

## Application Narrative Template

This section of the toolkit is to assist jurisdictions in thoroughly completing their application narrative document. Below you will find the questions that HHAP program staff will be ensuring are answered in each jurisdiction's narrative document. Applications will not be deemed complete if all the below questions are not addressed in a jurisdiction's narrative attachment. More information on these areas can be found in the [HHAP program guidance](#).

### 1. **SUMMARY OF HOMELESSNESS IN THE CoC, LARGE CITY, OR COUNTY**

To successfully complete this section, applicants must:

**A. Submit their CoC's complete HUD Longitudinal System Assessment (LSA) from October 1, 2017 – September 30, 2018.** The LSA Summary Data View has been exported and attached to this application.

**B. Use the LSA data to provide (as defined by HUD):**

1. Total number of households served in: (1) Emergency Shelter, Safe Haven and Transitional Housing, (2) Rapid Rehousing, and (3) Permanent Supportive Housing.
2. Total number of disabled households served across all interventions.
3. Total number of households experiencing chronic homelessness served across all interventions.
4. Total number of 55+ households served across all interventions.
5. Total number of unaccompanied youth served across all interventions.
6. Total number of veteran households served across all interventions.
7. Number of individuals served across all interventions who were: (1) Female, (2) Male, (3) Transgender, or (4) Gender Non-Conforming.
8. Total number individuals served across all interventions who were: (1) White, Non-Hispanic/Non-Latino (only), (2) White, Hispanic/Latino (only), (3) Black or African American (only), (4) Asian (only), (5) American Indian or Alaska Native (only), (5) Native Hawaiian/Other Pacific Islander (only) or (6) Multiple races

**Please note:**

- Per HHAP program guidance, CoCs are expected to share the LSA with their regional co-applicants (i.e. applicable large cities and counties that overlap the CoC's jurisdiction). Each entity will submit a copy of the LSA for their CoC.
- Acknowledging that there may be differences in demographics and characteristics within a region, large city and county, applicants may also include additional information and data that is specific to the geography they represent.

**2. DEMONSTRATION OF REGIONAL COORDINATION**

To successfully complete this section, applicants must provide:

**A. Coordinated Entry System (CES) Information**

For Large City and County applicants:

1. How do you coordinate with your CoC's CES?

Marin County Department of Health and Human Services (HHS) is the recipient of the grant for the Coordinated Entry project through HUD's Continuum of Care program, and also supports Coordinated Entry with county general fund dollars. HHS is staff to the Marin County Continuum of Care, and leads all Coordinated Entry Committee general meetings, as well as the Coordinated Entry Steering Committee. HHS is also the HMIS Lead for the Continuum of Care, and monitors data quality for all HMIS and Coordinated Entry-participating provider projects.

2. What, if any, are your jurisdiction's current challenges related to CES, and how do you plan to address these challenges?

The geography covered by Marin County is the same as the Marin Continuum of Care, of which the Marin Coordinated Entry Committee is a work group. The Marin Coordinated Entry Committee have identified the following challenges to operating Coordinated Entry in Marin as effectively as possible, as well as strategies identified (and some already underway) to address them. Challenges, and their corresponding strategies, include:

- Improving communication between Coordinated Entry-participating providers, between providers and participants, and between the Continuum of Care/County and persons experiencing homelessness who are the most vulnerable.
  - Strategies underway to address this challenge include ensuring all Coordinated Entry-participating providers are connected to the proprietary "WIZARD" tool, a client care coordination platform, as part of the Marin County Whole Person Care Pilot, which targets people experiencing homelessness. Additional strategies identified include 1) adding additional partners who are not yet connected to WIZARD; 2) streamlining client feedback collection processes across provider programs/agencies; 3) coordinating monthly updates to all Coordinated-Entry-participating providers, including a quarterly

press release; and; 5) further supporting and leveraging the Chamber of Commerce marketing efforts regarding Coordinated Entry to the community.

- Increasing resources targeting Transition-Aged Youth and Older Adults experiencing homelessness.
  - Strategies underway to address this challenge include utilizing HEAP and HHAP set aside amounts for TAY and giving priority to proposals that accommodate older adults experiencing homelessness.
- Increasing resources for and improving prioritization of families experiencing homelessness.
  - Strategies underway to address this challenge include ensuring that the number of permanent supportive housing vouchers assigned to families is proportionate to the percentage of families on the chronic homelessness by-name list.
  - Additional strategies underway include developing a new prioritization process through Coordinated Entry to better prioritize families that are the most vulnerable.
- Increasing resources for persons experiencing homelessness who require a higher level of care than permanent supportive housing. Many of the most vulnerable in Marin County require the support of a Board and Care or Custodial situation; however, the most service intensive housing available to most people experiencing chronic homelessness in Marin County is Permanent Supportive Housing.
  - Strategies identified to address the challenge include 1) quantifying the need for more highly supportive beds and; 2) educating local, state, and federal leadership and funders regarding the need for higher service-intense housing and other resources for persons experiencing homelessness in Marin County.
- Integrating partners from Behavioral Health and additional subpopulation-focused providers.
  - Strategies identified include targeted outreach to subpopulation-focused provider partners that are not currently integrated into the Coordinated Entry System (e.g. Latinx providers),
- Ensuring consistency of access to subsidies despite fluctuation in availability of subsidy programs.
  - Strategies underway to address this challenge include leveraging the Marin Housing Authority's position as a central partner in the Continuum of Care, and as the Coordinated Entry provider. Marin Housing Authority regularly communicates with other provider partners regarding applications for housing vouchers and spearheads initiatives to apply for funds to address and end homelessness for the most vulnerable in Marin County.
  - Strategies identified include planning ahead anticipating timing of subsidy access for providers so that subsidies will be able to be applied as soon as they are available and any shortfalls may be avoided.

### 3. How do you promote the utilization of your CES?

- a. Specifically, what outreach do you conduct to ensure all individuals experiencing homelessness in your jurisdiction, including those with multiple barriers, are aware of the CES assessment and referral process?

Strategies regarding outreach and marketing of the Marin Coordinated Entry System were developed by the Marin Coordinated Entry Committee prior to the launch of Coordinated Entry in Marin in January 2018. The Committee is made up of Coordinated Entry-participating providers as well as other County and Continuum of Care partners whose work touches persons experiencing homelessness. The committee meets quarterly to discuss strategies to further improve awareness of the Coordinated Entry System in Marin for persons experiencing homelessness.

Per the strategies developed, all Coordinated Entry-participating provider agencies display signs advertising the Marin Coordinated Entry system throughout their programs, and in places where persons at risk of and experiencing homelessness are likely and known to be. Additionally, signs are displayed and flyers are distributed at other partner agency locations that serve persons who are marginalized – due to economic status, sex, age, disability, race, ethnicity, culture, etc. – and therefore at greater risk of experiencing homelessness. Signs and flyers marketing Coordinated Entry in Marin are in English, Spanish, and Vietnamese, pursuant to findings of a study done by the Committee which showed that these are the most prevalent languages spoken and understood by persons experiencing homelessness in Marin. Flyers include the number of a phone line (457-HOME) that persons experiencing homelessness can call to be connected to the Coordinated Entry System.

Further, the language used to describe what Coordinated Entry is, and who the system is most appropriate to serve, has been workshopped extensively for clarity and accessibility. All agencies participating in Coordinated Entry conduct the VI-SPDAT assessment at their physical access points, and all outreach staff are trained on the VI-SPDAT and are able to conduct assessments. When engaging with persons who may have already received an assessment, staff verify whether that person already has a VI-SPDAT score in HMIS.

Additionally, the Marin County Department of Health and Human Services, in collaboration with other provider agencies, has conducted presentations on the Marin Coordinated Entry System at local government and other community meetings to advertise and educate stakeholders at all levels about the system.

## **B. Prioritization Criteria**

1. What are the criteria used to prioritize assistance for people experiencing homelessness in your jurisdiction?

As stated in the Marin County CoC Written Standards of Service, the Marin County CoC has adopted the recommended order of priority established in HUD's Notice CPD 16-11 to ensure that those persons experiencing chronic homelessness with the longest histories residing in places not meant for human habitation, in emergency shelters, and in safe havens, and with the most severe service needs are given first priority for Permanent Supportive Housing beds dedicated or prioritized for occupants by persons experiencing chronic homelessness. A chronically homeless individual or head of household must meet the definition stated in the HUD Definition of Chronically Homeless final rule.

Additionally, the Marin County CoC has adopted the recommended order of priority established in 25 CCR 8409 for ESG-funded activities. The CoC prioritizes access to assistance for people with the most urgent and severe needs. ESG-funded activities seek to prioritize people who:

- A. Are unsheltered and living in places not designed for human habitation, such as cars, parks, bus stations, and abandoned buildings;
- B. Have experienced the longest amount of time homeless;
- C. Have multiple and severe service needs that inhibit their ability to quickly identify and secure housing on their own; and
- D. For Homelessness prevention activities, people who are at greatest risk of becoming literally homeless without an intervention and are at greatest risk of experiencing a longer time in shelter or on the street should they become homeless.

## 2. How is CES, pursuant to 24 CFR 578.8(a)(8) used for this process?

Individuals and families are prioritized for a full continuum of housing and service interventions through the Marin Coordinated Entry System, according to Marin CoC's Written Standards of Service, which prioritize those who are most vulnerable and with the most acute needs for referral and placement into appropriate housing interventions. Those with the highest VI-SPDAT or family VI-SPDAT scores are prioritized for longer-term housing solutions.

Through Coordinated Entry, housing is awarded based on the prioritization order, except for housing with specific subpopulation requirements. For example, individuals who are Veterans may be housed more quickly than someone else who is higher on the priority list if the next bed that opens is targeted to that subpopulation. Similarly, if there is a vacancy in a unit targeted toward survivors of domestic violence, the highest-scoring survivor of domestic violence will be referred for that vacancy.

### **C. Coordination of Regional Needs**

1. How have you coordinated with your partnering CoC, large city (if applicable), and/or county to identify your share of the regional need to address homelessness?

Marin County is the biggest funder of homeless services in the county and is a leader in transforming the homeless system of care. The County Department of Health and Human Services, as staff to the Continuum of Care, works across departments, with the cities, and with community partners to create a unified system to help house people and keep them housed. The County of Marin and the Marin County Continuum of Care, who share the same geography, collaborate closely regarding strategies to address homelessness within the jurisdiction. Per the corrected HHAP Final Allocations (released January 23, 2020), based on the 2019 Point-in-Time Count results, the Homeless Coordinating and Financing Council allocated \$1,218,057.42 to the Marin County Continuum of Care, and allocated \$1,128,443.05 to the County of Marin. As these totals are based on objective data regarding the need in the region, and demonstrate roughly equal amounts, the County of Marin and the Marin County Continuum of Care recognize that each has an equal share of the need in the region.

To further inform each entity's share of the needs, Marin County Health and Human Services (HHS), the Administrative Entity for the Homeless Housing, Assistance, and Prevention (HHAP) funds, hosted a feedback session in order to inform funding priorities for the Marin County HHAP allocation. Attendees

were provided with information about the HHAP program, including eligible uses of funding. Marin CoC allocation priorities were determined by the Continuum of Care.

## 2. What is your identified share of this need, and how will the requested funds help your jurisdiction meet it?

As discussed above, the County of Marin recognizes an equal share of the need with the Marin County Continuum of Care. To inform strategies to meet the needs within the County, attendees of the County Allocation listening session communicated the greatest support for the following two uses of the HHAP funding for the County allocation:

- **Funding to maintain continuity of service for Whole Person Care (WPC) clients.** The Whole Person Care (WPC) Pilot, administered by the California Department of Health Care Services, was a five-year one-time funding program aimed to provide more efficient, high quality, integrated care by better coordinating physical health, behavioral health and social services for Medi-Cal patients who are high users of multiple health care systems, yet continue to have poor health outcomes. In June 2017, Marin County Department of Health & Human Services (Marin HHS) received approval from the state to begin implementation of the pilot, with the vision of building a sustainable, evidence-based, outcomes-focused coordinated system of care across health and social sectors in Marin to more efficiently and effectively serve Marin County's most vulnerable Medi-Cal beneficiaries. The WPC pilot in Marin built upon existing programs and services by implementing a unified, coordinated care management system; by standardizing screening, assessments, and care coordination; and, by promoting bi-directional information sharing and care coordination among providers. The goal for this systems-level change was new, coordinated, and sustainable approaches to meeting the needs of high-risk, high-cost Medi-Cal beneficiaries. One of the services implemented by the Whole Person Care program was housing case management, which supports people experiencing chronic homelessness who are housed in Section 8 vouchers through Coordinated Entry. Because the funding for the Whole Person Care program is set to sunset this year, the service side of this new permanent supportive housing program will lose funding. For this reason, using HHAP funding for this initiative was identified as a top priority.
- **Outreach and coordination targeted to underserved areas.** A main component of the Marin Continuum of Care, the Marin Homeless Outreach Team (HOT) is a collaborative effort of local public and non-profit entities designed to bridge the system gaps and assist those in greatest need to access permanent housing. Many people with long histories of homelessness struggle with complex, multi-layered issues that interfere with their ability to gain and maintain stable housing. These factors often cause individuals to fall through the cracks between existing programs and remain on the streets instead. HOT's goal is not only to house those high needs persons, but also to mend the system cracks so that more people can permanently end their homelessness. Even when programs do exist, people with many barriers often struggle to navigate our community services safety net programs on their own. HOT case managers navigate these systems for each HOT client, ensuring that each person receives customized care and a direct route to permanent housing whenever possible. HOT is administered by the St. Vincent de Paul Society of Marin and funded by Health & Human Services. To ensure that outreach in Marin has capacity to assist the most vulnerable and the most resistant or unable to engage with the system of care, using HHAP funding for this initiative was identified as a top priority.

## **D. Creating Sustainable, Long Term Housing Solutions**

1. How is your jurisdiction involved in the efforts to create sustainable, long-term housing solutions for people experiencing homelessness across your region?

Examples could include, but are not limited to:

- a. Partnering with agencies responsible for city planning and zoning, housing developers, and financial and legal service providers.
- b. Developing or strengthening data and information sharing across and within jurisdictions.
- c. Coordinating with other regional jurisdictions to ensure systems are aligned and all available funding is being used efficiently and effectively.

As mentioned previously, the County of Marin Department of Health and Human Services (HHS) is a founding member of Opening Doors Marin, a collaborative of policy makers and funders across the county, whose membership includes supervisors, city councilmembers, city managers, two community foundations, local businesses, nonprofits, community development agency, and all other critical partners involved in efforts to address homelessness and affordable housing. The mission of Opening Doors Marin is to increase housing opportunities for the most vulnerable in our community; work to end veteran and chronic homelessness in Marin while preserving the safety and beauty of the community; create alignment across a broad array of stakeholders across the county; educate the Marin community about successes to date with Housing First and our collaboration; advocate to end homelessness in our community, and; identify new sources of funding for preserving and purchasing units of housing in Marin. Marin County HHS staff are members of the Opening Doors Marin Steering Committee

Over the course of 2 years Marin County has adopted policies that preserve affordable housing and accelerate and incentivize the development of Accessory Dwelling Units and Junior Accessory Dwelling Units. Marin County has been supporting a variety of projects and initiatives designed to increase our local housing capacity and our ability to house the most vulnerable. Those efforts include:

- Landlord recruitment – partner with us to rent to someone with a housing subsidy
- Conversion and Preservation – help expand the number of affordable units in existing properties and help us preserve affordable units when properties turn over in the market
- New construction – reducing barriers to development of Accessory Dwelling Units and Junior Accessory Dwelling Units
- Purchasing and preserving affordable units

As part of the effort to recruit and retain landlords to rent to persons with housing subsidies, the Marin Housing Authority administers the Landlord Partnership Program and the Landlord Liaison Project, funded by the County of Marin. These initiatives, launched in 2016, aim to expand rental opportunities for households holding housing choice and homeless vouchers by making landlord participation in the program more attractive and feasible, and by making the entire program more streamlined. By offering interest-free loans to landlords willing to rent, funds to be used as double security deposits to mitigate losses for damages and vacancies, as well as access to a dedicated landlord liaison 24-hour hotline, and

establishing a Landlord Advisory Committee, and landlord workshops and trainings, to date these efforts have brought in at least 106 new landlord partners.

Additionally, the County of Marin has a history of spearheading groundbreaking protections for low-income households, and adopted an ordinance in 2016 to establish source-of-income protections for renters to increase affordable housing options in Marin, before the state of California.

The Marin County Housing Trust Fund has been instrumental in the work to preserve, rehabilitate, and develop affordable housing. The Housing Trust Fund was created to increase the stock of permanently affordable housing units in the County and provides a local funding source for financial and technical assistance to help affordable housing developers produce and preserve affordable housing. Additionally, to further streamline communication and updates on all proposed development projects, the Chief Planner of the County of Marin Community Development Agency is a voting member on the Continuum of Care Advisory Board, the Homeless Policy Steering Committee, and participates in meetings.

The County of Marin also has a long history of direct collaboration with non-profit provider partners, and is currently supporting vouchers that will fund operating costs at the Mill Street Center Project, which is undergoing a transformation from a one-story shelter to a four-story center that also includes two floors of permanent supportive housing.

### **3. RESOURCES ADDRESSING HOMELESSNESS**

To successfully complete this section, all applicants must answer the following questions:

#### **A. Existing Programs and Resources**

1. Provide an exhaustive list of all funds (including the program and dollar amount) that your jurisdiction currently uses to provide housing and homeless services for homeless populations.

This list should include (where applicable), but not be limited to:

- a. Federal Funding (Examples: [YHDP](#), [ESG](#), [CoC](#), [CSBG](#), [HOME-TBRA](#), [CBDG](#))
  - CoC: \$4,089,391
  - ESG: \$295,145
  - Section 811: \$1,965,000
  - Medi-Cal FFP: \$590,401
- b. State Funding (Examples: [HEAP](#), [CESH](#), [CalWORKs HSP](#), [NPLH](#), [VHHP](#), [PHLA](#), [HHC](#), [Whole Person Care](#), [HDAP](#), [BFH](#))
  - Whole Person Care (Medi-Cal Waiver) Housing Case Management: \$1,140,000
  - MHSA: \$1,677,037
  - HEAP Diversion Pilot: \$307,965
  - HEAP PSH Development: \$4,523,891
  - HMIOT: \$518,000

- HSP: \$953,450
- HDAP: \$49,074
- HHC: awaiting award
- NPLH: awaiting award
- VHHP: awaiting award

c. Local Funding

- Rapid Rehousing: \$518,235
- Outreach: \$394,743
- Employment Services: \$175,000
- Emergency Shelter: \$1,642,634
- Permanent Supportive Housing: \$438,666
- Coordinated Entry: \$113,102
- Technical Assistance: \$175,732
- Point in Time Count: \$50,000

2. How are these resources integrated or coordinated with applicants from overlapping jurisdictions (i.e. CoC, large city, and/or county)?

The County of Marin provides funds to supplement the Marin County Continuum of Care Coordinated Entry System, as well as provider Ritter Center’s “Housing First PSH” program. Otherwise, Marin County and CoC funds for housing and homeless services are separate.

3. What gaps currently exist in housing and homeless services for homeless populations in your jurisdiction?

In the jurisdiction covered by the County of Marin and Marin County Continuum of Care, while funds are prioritized to fill the gaps identified in housing and homeless resources to meet the need, the following gaps still persist due to factors including a highly competitive rental market, lack of affordable housing stock, insufficient funding, and lack of funding sources targeted to the needs described below:

- Project-based housing with onsite services is an ongoing need in Marin. This housing type helps to ensure housing stability for the most vulnerable persons experiencing homelessness. The County, CoC, and provider partners are working to increase the number of project-based housing units, including the Mill Street project which through No Place Like Home and other state and local private funding will build upon existing resource to add new permanent site-based beds. However, additional sustainable sources of funding for project-based housing are needed.
- Highly supportive mental health beds, and residential supportive services model housing. As described in the bullet above, No Place Like Home funding has been a start to increasing the availability of these targeted resources in Marin, but system- and project-level data and provider insights show that many more mental health focused housing and supports are needed.
- Services and housing for persons experiencing homelessness with co-occurring disorders, who may not be eligible for targeted mental health resources for lack of a diagnosis of Serious Mental Illness. For persons with co-occurring disorders, it may be difficult to tell if they qualify as having SMI when behavior may be caused by active drug use. When this occurs, it can be very difficult

for doctors to decide on a diagnosis that qualifies as a Serious Mental Illness, which can act as a barrier to the resources that would best meet the needs of this individual. For this reason, more flexible non-SMI dedicated resources are needed for persons with co-occurring disorders.

- Facilities for persons who have age-related issues (e.g., dementia), including more skilled nursing beds or permanent supportive housing with skilled nursing services on-site. Due to the increasing number of older adults experiencing homelessness and adults aging into chronic homelessness with severe age-related disabilities, there is not enough funding targeted to providing the kinds of intensive housing with supports to meet the needs of this population.
- Increased outreach to special geographies. The geography covered by the County of Marin and the CoC includes some remote and difficult to reach places, where some of the most vulnerable are living in conditions not suitable for human habitation. The County and CoC prioritize new funding to increase outreach supports to target this gap, but additional outreach is still needed.
- Ongoing funding for sustainable operation costs. Currently, the County of Marin is developing a draft business plan with community partners for ending chronic and veteran homelessness, which will show a need to double the stock of housing and resources dedicated to these populations in the next three years. State and federal funding sources do not currently provide a sustainable source of funding for operating costs needed to keep these programs open and running. New funding should increase the amount eligible to be spent on operating costs.

## **B. HHAP Funding Plans**

1. Explain, in detail, how your jurisdiction plans to use the full amount of HHAP funds (including the youth set-aside) and how it will complement existing funds to close the identified gaps in housing and homeless services for the homeless population in your jurisdiction.

The County of Marin plans to use its full allocation of HHAP funding to support two initiatives: Whole Person Care Case management (\$650,000 over the course of two years), and outreach to underserved populations (\$399,452 over the course of two years). \$90,275 of the funds for outreach include the youth set-aside, and will be used to target youth and other populations experiencing homelessness in the Canal, Southern Marin, and West Marin regions of the county.

- The county has set aside \$500k for Whole Person Care services, and we're also exploring using MHSAs for some of our programming
- HHS will release a Request for Proposals for a small amount of funds for outreach in Southern Marin which are complementary to other outreach teams, both locally and state funded (see below).
- HHS funds 1.75 FTE intensive case managers for people who are very difficult to serve, as well as a mental health outreach team that works county-wide. WPC and HMIOT are also supporting a team of mental health clinicians who can do outreach and assessments for the behavioral health system in the field. We are a large geographic area with a lot of land only reachable by winding 2-lane roads making much of the county difficult to access, which means that outreach is a bit strained.

2. How will you ensure that HHAP funded projects will align and comply with the core components of Housing First as defined in Welfare and Institutions Code § 8255(b)?

The County of Marin is dedicated to implementation of and high fidelity to the Housing First approach, as required by the State of California for all state-funded projects. In 2016, the Marin County Board of Supervisors adopted housing first as official policy for county-funded and administered programs. HHAP-project policies will align with housing first principles and projects will operationalize policies in staff responsibilities. County, CoC leadership, and program providers will perform regular evaluation of HHAP-funded projects to monitor for Housing First compliance. Project and system leadership and providers will engage in regular evaluation of provider- and system-level data to measure outcomes and identify areas where improvements can be made to bring the project into greater alignment with Housing First. All monitoring and reporting submissions for HHAP-funded projects will evaluate compliance with requirements for Housing First. Provider- and system-level data will be monitored for improved outcomes for measures, such as successful placement in permanent housing destinations from street outreach, improved housing retention, fewer returns to homelessness, and other measures of performance.

#### **4. PARTNERS ADDRESSING HOMELESSNESS**

To successfully complete this section, all applicants must answer the following questions:

##### **A. Collaborating Partner Efforts**

Please note: per Program Guidance, page 9, collaborative partners, at a minimum, should include representatives of local homeless service providers, homeless youth programs, law enforcement, behavioral health, county welfare departments, city and county public officials, educators, workforce development, community clinics, health care providers, public housing authorities, and people with lived experience. If any of these partnerships are not currently active in your jurisdiction, please address in question #3 below.

1. Describe, in detail, the collaborative partners who will be working with you on identified HHAP projects and how you will be partnering with them.
- We'll have nonconflicted voting members of the HPSC on the RFP review committee

With the help of many valuable partners, outlined below, Marin County continues to make progress on a variety of initiatives aimed at preventing and ending homelessness in Marin. These partners and key stakeholders have provided feedback on the funding priorities for the HHAP allocation, and work together to establish a coordinated and community-wide response to the complex issue of homelessness.

- |                                     |   |
|-------------------------------------|---|
| 1. Elected Officials                | 11. Probation   |
| 2. County Health and Human Services | 12. Homeless Service Providers<br>(including Youth Providers) |
| 3. Community Development            | 13. Homeless Housing Providers<br>(including Youth Providers) |
| 4. Public Housing Agency            | 14. School Districts  |
| 5. Community Funder                 | 15. Business Community  |
| 6. Lived Experience Representative  | 16. Hospitals   |
| 7. Domestic Violence                | 17. Veterans' Services  |
| 8. Faith-Based Organization         | 18. Employment Services                                       |
| 9. Affordable Housing Developer     |   |
| 10. Law Enforcement                 |   |

The Marin Continuum of Care/County collaborates with partners in a variety of ways:

**Provider Agency:** The providers listed above operate Emergency Shelters, Permanent Housing, and a variety of wrap-around services to assist and stabilize homeless families, youth, and individuals in Marin County. Because clients often touch many service providers, provider agencies are in regular communication. Providers have been members of the Homeless Policy Steering Committee (HPSC) since its inception, and remain an integral part of the CE system implementation and monitoring. CE is managed collaboratively by representatives from most of the provider agencies, who meet multiple times weekly to jointly make policy decisions.

**CoC Board Member:** The Homeless Policy Steering Committee (HPSC) is the governing body of the Marin CoC. The HPSC develops long-term strategic plans and facilitates year-round efforts to identify the needs of homeless individuals and families in Marin. Regular meetings of the HPSC provide a forum for coordination for Marin's county-wide response to homelessness. The HPSC is open to all interested parties, including the public, and homeless or formerly homeless individuals. The HPSC is comprised of 18 areas of representation as shown below.

Marin's partners are collaborating across a variety of programs and activities on a regular basis. This collaboration and partnership facilitates continued program expansion, streamlined coordinated care, increased transparency, and best of all, improved health and housing outcomes for homeless and chronically homeless individuals and families being moved into and supported in housing. The above partners collaborate with the County of Marin and the Marin Continuum of Care in identifying the priorities for HHAP funding, and will be receiving regular updates on the HHAP-funded project(s)' progress, and offering feedback and participating in decision-making regarding the projects at the HPSC, as appropriate.

2. Describe any barriers that you experience in partnering, and how you plan to address them.

Examples could include: lack of key stakeholders or service providers, political bureaucracy, approval methods, lack of community input, etc.

The below challenges that have been identified as barriers to implementing Coordinated Entry have also been identified as barriers to partnering with the representatives named above.

- Increasing resources targeting Transition-Aged Youth and Older Adults experiencing homelessness.
  - Strategies underway to address this challenge include utilizing HEAP and HHAP set aside amounts for TAY and giving priority to proposals that accommodate older adults experiencing homelessness.
- Increasing resources for and improving prioritization of families experiencing homelessness.
  - Strategies underway to address this challenge include ensuring that the number of permanent supportive housing vouchers assigned to families is proportionate to the percentage of families on the chronic homelessness by-name list.
  - Additional strategies underway include developing a new prioritization process through Coordinated Entry to better prioritize families that are the most vulnerable.
- Increasing resources for persons experiencing homelessness who require a higher level of care than permanent supportive housing. Many of the most vulnerable in Marin County require the support of a Board and Care or Custodial situation; however, the most service intensive housing available to most people experiencing chronic homelessness in Marin County is Permanent Supportive Housing.
  - Strategies identified to address the challenge include 1) quantifying the need for more highly supportive beds and; 2) educating local, state, and federal leadership and funders regarding the need for higher service-intense housing and other resources for persons experiencing homelessness in Marin County.
- Integrating partners from Behavioral Health and additional subpopulation-focused providers.
  - Strategies identified include targeted outreach to subpopulation-focused provider partners that are not currently integrated into the Coordinated Entry System (e.g. Latinx providers),
- Ensuring consistency of access to subsidies despite fluctuation in availability of subsidy programs.
  - Strategies underway to address this challenge include leveraging the Marin Housing Authority's position as a central partner in the Continuum of Care, and as the Coordinated Entry provider. Marin Housing Authority regularly communicates with other provider partners regarding applications for housing vouchers and spearheads initiatives to apply for funds to address and end homelessness for the most vulnerable in Marin County.
  - Strategies identified include planning ahead anticipating timing of subsidy access for providers so that subsidies will be able to be applied as soon as they are available and any shortfalls may be avoided.

3. *If no collaborative partners have not been identified at time of application, describe the collaborative process of how you intend to include new and existing partners on HHAP projects.*

**N/A**

## 5. SOLUTIONS TO ADDRESS HOMELESSNESS

To successfully complete this section:

Applicants that Submitted a Strategic Plan for CESH must:

- Identify the measurable goals set in your CESH Strategic Plan and explain, in detail, which of these goals HHAP funding will directly impact and by how much.

**Please note:** Per HSC § 50219(a)(6), all applicants' measurable goals must include the number of individuals they intend to serve, and the number of individuals they intend to successfully place in permanent housing with HHAP funding.

Through many community discussions of priorities and strategies to prevent and end homelessness in Marin County, stakeholders have advocated for and adopted the following goals:

- **End Chronic and Veteran Homelessness in Marin County by 2022;**
- **Maintain and Enhance Fidelity to the Principles of Housing First;**

To achieve these goals, the HHAP-funded projects will impact the following solutions that have been identified for further community focus and development.

Through the 5-year Whole Person Care (WPC) Pilot Program, the County of Marin and provider partners have been able to implement housing-based case management based on the Assertive Community Treatment (ACT) Model, a service delivery model that provides comprehensive, locally-based treatment to persons experiencing homelessness or who are at risk of homelessness with Serious Mental Illness, who may also have served in the military and/or are experiencing chronic homelessness. Community partner Marin Housing Authority has dedicated the Section 8 vouchers that are supported by the WPC services that will be continued with these funds, through which the County of Marin will be able to serve and house at least 180 persons (100%) through Whole Person Care Case Management. This includes the 84 persons who are currently being served and assisted in maintaining stable housing through the program.

To ensure the most vulnerable populations experiencing homelessness are engaged by the system of care, HHAP funding will be used to enhance capacity for and better coordinate outreach teams. Outreach teams will ensure that persons experiencing homelessness who are not connecting with light-touch outreach are being identified for more active engagement through Marin's specialized outreach teams, including the Homeless Outreach Team and new Homeless Mentally Ill Outreach and Treatment (HMIOT) team. Marin's new Homeless Outreach Coordinator works closely with other outreach teams to enhance accountability and full coverage of outreach to all of Marin County. HHAP-funded outreach activities will serve 50 persons over the course of the year and will successfully place 25 persons (50%) into permanent housing.



## HOMELESS HOUSING, ASSISTANCE AND PREVENTION PROGRAM (HHAP) ANNUAL BUDGET TEMPLATE

### APPLICANT INFORMATION

CoC / Large City / County Name:

Marin County
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Receiving Redirected Funds? Y/N

No
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Administrative Entity Name:

Marin County Department of Health and Human Services
--

Total Redirected Funding

\$ -
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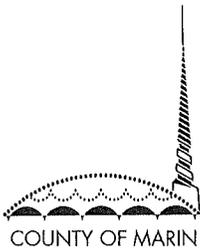
### HHAP FUNDING EXPENDITURE PLAN\*

ELIGIBLE USE CATEGORY	FY20/21	FY21/22	FY22/23	FY23/24	FY24/25	TOTAL
Rental Assistance and Rapid Rehousing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Operating Subsidies and Reserves	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Landlord Incentives	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Outreach and Coordination (including employment)	\$ 199,726.02	\$ 199,726.01	\$ -	\$ -	\$ -	\$ 399,452.03
Systems Support to Create Regional Partnerships	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Delivery of Permanent Housing	\$ 325,000.01	\$ 325,000.01	\$ -	\$ -	\$ -	\$ 650,000.02
Prevention and Shelter Diversion to Permanent Housing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
New Navigation Centers and Emergency Shelters	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Strategic Homelessness Planning, Infrastructure Development, CES, and HMIS (up to 5%)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Administrative (up to 7%)	\$ 39,495.50	\$ 39,495.50	\$ -	\$ -	\$ -	\$ 78,991.00
<b>TOTAL FUNDING ALLOCATION</b>						<b>\$ 1,128,443.05</b>
	<b>FY20/21</b>	<b>FY21/22</b>	<b>FY22/23</b>	<b>FY23/24</b>	<b>FY24/25</b>	<b>TOTAL</b>
Youth Set-Aside (at least 8%)	\$ 45,137.72	\$ 45,137.72	\$ -	\$ -	\$ -	\$ 90,275.44

\*Narrative should reflect details of HHAP funding plan

**COMMENTS:**

FINAL
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DEPARTMENT OF  
**HEALTH AND HUMAN SERVICES**

Promoting and protecting health, well-being, self-sufficiency, and safety of all in Marin County.

February 10, 2020



Benita McLarin, FACHE  
DIRECTOR

Amber Ostrander  
HHAP Program Grant Manager  
Homeless Coordinating and Financing Council (HCFC)  
Business, Consumer Services, and Housing Agency  
915 Capitol Mall, Suite 350A, Sacramento, CA 95814

20 North San Pedro Road  
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San Rafael, CA 94903  
415 473 6924 T  
415 473 3344 TTY  
[www.marincounty.org/hhs](http://www.marincounty.org/hhs)

To Whom It May Concern:

This letter observes that the County of Marin, Department of Health and Human Services, and the Marin Continuum of Care (CoC), as applicants with overlapping jurisdictions for Homeless Housing, Assistance and Prevention (HHAP) funding, do hereby acknowledge and agree to regional coordination and partnership, per Health and Safety Code 50219(a)(1). While the County of Marin is the Administrative Entity for both the County and CoC HHAP funds, the Marin CoC sets the funding priorities for its own allocation of funds.

The County of Marin and the Marin CoC (also known as the Homeless Policy Steering Committee) agree to participate in regular meetings to jointly plan and evaluate HHAP spending and projects. These discussions will take place at the regular quarterly general meetings of the Homeless Policy Steering Committee or its subcommittees. Attendees include interested members of the public as well as the voting membership of the HPSC. Voting members are composed of local partners engaged in addressing and ending homelessness in Marin, including elected officials, county department representatives, homeless housing and services providers, public housing, affordable housing developers, law enforcement, probation, school districts, veterans' services, employment services, youth, and representatives with lived experience of homelessness.

The County of Marin and the Marin CoC have reviewed and agree with how each intends to fund its respective HHAP-funded project(s). Both agree that the other's spending plan accurately addresses the share of regional need to address homelessness in Marin.

Sincerely,

Benita McLarin, FACHE

Director, Marin County Department of Health and Human Services