

SANTA CLARA COUNTY PROGRAM GUIDELINES – FIFTH DRAFT
Supportive Housing Development Program¹

Item	Term Sheet (August 2019)
<p>Program Overview and Objectives</p>	<p>The County of Santa Clara (County) Supportive Housing Development Program finances the development of multi-family rental housing for the community’s most vulnerable populations. The Supportive Housing Development Program’s primary objective is to reduce and prevent homelessness by:</p> <ol style="list-style-type: none"> a. Developing permanent supportive housing (PSH) units for persons with disabling conditions; b. Developing rapid rehousing (RRH) units for people who need short-term rental assistance and services to obtain and maintain permanent housing; and, c. Increasing the supply of housing that is affordable to extremely low income and very low income households. <p>Between July 1, 2017, and June 30, 2028, the County’s goal is to develop or finance at least 4,800 new housing units. Of the 4,800 units, at least</p> <ul style="list-style-type: none"> • 1,600 units would be used as RRH for families or individuals who are homeless; • 1,200 units would be used as PSH for persons with disabling conditions and who are homeless, including chronically homeless men, women and families; • 600 units would be used as PSH for persons with disabling conditions who may or may not be chronically homeless; • 1,400 units would be used for other ELI households; • 50 units would be prioritized for adults with intellectual and developmental disabilities and their families; and • Assist in the development of units to assist workers in Santa Clara County maintain homes or move into the County they work. <p>To meet these goals, the County will use a variety of funding sources. The following guidelines apply to all of the County’s housing development funds, some of which may have additional restrictions or requirements. The County will issue a Notice of Funding Availability (NOFA) that will specify how developers may apply for Supportive Housing Development Program funding. The County may periodically update the NOFA.</p> <p><u>Reservations</u></p> <p>The County reserves the right to withhold or delay awarding funds to any project even if the project meets the threshold eligibility under the Supportive Housing Development Program’s guidelines and the NOFA’s requirements. The County reserves the right to fund projects that do not meet these guidelines if it is in the best interest of the County. For example, the County may have to fund a project in order to meet timeliness requirements of a specific funding source such as the Home Investment Partnerships Program (HOME).</p>

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Priority Populations	<p>PSH units shall be prioritized for individuals who need ongoing supportive services in order to obtain and maintain stable housing. PSH units shall assist individuals or families with a disabling condition, who are extremely low income, and who are:</p> <ol style="list-style-type: none"> a. Chronically Homeless; b. Homeless; c. Leaving institutions, including, but not limited to, hospitals, residential care facilities, and skill nursing facilities; or, d. At imminent risk of homelessness. <p>RRH units shall be prioritized for individuals or families who are extremely low income (earning up to 30% AMI) and who are:</p> <ul style="list-style-type: none"> • Homeless; or • At imminent risk of homelessness. <p>Note that RRH Program participant household’s income are expected to be less than or equal to 30% AMI at program entry.</p> <p>I/DD units shall be prioritized for individuals or families who are extremely low income and/or very low income and who are eligible to receive services through the San Andreas Regional Center.</p>
Eligible Project Types	<p>Under the Supportive Housing Development Program, the County will make funding available for new construction or rehabilitation. The following are the County’s eligible project types:</p> <ol style="list-style-type: none"> 1. Type 1: Projects that commit at least 50% of the units within the project as a combination of PSH and RRH units. (Note the County will select and/or approve the target population for PSH units). 2. Type 2: Projects that have an affordability structure resulting in an average affordability of 45% of AMI and commit a minimum of 1/3 of the affordable units as a combination of PSH and RRH, 1/3 of the affordable units for ELI households and 1/3 of the affordable units for households earning up to 80% AMI. 3. Type 3: Projects that commit at least 25% of the restricted units within the project for individuals with an intellectual or developmentally disability and their families. <p>Note that the County will be prioritizing development projects that increase the inventory of affordable housing units that provide a range of affordability and promote the integration of different population types within a development. For the purposes of meeting a project type, NPLH units will be counted as PSH Units. All units designated as NPLH units must house the target population as defined in Section 101(qq) of the NPLH Guidelines and in no case shall more than 49% of the units be designated as NPLH units. For clarification purposes, a development can be 100% PSH but only 49% of the total units in the development will be designated as NPLH units.</p>

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<p>Mixed Income Housing Program Goals</p>	<p>Through this update the County is making available up to \$100,000,000 for a new Mixed Income Housing Program for integrated developments that provide newly constructed multifamily housing projects that result in truly mixed income housing developments for households earning up to 120% AMI. Rather than support stand-alone projects, the County is seeking innovative projects that provide more than 4 AMI tiers and proposed in conjunction with Project Type 1 or 2. Given the limited resources, proposals under this category will be individually negotiated and the final subsidy amount will be based on actual project needs. Factors that will be used to consider the County’s final funding amount include the timing and availability of other funding sources.</p>
<p>Projected/ Anticipated Operating Subsidy Type</p>	<p>The County anticipates that an operating subsidy of some type will be needed for each PSH or RRH unit. The County anticipates that an operating subsidy will be provided either through a capitalized operating reserve <u>or</u> through a rental subsidy. Operating funds in the form of a rental subsidy, will be provided through a project based or tenant based subsidy. The subsidies shall be sized to ensure that the property has sufficient rental revenue to meet operating expenses (including debt). Thus, subsidy amounts shall vary by project.</p> <p><u>PSH</u>: The County anticipates that the PSH units will primarily be provided with a project-based rental subsidy or a capitalized operating reserve. However, in some cases the County may use a tenant based rental subsidy for PSH units.</p> <ul style="list-style-type: none"> • <u>Project based rental subsidies</u>: Project based rental subsidies will be provided to units designated as PSH at an amount sufficient to cover the operating costs for those units. The amount of the rental subsidy shall be based on the Project’s ability to pay for operating costs and the amount of hard debt that is supported by the operating subsidy income or “overhang.” • <u>Capitalized Operating Reserve</u>: The subsidy shall be sized to cover anticipated operating deficits attributable to the PSH units. The total amount of the subsidy will be determined upon the individual Project underwriting performed by the County pursuant to the requirements of these guidelines. Typically, the County expects the reserve to be sized for a 15-20 year period. <p><u>RRH</u>: As needed, tenant based rental assistance will be provided to individuals participating in RRH programs. Generally, the rental subsidy provided for RRH units is sufficient to cover the difference between the tenant’s ability to pay and the full restricted rent of the unit.</p> <p><u>I/DD</u>: Developers are encouraged to apply for long-term project-based rental assistance funding (i.e. Section 811 Rental Assistance)</p> <p><u>Other ELI/ VLI Units</u>: No rental assistance or operating reserve will be funded through the County’s Supportive Housing Development Program. The County expects that the Project will, at a minimum, provide the minimum service amenities appropriate to the “Housing Type” under the California Tax Credit Allocation Committee (CTCAC) Regulations and/or the State of California’s Uniform Multifamily Regulations (UMRs).</p>

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Projected / Anticipated Supportive Services Subsidy Type Continued

County provided supportive services will be offered for both PSH and RRH units as follows:

PSH Units: The County will ensure that sufficient and effective supportive services are provided to PSH residents. Typically, the County will enter into a Memorandum of Understanding (MOU) with the property owner. The supportive services are in addition to “resident services” that the owner provides. The supportive services shall be coordinated and managed by the County. However, the supportive services may be provided by a combination of County staff or community-based organizations who have experience with chronically homeless individuals and families, including those who are high users of safety-net services such as emergency and acute health services. The Service Provider integrates case management, clinical services, educational and vocational services and housing services to help chronically homeless individuals obtain and retain permanent housing. The Service Provider is responsible for helping individuals:

- a. Enroll, engage and remain engaged in services;
- b. Obtain permanent housing as quickly as possible, with the goal of moving into housing within 60 days of enrollment in case management;
- c. Remain housed for at least 12 months or leave the program for other stable and affordable housing situations;
- d. Improve their health and wellness, an indication of which can be a reduction in the unnecessary utilization of emergency and acute health services;
- e. Improve their self-sufficiency by obtaining and retaining sufficient resources to meet their basic needs;
- f. Obtain and retain stable income that is greater than or equal to \$850;
- g. Receive appropriate medical and behavioral health services; and,
- h. Meet the goals that they set for themselves with respect to self-sufficiency, employment, and quality of life.

On average, supportive services provided through the County will cost \$11,000 per unit per year, an expense which will be external to the project’s operating budget. Over time, as individuals recover, the County anticipates that their utilization of services will diminish or change. However, the supportive services shall be provided or offered to PSH residents for as long as the development maintains a set aside for PSH. When financially feasible, a portion of the supportive services costs will be covered as an above the line expense. Supportive Services will be provided by the County for a term of 20 to 40 years.

RRH Units: Similar to PSH units, the County will provide the supportive services that are necessary to help RRH participants obtain and maintain stable housing. The key differences are that in RRH units:

- a. The supportive services will range between \$5,000 and \$7,500 per unit per year because the households’ are not disabled and generally need less medical and behavioral health services;
- b. The cost of the supportive services is in addition to a tenant-based or other rental subsidy that is provided to each unit for a period of three to 24 months; and,

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<p>Projected/ Anticipated Supportive Services Subsidy Type Continued</p>	<p>c. The supportive services are provided for three to 24 months.</p> <p>Other ELI/VLI Units: No additional supportive services will be provided by the County. The County expects that the Project will, at a minimum, support CTCAC’s minimum service amenities appropriate to the Housing Type.</p> <p>I/DD Units: The County is currently in discussions with the San Andreas Regional Center (“Regional Center”) to provide services for PSH County clients.</p> <p>In the interim, services and support provided for persons with developmental disabilities shall be committed by Regional Center and are intended to be life-long. A wide-range of services and supports may be available to assist the individual with the acquisition and retention of adaptive skills that will enable the individual to safely reside in their own home or apartment, as well as, socialize, recreate and fully integrate into their community. Services provided by the Regional Center may continue as long as the individual is eligible to receive Regional Center services, the needed services are specified in the individual’s Individual Program Plan (IPP), and the services are not available through another community resource. Types of services and supports provided through the Regional Center may include, but may not be limited to, Case Management; Supported Living or Independent Living; Health and Clinical Supports; Adaptive Equipment and Environmental Modifications; Day Activities and Vocational Services and Supports. Transition set-up supports for individuals leaving an institution may be available to assist someone to transition from an institution into the community. These services may include moving expenses, one-time set-up fees, i.e. utilities, or security deposits required to obtain a lease or an apartment.</p> <p>NOTE: The County will provide the required mental health services and help coordinate access to other community-based supportive services for a minimum of 20 years for the NPLH units consistent with Section 203 of the NPLH guidelines.</p>
<p>Key Service Principles and Service Components</p>	<p>Key Service Principles</p> <ol style="list-style-type: none"> 1. Housing First: Housing is the foundation upon which homeless persons can end their homelessness, address their health conditions and improve their stability and self- sufficiency, the Service Provider makes every effort to place individuals in housing as quickly as possible with the least number of pre-conditions. Once housed, even the “hardest to serve” can succeed with proper support. Participation in services are not required. However, participation in services are encouraged, and the Service Provider is required to continually implement engagement strategies. The only behaviors that might trigger an involuntary exit from the program are those associated with serious or repeated lease violations, unit abandonment, or long-term incarceration/institutionalization. 2. Community-based service delivery: The team provides clinical services in the settings where the participant is most comfortable. 3. Consumer choice: Each participant can define his/her own recovery goals. 4. Recovery: Everyone is capable of recovery but it will look different for each person. With stable housing and appropriate services, individuals will become healthier, more stable, happier and more self-sufficient.

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**Key Service Principles
and Service
Components –
Continued**

5. Harm reduction: The Service Provider focuses on reducing the negative consequences of drug use, not enforcing sobriety.
6. Success: The Service Provider continually reinforces the possibility of success for each participant, conveying that faith and hope directly to them, so that they eventually believe in themselves.
7. The Service Provider maintains a “whatever it takes” approach to meeting the clients’ needs and ensures that the changing needs of the clients are met.

Service Components. The Service Provider in conjunction with the County is responsible for:

1. Outreach, Enrollment, Assessment and Planning
 - a. Locating each potential Supportive Housing Resident, establishing trust and rapport and enrolling the individual (or family) in the Service Provider’s program.
 - b. Conducting assessments to identify psychosocial, life skills and functional needs, eligibility for entitlement programs (e.g., General Assistance, IHSS, etc.) and self- sufficiency needs;
 - c. Maintaining appropriate levels of engagement and sustaining clients’ belief in recovery; and;
 - d. Developing client-centered service plans to obtain and retain housing, improve health conditions, improve daily living activities, increase meaningful daily activities and to achieve long-term stability.

2. Housing Attainment and Retention
 - a. Assist clients to obtain and maintain permanent housing by assisting with rental application processes (and re-certifications), appeals, and making referrals to services that would facilitate tenancy (e.g., financial education programs for those who have been accepted on a credit appeal);
 - b. Helping the client understand lease provisions and property requirements;
 - c. Assisting clients with their move-ins including coordinating furniture and household goods;
 - d. Providing clients with the skills/knowledge to be successful tenants;
 - e. Helping to resolve disputes between the participant, property management and/or other residents;
 - f. Helping individuals respond to effectively and appropriately to lease violations;
 - g. Responding to crises identified by the client, the property management, or other persons (as appropriate) within one business day;
 - h. Helping clients relocate to other permanent housing when it is in the best interest of the client; and,
 - i. Performing wellness checks when needed.
 - j. Attend meetings as required by this project. Ensure that the Supportive Housing Residents’ case managers participate in these meetings as appropriate.

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**Key Service Principles
and Service
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3. Treatment and Services. All services are voluntary, connected to a treatment or services plan, responsive to the participant’s needs/diagnosis, and geared toward helping them manage symptoms. The Service Provider:
 - a. Provides or helps clients access primary care, specialty care, dental care and behavioral health services, including substance abuse counseling, Individual and family counseling, crisis intervention/support and medication management/education;
 - b. Coordinates health services or supports health care providers in their efforts to coordinate health services;
 - c. Assists clients in applying for assistance programs including, but not limited to, Medi-Cal and MediCare, Supplemental Security Income, General Assistance and utilities discounts;
 - d. Helps clients access employment services, job training, and/or volunteering opportunities;
 - e. Identifies, encourages and helps clients connect to social networks, peer support and leisure activities; and,
 - f. Assists clients with other basic needs such as transportation, food/nutrition, life skills and basic hygiene.

4. Staffing and Service Model. Individuals’ complex needs will require interdisciplinary teams to work in a coordinated manner. These teams may be part of one or a few organizations operating under the principles of service models such as Assertive Community Treatment (ACT). The size and composition of the team may vary depending on target population, case load size and organizational strengths.
 Regardless of team composition, each client will be assigned a case manager (aka, Intensive Case Manager, Personal Service Coordinator, Service Coordinator, etc.). The case manager is responsible for completing a full assessment, preparing a Treatment Plan, establishing and maintaining a therapeutic relationship with each participant on their caseload, and for coordinating treatment, services, supportive therapy, and crisis management. The case manager is the primary point of contact for property managers and resident services staff. Case managers will be mobile and will deliver most services at or near a client’s home. When warranted by case load size, appropriate facilities and client need, case managers will have offices (or office hours) on site.

 Staffing ratios and the frequency of services (e.g., case management sessions and home visits) will adapt based on client needs and progress toward goals. The concept is to have extremely low client to staff ratios during the initial engagement and move-in phase. For example, a case manager may work with five or fewer unhoused chronically homeless persons for three to six months before taking on additional clients. During the initial housing phase - the first 12 to 24 months of housing - case managers would have caseloads of 20 or less clients. During these two phases, case managers and service teams may have contact with clients daily or multiple times per week. It is expected that, for the majority of residents, this intensity will decrease over time as needs decrease.

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<p>Key Service Principles and Service Components - Continued</p>	<p>As needs and service interactions decrease, clients move into the housing retention phase. While all clients remain a part of the supportive housing program, client to staff ratios may increase, the service focus may shift to wellness goals, and the case management role may shift to peer support specialists or community workers who are a part of or working in conjunction with the Service Provider organization(s).</p> <p>Service levels and staffing ratios will revert to higher levels in response to client-specific needs and situations (e.g., medical emergencies that require more intensive care to help an individual recover and regain their health). Reversion to higher levels of service may be short-term, long-term or permanent. Regardless of how long a client has been housed, County and its Service Provider is responsible for ensuring an adequate level of service to achieve and maintain the goals described in section 1.</p> <p>Administrative Activities. The Service Provider is responsible to the County for accurately documenting services for assessment, care planning, clinical, billing, program assessment and reporting purposes. For most providers this includes use of or compliance with standards for the Homeless Management Information System and electronic health records for the specialty mental health and behavioral health system.</p>
<p>Threshold Eligibility – Applicants</p>	<p>Eligible applicants include Non-profit organizations, tax-credit limited partnerships or limited liability corporations, mission aligned for-profit affordable housing developers with a successful development track record, public agencies, other local jurisdictions, and joint ventures among any of these entities. (Note: Development partnerships where at least one developer has met any of the above requirements)</p> <p><u>Technical Capacity and Experience.</u> The applicant must demonstrate technical capacity and experience to successfully develop, own and manage affordable and supportive housing, including partnering with providers of supportive services.</p> <p>All applicants must include the following team members and the meet the below criteria.</p> <ul style="list-style-type: none"> • <u>Developer:</u> Developers who have successfully built and operated three to five restricted affordable rental housing developments, one of which includes at least 50% of the units as PSH or RRH and at least 50% of the units, with the exception of the manager’s unit, targeted to households with incomes at or below 80% AMI. Developers of Type III or Mixed Income Housing must demonstrate experience relevant to owning and developing affordable rental housing consistent with the requirements of the California Tax Credit Allocation Committee requirements. Ownership by an affiliated limited partnership for tax credit purposes will qualify as ownership of the project. Qualifications will require listing the number of affordable housing projects with “restricted” units that have been completed. Each team member will verify their role as a principal for the completed project listed

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**Threshold Eligibility –
Applicants -
Continued**

- Property Manager: The applicant team for a Type I or Type II development must include a property management agent with experience managing at least one project with at least 50 supportive housing units whose residents receive supportive services from a community-based organization for at least 24 months subject to satisfactory review by a local government funder on a previously managed affordable housing development. Type III developments must include a property management agent with experience managing 2 California Low Income Housing Tax Credit projects. The property manager may be the applicant’s own personnel, or a third-party contractor. The applicant or the applicant’s management agent must demonstrate successful approaches to managing affordable housing developments with similar populations as those being proposed. For proposals with supportive housing units, the approaches must be effective with residents who may continue to struggle with behavioral health and medical issues.

Skilled property management is critical to the success of affordable housing projects. Sponsors must provide information about the management agent and a brief description of how the property will be managed to ensure compliance with the core components of Housing First as defined in Welfare and Institutions Code Section 8255(b). Points will be awarded based on the experience of the named company or entity. The number of properties currently managed must be listed, along with addresses and the number of “restricted” and market rate units in each property. In addition, the number of years the organization or individual has been involved in property management must be identified.

In the event a separate sole purpose nonprofit developer/owner will utilize a separate Property Management entity for the proposed development subsequent to completion, the qualifications of the named individuals or organization must also be included in the response to the NOFA requested information.

- Resident Services: The Applicant must include a provider of services to residents of multi-family developments with at least 24-months experience. Skilled service providers are a necessity to enable projects with supportive housing to be successful. Applicants that do not include a supportive services provider as part of their application will be assigned a service provider that is already approved by the County. These service providers have already been determined to be high-quality with appropriate staffing and training to ensure successful service delivery to supportive housing. The Resident Services provider may be the applicant’s own personnel, or a third-party contractor. The Resident Services provider must have experience with supportive housing residents and experience coordinating with providers of supportive services.
- Supportive Services: All supportive services for PSH and RRH households will be provided by County staff and/or community-based organizations and other government agencies that have an agreement with the County. While the County would ultimately determine how the supportive services are provided, developers may participate in the selection process in two ways.

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<p>Threshold Eligibility – Applicants - Continued</p>	<p>The first process is used if the applicant has not identified a particular provider of supportive services. In this case, the applicant would participate in the County’s selection process <u>after</u> the applicant is successful in securing the County’s development financing.</p> <p>Alternatively, the applicant may identify one of the County’s contracted providers of supportive services as part of the application process. The provider need not be a partner in the development, but should be a significant contributor to the design of the development. The applicant must demonstrate why selection of the particular provider is advantageous for the development, the residents, and the County. The County reserves the right to accept or reject the applicant’s proposed service provider.</p> <p>Note that supportive services provided for I/DD households shall be provided by SARC.</p>
<p>Eligible Projects</p>	<p>Eligible Projects:</p> <ul style="list-style-type: none"> • New construction of multi-family rental housing • New construction of mixed use developments (containing both residential and non-residential space). Generally, the funding sources associated with the Supportive Housing Development Program will only be used to assist the affordable housing portion of a project or the mixed income units for households earning up to 120%AMI. Costs associated with developing the commercial portions must be separated from residential costs. • New construction of residential care facilities or other service-rich environments that provide permanent housing. • Acquisition and Rehabilitation of rental housing (for existing developments, the proposal must meet one of two identified eligible project types at attrition/turnover) <p>Minimum Development Size: None</p>
<p>Eligible Use of Funds</p>	<p>Eligible Use of Funds:</p> <ul style="list-style-type: none"> • <u>Predevelopment & Acquisition (see rates and funding terms for eligible expenses)</u> • <u>Development</u> <ul style="list-style-type: none"> ○ <u>New Construction</u> ○ <u>Acquisition and Rehabilitation</u> • Permanent financing

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Threshold Eligibility – Proposals

Must Demonstrate Site Control. Applicant must submit evidence that it possesses full site control, meaning that the Applicant has obtained an enforceable right to use a parcel of land prior to the submission of the proposal. This right may consist of fee title, ground lease, an exclusive negotiating agreement, DDA, purchase & sale agreement or an enforceable option.

Project Readiness. Applicant must demonstrate the capacity to secure all necessary funding for the development within three years of the selection date for Supportive Housing Development Program Funds.

Land Use and Zoning. Applicant must either 1) submit evidence that the proposed project is permitted under the current General Plan Land Use designation or Zoning Ordinance at the time of the proposal submission and that all appeal periods have concluded; or 2) Submit information as to why the project is appropriate to obtain zoning approval. The County reserves the right to consult with Local City staff to determine site-specific entitlement requirements.

Financial Feasibility of the Project (i.e. realistic development and operating budget projections) In order to be considered, the applicant must submit evidence of project financial feasibility for at least a 15-year period. If the project is a new construction or rehabilitation, the project also must demonstrate that it is feasible per guidelines for the 9% and 4% LIHTC program. Applicant must follow the underwriting guidelines in the NOFA so that the review panel is able to determine feasibility and compare projects against one another.

Tenant Selection Criteria. The applicant must submit a property management plan that has or will adopt tenant selection criteria guidelines that are consistent with the Housing First practices consistent with Welfare and Institutions Code 8255 and that: pose minimal barriers to entry, have a minimal number of steps; use a ‘screening in’ approach versus a ‘screening out’ approach; have clear mitigation steps that recognize the needs of homeless persons, chronically homeless persons and individuals with disabling conditions; and acknowledge the fact that individuals who are enrolled in supportive housing programs are actively addressing their housing barriers. PSH’s admission policies are designed to “screen-in” rather than screen-out applicants with the greatest barriers to housing such as having no or very low income, poor rental history and past evictions, or criminal histories. Tenant selection criteria will prioritize people who have been homeless the longest or who have the highest service needs as evidenced by vulnerability assessments or the high utilization of crisis services.

High-quality design and amenities. The project must incorporate high-quality design and amenities appropriate for the target population being proposed in a manner that ensures integration into the community. All project must include common space for residents. For PSH units, developments should include features that address the housing and services needs of supportive housing residents, such as secure entrances, meeting spaces with doors to enable case managers and service providers to meet confidentially with clients, and space for

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<p>Threshold Eligibility – Proposals - Continued</p>	<p>education, workshops, and recreation. The applicant must also demonstrate the extent to which the proposed development meets or advances County policies related to health, transportation and sustainability.</p> <p><u>Leverage.</u> Must propose the maximum use of available non-local funds to achieve the highest reasonable financial leverage of capital resources. Non-local funds include, but are not limited to Affordable Housing Program (AHP), Affordable Housing and Sustainable Community (AHSC), Multifamily Housing Program (MHP) and the Veterans Housing and Homelessness Prevention (VHHP) program. In addition, Measure A funds must be leveraged at a 1:3 ratio. For purposes of the Measure A leverage requirements local funds will be considered non-Measure A funds.</p> <p><u>Community Engagement Plan.</u> Applicants are required to commit to the design and execution of a Community Engagement Plan in conjunction with the County and the local jurisdiction’s staff that:</p> <ol style="list-style-type: none"> 1. Engages and informs elected and other public officials; 2. Builds active community involvement; 3. Addresses community concerns and engages with individuals who oppose the development; 4. Incorporates a communications strategy to inform and engage community members beyond proximate residents and businesses; and, 5. Incorporates the needs and feedback of potential affordable and supportive housing residents. <p>Applicants will be required to provide examples of community engagement efforts utilized in similar projects as the proposed project.</p>
<p>Loan Amount</p>	<p>The County’s goal is to ensure that developments maximize non-local funding sources and minimize development costs while not constraining development activity based on the availability of capital from existing funding sources. Moreover, the Supportive Housing Development Program, with several exceptions for HOME, NPLH and I/DD designated units, must be responsive to the different costs and needs of developments that will take place throughout the county, from Gilroy to Palo Alto.</p> <p>Thus, while the Supportive Housing Development Program does not identify maximums for loan amounts, total developments cost per unit, or local subsidy per development, the County would expect that:</p> <ul style="list-style-type: none"> • The total development cost is lower than or not unreasonably higher than similar developments that have been recently completed or that are underway. The County must ensure that the proposed costs are reasonable; • For developments using the 9% LIHTC program, the local subsidy makes up no more than 40% of the total development cost.

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<p>Loan Amount - continued</p>	<p>Other sources of appropriate financing must be identified, but not necessarily committed, at the time of application. Projects will be reviewed to ensure that only the minimum level of County subsidy needed will be provided. All other sources of funding must be committed before closing of the County’s Construction/Permanent Loan.</p> <p>HOME assisted units are subject to maximum per unit subsidy limits and the NPLH assisted units have a maximum subsidy per unit of \$200,000.</p> <p>I/DD units have a maximum subsidy per unit of \$200,000 and a maximum loan of \$4,000,000.</p>
<p>Underwriting</p>	<p><u>Financial Feasibility.</u> Proposed projects must demonstrate financial feasibility for both development and operations, assuming the underwriting standards appended to the NOFA.</p> <p><u>Supportive Services.</u> The cost of case management and service coordinators included in the Supportive Services Plan may be paid from operating revenue to the extent financially feasible. OSH staff will determine the reasonableness of these costs, considering the staffing levels outlined in the Supportive Services Plan.</p> <p><u>Operating Subsidy.</u> Projects that proposed to rely on a project-funded capitalized operating reserve or cross-subsidy to support the expenses of PSH units, shall assume the following in demonstrating long-term operational feasibility. Rents for households of a PSH unit shall be set at 30% of Supplemental Security Income (SSI). Rents may be set higher in the unusual circumstance where the household may earn higher incomes.</p> <p><u>Inclusionary Housing Units.</u> Projects that includes inclusionary housing units will require additional review by the County. Generally, units required under an inclusionary housing ordinance shall not be eligible for County funding except for units restricted at a lower rent level than required by the ordinance, in which case the loan amount shall be limited to the amount required to reduce the rents from the level required under the ordinance to the program-restricted amount. The County will work in collaboration with the developer to set a baseline investment amount per unit and</p>
<p>Fees</p>	<ul style="list-style-type: none"> a. Bond Conduit issuer fees are separate (i.e. City of San Jose) b. Compliance monitoring fee: \$100 per unit per year.

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SANTA CLARA COUNTY PROGRAM GUIDELINES – FIFTH DRAFT
Supportive Housing Development Program¹

**Rates & Funding
Terms**

Financing Terms.

- 3% simple interest, residual receipts, 55 year term/affordability covenant. The County will consider a lower interest rate on a case-by-case basis.
- a. If amortizing debt on project, minimum 1.15 debt coverage ratio
- b. 3 year conditional commitment

Release of Funds. The County will make capital funds available for disbursement on a draw-down or reimbursement basis, upon closing of the loan and/or commencement of construction. Disbursement of funds for payment of hard costs will be on a draw-down basis. The disbursement of funds for acquisition and predevelopment funding will be provided as the need for the funds arises.

Predevelopment and Acquisition Funding. In addition to the cost of the land (if the application includes acquisition), the County may release up to \$2,000,000 prior to the start of construction for predevelopment expenses. Predevelopment funds prior to the approval of CEQA must only be used toward feasibility and planning studies that do not result in any physical changes to the environment or irreversible uses of the land. The County will determine whether to release funds based on an evaluation of the developer's track record and project risk. Funds will be released conditioned on the execution of loan documents and the recording of a deed of trust against the land or leasehold interest. Only the following costs are considered eligible acquisition and predevelopment expenditures:

- a. Initial feasibility study
- b. Appraisal fees
- c. Architectural and engineering fees
- d. Fees for toxics and asbestos assessment (i.e. Phase I)
- e. Permit fees necessary to apply for financing
- f. Option agreements
- g. Legal/title costs including title clearance costs
- h. Cost of entitlements/zoning approvals
- i. Total purchase price
- j. Title and recording associated with the acquisition
- k. Appraisal fees not included in predevelopment
- l. Acquisition loan fees and/or interest
- m. Refinancing of existing debt associated with the property to be acquired.

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**Rates & Funding
Terms - continued**

Special conditions to closing. In addition to the standard conditions, representations, and warranties, the County in its sole discretion, may require projects to meet the following special conditions prior to loan closing:

- a. Applicants may be required to present their project to the County’s Executive Committee.
- b. Applicants may be required to address all architectural, design, and supportive services deficiencies identified during the application review process prior to release of loan funds.

Compliance with all Conditions Prior to Closing on Construction Finance. All requirements and conditions set forth in the NOFA and the loan documents must be satisfied, as determined by the County, in its sole discretion, prior to disbursements of any loan funds. The applicant represents and warrants that all materials and information provided in connection with this NOFA are true and correct at all times, from date of submission to the County and throughout the award process, loan closing and term of the loan. By way of example, but not by limitation, some of the conditions, representations, or warranties that must be at all times true include:

- a. Applicant must be in good standing and have the authority and organizational power to enter into the documents, agreements, and certifications related to the NOFA and any resulting loan.
- b. Applicant and its partners, principals, or affiliates must not be or include any persons or companies who are non-compliant with the requirements of any agreement with the County or be listed on HUD’s debarment lists.
- c. Applicant and its partners, principals or affiliates cannot be in default or in violation of any of its obligations under the NOFA, or any loan documents, contracts, agreements, court orders or laws, and submitting for the NOFA and providing the information and entering into the agreements contemplated by the NOFA will not cause a default or violation.
- d. There shall be no change in the ownership, which is not promptly disclosed to and approved by the County.
- e. Applicant and its partners, principals, or affiliates shall not be subject to any binding, agreement, suit, order, or law which would be violated if applicant proceeds with the transactions contemplated by the NOFA, or the loan documents.
- f. There shall be no discovery of any preexisting event or circumstances and there shall be no material adverse change in the condition or suitability of the project site, the feasibility of the project, completion date, or the cost of the project, which is not promptly disclosed to and approved by the County. Applicant and its partners, principals or affiliates shall not be subject to any litigation, suit, arbitration or administrative proceeding which may adversely affect the ability of applicant to perform any of its obligations under and contemplated by the NOFA.
- g. There shall be no deviation from the Supportive Services Plan approved by the County that is not promptly disclosed to and approved by the County.
- h. Applicants must provide a confirmation letter from SARC to provide the supportive services for adults with intellectual and developmental disabilities and their families in County funded developments. In addition, at construction finance closing an MOU between SARC and the Applicant shall be provided describing the roles and responsibilities.

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Rates & Funding Terms - continued	<u>Retention.</u> For Construction/Permanent loans, the County will hold 5% of the loan amount, up to a maximum of \$1,000,000, until the construction of the project is complete. Any withheld loan amount will only be released upon the full satisfaction of all Permanent Financing Conditions, as identified in the County’s loan agreement.
Subordinate Financing	Applicants are encouraged to seek loans and grants from local government and third parties to leverage funds and achieve project feasibility.
Tenant Selection	<p>All referrals for supportive housing units (PSH & RRH units alike) shall come directly from the Santa Clara County Continuum of Care’s (CoC) Coordinated Entry System (CES), which is managed by the County’s Office of Supportive Housing.</p> <p>In compliance with the U.S. Department of Housing and Urban Development’s (HUD) requirements for communities that receive CoC program funds, the OSH manages the countywide CES. Through the CES, homeless individuals and families are assessed for and referred to appropriate housing and interim housing programs. The OSH is responsible for designing and implementing common assessment tools, managing the dynamic registries of homeless persons in need of assistance, managing the Homeless Management Information System (HMIS), making or coordinating all referrals to programs, and managing or monitoring the performance of all supportive housing and interim housing programs. The CES is linked to street, medical and specialized outreach programs so that the community is able to continuously identify and assess individuals in need and to effectively connect them to the appropriation housing programs.</p> <p>Currently, all homeless individuals and families are assessed using Vulnerability Index & Service Prioritization Decision Assistance Tool (VI-SPDAT). The tool helps determine whether homeless persons need PSH, RRH, or some other housing intervention. Households within the PSH or RRH bands are referred to programs based on their vulnerability score and based on the availability and specific requirements of PSH and RRH programs. The CES is currently being expanded and adapted to adequately assess the needs and coordinate supportive housing programs for individuals who are living in, but can leave institutions. During the initial lease up for PSH and for RRH units, the County will identify and refer eligible households to supportive service providers. The providers will assist the households apply for, move-in, and maintain their housing in the proposed development. The process will repeat as units PSH or RRH units become vacant. The referral process will be specified in the MOU between the owner and the County. Screening-in criteria and low barrier admission policies. PSH’s admission policies are designed to “screen-in” rather than screen-out applicants with the greatest barriers to housing such as having no or very low income, poor rental history and past evictions, or criminal histories. Tenant selection criteria will prioritize people who have been homeless the longest or who have the highest service needs as evidenced by vulnerability assessments or the high utilization of crisis services.</p> <p>I/DD Referrals are expected to come directly from SARC.</p>

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<p>Other Special Terms and Conditions</p>	<p><u>Ground Lease.</u> For new developments, applicants must include the opportunity for the County (and/or another public entity) to eventually own the land as ground lessor under a long-term ground lease structure or some other land dedication/subdivision mechanism that will ensure long-term affordable housing as the primary use of the land.</p> <p><u>Wages.</u> The County requires the payment of State prevailing wages be paid when County funds are used for construction. Wage rates for workers performing work related to the development of the awarded projects shall be paid not less than the general prevailing rate of per diem wages, as defined in Section 1773 of the California Labor Code and Subchapter 3 of Chapter 8, Division 1, Title 8 of the California Code of Regulations (Section 16000 et seq.), and as established by the Director of the California Department of Industrial Relations (“DIR”). In addition, if federal funds are used for physical improvements, the higher of State prevailing wage and Davis-Bacon wage rates shall be determined and paid for each job classification.</p> <p><u>Uniform Relocation Act.</u> Any Sponsor proposing to acquire land or rehabilitate existing structures using County funds that may result in the displacement of tenants or businesses must fully comply with both state and federal relocation laws. Sponsor must provide an assessment of the potential displacement of tenants or businesses, including a detailed summary of tenants or businesses and estimated costs and timing of relocation, along with the name, resumé and contact information of the proposed qualified relocation consultant. A displaced person must be provided relocation assistance at the levels described in and in accordance with the requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (URA) (42 U.S.C. 4201-4655) and implementing regulations at 49 CFR part 24.</p>
<p>Compliance Monitoring</p>	<p><u>Desk Review.</u> Periodic monitoring projects to confirm ongoing program compliance.</p> <p><u>Status Reports.</u> Written status reports will be required at regular intervals, describing progress towards securing project financing, changes in construction schedule, lease up, etc.</p> <p><u>Residual receipt documentation.</u> Following completion, on an annual basis, owner shall submit audited financial reports for the project.</p> <p><u>Reporting. Annual Reporting.</u> The Developer shall submit to the County (i) not later than May 1st of each year, or such other later date as may be requested by the County, a statistical report, including income and rent data for all units, setting forth the information reasonably required by the County to determine compliance and (ii) within fifteen (15) days after receipt of a written request, any other information or completed forms reasonably requested by the County. The annual compliance report submitted by applicant to the County must include:</p> <ol style="list-style-type: none"> 1. Project location, services and amenities;

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Compliance Monitoring - continued	<ol style="list-style-type: none"> 2. Tenant roster listing household size, income, and rent for each tenant in a restricted unit with a breakdown of the type of restricted units (i.e. PSH, HOME, NPLH); 3. Average vacancy during the reporting period; 4. Additional requirements as required by special revenue funds including but not limited to NPLH, HOME, and CDBG; and 5. An independently audited financial statement detailing operating Revenues and operating expenses. <p>The County shall review reports for compliance with the program requirements, shall require the developer to correct violations of any requirements, and may request additional documentation from the Borrower, as the situation dictates.</p> <p><u>Field Monitoring.</u> Periodic site visits of projects that receive funding through the County’s Loan Program.</p> <p><u>Construction Monitoring.</u> The County reserves the right to undertake periodic monitoring, including site visits of the project during construction.</p>
Definitions	<p><u>At Imminent Risk of Homelessness:</u> Individual or family who will imminently lose their primary nighttime residence, provided that:</p> <ol style="list-style-type: none"> i. Residence will be lost within 14 days of the date of application for homeless assistance ii. No subsequent residence has been identified; and iii. The individual or family lacks the resources or support networks needed to obtain other permanent housing <p><u>At Risk of Chronic Homeless:</u> An adult or older adult An adult or older adult with a Serious Mental Disorder or Seriously Emotionally Disturbed Children or Adolescents who meet one or more of the criteria below. All persons qualifying under this definition must be prioritized for available housing by using a standardized assessment tool that ensures that those with the greatest need for Permanent Supportive Housing and the most barriers to housing retention are prioritized for the Assisted Units available to persons At-Risk of Chronic Homelessness pursuant to the terms of the Project regulatory agreement. Qualification under this definition can be done through self-certification or in accordance with other established protocols of the Coordinated Entry System or other alternate system used to prioritize those with the greatest needs among those At-Risk of Chronic Homelessness for referral to available Assisted Units. Persons qualifying under this definition are persons who are at high-risk of long-term or intermittent homelessness, including:</p> <ol style="list-style-type: none"> 1. Pursuant to Welfare and Institutions Code Section 5849.2, persons exiting institutionalized settings, such as jail or prison, hospitals, institutes of mental disease, nursing facilities, or long-term residential substance use disorder treatment, who were Homeless prior to admission to the institutional setting;

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Definitions Continued

2. Transition-Age Youth experiencing homelessness or with significant barriers to housing stability, including, but not limited to, one or more evictions or episodes of homelessness, and a history of foster care or involvement with the juvenile justice system; and others as set forth below;
3. Persons, including Transition-Age Youth, who prior to entering into one of the facilities or types of institutional care listed herein had a history of being Homeless as defined under this subsection (f)(3): a state hospital, hospital behavioral health unit, hospital emergency room, institute for mental disease, psychiatric health facility, mental health rehabilitation center, skilled nursing facility, developmental center, residential treatment program, residential care facility, community crisis center, board and care facility, prison, parole, jail or juvenile detention facility, or foster care. Having a history of being Homeless means, at a minimum, one or more episodes of homelessness in the 12 months prior to entering one of the facilities or types of institutional care listed herein. The CES (as defined in Section 101(n) of the NPLH Program Guidelines), or other local system used to prioritize persons At-Risk of Chronic Homelessness for available Assisted Units may impose longer time periods to satisfy the requirement that persons under this paragraph must have a history of being Homeless.
4. The limitations in subsection (v)(1)(C) pertaining to the definition of “Homeless” shall not apply to persons At-Risk of Chronic Homelessness, meaning that as long as the requirements in subsections (f)(1) - (3) above are met:
 - a. Persons who have resided in one or more of the settings described above in subsection (f)(1) or (f)(3) for any length of time may qualify as Homeless upon exit from the facility, regardless of the amount of time spent in such facility; and
 - b. Homeless Persons who prior to entry into any of the facilities or types of institutional care listed above have resided in any kind of publically or privately operated temporary housing, including congregate shelters, transitional, interim, or bridge housing, or hotels or motels, may qualify as At-Risk of Chronic Homelessness

Chronically Homeless: (HUD Definition at 24 CFR 578.3)

- a. Includes an individual or family who:
 - a. Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter,
 - b. has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year, or an at least four separate occasions in the last three years, and
 - c. Can be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability, post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability.
- b. An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) above, before entering that facility, or

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Definitions Continued

- c. A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) including a family whose composition has fluctuated while the head of household has been homeless.

Continuum of Care. As defined by 24 Code of Federal Regulations (CFR) 578.3, Continuum of Care refers to the group organized to provide coordinated services to homeless individuals. This group is composed of representatives of organizations such as non-profit homeless providers, faith-based organizations, businesses, governments, public housing agencies, victim service providers, medical providers, advocates, law enforcement, social service providers, school districts, universities, mental health services providers, affordable housing developers, and organizations that serve homeless and formerly homeless veterans, and homeless and formerly homeless persons, to the extent they reside within the geographic area and are available to participate.

Coordinated Entry System (CES): The centralized system to assess the eligibility and needs of each individual or family who seeks homeless assistance and prioritize access to assistance based on individual needs and strengths. This organized process provides for the assessment of homeless individuals for the purposes of placing them into Permanent Supportive Housing, with the goal of housing the most vulnerable people first. A CES also includes data and referral systems that capture information about available PSH units so that the prioritized individual can be referred to the next available and appropriate PSH unit. CES management is part of the Homeless Management Information System (HMIS) required by HUD and administered by the Office of Supportive Housing.

Disabling Condition. A disabling condition means:

1. A physical, mental or emotional impairment including a diagnosable substance use disorder, serious mental illness, post-traumatic stress disorder, cognitive impairment resulting from brain injury, or chronic physical illness or disability which is
 - a. Expected to be of long-continued and indefinite duration,
 - b. Substantially impedes and individual's ability to live independently, and
 - c. Of such a nature that such ability could be improved by more suitable housing conditions;
2. A developmental disability as defined in Section 102 of the Developmental Disabilities Assistance and Bill of Rights Act.
3. The disease of acquired immunodeficiency syndrome or any conditions arising from the etiological agency for acquired immunodeficiency syndrome (HIV/AIDS)

Homeless (HUD Definition at 24 CFR 578.3): Includes but is not limited to:

1. An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
 - a. An individual or family with a primary nighttime residence that is a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings; including a car, park, abandoned building, bus or train station, airport, or camping ground, or

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Definitions Continued

- b. An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals), or
 - c. An individual who is existing an institution where he or she resided for 90 days or less, and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.
2. An individual or family who will imminently lose their primary nighttime residence (see at “Imminent Risk of Homelessness” Definition above)
3. Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless, but who:
- a. Are defined as homeless under section 387 of the Runaway and Homeless Youth Act ((42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17(b) of the Child Nutrition Act or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a),
 - b. Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60-days immediately preceding the date of application for homeless assistance,
 - c. Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance, and
 - d. Can be expected to continue in such status for an extended period of time because of chronic disabilities; chronic physical health or mental health conditions; substance addiction; histories of domestic violence or childhood abuse (including neglect); the presence of a child or youth with a disability; or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment.
4. Any individual or family who:
- a. Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual’s or family’s primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence,
 - b. Has no other residence, and
 - c. Lacks the resources or support networks, such as family, friends, and faith-based or other social networks to obtain other permanent housing.

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Definitions Continued

Housing First. A homeless assistance approach that prioritizes providing permanent housing to people experiencing homelessness, thus ending their homelessness and serving as a platform from which they can pursue personal goals and improve their quality of life.

Individuals leaving long-term care facilities. Individuals leaving long term care facility (including skilled nursing, rehab facility, subacute or similar facility) or a hospital that cannot be safely discharged due to lack of housing or homelessness, either experienced prior to admission or resulting from their stay.

Individuals

No Place Like Home (NPLH): A program for counties to fund the development of permanent supportive housing for persons with mental illness who are chronically homeless, at risk of chronic homelessness, or homeless.

Permanent Supportive Housing (PSH) is a type of housing program that provides permanent affordable housing and supportive services to individuals (and their families) who have disabling conditions. There is no limit to length of stay and housing units are occupied by persons with lease agreements and have access to on-site or off-site services that are flexible, voluntary, and individualized in order to assist an individual or family retain their housing, improve their health status, and maximize their ability to live, and, when possible, work in the community. PSH programs are typically prioritized for chronically homeless persons and families or other populations with significant health needs.

Rapid Rehousing (RRH) is a type of housing program connects families and individuals to permanent housing through time-limited financial assistance and targeted supportive services. RRH program participants are provided shallow or declining rent subsidies, other temporary financial assistance, and time-limited case management and other support services. In RRH programs, individuals and families eventually take over the full rent of their leased housing units. After “transitioning in place,” the individuals and families may reside in the unit so long as they abide by the lease. If and when RRH unit becomes vacant, the unit is filled by a new RRH participant. To ensure that individuals and families can transition in place, units that are set aside for RRH programs shall have their rents restricted to a level affordable to households earning no more than 30% of AMI, adjusted for household size.

Supportive Housing. A combination of affordable housing and support services designed to help individuals and families overcome or recover from homelessness, acute or chronic illnesses, financial emergencies, and/or other crises that undermine housing stability.

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