide network of varied government and nonprofit organizations and service agencies especially those who are serving the homeless people of Orange County. Other sources of referrals will include, but certainly not be limited to law enforcement; local shelters, food programs and other nonprofit and government agencies that provide outreach and services to the homeless; hospitals, mental health facilities and other health care providers; local veteran's agencies; religious organizations; ethnically and linguistically diverse community-based organizations, and self-referrals.

The referring agency is responsible for documenting an applicant's eligibility utilizing the standard MHSA Housing Program Certification and Referral Application, by securing all required eligibility documentation; including releases of information authorizing the referring agency to share certification information with the HCA MHSA SNHP Housing Program, property management, and the onsite services provider. It is expected the referring party will assist the applicant as needed in completing the certification application, as well as any additional requirements related to the project's screening process. The referring agency will provide support throughout the entire application and project screening process.

**2. How certification of eligibility will be documented, provided to the individual applicant, and maintained by the county**

**Eligibility Determination**

HCA MHSA SNHP Housing Program staff will review the application and supporting documentation for completeness and certify that the applicant meets Orange County's MHSA Special Needs Housing Program eligibility criteria. These criteria must all be met in order to be SNHP Housing Program eligible. If complete and eligibility is demonstrated, an MHSA Eligibility Certification Form will be issued within one week of receipt. If the application is incomplete, HCA MHSA SNHP Housing Program staff will contact the referring agency to request missing information. The certification document will be delivered to the referring agency using the most expedient method available. The referring agency's designated staff and the client will deliver the MHSA Eligibility Certificate Form to the property manager at the time of the property application submission. For units that are subsidized by Project-Based Section 8 vouchers, the application might be directed first to the Santa Ana Housing Authority following SNHP eligibility certification by HCA, and then to the property manager.

**Certification Denial**

If the certification is denied because the prospective tenant did not meet the SNHP Housing Program criteria, the referring party and the prospective tenant are notified and informed of the reason for the denial in writing, as well as a phone call from HCA MHSA Housing Program staff. The referring party and/or prospective tenant may resubmit the application for reconsideration if the conditions that resulted in the original denial change.

**Certification Approval**

Prospective SNHP tenants apply for tenancy either at the specific SNHP Housing Program funded site or through their service provider. The prospective tenant may directly approach the Property Management Company to inquire about applying for tenancy for one of the units, or request assistance from their services provider. The prospective tenant will complete the MHSA Housing Program Certification Application and, working with either the Property Manager and/or the service provider(s), will submit this Certification Application to the HCA MHSA SNHP Housing Program. HCA MHSA SNHP will provide confirmation of SNHP housing unit eligibility to the property management company and the relevant provider if the applicant meets the MHSA SNHP Housing Program criteria.

**3. How certification of eligibility will be provided to the property manager/development**

Applicants meeting all eligibility requirements will be certified by HCA MHSA SNHP program staff and the Certification Forms will be sent to both Aqua property management staff and City of Santa Ana Housing Authority staff along with the complete housing application. For record keeping purposes, HCA MHSA SNHP program staff shall maintain hard copies of all MHSA certification forms and shall track the following information: applicant name, date of MHSA certification, date that the completed housing application was submitted and date stamped by property management, date of approval or denial of housing, date of appeal (if applicable), and date of move-in.

Aqua tenants will also need to be assessed for eligibility for Santa Ana Housing Authority Project-Based vouchers.

It must be noted that MHSA certification does not take into consideration factors that may be considered in assessing someone's eligibility for housing, such as credit history, eviction history, or criminal history. This type of background check information will be collected by the property management company once the MHSA eligible certified applicant is referred to Aqua and may be used as part of the tenant selection process

**Item 5 Tenant Selection Plan, Interest List Procedures, and Referral Process**

Provide a tenant selection plan, specific to the proposed development, that describes the following:

1. How prospective tenants will be referred to and selected for MHSA SNHP units in the development;
2. The tenant application process;
3. The procedure for maintaining the interest list;
4. The process for screening and evaluating the eligibility of the prospective MHSA SNHP tenants, including the criteria that will be used to determine a prospective MHSA SNHP tenant's eligibility for occupancy in the development;
5. The appeals process for individuals who are denied tenancy in an MHSA SNHP unit; and,
6. The reasonable accommodations policies and protocols.

**NOTE:** Orange County Health Care Agency approval of the Mental Health Services Act Special Needs Housing Program (MHSA SNHP) Application does not ensure that the Tenant Certification/Referral Process is compliant with local, state and federal fair housing laws. The Developer/Borrower is advised to seek legal counsel to ensure that the Tenant Certification/Referral Process complies with fair housing laws.

**Response:**

**1. How prospective tenants will be referred to and selected for MHSA SNHP units in the development**

Initial referrals for the MHSA SNHP units at Aqua will be made to the property management company from a pool of clients participating in the designated County programs including the Santa Ana PACT (Program for Assertive Community Treatment Team) or other HCA AOABH program(s). These referrals will be presumptively eligible for MHSA SNHP housing units and are in urgent need for permanent supportive housing as an essential component for recovery or treatment.

Applicants who are not current clients of the designated Lead SNHP Provider will be referred to the designated Lead Provider's program for determination of eligibility for the designated MHSA SNHP units. As part of the referral process, HCA MHSA SNHP program staff will verify eligibility for MHSA SNHP for each individual referred. The program will complete a MHSA Housing Tenant Certification and Referral Form, which will document the individual's is MHSA-eligibility. This document will remain on file at HCA's offices for proof of compliance in the event of an audit.

**2. The tenant application process**

All prospective tenants at Aqua must fill out and submit the rental application prepared by the property manager to assure equal access and equal opportunity to all. However, successful applicants must meet program eligibility guidelines. The lead service provider will provide assistance to prospective MHSA SNHP tenants, and will offer assistance to complete the required paperwork, accompany them during interviews with the property manager/Housing Authority and provide appropriate advocacy during any appeal proceeding. All interested applicants will be referred to HCA MHSA SNHP program staff for program eligibility.

With respect to the treatment of applicants, the management agent will not discriminate against any individual or family because of race, color, creed, national or ethnic origin or ancestry, religion, sex, sexual preference, gender identity, age, disability, handicap, military status, source of income, marital status or presence of children in a household, acquired immune deficiency syndrome (AIDS) or AIDS related conditions (ARC), or any other arbitrary basis. No criteria will be applied or information considered pertaining to attribute of behavior that may be imputed by some to a particular group or category. All



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criteria shall be applied equitably and all information considered on an applicant shall be related solely the attributes and behavior of individual members of the household as they may affect residency as it pertains to the household's ability to adhere to the terms of the lease, likelihood of disturbing the peaceful enjoyment of other tenants and ability to care for or provide care for the unit. Applications will be sent to the Santa Ana Housing Authority for review and approval. Additionally, prospective tenants will be required to complete a Santa Ana Housing Authority Project-Based Voucher Intake Packet.

### 3. The Procedure for maintaining the interest list

- a. Applicants will be added to a waiting list in chronological order of the date and time applications are received.
- b. In the event that the volume of applications received exceeds the number of available apartments and more than one applicant qualifies for the unit, the application with the earliest date will be approved. The other will go to the top of the list until the next unit is available.
- c. When the next 30-day notice is received by management, it will be the responsibility of the site administrator to notify the applicant at the top of the waiting list. If that applicant turns down the unit, management will then proceed to the next person on the waiting list. With the approval of the applicant, the site manager will also notify the referring case manager.
- d. If an applicant on the waiting list rejects the two units offered to him/her it is considered to be a withdrawal of the application by the applicant.

### 4. The process for screening and evaluating the eligibility of the prospective MHSA SNHP tenants

When there is a vacant MHSA SNHP unit, the property manager will contact HCA to refer an eligible client from the interest list and property management will schedule an interview. For the interview, the applicant must be prepared to provide a state-issued identification card, a social security card or number, and income verification (SSI award letter, etc.). An applicant for the MHSA SNHP designated unit must have a diagnosis of a serious mental illness as defined by the Welfare and Institutions Code Section 5600.3(b). Applicants must also be homeless. Other eligibility and income requirements may be imposed by other public agencies providing rental subsidies or operating/capital funds for these MHSA SNHP designated units. The property management company will run a credit and criminal background check. The property management company will review the following financial information for all applicants applying for permanent supportive housing at Aqua.

- a. All income will be verified in writing by the income source indicated on income certification form
- b. All assets, including bank accounts, will be verified in writing
- c. Upon initial occupancy, MHSA SNHP resident's income cannot exceed 30% of the area median income as published annually by the U. S. Department of Housing and Urban Development and The California Tax Credit Allocation Committee.
- d. Third-party income verification will be required from all sources, including but not limited to:
  - Employment, Self-Employment
  - Savings and checking
  - Pension
  - Disability
  - Asset verification, property, home, stocks, bonds, annuities, IRA, etc.
  - Government assistance, A.F.D.C., food stamps, etc.
  - Social Security
  - Child Support/Alimony
  - Non-Tuition Financial Aid
- e. Income calculations are based on the applicant's annual gross income

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The development applicants must also meet the Santa Ana Housing Authority tenant selection criteria for Project-Based vouchers. The Santa Ana Housing Authority will conduct a criminal background check on each applicant.

### **5. The appeals process for individuals who are denied tenancy in an MHSA SNHP unit**

All rejected applicants will have the right to appeal the decision. This applicant will be notified of the rejection decision within 24 hours. The appeal must be received by the administrator or managing agent no later than fourteen (14) days after the rejection letter is received. Within three working days of receipt of an appeal, the appeal will then be forward to the Director of Compliance or the Regional Manager of (the property manager) and to the assigned Residential Service Coordinator for the property.

### **6. The reasonable accommodations policies and protocols**

Reasonable accommodations will be made to meet the needs of any disabled applicants, including applicants with physical and/or mental disabilities.

Management will apply the same screening criteria to all applicants. However, management is obligated to offer qualified applicants with disabilities additional consideration in the application of rules, practices, or services and structural alterations if said accommodation will enable an otherwise eligible applicant or tenant with a disability an equal opportunity to access and enjoy the housing program. Note that management is not, however, required to make a reasonable accommodation or physical modification if the accommodation or modification will result in an undue financial burden to the property or if it requires management to alter or change a basic component of the housing program.

If applicant has a physical or mental disability, and as a result of this disability there are reasonable accommodations that should be considered in an application, a note is attached to the tenant's application describing the reasonable accommodation(s) requested. A Reasonable Accommodation Request form may also be completed upon receipt of the application and further information may be required from to verify need for reasonable accommodations.

**Item 6 Supportive Services Plan**

**NOTE:** A tenant's participation in supportive services may not be a condition of occupancy in MHSA SNHP units.

Describe the development's approach to providing supportive services to MHSA SNHP tenants. The following information should be provided:

1. A description of the anticipated needs of the MHSA SNHP tenants;
2. The supportive service provider's initial and ongoing process for assessing the supportive service needs of the MHSA SNHP tenants;
3. A description of each service to be made available to the MHSA SNHP tenants, to include where and how the service will be delivered, the frequency of the service delivery and identification of the service provider. A description of the available services and supports should include, but not be limited to:
  - a) Mental health services
  - b) Physical health services (including prevention programs)
  - c) Employment/vocational services
  - d) Educational opportunities and linkages
  - e) Substance use services
  - f) Budget and financial training
  - g) Assistance in obtaining and maintaining benefits/entitlements
  - h) Linkage to community-based services and resources
4. Indicate whether or not there will be an onsite service coordinator, and include the ratio of onsite staff to MHSA SNHP tenants. If there is no onsite service coordination, provide a description of service coordination for the development;
5. A description of how services will support wellness, recovery and resiliency. It is anticipated that the supportive services plan for the development will include services that are facilitated by peers and/or consumers. If this is not part of your service delivery approach, please provide an explanation;
6. A description of how the MHSA SNHP tenants will be engaged in supportive services and community life. Include strategies and specific methods for engaging tenants in supportive services and the frequency of contact between supportive services staff and MHSA SNHP tenants. This description should also include the identification of staff (the responsible service provider) and specific strategies for working with MHSA SNHP tenants to maintain housing stability and plans for handling crisis intervention;
7. If the Development is housing for homeless youth, provide a description of services to be provided to meet the unique needs of the population including engagement strategies and peer involvement. In addition, provide a description of how transition-aged youth MHSA SNHP tenants will be assisted in transitioning to other permanent housing once they reach 25 years of age;
8. Supportive services must be culturally and linguistically competent. Describe how services will meet this requirement including, when necessary, how services will be provided to MHSA SNHP tenants who do not speak English and how communication between the property manager and the non-English speaking MHSA SNHP tenants will be facilitated;

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9. Describe the process to ensure effective communication between the service provider and the property manager regarding the status of MHSA SNHP tenants in the development and any other issues regarding the development, including but not limited to regularly scheduled meetings and the identification of a single point of contact for communication and coordination of supportive services; and,
10. If proposing to develop Shared Housing units within a Rental Housing Development, attach "House Rules".

### Response:

#### **1. A description of the anticipated needs of the MHSA SNHP tenants**

MHSA SNHP tenants will be MHSA-eligible individuals who are homeless and have a serious and persistent mental illness. Tenants may have a range of special needs and may be users of acute inpatient care, have co-occurring mental illness and substance use, and/or chronic medical conditions. Primary service needs include case management, assessment, psychiatric care, mental health services, educational and vocational services, co-occurring disorder services, crisis intervention, medical support, peer support, and housing services to facilitate participants' journeys toward wellness and recovery. A significant goal of all participants in the program is establishing permanent housing and the ability to live independently. The independence level varies based on individual needs with the primary focus upon establishing a safe and stable environment which provides a foundation of security and consistency. In the HCA AOABH Programs, the philosophy is to meet clients where they are, doing "whatever it takes" to collaboratively offer client-centered services focused on recovery. For that reason AOABH offers a range of service providers designed to meet the needs of participants as they continue to progress toward recovery. Services will be provided on or offsite according to the residents' preferences.

#### **2. The supportive service provider's initial and ongoing process for assessing the supportive service needs of the MHSA SNHP tenants**

The County of Orange HCA Adult and Older Adult Behavioral Health Division (AOABH) represents all of the County of Orange Health Care Agency program which was created to provide voluntary, client-centered, culturally sensitive mental health services that support wellness, recovery and resiliency to adults diagnosed with a serious and persistent mental illness who are homeless or at risk of homelessness. This division is dedicated to the provision of accessible, effective, high quality community-based counseling and social services as an alternative to traditional institutional care. These programs provide services throughout Orange County in locations that are comfortable and safe for clients. Program sites consist of a multiple disciplinary team of professionals working together to improve the overall quality of life for participants in the program, helping them regain independence and achieve their goals. HCA AOABH is dedicated to providing comprehensive services that are coordinated, proactive, and effective in promoting wellness and recovery for homeless adults with mental illness living in Orange County.

Each participant interested in any AOABH Program is assessed for appropriateness based on their individual needs. A full history is taken during the initial assessment meetings including discussion about participants' past and present living situation, history of mental illness, substance abuse issues, medical issues, financial situation, housing, social supports, and more. Once admitted to the program, every participant is assigned a dedicated Plan Coordinator (PC) or Personal Services Coordinator (PSC) who works closely with them to reach their goals. The PC or PSC functions as a case manager, providing primary oversight to participants on an individual basis and coordinating linkage to all services, both internal and external. The PC or PSC provides ongoing assessment and support to participants through regular visits at whatever location is convenient for the participant. Though each client has a dedicated case manager, some programs (PACT, FSPs) follow a team approach to treatment, while others are more coordinated by the case manager in collaboration with the treating physician and Service Chief. The case manager works in coordination with the Clinical Team i.e. other PCs or PSCs, the psychiatrist and nurse, to ensure that the above listed needs of the participant are

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met. The PC or PSC is responsible for developing the master treatment plans annually for each participant on their caseload and to provide individualized goals with plans to help participants establish progressively higher levels of independence and recovery. The PCs and PSCs work collaboratively with the multi-disciplinary treatment team under the direction and guidance of the Service Chief, who is a licensed, master's level clinician.

HCA, in collaboration with Mercy House, will identify prospective tenants from its case management and outreach system and through other Orange County homeless and behavioral health service providers for tenancy at Aqua. Intake will involve a comprehensive mental health assessment to verify that prospective residents meet the requirements of the Mental Health Services Act. Qualified applicants will also be financially evaluated and linked to appropriate public assistance programs to ensure that they have maximum access to benefits that assist in maintaining residency in a permanent supportive housing environment. All applicants will be provided assistance from Mercy House staff in obtaining necessary documentation and will be given a reasonable amount of time to obtain required documentation and verifications. Case Managers will also assist in any appeals or reasonable accommodations requests as desired by the applicant. This process strongly enforces the Housing First practice and assures that high-acuity homeless individuals, who might encounter additional barriers when navigating the extensive housing placement process, are given immediate access to the appropriate resources.

Supportive services provided at Aqua will be jointly determined with the client/tenant, client-centered and client directed, and voluntarily chosen by the client/tenant to the greatest extent possible.

Services are typically provided on-site, with staff visiting tenants on a weekly or monthly basis, with the frequency depending on individual need. Some services will also be provided off-site as programmatic and staffing needs dictate. Staff members will meet with clients in their homes or in the community as often as possible to assess their ongoing needed level of support.

As described above, each participant of any AOABH Program receives an assessment that covers the major areas of their life and is based on input from a wide variety of sources. The treatment plan focuses on the participant's strengths and identified areas of need. While all services are voluntary, all participants have a Treatment Plan that reflects their personal wellness goals related to housing stability. Each participant is active in developing this plan with their PC or PSC. This plan contains goals and objectives which incorporate their unique strengths, needs, abilities, and preferences, as well as identified challenges and problems.

Through a combination of Mental Health Services, Supportive Services, and Housing Services, housing stability can be achieved by all MHSA Special Needs Housing Program participants. Participants will gain a sense of belonging to a community, and enjoy the feeling of being capable and able to live independently in a community setting. Participants will be empowered by supportive services that help them redevelop social and independent living skills. PSC's, PC's and Peer Mentors may role model social and independent living skills and provide different options for addressing various situations and support participants as they try out new things. These staff will provide a range of off-site services as well, including linkages to community resources for food, entertainment, recreation, exercise, spiritual, mental health, medical and dental needs.

Each participant's treatment plan is reviewed and updated annually as participants achieve goals. The program Psychiatrist and/or Nurse Practitioner will conduct a thorough annual clinical assessment and provide or update a complete diagnosis for each participant. This individual will also prescribe psychotropic medication as appropriate and will provide ongoing, regular assessment and medication evaluation. The Psychiatrist and/or Nurse Practitioner also reviews all clinical documentation presented by the clinical team to ensure accuracy. The Service Chief or Program Director is responsible for all administrative and clinical program functions. The Service Chief/Program Director is also responsible for the clinical review of all non-medical documentation.

As the non-clinical case management and residential services partner, Mercy House will provide regular

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availability of staff and an onsite presence that will help to reduce the barriers these clients face in connecting with supportive services throughout the community, lessening the likelihood of lengthy waits and lapses in care. Upon move in to the community, staff will begin developing trust and rapport with the client in a multi-phased approach and start to build the clients' community of support to help make the transition from homelessness to housing more successful. During the first phase, the case manager may meet more frequently with the client helping them to get acquainted with their new surroundings and begin to learn to maintain their home. Together the tenant and the case manager will begin to create an Individualized Housing Plan. The plans and timelines for each client are client centered and are tailored to each individual's circumstances, needs, strengths, level of engagement, and wishes. Case Managers aid each client in achieving the goals of their plan by helping clients identify and obtain services and resources, on and off site that they need to maintain housing stability, increase their well-being and more fully integrate into the broader community. This includes clients in making decisions for themselves and sharing responsibilities. The plan may identify a number of areas in which the client needs additional support including housing stabilization, financial, employment, life skills, sobriety, physical and mental health and others. Coordination between the case manager, resident services coordinator and the HCA case managers will begin to connect clients to the additional supportive services they may need or benefits they are entitled to. At move-in the services coordinator will go through the different transportation options available to the resident. Overview of transportation options include on foot, by bicycle, or via OCTA bus routes.

During Phase 2, the case manager will begin to monitor and strengthen their support network and client's skills. Staff will be encouraged to engage residents in community building activities and events to help residents create a local support group which increases their self-worth and pride in their home. Residents will also be encouraged to participate in the Resident Advisory Council and participant in events and volunteer opportunities in the nearby area. The Resident Services Coordinator will schedule monthly life skills classes and a rotating schedule of partner agencies to bring their services on-site.

During Phase 3, case managers will develop long term goals with the client aimed at continuing housing stabilization. Staff will work closely with clients to prevent eviction, and will learn to identify the early signs of lease violations through case management, casual interaction, and observation, and close coordination with property management staff. When residents become delinquent in rent, have multiple housekeeping notices, or other lease violations, staff will work with the resident in case management to identify any difficulties they are facing in maintaining their housing. Staff will work with both the resident and property management to prevent eviction and help get the client back on track and in compliance with their lease agreement. Property management will be flexible in their terms and understanding if any conflicts should arise. The key to successful operations while maintaining resident stability will be constant open communication with property management. The property manager's main role will be to enforce the terms of the lease. However unlike traditional market rate housing, with the Housing First Principles being incorporated the property manager will immediately notify the Lead Service Provider of any lease violations or signs of instability from residents. By working together with open communication the Service Provider and Property Manager will attempt to diffuse issues before they lead to notices and subsequent evictions. To encourage communication, bi-weekly onsite meetings between the developer, onsite property management and services provider will be required. Topics will range from getting new applicants approved for move-in to resolving lease violations and identifying the ideal resident functions and new services to maintain long term housing stability and quality of life for the community.

Staff will continuously monitor client progress and well-being by establishing at least weekly contacts with all tenants including welfare checks for those not participating in case management.

### **3. A description of each service to be made available to the MHSA SNHP tenants**

The supportive services provision will be based on Housing First principals coupled with ongoing education and supportive services that focus on homeless or formerly homeless individuals' assessed needs. Trauma informed care and motivational interviewing strategies allow staff to address the

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individual's identified needs, allowing trust and rapport to develop. Regular availability and visibility on-site will reduce the barrier of connecting to a service provider as needed and reduce lengthy time lapses to connecting to services.

Supportive services will be designed to focus on intensive case management, with emphasis on behavioral health and primary health issues, independent living skills, and employment/educational goals. Intensive case management includes individualized service planning and goal setting, coordination of services, counseling and support, crisis intervention, intensive assistance with accessing mainstream services and other community-based resources.

All services emphasize enhancing the resident's quality of life and include community building activities and events to help residents develop a local support network and increase their sense of self-worth. Housing First strategies such as an Eviction Prevention program will be implemented wherein the warning signs of lease violations are identified early, through regular case management meetings, casual observation and interaction, and close coordination with property management staff.

When residents become delinquent in rent, have multiple housekeeping notices, or other lease violations, Mercy House services staff will supplement the case management services that the tenants are already receiving through HCA. The extra intervention will help clients to address the issues that have put them at risk of eviction. Mercy House and/or HCA case managers and property management staff work together to educate the resident and create a plan for getting back into compliance with the lease. Property management staff will be flexible in negotiating the terms of a "work out" plan with regards to late rent payments or other lease violations.

HCA AOABH Programs utilize the recovery model philosophy in providing services that focus on helping participants to attain maximum independence by promoting participant strengths and self-identified goals and objectives. The program's multi-disciplinary staff partners with participants to offer a full array of mental health and case management services which are provided in the field or whatever location is convenient for the participant. Participants have a range of abilities, needs, and goals, which call for flexibility in how and when services are provided. An important aspect of the program is that it provides intensive case management to this unserved/underserved

Typical Services Provided by Adult and Older Adult Behavioral Health Programs based on client need include:

- Intensive case management and service coordination, with personalized, focused treatment plans.
- Symptom management, using counseling and psychotherapy services.
- Medication education and/or medication support services; assistance with medication administration as needed, both on and off-site.
- Nursing staff work closely with medical providers, maintaining a relationship with a local clinic and coordinating care with participants who have their own medical provider. Those who don't have a medical home will be assisted to establish one.
- Education support to develop further independence for those who are interested in, and have the ability to pursue educational endeavors.
- Mental health symptom management skills such as keeping appointments with doctors and labs and developing new ways to cope with stressful and general life situations without symptom exacerbation.
- Developing independent skills including, but not limited to budgeting, grooming, cleaning, cooking, and navigating public transportation.
- Developing coping skills to manage the following: crisis, relationships, conflict resolution, unhealthy thoughts, and help with family and social relationships.
- Discussion groups focused on topics such as: making positive choices, assessing harm potential and limiting possible adverse effects on daily living such as safety, medication compliance, healthy eating habits, etc.
- Drug and alcohol counseling, education, and linkage as indicated. Or recovery program linkage as needed.

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- Medication education: a great deal of education is provided to participants to help them understand the ramifications of medications. The dually diagnosed population is often prescribed multiple medications and is often unaware of interactive effects and the importance of following prescribed protocols.
- Education and graduated practice accessing resources and referrals to build self-sufficiency and resiliency.
- Staff-led groups on a variety of topics including socialization, understanding emotions and feelings, crafts, and exercise groups tailored to the needs of this population.
- Vocational rehabilitation and educational skill development and assistance.
- Assistance with legal issues through referral and partnership with legal resources in the community.
- Assistance in obtaining benefits. This PC or PSC works to provide a link with participants to Social Security or will work with Medicare or Medi-Cal to coordinate benefits for participants as quickly as possible. Every participant who comes into any AOABH program is reviewed for benefit eligibility and access. The Plan Coordinator helps participants in filling out all necessary paperwork, and links them with SSI Outreach to facilitate the process of benefits acquisition.
- Community-building to establish connections and stability for participants in their individual community including linkage as appropriate to senior centers, places of worship, medical care, and shopping.

Additionally Residential Services will be delivered on-site by a Residential Clinical Services Coordinator (RCSC). The Residential Clinical Services Coordinator will hold regular hours at the property and will ensure that: all residents have a sense of community and quality of life, coordinate with partner agencies to be on site as well as assist those seeking access to off-site services, coordinate life skills workshops, host or arrange community events to decrease tenant isolation, provide tenant landlord mediation, and conflict resolution between tenants.

Property Management, along with Residential Clinical Services Coordinator will coordinate resident meetings at least quarterly (or more frequently if needed or requested) to encourage discussions related to the needs of the residents, including but not limited to such topics as apartment living; meeting neighbors; becoming familiar with the surrounding area and any opportunities in general; operations and services concerns or suggestions; and resident activities.

Residential services like supportive services that are offered to MHSA tenants at Aqua are voluntary, and designed to respond to the varied, identified special needs of the tenant population.

As needed, one-on-one discussions will occur, as all parties realize and understand not all people are comfortable in a group setting. The goal is to insure each resident will have ample opportunity to have his or her opinions heard.

After initial lease up, on-site management will work with Resident Services Coordinator to schedule discussions or distribute a survey regarding services planning and operations. Doing so will allow residents to provide input on the services provided. Results of surveys, individual feedback and discussions will be used to adjust services plans and better meet needs specific of our residents.

Residents will be encouraged to participate in the Resident Advisory Council to contribute to larger discussions regarding services, planning, and operations. Facilitated by staff, the Resident Advisory Council will meet on a quarterly or as needed basis to voice their concerns or improvements to the property and/or services. Residents will also be notified of free events and volunteer opportunities in neighborhood.

The project will include community area for community gatherings and social functions to enhance a sense of community and help promote resident interaction. Events such as potlucks, community funded BBQs and yoga are all ways to encourage resident interaction.

With existing partnerships with local advocacy agencies such as HCA and Mercy House, the project is



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uniquely positioned to access experts and service allies to support the critical needs for homeless residents. Mercy House will provide peer support and regular training on homeless-specific needs. Mercy House will continuously assess the existing services/activities and develop innovative and improved ways to provide relevant and appropriate services to meet the clients' individual needs.

#### **4. Indicate whether or not there will be an onsite service coordinator, and include the ratio of onsite staff to MHSA SNHP tenants**

The HCA AOABH system offers varying staffing ratios, depending on the level of functioning of the participants. HCA AOABH staff will provide 0.5 FTE of services both in clinic settings and in the community, with a significant amount of interaction provided at the participants' residences especially among participants of lower ratio programs such as the PACT Program or Full Service Partnership (FSP's) programs. HCA Residential Care and Housing Office provides Residential Clinical Service Coordinator (RCSC) Services which are also provided onsite; additional clinical services are provided by other HCA clinical staff at locations with which clients are familiar and feel safe, such as their clinic program office or public places of their choosing. The services are provided directly by the Orange County Health Care Agency and/or its contractors, including Full Service Partnerships (FSPs).

In addition to the staffing outlined above provided by the Aqua project, it will be staffed by Mercy House who will provide a minimum of 0.20 FTE Case Manager (CM) and 0.10 FTE Residential Services Coordinator (RSC). The CM and RSC will provide access to client services related to mental health, medical health, substance abuse and other needed resources.

Mercy House will provide high quality supportive services that are designed to help formerly homeless people maintain stable housing and generate positive changes in their lives while residing at the Aqua.

Mercy House has been providing supportive services and comprehensive case management to homeless individuals, Veterans and families in Orange County for over 27 years. Mercy House staff has extensive knowledge of needs and barriers faced by the homeless in our community, as well as a variety of resources helpful to their success including experience in coordinating care with various support agencies.

#### **5. A description of how services will support wellness, recovery and resiliency. It is anticipated that the supportive services plan for the development will include services that are facilitated by peers and/or consumers.**

AOABH Programs approach services with the Recovery Model as its foundation. Recovery is the awakening of hopes and dreams. It is a deeply personal, unique process of understanding one's attitudes, values, feelings, goals, skills, and/or roles. It is a way of living a satisfying, hopeful, and contributing life. Recovery involves the development of new or rediscovered meaning and purpose in one's life as one grows beyond the effects of untreated mental illness. The recovery process involves gaining the knowledge to reclaim one's power and achieve one's desires by learning to make choices that bring strength rather than harm. It is essential that program participants who are facing the challenges of mental illness and homelessness obtain permanent housing as both a springboard and a platform for recovery to occur.

In line with the recovery approach at AOABH many program sites employ Peer Mentors who lead Clubhouse groups and activities for clients. These are consumer level staff who have received training in providing services and hold paid positions in the program. Each of the Peer Mentors has an "included diagnosis" similar to the program participants. This provides them with additional insight and highlights the fact that there is no reason for participants to be limited in their abilities to achieve success and they can achieve successes by effectively managing their own diagnoses. The role of Peer Mentors is to provide ongoing support and encouragement as a peer to participants in the program. Rather than being assigned to specific participants similar to a PC or PSC, the Clubhouse Coordinators maintain a drop-in activity center open to all clients in the program. It is through this

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Clubhouse that these peer employees build relationships with the participants and provide the above services.

MHSA residents of the Aqua project have access to the County of Orange's AOABH Wellness Center in Tustin. This site offers a variety of classes and activities daily for people with serious and persistent mental illness and is very popular.

Additionally, Mercy House's service delivery model will be based on a number of evidence-based practices that are complementary to one another and are agile to meet the needs of a diverse set of residents. The supportive services philosophy and design promotes and supports, housing stability, independence, community building and the development of support networks, and participation in meaningful activities within the broader community. The models used are:

1. Strength-based practices and motivational interviewing techniques will encourage the tenant to participate in social services, develop an individualized housing plan, and become an agent of change in their own lives.
2. Harm Reduction practices will provide care and support to those with addiction and substance abuse.
3. Trauma-informed practices will enable the case manager to build trust and rapport with homeless and veteran clients. Connection to Peer Support Groups will be included in this area of service delivery.
4. Critical time intervention strategies will be employed to strengthen the tenant' support network and develop their skills to maintain housing on their own.

### **6. A description of how the MHSA SNHP tenants will be engaged in supportive services and community life.**

Strength-based practices and motivational interviewing techniques are used to engage residents in creating individualized service and housing plans. Residents who are active in the service process are more likely to succeed. Service needs are then consumer-centered and driven and culturally sensitive to the needs, daily lifestyle, and comfort zone of the resident. Services are provided on site or within community to reduce barriers to access. Residents are also encouraged to participate in the Resident Advisory Council to contribute to larger discussions regarding service suggestions and needs. Resident surveys requesting services feedback will be conducted at completion of initial lease-up and quarterly at minimum to determine residents' needs and requests. Follow-up meetings to discuss anonymous feedback will help promote resident conversations around services. To promote a high level of response from surveys, gift cards, breakfast on the go, and community dinners will be offered where surveys can be completed.

One-on-one discussions along with community forums to gain community feedback on services will be held. Comments/feedback will be categorized and the changes most requested will be discussed at community get-togethers and changes implemented. Follow up surveys and individual discussions will be held to determine if the changes to services have been effective.

Staff will continuously monitor client progress and well-being by establishing at least weekly contacts with all tenants including welfare checks for those not participating in case management.

The project will include community areas for community gatherings and social functions. Events will be planned around the courtyard to enhance sense of community and help promote resident interaction. Events such as potlucks, community funded BBQs and yoga are all ways to encourage resident interaction.

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- 7. If the Development is housing for homeless youth, provide a description of services to be provided to meet the unique needs of the population including engagement strategies and peer involvement.**

Aqua is not expected to serve youth or transitional aged youth.

- 8. Supportive services must be culturally and linguistically competent. Describe how services will meet this requirement including, when necessary, how services will be provided to MHSA SNHP tenants who do not speak English and how communication between the property manager and the non-English speaking MHSA SNHP tenants will be facilitated.**

The HCA AOABH team has language capabilities among staff that include bilingual Vietnamese, Spanish, Farsi, Arabic, and Korean. Additionally, Mercy House has bilingual Spanish staff members. As needed, Mercy House in working as the liaison between the tenant and landlord will help to secure a needed translation service resource that can broker the line of communication between the tenant and landlord.

- 9. Describe the process to ensure effective communication between the service provider and the property manager regarding the status of MHSA SNHP tenants in the development and any other issues regarding the development, including but not limited to regularly scheduled meetings and the identification of a single point of contact for communication and coordination of supportive services**

Consistent with previously developed projects by Community Development Partners, Mercy House and Solari Management, a single point of contact from Mercy House will be the representative communicating with on-site property management and HCA. Weekly meetings will be held between Mercy House, Solari, and HCA case managers to ensure that the highest standards of compliance with SNHP rules and regulations are followed.

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

Aqua will not be a shared housing development, therefore house rules are not applicable.

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**Item 7 Supportive Services Chart**

Complete the Supportive Services Chart. The Chart must list all services that will be provided to MHSA SNHP tenants, including any in-kind services essential to the success of the Supportive Services Plan.

Supportive Service	Service Location	
	Onsite	Off-Site
<i>Additional services not listed below may be added at the bottom of the checklist.</i>		
Comprehensive Assessment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Development of Coordinated Care Plan/Treatment Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mental Health Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Case Management Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Individual and Group Psychosocial Rehabilitation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Housing Retention Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Psychiatric Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Co-Occurring Disorder Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Medication Support Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Employment Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Education Support Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Medical and Wellness Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Recovery Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Transportation Assistance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Benefits Counseling	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Social Skills Development	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Community Linkage	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Peer Support Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Basic Needs and Emergency Financial Assistance (food, clothing, furniture and household supplies)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
24/7 Crisis Intervention	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

\*Transportation, assistance with, or access to transportation, will be provided for all off-site services.

## Item 8 Design Considerations for Meeting the Needs of the MHSA SNHP Tenants

Describe the following:

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

### Response:

#### **1. Physical space, including common areas, outdoor areas, landscaping, physical access to the property, security**

Aqua will fill a need for permanent housing opportunities for the homeless population of Santa Ana providing nearly sixty (60) dwelling units among a diverse array of amenities, open spaces and services. Its location is ideally situated among over two dozen public, social and health service providers, most within a ten minute walk of the Aqua community. Access to public transit on 17th St. and the nearby Main St., further connect these future residents to the services that can help them seek stability and wellness in their lives.

The development is configured as a series of three buildings, two consisting of mostly dwelling units and the third hosting community amenities, on-site management, and spaces for service providers. These interlocking bar-buildings are connected by a series of open walkways, engaging staircases and elevators where necessary. The open walkways and staircases are designed to maximize residents' access to natural light and air while maintaining strong visual connections throughout the community. Along the western portion of the property are a variety of outdoors community spaces each designed to serve the different emotional and social places residents might be as they live at Aqua. The community building hosts various amenities from shared dining and living rooms to exercising physically and mentally. Atop the podium deck is a community deck that can be used for social gatherings or organized activities like yoga. To the northwest portion of the site is a lawn area for sports and other leisure activities as well as a walking path and barbeque area.

#### **2. Supportive services space (if any), including any quiet area on site for tenants to meet service staff**

Supportive services will have a dedicated community rooms to use and meet with SNHP residents as well as a private office for HCA staff. In addition to the dedicated rooms, there will be a dining hall, conference room, computer lab, and conference room.

#### **3. How the MHSA SNHP units will be designed to provide appropriate accommodations for physically disabled MHSA SNHP tenants, if appropriate**

The SNHP units will be a mix of studio and one-bedroom units that have been designed to be adaptable to serve physically disabled residents, and will come fully furnished including full-sized refrigerators and microwaves. As part of the designed review process, a Certified Accessibility Specialist will review and plans to ensure that each unit is compliant with the latest accessibility codes.

