

Agency Plan: Housing and Community Development Department

I. Headline list of recommendations sent to HCD

- 2B:** Interagency communication and coordination
- 2D:** Develop a low-barrier interagency reception housing program
- 3A:** Adequate training for peers
- 3B:** Expansion of peer workforce
- 6C:** Reallocate remaining funds from Santa Rita Jail's Mental Health Program Services Unit to permanent supportive housing
- 7D:** Eliminate discrimination by following Fair Chance policies
- 7E:** Create deep subsidies for justice-involved individuals
- 7F:** Allocate more funding for permanent supportive housing programs/services
- 7G:** Establish an anti-displacement and homeless prevention system
- 7H:** Re-fund and revive the Independent Living Association of Alameda County
- 7I:** Expand licensed board-and-care facilities
- 7J:** Create an RFP for county-owned land in the unincorporated county to be transferred to a land trust landbank
- 7K:** Establish additional interim housing options
- 7L:** Create more skilled nursing facilities
- 7N:** Prioritize county housing funds for individuals with SMI/SUD/co-occurring disorders
- 7O:** Expand funding and support for innovative housing models

II. Considerations

- There are a number of edits that HCD has suggested to the language of the recommendations. These are tracked via **blue highlighting** in the plan document and should be considered for recommendation finalization
- Other funding sources would not be able to cover costs associated with assigning a staff person as an inter-agency liaison, as outlined in **Recommendation 2B**
- **Recommendation 2D** was assigned to HCD, but it is out of the purview of the department to provide direct services to this population. However, they would be involved in the acquisition and development of a site
- A Fair Chance policy, described in **Recommendation 7D**, which prevents discrimination against individuals with justice involvement in housing, has been presented to the Alameda County Board of Supervisors, but they have yet to adopt it.

- There is a need for data on the number of people with justice involvement in Alameda County who are Very Low and Extremely Low Income and need housing subsidies, as well as those who need supportive SMI/SUD/co-occurring services, to assess the budget needed for deep subsidies for these populations, as described in **Recommendations 7E and 7F**
- There are large budgetary needs to fulfill many of the recommendations in the HCD plan, for example:
 - To provide the appropriate level of anti-displacement and homeless prevention services, as outlined in **Recommendation 7G**
 - To provide Independent Living Home Operator support, as suggested in **Recommendation 7H**
 - To analyze the need, then to build and support Board & Care facilities, as directed in **Recommendation 7I**
 - To develop more Skilled Nursing Facilities, as in **Recommendation 7L**
 - To acquire property and operate it as Land Trust models, as outlined in **Recommendation 7O**

III. Omissions

- None Found

Alameda County Housing and Community Development Recommendation Template March 2024

- Recommendations in this plan include the following highlighted thematic groups (in blue):

1. African American Resource Center	2. Collaboration & Case Management	3. Community-Based Support/Outreach/ Education
4. Crisis Services/5150 & Treatment Beds	5. Diversion	6. Funding & Financial Transparency
7. Housing & Residential Facilities	8. Increase Access to Treatment	9. Space & Services for Youth & TAY
10. Staff Training & Professional Development	11. Family Support	

2. Collaboration/ Whole Person Care/ Case Management

2B: Interagency Communication and Coordination: In the interest of non-duplication of efforts and prevention of individuals falling through the cracks of services, the Taskforce recommends the following actions to increase collaboration between agencies:

- Each county agency to assign a delegate** to be the inter-agency communication liaison. If it is not possible to have a dedicated staff person, then establish a communication strategy. **(All Agencies)**

Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/Outcome, and Racial Equity measures	Notes
Key Partners: <ul style="list-style-type: none"> County ACSO ACPD Consult with: <ul style="list-style-type: none"> All agencies 	Communication barriers between agencies	CDA/HCD would need to assign a staff person. Unfunded/Budget Needed: Impacts budget in that other funding sources would not be able to cover costs associated with participation		

2D: The County should fund and support a low barrier interagency reception housing program that individuals can be immediately released to from Santa Rita Jail regardless of Medi-Cal status. This housing program must incorporate dual diagnosis providers and allows for triage, outreach, and coordination across providers, Probation, ACSO, and family when available. This housing program must have the ability to triage individuals to a higher level of care, treatment, and/or other transitional housing.

Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/Outcome, and Racial Equity measures	Notes
Key Partners: <ul style="list-style-type: none"> ● ACBH ● ACPD ● ACSO ● SSA 	Not Applicable to CDA	Not Applicable to CDA	Not Applicable to CDA	CDA/HCD/HH do not provide direct services to this population but if a public private partnership for a new site (not county owned) HCD would be involved in the acquisition and development of a site.

3. Community Based Support/Outreach/ Education

3A: Peers must be provided with adequate training, support, and compensation to serve in front line, promotional, decision-making, and leadership positions.

Training/support should include:

- Support/subsidies to help peers obtain certifications, credentials, and on the job experience (**all Agencies**);
- **Fair pay for lived expertise as equitable to professional and educational experience (County and Agencies).**

Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/Outcome, and Racial Equity measures	Notes
Key Partners: <ul style="list-style-type: none"> ● County ● ACBH ● ACSO Consult with: <ul style="list-style-type: none"> ● ● 	Ensuring compensation and training for individuals with lived experience will support expertise and input.	Data: Evaluation of Job Classifications to ID barriers to employment within CDA specific Classifications Budget: further assessment needed for fair pay comparison,		CDA/HCD/HH do not provide direct services to or work with peers, but will evaluate employment strategies. Example: HCD and HRS Tech positions

3B: Expansion of peer workforce must include placement in key spaces and uplifting of their expertise in front-line and leadership roles. These positions/locations include:

- **Peer inclusion at County and Agency decision-making**, policy, and funding meetings (**all Agencies**).
- **Peer-led interventions in housing programs** and other spaces to address vicarious trauma and practice restorative practices (**ACBH and H&H**);

Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/Outcome, and Racial Equity measures	Notes
<p>Key Partners:</p> <ul style="list-style-type: none"> ● County ● AHS ● ACSO ● ACPD ● H&H <p>Consult with:</p>	Inclusion of lived experience voice in RFP and proposal selection processes	If stipends are needed to participate in RFP review process – new budget allocation would be needed – we don’t currently pay people to participate in proposal review – ongoing process	<p>No Existing Strategy</p> <p>Possible New Strategy:</p> <p>Inclusion of peers in RFP processes is new and would need to be added to our internal procedures. This fits within the CoC Racial Equity Framework under the engagement with people with lived experience to set priorities</p>	HCD would propose to include the CoC leadership academy for people with lived experiences into the RFP processes held for relevant funding sources

6. Funding & Accounting Transparency

6C: Remaining funds from the County’s dedication of \$26.6M for the Mental Health Program Services Unit in Santa Rita Jail should be reallocated for permanent supportive housing. Include a report/plan for how this money will be spent.

Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/Outcome, and Racial Equity measures	Notes
<p>Key Partners:</p> <ul style="list-style-type: none"> ● County (GSA and HCD) <p>Consult with:</p> <ul style="list-style-type: none"> ● H&H/H&H, BHCS and Probation 	Provides funding to support new housing units throughout the county	In consultation with BHCS/Probation and H&H – Identify the highest need (new board and care vs. new independent living vs. shared housing opportunities)	<ul style="list-style-type: none"> ● New Strategy: Focus on currently available opportunities – supporting land trusts and emerging developers to acquire buildings ● New Strategy: H&H would have to provide ongoing operating and services support 	Should the BOS decide to move these funds from GSA/SRJ/ASCO to CDA/HCD for Permanent Supportive Housing, CDA/HCD would need to incorporate this workload into the next fiscal years work plan

7. Housing

7D: Eliminate Discrimination: Ensure that the unincorporated county and County-funded affordable housing projects follow Fair Chance policies, allowing people who are formerly incarcerated/ criminalized, and their families access to housing and housing stability. This would require adoption, implementation, and monitoring of Fair Chance Ordinance in the unincorporated areas of the County and a Fair Chance policy in affordable housing financed by the County. The county should lead by example and advocate for other cities in the County to adopt fair chance policies.

Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/Outcome, and Racial Equity measures	Notes
<p>Key Partners:</p> <ul style="list-style-type: none"> County (CDA/HCD and County Counsel) <p>Consult with:</p> <ul style="list-style-type: none"> Board of Supervisors 	<ul style="list-style-type: none"> Allows people with former justice involvement equal access to rental housing where they can be discriminated against because of their background 	<ul style="list-style-type: none"> Board of Supervisors would need to decide to adopt the ordinance and then to direct staff to implement the ordinance in the UC and use it as the policy in affordable housing projects (presented to the BOS in December 2022, but not adopted with second reading in January of 2023) To track outcomes and ensure compliance in marketplace will require budget, use of a rental registration system to create the data, and HCD staffing to implement. 	<ul style="list-style-type: none"> Progress: CDA/HCD has completed its work on the ordinance. If adopted, HCD would then need to bring the policy to the Board and begin incorporation of that policy into affordable housing loan programs it administers. Data: There is no current data source. Would need to implement a rental registration system that would allow HCD to track discrimination complaints in order to ensure enforcement and create data points. 	<ul style="list-style-type: none"> The 9th Circuit court has made a ruling which indicates some exposure or risk to the county should this be adopted. Other cities (Richmond, Berkeley, Oakland and San Francisco) adopted these policies before the court ruling but have decided to keep them on the books despite the risks. Next step is a presentation to the Board of Supervisors for their discussion. The only people excluded from certain housing authority properties or subsidies are convicted sex offenders with lifetime registration requirements, those convicted of meth manufacture, and those with outstanding debt to that housing authority.

7E: Create Deep Subsidy for people with justice involvement: Since people with criminal histories are not eligible for Section 8 housing, the County should create operating subsidy alternatives to federally funded Section 8 Housing that will not restrict access to affordable/subsidized housing to households and families with serious mental illness and those with formerly incarcerated/criminalized backgrounds.

Recommend modifying and add to the second half of the recommendation to the following:
 Expand the supply of supportive housing subsidies and units for persons with criminal justice histories and those who are formerly incarcerated by creating a set aside for this population within existing programs.

Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/Outcome, and Racial Equity measures	Notes
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<p>Key Partners:</p> <ul style="list-style-type: none"> • H&H & CDA/HCD • County <p>Consult with:</p> <ul style="list-style-type: none"> • Health Committee then to the BOS for adoption and funding considerations 	<ul style="list-style-type: none"> • Allows ELI and unhoused individuals access to deeply affordable units so that they can recover from homelessness • Coordinated entry does not always reach this population, so having a set aside will allow this population to reach the top of the list. • Additional capacity needed or set aside of permanent housing solutions for those with justice involvement. 	<ul style="list-style-type: none"> • Information on the number of people with justice involvement in Alameda County who are Very Low and Extremely Low Income and need housing subsidy • Data: Home Together Plan outlines total units needed: 21,150; but what # Justice Involvement? • Budget: \$130 million annually? • Time: Could be part of BHBH but need funding sustainability and long-term support. 	<ul style="list-style-type: none"> • Existing strategy: Local Housing Support Program (LHSP) is a “lightly” funded program available to provide up to \$2k per month, \$24k per year to clients at the top of the coordinated entry system (when resources are available). • New Strategy: It would require new, increased and sustainable source of revenue dedicated to this population to set aside increase access to deep housing subsidy for the Justice Involved. • Progress: HCD and H&H have created policies framework for the Local Housing Subsidy Program, a deep subsidy for people who are homeless and extremely low income. It is scheduled to go to the BOS Health Committee in July for review and recommendation to the full Board. • Racial Equity Measures: Key data points would be to track demographics of those who are housed with this source (HMIS? Or Asset Management software?) 	<ul style="list-style-type: none"> • The Local Housing Support Program framework, including policies and procedures, are ready to go to the Health Committee for review and recommendation to the full Board. • 2,000 additional voucher-based housing subsidies cost aprox. \$48 million annually and 5,000 would cost approximately \$120 million (not including administrative costs)
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7F: Create Deep Subsidy for SMI/SUD/Co-occurring Disorders: People with SMI/SUD/Co-occurring disorders and those who are formerly incarcerated are more likely to be Extremely Low Income (ELI) and homeless or at risk of homelessness.

The County should provide more funding to support this population in permanent supportive housing programs and services.

The County should financially support the Home Together Plan and the Alameda County Housing Plan (currently being drafted).

- Recommend modify to the following:

Expand the supply of supportive housing subsidies and units for persons with SMI/SUD/co-occurring and formerly incarcerated by creating set asides in existing programs dedicated just for these populations..

Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/Outcome, and Racial Equity measures	Notes
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<p>Key Partners:</p> <ul style="list-style-type: none"> • H&H & CDA/HCD • County <p>Consult with:</p> <ul style="list-style-type: none"> • Health Committee then to the BOS for adoption and funding considerations 	<ul style="list-style-type: none"> • Allows ELI and unhoused individuals with SMI/SUD/co-occurring disorders access to deeply affordable units so that they can recover from homelessness • Coordinated entry does not always reach this population, so having a set aside will allow this population to reach the top of the list. • Additional capacity needed or set aside of permanent housing solutions for those experiencing SMI/SUD/co-occurring disorders 	<ul style="list-style-type: none"> • Data: Need to refine the numbers in the Home Together Plan: total units needed: 21,150; focusing on those engaged w/CJ and SMI/SUD/co-occurring (20-50%) represents a need of 4,230-10,575 units • Budget: Depends on the numbers needing support.... • Time: Need sustainability and long-term support. 	<ul style="list-style-type: none"> • Existing strategy – Local Housing Support Program (LHSP) is a “lightly” funded program available to provide up to \$2k per month, \$24k per year to clients at the top of the coordinated entry system (when resources are available). • New Strategy: It would require new, increased and sustainable source of revenue dedicated to this population (Prop 1 MHSA is possible) to set aside increase access to deep housing subsidy for the SMI/SUD/Co-occurring disorders population.. • Progress: HCD and H&H have created policies framework for the Local Housing Subsidy Program, a deep subsidy for people who are homeless and extremely low income. It is scheduled to go to the BOS Health Committee in July for review and recommendation to the full Board. • Outcomes: A fully funded program would demonstrate progress on this measure. 	<ul style="list-style-type: none"> • The Local Housing Support Program framework, including policies and procedures, are ready to go to the Health Committee for review and recommendation to the full Board. • 2,,000 additional voucher-based housing subsidies cost aprox. \$48 million annually and 5,000 would cost approximately \$120 million (not including administrative costs)
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- **Racial Equity Measures:**
Key data points would be to track demographics of those who are housed with this source (HMIS? Or Asset Management software?)

7G: Anti Displacement and Homeless Prevention System: Create and support a strong Anti Displacement and Homeless Prevention system in the County. At minimum, this should include:

- HCD: Expanding funding and availability of legal services for low income tenants who are at risk of eviction, in conflict with their landlords, etc, with a focus on those at risk of homelessness;
- HCD: Ensure that the unincorporated county and County-funded affordable housing projects follow Just Cause policies, providing protection to people with SMI/SUD/ co-occurring disorders and formerly incarcerated/criminalized and their families access to housing stability.;
- H&H: Expand upstream screening and tenancy-sustaining services for individuals at highest-risk of homelessness, and deploy tenants rights education, legal services, social services, and other money management services earlier in the process to help prevent evictions and displacement;
- H&H: **Dedicate County staff and County-funded CBO staff to facilitate return to supportive housing for persons who lose access to that housing.**

Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/Outcome, and Racial Equity measures	Notes
<p>Key Partners:</p> <ul style="list-style-type: none"> ● H&H ● HCD <p>Consult with:</p> <ul style="list-style-type: none"> ● BHCS, Probation, SSA 	<ul style="list-style-type: none"> ● AC Housing Secure provides representation for low income tenants who are at risk of eviction – focusing on illegal evictions and soft landings so that tenants do not receive an Unlawful Detainer, which would make it impossible to get housing in the future. 	<ul style="list-style-type: none"> ● Data needs are from the Courts – and currently HCD submits a public records request for data – also needs courts to track demographics of tenants who are served eviction notices and the outcomes of the cases (not just the intake of the cases) – so that we can see the outcomes rather than just the input. ● Just Cause: This ordinance is currently under discussion with the Board of Supervisors 	<ul style="list-style-type: none"> ● Existing Strategy – AC Housing Secure ● New Strategy – Fully fund the program ● Racial Equity Measures: Key data points would be to track demographics of those who are sent to court with eviction notices. This is a data request from the Courts. 	<p>To fully fund all low-income tenants who are at risk of eviction would cost the county approximately \$18 million per year. Currently the AC Housing Secure program receives \$1.8 million per year. The program serves approximately 10-15% of the tenants who are at risk of eviction. Landlords come to eviction court with attorneys 80% of the time..... in comparison.</p>

7H: Re-fund and revive the Independent Living Association of Alameda County (ILA-AC): In 2017 Dr. Robert Ratner and Healthy Homes worked to educate and support independent living home operators, service providers and tenants to improve the general living conditions of boarding homes housing many living with mental illness in substandard and dangerous living conditions. Defunded in December 2021, as of November 2021, there were 17 active operators in the ILA-AC with 33 quality member homes and 206 quality beds. These homes improved through annual inspections, operator resources and trainings. Identify MHSA or other funding to re-establish this housing support service within the SHCLA, an active agent in promoting quality of life for the most vulnerable citizens.

Proposed language:

Provide Independent Living Home Operator support: Support independent living home operators, service providers and tenants to improve the general living conditions of housing where many people are living with mental illness in substandard and dangerous living conditions.

These homes can be improved through annual inspections, operator resources and trainings. Identify funding to establish this housing support service to promote quality of life for vulnerable citizens.

Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/Outcome, and Racial Equity measures	Notes
<p>Key Partners:</p> <ul style="list-style-type: none"> • H&H • CDA/Healthy Homes Department <p>Consult with:</p> <ul style="list-style-type: none"> • BHCS 	<ul style="list-style-type: none"> • Provide support to both operators and tenants living in Independent Living homes or boarding homes which can be difficult to maintain and operate. • Provides oversight for the county to inspect and ensure conditions meet standards • Provides training and support to operators 	<ul style="list-style-type: none"> • Data: on the number and type of units that exist – and new units that are added to the system • Budget: This is currently not funded and would need new funding to support it. • Timeline: Depends on if it is funded 	<ul style="list-style-type: none"> • Existing Strategy: Currently HH Department is inspecting ILA’s using Measure A funding from HCSA. • New Strategy: Need more money to help with repairs and to assist with purchasing the buildings from 3rd party operators. • Progress: CDA - This program has existed in the past and can be brought back if funded at scale. • Racial Equity measures: A high percentage of both operators and residents of these buildings are Black, Indigenous and People of Color and/or homeless/formerly homeless individuals. 	<ul style="list-style-type: none"> • <i>Independent Living Homes</i> are also referred to as <i>Group Homes</i>. These have 6 or less people in them, no one is providing their medication or food. • Most of the operators are not owners of the building – they lease from 3rd party owners – and therefore they need more assistance to acquire the buildings and to rehabilitate the buildings

71: Build and support licensed board and Care: Expand licensed Board-and-Care facilities, which are designed to support highly impacted persons experiencing mental illness and/or substance use disorders. This expansion should both include the creation of more facilities as well as expanding sustainability funding for these facilities by ensuring and increasing patch funding for their reimbursement rates. The county should continue to conduct a periodic needs assessment of licensed Board & Care (B&C) beds, as well as Crisis Residential Treatment bed capacity.

To maintain and increase licensed B&C stock, state reimbursement rates will need to be increased closer to those set for facilities housing people with developmental disabilities. County and local advocacy groups should partner to advocate at the state level for increased reimbursement rates for B&Cs.

In addition, as the County explores future housing bond ballot measures, B&C should be included as an eligible category for the use of funds.

Recommendation:

1. Build and Support Licensed Board and Care **DEDICATED TO LOW INCOME**
2. Separate this out between Board and Care and Residential Treatment....

Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/Outcome, and Racial Equity measures	Notes
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<p>Key Partners:</p> <ul style="list-style-type: none"> ● County ● HCD ● H&H <p>Consult with:</p> <ul style="list-style-type: none"> ● BHCS 		<ul style="list-style-type: none"> ● Data: How many Board and Care homes exist and how many beds in them? How many are dedicated to low income population? How many low income people currently use Board and care? How many would use it if it was available? How many Residential Treatment Beds are needed? Accute Care, and Sub-Accute care? ● Budget: Unknown until there is data that examines the needs and existing inventory. ● Timeline 	<ul style="list-style-type: none"> ● Existing Strategy: No funding currently in CDA/HCD exists for this specific work ● New Strategy: With new funding (potentially MHSA housing funds under Prop 1), create a program to create new board and care homes. Focus on the purchase of currently leased sites, as well as new sites. Also allow funds to support rehabilitation of existing board and care homes. ● New Strategy: HCD will include Board and Care as a possible use with new housing funding sources – ETA at Board – this summer ● New Strategy: HCD/H&H/BHCS should co-write a PAL letter to get the BOS to support advocacy for increased rates. 	<ul style="list-style-type: none"> ● Board and Care/Licensed Residential Treatment Facilities owned by 3rd party entities (for profit, individuals or non profit) – Acquisition and Development done via Development Agreement with CDA/HCD. ● Residential Treatment Facilities owned by the County = partnerships with GSA for acquisition and development ● Ongoing Operations and Services = Board and Care = H&H/H&H ● <i>Crisis Residential Treatment</i> = BHCS
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7J: Create an **RFP for County-owned land** in the unincorporated county that would be **transferred to a land trust land bank to ensure the properties remain a board and care in perpetuity.** The land trust would assemble land for new construction development opportunities.

Proposed Language:
 The County should assess all County owned land (in and out of the unincorporated county) and evaluate its use for housing this population.

The County should follow CA Law (Surplus Lands Act) to dispose of property for affordable housing targeted to this population, and prioritize community ownership, such as land banks and nonprofits that will own in perpetuity.

The County should support the evaluation of all publicly owned land by other governmental entities and encourage the use for affordable housing targeted to this population

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<p>Key Partners:</p> <ul style="list-style-type: none"> ● GSA ● HCD ● H&H <p>Consult with:</p> <ul style="list-style-type: none"> ● 	<ul style="list-style-type: none"> ● Problem: Insufficient property and resources are targeted to this population. 	<ul style="list-style-type: none"> ● Data: ID Underutilized County Owned properties in both the Unincorporated County and the Cities within the County ● Budget: Unknown ● Timeline: Unknown 	<ul style="list-style-type: none"> ● Existing Strategy: Tiny Home village built on Fairmont Campus and Safe Parking program on Fairmont campus. ● Existing Strategy: New Affordable Housing on Broadway properties – partner selected through the Surplus Lands Act process and under negotiations for two years. ● New Strategy: Request GSA report on all County owned properties that could be surplus and used for affordable housing and targeted to these populations. ● Progress: 	<ul style="list-style-type: none"> ● GSA has reported that there are obstacles to development on any more of the Fairmont Campus due to Hayward Fault line and lack of infrastructure.

7K: The County should build (HCD) and support (H&H) more interim housing options for people who are homeless and involved in the criminal justice system.

This includes expanding non-congregate shelter options and maintaining existing shelters

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<p>Key Partners:</p> <ul style="list-style-type: none"> • HCD • H&H • Probation • SSA <p>Consult with:</p>	<p>Problem: Insufficient beds/units exist for this population funds exist to support the development of new shelters (or dedicate existing shelters) to this population.</p>	<ul style="list-style-type: none"> • Data: Need info on how many people are released to homelessness per year. • Budget: Unknown • Time: Could be part of BHBH but need funding sustainability and long-term support. 	<ul style="list-style-type: none"> • Existing Strategies: Currently, there are over 3,000 shelter slots (beds or units) in Alameda County, with occupancy rates highest in the non-congregate sites such as Lake Merritt Lodge and the Fairmont Navigation Center. • New Strategies: New Homekey sites can be interim and can designate a target population. • New Strategy: The County can support interim uses and new shelters with new funding sources, such as the Regional Bond. The Housing Plan will include interim housing as an eligible use. 	<ul style="list-style-type: none"> • Same general questions and budget implications as 2D. (Narrower target population would be necessary to focus resources on SRJ releases.) • Home Together identified a need for up to 1,000# new interim beds that are low-barrier and non-congregate. Cities and County typically partner on these efforts. Adding special eligibility for target population is feasible with budget and space. Most of these resources are currently in East Oakland and it would be beneficial to expand into other neighborhoods/ communities. • Transitional Housing/Shelter owned by 3rd party entities (for profit, individuals or non profit) – Acquisition and Development done via Development Agreement with CDA/HCD. • Transitional and Shelter owned by the County = partnerships with GSA for acquisition and development and HCD to confer on housing related issues • Ongoing Operations and Services = H&H
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7L: The County should create more skilled nursing facilities (SNFs) for people with high medical needs and serious mental illness. The sole SNF in the County that serves this population—OakDays, a HomeKey program- is always full and has demonstrated the need for expansion of these types of facilities in the county.

H&H Recommendation: add to H&H for OakDays model which serves people with high medical needs in interim or permanent housing with 24/7 nursing and flexible on-site clinical care.

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<p>Key Partners:</p> <ul style="list-style-type: none"> ● H&H ● GSA ● HCD <p>Consult with:</p> <ul style="list-style-type: none"> ● 		<ul style="list-style-type: none"> ● Data: Need far exceeds existing availability. Up to 3,00 people per year report homelessness plus disability, Recommend additional capacity of 300+ units in non-congregate settings. ● Budget: Total Development Costs would range from 250k-700k depending on the type of unit. ● Operating proxy from OakDays = \$36,000 per unit per year. ● Timeline: Unknown 	<ul style="list-style-type: none"> ● Existing Strategy: OakDays is owned by the county and operated by Five Keys, with clinical care provided by Cardea Health. Services including HCS and HCBA Waiver reimbursement requires licensed Home Health Agency partner. ● New Strategy: ID additional funding to support additional development of SNF's ● Outcome: Racial Equity Measures: 	<ul style="list-style-type: none"> ● Skilled Nursing Facilities owned by 3rd party entities in public/private partnerships (for profit, individuals or non profit) – Acquisition and Development done via Development Agreement with CDA/HCD and HCSA to confer on medical related issues. ● Skilled Nursing Facilities owned by the County = partnerships with GSA for acquisition and development and HCSA to confer on medical related issues ● Ongoing Operations and Services = BHCS?
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7N. Target County Housing Funds to SMI/SUD/Co-occurring Clients: The County needs to demonstrate that it is focused on prioritizing housing solutions for the population that has SMI/SUD/co-occurring and/or have criminal justice system involvement.

Any plans that the County is creating for housing should include a specific and explicit element dedicated to how the plan will address housing shortages and placement for this population.

This is specifically important for any new funding streams that the County receives related to housing or to services for this population, e.g. MHSA and/or BHSA - Behavioral Health Services Act dollars, regional housing bond dollars, etc. The County agencies that receive the funding should collaborate with the housing department to make a specific plan for how those funds will be used to create supportive housing units, B&C, supported independent living programs, and other interim housing options for this population.

The plan should include a clear assessment of need and how this plan addresses that need, and an accounting of the number of dollars and number and type of housing units that will be created for this population. Furthermore, the County should provide regular annual reporting to the public on their progress towards the goals and commitments made in that plan

Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/Outcome, and Racial Equity measures	Notes
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<p>Key Partners:</p> <ul style="list-style-type: none"> • HCD • H&H <p>Consult with:</p> <ul style="list-style-type: none"> • 	<ul style="list-style-type: none"> • Problem: Inadequate housing resources for people with SMI/SUD/Co-occurring and CJ involvement 	<ul style="list-style-type: none"> • Data Needed: Refined data on overlapping needs and homelessness. Current data show at least half of people experiencing homelessness have SMI/SUD or Co-occurring. Approximately 25% indicate CJ involvement in past 12 months. 	<ul style="list-style-type: none"> • Existing Strategies: Home Together Plan call for more than 3,000 additional units of supportive housing for target population • New Strategies: Regional Housing Bond on ballot for November 2024 would bring 1-2 billion to Alameda County for additional housing resources. • HCD is developing a county-wide housing plan now – this population should be included as priority target population. 	<ul style="list-style-type: none"> • Development of new Real Estate Projects performed by CDA/HCD • Support Services of new projects performed by H&H
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70: Support Innovative Models: Expand funding and support for innovative housing models, including Community Land Trust models that hold land for the purposes of maintaining permanently affordable housing for low-income renters, and where possible, with a focus on people with serious mental health challenges, e.g. the Supportive Housing Community Land Alliance. Support capital funding for H&H’s Supportive Housing Land Trust (SHCLA) in its work to stabilize the loss of licensed board and cares with purchases of available properties. With capital funding of \$5 million, SHCLA proposes to leverage additional sources to make headway in increasing the dwindling licensed Board and Care stock and stabilize it with public funding.

Proposed language:

- Support Innovative Models: Expand funding and support for innovative housing models, including Community Land Trust models that acquire and hold land for the purposes of maintaining permanently affordable housing for low-income renters with a focus on people with serious mental health challenges.
- Support capital funding to minimize the loss of licensed board and care, encouraging purchase of available properties

Partner(s)	Problem that it Solves	Data needed? Budget request? Time to Implement?	Progress/Outcome, and Racial Equity measures	Notes
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<p>Key Partners:</p> <ul style="list-style-type: none"> • HCD • H&H <p>Consult with:</p> <ul style="list-style-type: none"> • BHD 	<ul style="list-style-type: none"> • Many independent Board and Care homes are unable to continue operating due to financial and other challenges. 	<ul style="list-style-type: none"> • Data: Reference Board and Care needs analysis and other research. • Budget: Varies. Providing start-up capital would require a minimum of \$200-250k per unit. • Ongoing operations costs depend on specific use, but high tier Board and care currently requires an operating/services supplement of \$3k+ per month. • Timeline: Land Trust model with acquisition and potential conversion would typically have a minimum timeline of 12 months to start-up. 	<ul style="list-style-type: none"> • Existing Strategies: Capacity Building programs for small and emerging developers. • Existing Strategies: Predevelopment Loan programs for small and emerging developers • New Strategies: Ensure that small and emerging developers can access new funding – ID local sources that don’t require small and emerging developers to compete and state and federal level • New Strategies: Partner with organizations which own land and want to develop it for affordable housing (like faith based organizations). • New Strategies: Ensure small development options are not subject to difficult to meet requirements – like labor compliance. • New Strategy: Create set aside funding for small and emerging developers and/or for small projects. 	<p>See Recommendation: 71 for Board and Care</p>
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