

CONTRACT AMENDMENT C

This CONTRACT AMENDMENT is made and entered into between SALISH BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION, through Kitsap County, as its administrative entity, a political subdivision of the State of Washington, with its principal offices at 614 Division Street, Port Orchard, Washington 98366, hereinafter "SBH-ASO", and Kitsap Community Resources hereinafter "CONTRACTOR."

In consideration of the mutual benefits and covenants contained herein, the parties agree that their Contract, numbered as Kitsap County Contract No. KC-133-20, Amendment B executed on April 26, 2021, shall be amended as follows:

- Page 1 shall be amended as follows:
 - **Contract Amount** is increased by \$738,596, increasing the contract total from \$649,975 to \$1,388,571.
 - **Contract Period:** Contract end date is extended to June 30, 2022. The contract period is January 1, 2020 through June 30, 2022.
 - **Attachments:**
 - Attachment B: HARPS SUBSIDY Statement of Work deleted and replaced as attached.
 - B-1: HARPS Log replaced as attached.
 - B-2: Deleted
 - B-3: CBRA Guide replaced as attached
 - Attachment C: Budget is replaced as attached.
 - Attachment E: Debarment Statement
1. **Attachment C: Budget** is deleted entirely and replaced as attached.

Bridge Subsidy (Short-Term)

1/1/20-6/30/20 funding remains unchanged at \$160,000.
7/1/20-6/30/21 funding remains unchanged at \$325,000.
7/1/21-6/30/22 funding is added in the amount of \$325,000.

SUD Subsidy

1/1/20-6/30/20 funding remains unchanged at \$32,000.
7/1/20-6/30/21 funding remains unchanged at \$32,500.
7/1/21-6/30/22 funding is added in the amount of \$65,000.

Commerce Long-Term Subsidy

1/1/20-6/30/20 funding remains unchanged at \$33,975.

7/1/20-6/30/21 funding remains unchanged at \$64,000.
7/1/21-6/30/22 funding is added in the amount of 348,596.

2. If this Contract Amendment extends the expiration date of the Contract, then the Contractor shall provide an updated certificate of insurance evidencing that any required insurance coverages are in effect through the new contract expiration date. The Contractor shall submit the certificate of insurance to:

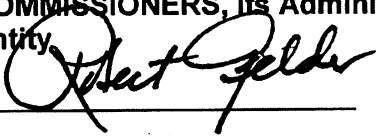
Program Lead, Salish Behavioral Health Organization
Kitsap County Department of Human Services
614 Division Street, MS-23
Port Orchard, WA 98366.

Upon receipt, the Human Services Department will ensure submission of all insurance documentation to the Risk Management Division, Kitsap County Department of Administrative Services.

3. Except as expressly provided in this Contract Amendment, all other terms and conditions of the original Contract, and any subsequent amendments, addenda or modifications thereto, remain in full force and effect.

This amendment shall be effective July 1, 2021.

SALISH BEHAVIORAL HEALTH ORGANIZATION, By KITSAP COUNTY BOARD OF COMMISSIONERS, Its Administrative Entity



8-23-21

DATE

CONTRACTOR: Kitsap Community Resources



Name: Irmgard Davis
Title: Interim Executive Director

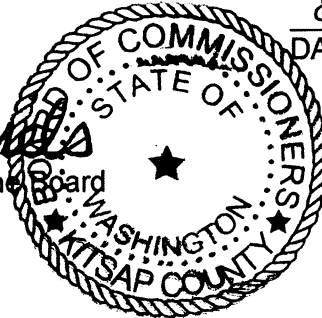
8/5/2021

DATE

ATTEST



Dana Daniels, Clerk of the Board



HARPS Subsidy Team STATEMENT OF WORK

1) Principles of Evidence-based Permanent Supportive Housing.

- A. Permanent Supportive Housing (PSH) is decent, safe, and affordable community-based housing that provides tenants with the rights of tenancy under state and local landlord-tenant laws and is linked to voluntary and flexible support and services designed to meet tenants' needs and preferences. PSH makes housing affordable to someone on SSI, (either through rental assistance or housing development). It provides sufficient wraparound supports to allow people with significant support needs to remain in the housing they have chosen. Dimensions of PSH EBP include:
- B. Choice in housing and living arrangements
- C. Functional separation of housing and services
- D. Decent, safe, and affordable housing
- E. Community integration and rights of tenancy
- F. Access to housing and privacy
- G. Flexible, voluntary, and Recovery-focused services
- H. Even though HARPS will not require high fidelity PSH EBP, we encourage sites to become familiar with the dimensions of PSH EBP. A link to the SAMHSA PSH toolkit can be found at <http://store.samhsa.gov/product/Permanent-Supportive-Housing-Evidence-Based-Practices-EBP-KIT/SMA10-4510>.
 - i) HARPS fidelity reviews will be encouraged through the learning collaborative/incentive fidelity review process.

2) HARPS Priority Populations:

- A. Individuals who are not eligible for Medicaid through the Foundational Community Supports Supportive Housing Services and who are experiencing a serious mental illness, substance use disorder or Co-Occurring disorder (Mental Illness & Substance Abuse Disorder)
 - i) Who are released from or at risk of entering:
 - (1) Psychiatric Inpatient settings
 - (2) Substance Abuse Treatment Inpatient settings
 - (3) Who are Homeless/At Risk of homelessness
 - (4) Broad definition of homeless (couch surfing included)

3) HARPS Housing Bridge Subsidy.

- A. Landlord Outreach and Engagement
 - i) Recruit and cultivate relationships with landlords and property management agencies, leading to more housing options for HARPS Participants. Make use of printed materials and in-person events, such as landlord organization or rental housing association meetings, to educate landlords and property managers about

the benefits of working with supportive housing providers, individuals with treated behavioral health conditions, subsidies, housing quality and safety standards, and the Department of Commerce's Landlord Mitigation Program.

(a) <https://www.commerce.wa.gov/building-infrastructure/housing/landlord-mitigation-program/>

- B. Utilize as short-term bridge subsidies for HARPS eligible individuals. These funds will be intended for individuals with serious mental illness but can be used for the SUD population once the SUD Subsidy funds are exhausted. Housing subsidies are encouraged to be available to individuals in the region that meet eligibility as defined in Section 3 of this Statement of Work.
- C. Contractor may bill 5% of subsidies disbursed each month. The administrative costs can include staff and staff expenses relevant to issuing subsidies in a manner consistent with the HARPS Housing Bridge Subsidy Guidelines below.

4) HARPS Housing Bridge Subsidy Guidelines.

- A. HARPS programs are encouraged to have Housing Subsidy policies in place to address appeals and denials and the following guidelines:
- B. The budget for the HARPS Housing Bridge Subsidy is short-term funding to help reduce barriers and increase access to housing. Individuals exiting detox, 30, 60, and 90-day inpatient substance use disorder treatment facilities, residential treatment facilities, state hospitals, E&T's, local psychiatric hospitals and other inpatient behavioral healthcare settings could receive up to 3 months of housing 'bridge' subsidy.
- C. HARPS Bridge Subsidies are temporary in nature and should be combined with other funding streams, whenever possible, to leverage resources to assist individuals in obtaining and maintaining a permanent residence. HARPS teams are encouraged to work with Dept. of Commerce and the long-term housing subsidies available through the Community Behavioral Health Rental Assistance (CBRA) program.
- D. HARPS Bridge subsidies are *estimated* at \$500 per person for 3 months (This estimation was developed for budget purposes only and regions may adjust as needed to meet Fair Market Rental Housing rates as long as the contractor stays within contracted amount). Allowable expenses for HARPS Housing Bridge Subsidy:
 - i) Monthly rent and utilities, and any combination of first and last months' rent for up to three (3) months. Rent may only be paid one month at a time, although rental arrears, pro-rated rent, and last month's may be included with the first month's payment.
 - ii) Rental and/or utility arrears for up to three months. Rental and/or utility arrears may be paid if the payment enables the household to remain in the housing unit for which the arrears are being paid or move to another unit. The HARPS bridge subsidy may be used to bring the program participant out of default for the debt and the HARPS Peer Specialist will assist the participant to make payment arrangements to pay off the remaining balances.
 - iii) Security deposits and utility deposits for a household moving into a new unit.
 - iv) HARPS rent assistance may be used for move-in costs including but not limited to deposits and first months' rent associated with housing, including project- or tenant-based housing.

- v) Application fees, background and credit check fees for rental housing.
- vi) Lot rent for RV or manufactured home.
- vii) Costs of parking spaces when connected to a unit.
- viii) Landlord incentives (provided there are written policies and/or procedures explaining what constitutes landlord incentives, how they are determined, and who has approval and review responsibilities).
- ix) Reasonable storage costs.
- x) Reasonable moving costs such as truck rental and hiring a moving company.
- xi) Hotel/Motel expenses for up to 30 days if unsheltered households are actively engaged in housing search and no other shelter option is available.
- xii) Temporary absences. If a household must be temporarily away from his or her unit, but is expected to return (e.g., participant violates conditions of their DOC supervision and is placed in confinement for 30 days or re-hospitalized), HARPS may pay for the households rent for up to 60 days. While a household is temporarily absent, he or she may continue to receive HARPS services.
- xiii) Rental payments to Oxford houses or Recovery Residences on the Recovery Residence Registry located at <https://hca-tableau.watech.wa.gov/t/51/views/ResidenceOxfordHouseLocations/Dashboard?:isGuestRedirectFromVizportal=y&embed=y>

E. HARPS Reporting. A monthly report format (see separately attached Excel Spreadsheet "HARPS Subsidy Log, which includes a worksheet for tracking Landlord Outreach and Engagement) will be submitted to SBHASO HARPS Care Manager by the 10th of the following month through secure (encrypted) email or SBHASO Portal submission.

5) HARPS Housing Services Guidelines. HARPS programs are encouraged to have Housing Service policies in place to address appeals and denials and the following guidelines:

- A. Housing and Recovery through Peer Services (HARPS) teams' caseload size. The case mix must be such that the HARPS Teams can manage and have flexibility to be able to provide the intensity of services required for each individual, according to the Medical Necessity of each individual. It is estimated that 20% of individuals accessing HARPS Housing Bridge Subsidy Funding will receive supportive housing services from HARPS teams each year. This assumes that each team will support an active caseload of 50 individuals at any one time and assumes turnover of thirty five percent (35%) per year.
- B. HARPS Housing Specialists must have the capacity to provide multiple contacts per week with individuals exiting or recently discharged from inpatient behavioral healthcare settings, making changes in a living situation or employment, or having significant ongoing problems in maintaining housing. These multiple contacts may be as frequent as two to three times per day, seven days per week, and depend on individual need and a mutually agreed upon plan between individuals and program staff. Many, if not all, staff must share responsibility for addressing the needs of all individuals requiring frequent contact.

- C. HARPS Teams must have the capacity to rapidly increase service intensity and frequency to an individual when his or her status requires it or if an individual requests it.
- D. HARPS Teams must have a response contact time of no later than two calendar days:
 - i) Upon discharge from a behavioral healthcare inpatient setting, such as an Evaluation & Treatment Center, Residential Treatment Center, Detox, or State Psychiatric Hospital.
- E. Operating as a continuous supportive housing service, HARPS Teams must have the capability to provide support services related to obtaining and maintaining housing. This will include direct contact with landlords on behalf of the participant. Services must minimally include the following:
 - i) Hospital Liaison Coordination. The BH ASO's hospital liaison must actively coordinate the transition of individuals from behavioral healthcare inpatient treatment center discharge to the HARPS Team in the community of residence in order to minimize gaps in outpatient health care, and housing.
 - ii) Service Coordination. Service coordination must incorporate and demonstrate basic recovery values. The individual will have choice of his or her housing options, will be expected to take the primary role in their personal Housing Plan development, and will play an active role in finding housing and decision-making.
 - iii) Crisis Assessment and Intervention Coordination. Behavioral Health Crisis assessment and intervention must be available 24-hours per day, seven days per week through the BH ASO's crisis system. Services must be coordinated with the assigned Care Coordinator. These services include telephone and face-to-face contact.
- F. Supportive Housing Services should include the following, as determined by medical necessity:
 - i) Supportive Housing Services. Assess housing needs, seek out and explain the housing options in the area, and resources to obtain housing. Educate the individual on factors used by landlords to screen out potential tenants. Mitigate negative screening factors by working with the individual and landlord/property manager to clarify or explain factors that could prevent the individual from obtaining housing. Ongoing support for both the individual and landlord/property manager to resolve any issues that might arise while the individual is occupying the rental.
 - (1) Each HARPS Participant will be assigned a Peers Specialist or Housing Specialist who assist in locating housing, and resources to secure housing, as well as maintain housing. The primary responsibilities of the Peer Specialist are to work with the individual to find, obtain and maintain housing to promote recovery, locate and secure resources related to housing and utilities, offer information regarding options and choices in the types of housing and living arrangements, and advocate for the individual's tenancy needs, rights (including ADA Accommodations), and preferences to support housing stability. Service

coordination also includes coordination with community resources, including Consumer self-help and advocacy organizations that promote recovery.

- (2) Each individual receiving HARPS Services must have an individualized, strengths-based housing plan that includes action steps for when housing related issues occur. As with the treatment planning process, the individual will take the lead role in setting goals and developing the housing plan.
- ii) Housing Search and Placement. Includes services or activities designed to assist households in locating, obtaining, and retaining suitable housing. Services or activities may include: tenant counseling, assisting households to understand leases, securing utilities, making moving arrangements, representative payee services concerning rent and utilities, and mediation and outreach to property owners related to locating or retaining housing.
 - iii) Housing Stability. Includes activities for the arrangement, coordination, monitoring, and delivery of services related to meeting the housing needs of individuals exiting or at risk of entering inpatient behavioral healthcare settings and helping them obtain housing stability. Services and activities may include developing, securing, and coordinating services including:
 - (1) Developing an individualized housing and service plan, including a path to permanent housing stability subsequent to assistance.
 - (2) Referrals to Foundational Community Supports (FCS) supportive housing and supported employment services
 - (3) Seeking out and assistance applying for long-term housing subsidies
 - (4) Affordable Care Act activities that are specifically linked to the households stability plan;
 - (5) Activities related to accessing Work Source employment services;
 - (6) Referrals to vocational and educational support services such as Division of Vocational Rehabilitation (DVR)
 - (7) Monitoring and evaluating household progress;
 - (8) Assuring that households' rights are protected; and
 - (9) Applying for government benefits and assistance including using the evidence-based practice SSI/SSDI through SSI/SSDI Outreach, Access, and Recovery (SOAR)
- G. Education Services Linkage. Supported education related services are for individuals whose high school, college or vocational education could not start or was interrupted and made educational goals a part of their recovery (treatment) plan. Services include providing support to applying for schooling and financial aid, enrolling and participating in educational activities or linking to supported employment/supported education services.
- H. Vocational Services Linkage. These services may include work-related services to help individuals value, find, and maintain meaningful employment in community-based job sites as well as job development and coordination with employers. These activities should also be part of the individual's recovery (treatment) plan or linkage to supported employment.

- I. Activities of Daily Living Services. Services to support activities of daily living in community-based settings include individualized assessment, problem solving, skills training/practice, sufficient side-by-side assistance and support, modeling, ongoing supervision (e.g. prompts, assignments, monitoring, encouragement), environmental adaptations to assist to gain or use the skills required to access services, and provide direct assistance when necessary to ensure that individuals obtain the basic necessities of daily life.
 - J. Social and Community Integration Skills Training. Social and community integration skills training serve to support social/interpersonal relationships and leisure-time skill training and include supportive individual therapy (e.g., problem solving, role-playing, modeling, and support); social-skill teaching and assertiveness training; planning, structuring, and prompting of social and leisure-time activities; side-by-side support and coaching; and organizing individual and group social and recreational activities to structure individuals' time, increase their social experiences, and provide them with opportunities to practice social skills, build a social support network and receive feedback and support.
 - K. Peer Support Services. These include services to validate individuals' experiences and to inform, guide and encourage individuals to take responsibility for and actively participate in their own recovery, as well as services to help individuals identify, understand, and combat stigma and discrimination against mental illness and develop strategies to reduce individuals' self-imposed stigma. Peer Support and Wellness Recovery Services include:
 - i) Promote self-determination; and
 - ii) Model and teach advocating for one's self
 - iii) Encourage and reinforce choice and decision-making.
 - iv) Introduction and referral to individual self-help programs and advocacy organizations that promote recovery.
 - v) "Sharing the journey" (a phrase often used to describe individuals' sharing of their recovery experience with other peers). Utilizing one's personal experiences as information and a teaching tool about recovery.
 - vi) The Peer Specialist will serve as a consultant to the Treatment team to support a culture of recovery in which each individual's point of view and preferences are recognized, understood, respected and integrated into treatment, rehabilitation, support, vocational and community activities.
 - L. Substance Use Disorder Treatment Linkage. If clinically indicated, the HARPS Team may refer the individual to a DBHR-licensed SUD treatment program.
- 6) HARPS Teams will not suggest or provide Medication Prescription, Administration, Monitoring and Documentation.**

7) Critical Incident Management Reporting

A. Individual Critical Incident Reporting

- i. The Contractor shall submit an individual Critical Incident report for the following incidents that occur:
 1. To a service participant, and occurred within a contracted behavioral health facility (inpatient psychiatric, behavioral health agencies), Federally Qualified Health Clinic, or by independent behavioral health provide:
 - a. Abuse, neglect, or sexual/financial exploitation;
 - b. Death; and
 - c. Severely adverse medical outcome or death occurring within 72 hours of transfer from a contracted behavioral facility to a medical treatment setting.
 2. By a service participant, who is currently receiving services associated with this contract or was served within the last 60 days. Acts allegedly committed, to include:
 - a. Homicide or attempted homicide;
 - b. Arson;
 - c. Assault or action resulting in serious bodily harm which has the potential to cause prolonged disability or death;
 - d. Kidnapping; and
 - e. Sexual assault
 3. Unauthorized leave from a behavioral health facility during an involuntary detention.
 4. Any event involving a service recipient that has attracted, or is likely to attract media coverage. (Contractor shall include the link to the source of the media, as available).
- ii. The Contractor shall report critical incidents within one Business Day of becoming aware of the incident and shall report incidents that have occurred within the last thirty (30) calendar days. Media related incidents should be reported to HCA as soon as possible, not to exceed one Business Day, regardless of the date of the actual event described in the media.
 1. The Contractor shall enter the initial report, follow-up, and actions taken into HCA Incident Reporting System

<https://fortress.wa.gov/hca/ics/>, using the report template within the system.

2. If the system is unavailable the Contractor shall report Critical Incidents to DPC@hca.wa.gov.

a. HCA may ask for additional information as required for further research and reporting. The Contractor shall provide information within three (3) Business Days.

B. Completing the reporting requirements of this section, do not release the contractor from notifying any other needed parties, such as Department of Health, Adult Protective Services, and or Law Enforcement.

8) The HARPS Team should work with the Treatment Team:

A. Establish a peer relationship with each participant.

B. Assess each individual's housing needs and provide verbal and written information about housing status. The physician or psychiatric Advanced Registered Nurse Practitioner (ARNP) will review that information with the individual, HARPS Team members and, as appropriate, with the individual's family members or significant others.

C. HARPS Team Members can provide direct observation, available collateral information from the family and significant others as part of the comprehensive assessment.

D. In collaboration with the individual, assess, discuss and document the individual's housing needs and behavior in response to medication and monitor and document medication side effects. Review observations with the individual and Treatment Team.

E. HARPS Team Members must participate in the HARPS Monthly Administrative Conference Call. This call occurs on the last Monday of each month from 10 AM to 11 AM.

CBRA Subsidy Program Requirements

Grantees shall commit to providing long-term or bridge subsidy in every county in their region for eligible households within the eligible population described below:

Eligible Population for Housing Subsidy Funded Under This Contract:

A. Adults (and their households) who have a diagnosed behavioral health condition, are eligible for services from an approved long-term support program, and demonstrate a need for long-term subsidy. (See: Program Guidelines, Overview and Program Eligibility)

- B. Grantees shall commit to prioritizing subsidies for the priority populations .
Priority Population for Housing Subsidy funded under this Contract:
- a. Households that meet one or more of the following: •
 - b. Discharging or needing to discharge from a psychiatric hospital or other psychiatric inpatient setting. (See: Program Guidelines, Priority Populations)
- C. Grantees shall submit the following deliverables on time with truthful, accurate information: •
- a. Monthly Invoices and Required Back-Up Documentation submitted to SBHASO by the 10th of each month
 - b. Annual County Expenditure Report Information to the lead of each county homelessness crisis response system within the service area. (See: Program Guidelines, Reporting Requirements)
 - c. Accurate and Timely Data Entry into the Homeless Management Information System Database. (See: Program Guidelines, HMIS and Data Quality)
- D. Grantees shall comply with all of the requirements, policies and procedures in the most up-to-date version of the Community Behavioral Health Rental Assistance Program Guidelines.



Guidelines

FOR THE

Community Behavioral Health Rental Assistance Program (CBRA)

July 1, 2021 – June 30, 2023

Version 2
July 2021

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1 Grant Basics

Overview

The Community Behavioral Health Rental Assistance program (CBRA) provides long-term or bridge rental subsidies for high-risk individuals with behavioral health conditions and their households. When partnered with programs offering supportive housing services such as Washington’s Foundational Community Supports (FCS) program, Aging and Long-Term Supports (AL TSA) programs, Housing and Recovery through Peer Services (HARPS) programs, or others, highly-vulnerable persons with complex behavioral health needs have opportunities to live independently in the communities of their choice.

Fund Source

CBRA is funded by State General Funds as allocated by the Legislature.

2 Administrative Requirements

Grant Management

2.1.1 Changes to Guidelines

Commerce may revise the guidelines at any time. All lead grantees will be sent revised copies. Lead grantees are responsible for sending revisions to subgrantees, if any, in a timely manner.

2.1.2 Commerce Monitoring

Commerce will monitor lead grantees' CBRA grant activities. Lead grantees will be given a minimum of 30 days' notice unless there are special circumstances that require immediate attention. The notice will specify the monitoring components.

2.1.3 Discharge Planning Facilitation

Lead grantees are responsible to facilitate partnerships between discharge planners at state psychiatric hospitals and community-based psychiatric inpatient institutions and sub grantees to ensure priority populations are being served. Lead grantees should also facilitate partnerships between discharge planning staff at other behavioral health institutions to support referrals for those that are not part of the priority population but meet eligibility criteria.

2.1.4 Subgrantee Management Requirements

Upon Commerce approval, lead grantees may enter into an agreement with any other nonprofit or governmental housing assistance organizations who operate programs to end homelessness within a defined service area. The CBRA Grant General Terms & Conditions Section 32 identifies subgrantee requirements. In addition, all subgrantee agreements must be time-limited and have defined roles and responsibilities for each party, detailed budgets and performance terms. Commerce reserves the right to directly contact subgrantees at any time for data quality, monitoring, fiscal and other issues.

Lead Grantee Responsibilities are as follows:

- ✓ Lead grantees must maintain written procedures related to subcontracting as well as copies of all subcontracts and records related to subcontracts.
- ✓ Lead grantees must ensure that subcontracts bind subcontractors to follow all applicable terms of the original grant with Commerce and must include a term that COMMERCE and the State of Washington are not liable for claims or damages arising from a Subcontractor's performance of the subcontract.
- ✓ Lead grantees must provide Commerce with copies of subgrant agreements (upon request) and notify Commerce if subgrants are terminated during the grant period.
- ✓ Lead grantees must notify Commerce of any changes in selection of subgrantees funded with CBRA, or changes in the interventions of those

subgrantees.

2.1.4.1 Subgrantee Risk Assessment and Monitoring

Lead grantees are responsible for ensuring subgrantee compliance with all requirements identified in the CBRA guidelines. The lead grantee must maintain policies and procedures that guide the risk assessment, monitoring activities, and monitoring frequency.

The lead grantee must conduct a risk assessment and develop a monitoring plan for each subgrantee within six months of contracting CBRA funds to the subgrantee. The risk assessment must inform the monitoring plan for each subgrantee. Monitoring plans must include monitoring dates, the type of monitoring (remote, on-site), and the program requirements being reviewed.

Commerce reserves the right to require lead grantees to undertake special reviews when an audit or other emerging issue demands prompt intervention and/or investigation.

Performance Measurement

Performance Measures help evaluate the effectiveness of the Permanent Housing Subsidy programs. For more details, see [Appendix D: Performance Requirements](#).

The Department of Commerce (Commerce) has identified the following as the most critical performance measures for Permanent Housing Subsidy programs:

- ✓ Prioritizing those exiting state psychiatric hospitals and community psychiatric inpatient beds.
- ✓ Increasing retention in the PHS program or exits to permanent housing

Upon request, grantees must submit accurate and complete information for the Annual County Expenditure Report to the Consolidated Homeless Grant Lead Contractor in the communities in which they serve.

Upon request, grantees will respond to requests for information by Commerce to facilitate legislative reporting and strategic distribution of funding.

Fiscal Administration

2.4.1 Budget Caps

Administration - up to 15 percent of total contracted budget may be used for administration. See [Section 4](#) for details on allowable expenses for Administration and Program Operations.

2.4.2 Reimbursements

Lead grantees must bill Commerce monthly for reimbursement of allowable costs. Invoices are due on the 20th of the month following the billing period. Final invoices for

a biennium may be due sooner than the 20th. If the lead grantee fails to submit an invoice within a three-month period, without a reasonable explanation, Commerce may take corrective action resulting in withholding of payment or reduction in contracted amount. Exceptions to billing procedures can be negotiated with Commerce on a case-by-case basis.

Invoices must be submitted online using the Commerce Contract Management System (CMS) via Secure Access Washington (SAW). Contact your Commerce representative for access to the online invoicing system.

2.4.2.1 Reimbursement Back-up Documentation

Requests for reimbursement must be accompanied by the CBRA Monthly Voucher Detail Report attached to the online invoice. Source documentation such as cancelled checks, purchase orders, or time sheets are not required.

Commerce may require a lead grantee to submit additional documentation as needed to approve reimbursement. Lead grantees must retain original invoices submitted by their subgrantees.

2.4.3 Budget Revisions

Budget revisions that move more than 10 percent of the grant total require a budget amendment. The Administration budget cap must be maintained with each revision.

2.4.4 Ineligible Use of Funds

Grantees must inform Commerce if CBRA funds are spent on ineligible households or expenses. Reasonable attempts must be made to prevent ineligible use of funds.

3 Program Eligibility and Priority Populations

Priority Population

Grantees must prioritize households meeting eligibility criteria for the program that are discharging or needing to discharge from state psychiatric hospitals or community psychiatric inpatient beds. See [Appendix D: Performance Requirements](#).

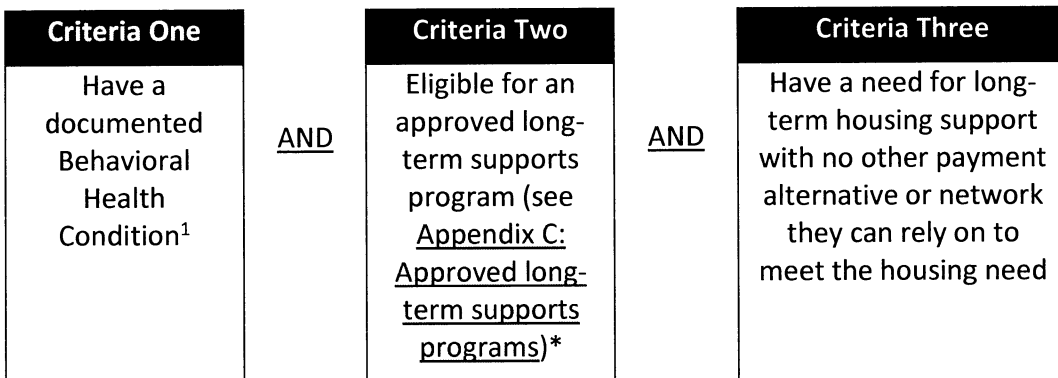
Households that meet eligibility criteria for the program that are not within the priority population may be served as long as the grantee has made a reasonable effort to ensure that individuals in the priority population have first access to available funds.

Household Eligibility

3.2.1 Eligibility Criteria:

A household is one or more individuals seeking to obtain or maintain housing together. A household does not include friends or family that are providing temporary housing.

Households eligible for rental assistance under this program must have an adult member of the family who meets **ALL** of the following criteria:



*Please note, individuals that would otherwise be eligible for an approved long-term supports program but are not due to citizenship status meet the criteria for Criteria Two.

3.2.1 Documentation of Eligibility

Grantees must document eligibility for at least one adult member of the household. The [CBRA Verification of Household Eligibility Form](#) and all applicable documentation (see below) is to be kept in the client file and dated within 30 days of program entry.

For a list of all required client file information and documentation see [Appendix B: Client](#)

^[1] A Behavioral Health Condition is a mental health condition or substance use disorder that impairs an individual's capacity to address normal activities of daily living, and is expected to be of long duration.

File Information and Documentation.

3.2.1.1 Documentation of a Behavioral Health Condition

Grantees must verify and document a behavioral health condition for at least one adult member of the household prior to program entry.

Behavioral health conditions are mental health conditions or substance use disorders that impair an individual's capacity to address normal activities of daily living, and are expected to be of long duration.

Acceptable documentation includes one of the following:

- ✓ Written verification of the behavioral health condition from an approved long-term supports program (see [Appendix C](#) for a list of approved long-term supports programs)
- ✓ Written verification from a licensed medical or behavioral health professional or social worker.
- ✓ Written verification from the Social Security Administration
- ✓ Written verification from the Department of Social and Health Services
- ✓ Disability check receipt (Social Security Disability Insurance check or Veteran Disability Compensation).
- ✓ Written self-attestation from the individual or statement from immediate family member. This method is to be used only if no other documentation method is available. Case manager must indicate why no other documentation is available.
- ✓ Other documentation as approved by Commerce.

3.2.1.2 Documentation of Eligibility from an Approved Long-Term Supports Program

Grantees must document eligibility for at least one approved long-term supports program prior to program entry. See [Appendix C: Approved Long-term Supports Programs](#) for a list of approved programs.

Acceptable documentation includes one of the following:

- ✓ Written verification of eligibility from an approved long-term supports program provider.
- ✓ Written verification of ineligibility based solely on citizenship status from an approved long-term supports program provider.

3.2.1.3 Documentation of Long-term Support Need and Lack of Resources and Supports

Grantees must provide documentation of the need of the individual for long-term housing support and that they have no other resources or support networks that can meet that need. The [CBRA Certification of Long-Term Housing Support Need](#) form can be used to collect a statement from a qualified party (below). Any type of written statement signed and dated within 30 days of program enrollment by the qualified party can be used as documentation.

Acceptable documentation includes one of the following:

- ✓ Statement from a Case Manager verifying the need for long-term housing support and the lack of sufficient resources and/or support networks to meet the housing need.
- ✓ Statement from a licensed medical or behavior health professional or social worker verifying the need for long-term housing support and the lack of sufficient resources and/or support networks to meet the housing need.
- ✓ Statement from a discharge professional verifying the need for long-term housing support and the lack of sufficient resources and/or support networks to meet the housing need.

3.2.2 Eligibility Recertification

As the conditions that determine eligibility for this program are unlikely to change from year to year, **annual eligibility recertification is not required.**

In the case that a household loses eligibility in the approved long-term support program (FCS, HARPS, etc.), grantees must review whether the household is still eligible for the CBRA program based on the following criteria:

- ✓ Has had no change in behavioral health condition status.
- ✓ Has a documented need for continued long-term housing supports with no other identified payment alternative or network that they can rely on to meet the housing need.
- ✓ Has an income that does not exceed 50 percent of area median income as defined by HUD.

3.2.3 Determination of Income Eligibility at Recertification

For a household to remain eligible for the CBRA program after losing eligibility for an approved long-term supports program, the combined household income must not exceed 50 percent of area median gross income as defined by HUD.

Income limits are based on Area Median Income (AMI) which can be located for each county at: www.huduser.gov (Data Sets, Income Limits).

Income is money that is paid to, or on behalf of, any household member. Income includes the current gross income (annualized) of all adult (18 years and older) household members and unearned income attributable to a minor. Income eligibility determinations are based on the household's income at program recertification. Income inclusions and exclusions are listed in the Electronic Code of Federal Regulations, www.ecfr.gov, Title 24 – Housing and Urban Development: Subtitle A 0-99: Part 5: Subpart F: Section 5.609 Annual Income.

Gross Income is the amount of income earned before any deductions (such as taxes and health insurance premiums) are made.

Current Income is the income that the household is currently receiving. Income recently terminated should not be included.

3.2.3.1 Annualizing Wages and Periodic Payments

Use the CBRA Income Eligibility Worksheet (or equivalent) to calculate income based on hourly, weekly, or monthly payment information. Add the gross amount earned in each payment period that is documented and divide by the number of payment periods. This provides an average wage per payment period. Depending the schedule of payments, use the following calculations convert the average wage into annual income:

- ✓ Hourly wage multiplied by hours worked per week multiplied by 52 weeks.
- ✓ Weekly wage multiplied by 52 weeks.
- ✓ Bi-weekly (every other week) wage multiplied by 26 bi-weekly periods.
- ✓ Semi-monthly wage (twice a month) multiplied by 24 semi-monthly periods.
- ✓ Monthly wage multiplied by 12 months.

3.2.4 Documentation of Recertification of Eligibility

Grantees must provide the CBRA Eligibility Recertification form with the final determination of eligibility and documentation to support the determination in the client file. Documentation must be dated within 45 days of recertification date.

3.2.4.1 Documentation of Lack of Change in Behavioral Health Condition Status

If a household's Behavioral health condition continues to impair capacity to address normal activities of daily living, and is expected to be of long duration, no additional documentation is needed. In the case that behavioral health condition status has changed, the grantee should provide documentation that led them to determine this change in status. See 3.2.1.1 Documentation of a Behavioral Health Condition for appropriate documentation standards.

3.2.4.2 Documentation of Continued Long-term Support Need and Lack of Resources and Supports

At recertification, grantees must provide documentation of the continued need of the individual for long-term housing support and verification that they have no other resources or support networks that can meet that need. See section 3.2.1.3 Documentation of Long-term Support Need and Lack of Resources and Supports.

3.2.4.3 Documentation of Income Eligibility at Recertification

Lead/subgrantees must verify and document income eligibility at recertification. CBRA Income Eligibility Worksheet (or equivalent) and all allowable income documentation (See Appendix G) must be kept in the client file.

3.2.5 Ineligible at Recertification

If a household is determined ineligible at recertification, grantees have the option of providing up to six additional months of rental subsidy to support the household to transition to self-sufficiency. The decision to provide additional rental subsidy of up to 6 months must be noted in the client file.

4 Eligible Activities and Costs

The primary activity of this program is payment of a Permanent Housing rent subsidy to a landlord on behalf of an eligible household. A comprehensive guide of eligible activities and costs to support the primary activity is found below.

Administration

Allowable administrative costs benefit the organization as a whole and cannot be attributed specifically to a particular program. Up to 15 percent of total reimbursed costs over the course of the grant period may be used for administration. This limit must be reconciled before the end of the grant period.

Administrative costs may include the same types of expenses that are listed in program operations (such as IT staff and office supplies), in the case that these costs are benefiting the agency as a whole and are not attributed to a particular program, they are considered administrative. Administrative costs may include, but are not limited to, the following:

- ✓ Executive director salary and benefits.
- ✓ General organization insurance.
- ✓ Organization wide audits.
- ✓ Board expenses.
- ✓ Organization-wide membership fees and dues.
- ✓ General agency facilities costs (including those associated with executive positions) such as rent, depreciation expenses, and operations and maintenance.

All amounts billed to administration must be supported by actual costs, or portions of actual costs. These costs must be charged to grant cost centers by one of the following three methods:

- ✓ Billed directly such as IT services that are billed by the hour.
- ✓ Shared costs that are allocated directly by means of a cost allocation plan.
- ✓ Costs related to executive personnel such that a direct relationship between the cost and the benefit cannot be established must be charged indirectly by use of an indirect cost rate which has been appropriately negotiated with an approved cognizant agency or by use of the 10 percent de minimus rate.

Operations

Operations expenses are directly attributable to a particular program and include:

- ✓ Salaries and benefits for staff costs directly attributable to the program, including but not limited to program staff, information technology (IT) staff, human resources (HR) staff, bookkeeping staff, and accounting staff.
- ✓ Office space, utilities, supplies, equipment (up to \$1,500 per grant period unless approved in advance by Commerce), telephone, internet, and training/conferences/travel and per diem.
- ✓ Data collection and entry.

- ✓ Housing search and placement.

Housing Costs

Eligible housing costs must be paid directly to a third party on behalf of the household. Rent payments may not be made directly to the eligible household.

4.3.1 Securing Housing

- ✓ Costs for securing permanent housing including: application fees, background check fees, credit check fees, and other related costs for securing permanent housing.
- ✓ Rental arrears and associated late fees for up to three months. Rental arrears may be paid if the payment enables the household to obtain or maintain permanent housing.
- ✓ Past evictions and associated fees that prevent the participant from obtaining housing may be paid in an amount up to \$3000.
- ✓ Up to three months of utility arrears and associated fees may be paid on behalf of the tenant if this enables the household to obtain or maintain permanent housing.

4.3.2 Move-In Costs

- ✓ Security deposits for households moving into new units.
- ✓ Utility deposits for a household moving into a new unit.
- ✓ Incentives paid to landlords
- ✓ First and Last Months' Rent

4.3.3 Rent and Associated Costs

- ✓ Monthly rent. Rent may only be paid one month at a time, although rental arrears, pro-rated rent, and last month's rent may be included with the first month's payment.
- ✓ Utilities which are included in rent.
- ✓ Renter's insurance
- ✓ Costs of parking spaces when connected to a unit.

4.3.4 Other Housing Costs

- ✓ Utility payments for households also receiving rental assistance.
- ✓ Other costs as approved by Commerce.

4.3.5 Special Circumstances

- ✓ Master-lease: security deposit and monthly rent is allowable when an organization master-leases a unit, and then sub-leases the property to CBRA-eligible households. Tenants must have a sublease with the master lease holder.
- ✓ Funds may be used to provide hotel or motel housing for no more than 90 days when no suitable shelter bed is available while a permanent housing search is

conducted.*

- ✓ Funds may be used to pay for storage of personal belongings if there are no other suitable storage options available while a permanent housing search is conducted.
- ✓ Temporary absence: if a household must be temporarily away from the unit, but is expected to return (such as temporary incarceration, hospitalization, or residential treatment), grantees may pay for the household's rent for up to 60 days and charge the grant for eligible costs. Any temporary absence must be documented in the client file. Extensions to the 60 day limit must be approved by Commerce.

*Please note, short-term rental agreements and walk-through inspections are encouraged for hotel/motel stays if owners wish to access landlord reimbursement programs like the Landlord Mitigation Program.

Ineligible Expenses

- Cable television deposits or services.
- Mortgage assistance and utility assistance for homeowners.
- Security and janitorial (salaries and benefits associated with providing security, janitorial services).
- Essential facility equipment and supplies (e.g. common-use toiletries, food served in shelters, bedding, mats, cots, towels, microwave, etc.)
- Expendable transportation costs directly related to the transportation of eligible households (bus tokens and fuel for a shelter van).
- On-site and off-site management costs related to the building.
- Facility-specific insurance and accounting.
- Replacement or operating reserves.
- Debt service.
- Construction or rehabilitation of facilities.
- Mortgage payment for a facility.

5 Requirements for Providing Permanent Housing Subsidy (PHS)

Permanent Housing Subsidy (PHS) is a rental subsidy with no time limit for households with behavioral health conditions in need of long-term housing assistance. PHS includes the availability of support services and may be provided as a scattered-site or master-leased model.

PHS has the following characteristics:

- ✓ **Permanent Housing-** A lease or rental agreement between the landlord and tenant is required (see [5.7.1 Lease or Rental Agreement](#) for conditions of lease and rental agreements) and eligible households may stay in their housing indefinitely as long as they meet the basic obligations of tenancy as called out in the lease or rental agreement.
- ✓ **Permanent or Long-Term Eligibility-** Services and the housing subsidy are available permanently as long as the household remains eligible. If a household loses eligibility for a long-term supports program, they can retain their eligibility for PHS as long as they meet basic criteria (see [3.2.3 Determination of Income Eligibility at Recertification](#)).
- ✓ **Voluntary Support Services-** Support services are available to clients but participation is voluntary.

Referrals for the CBRA program may come from a variety of sources. To support effective referrals for the priority population, grantees and program staff must actively create and maintain relationships and regularly coordinate with discharge planners at state psychiatric hospitals and community-based inpatient psychiatric treatment facilities to ensure priority populations are served.

To maintain referrals for individuals that may not fall into the priority population but are still eligible for the CBRA program, relationships should also be cultivated and maintained with community-based substance use and other treatment institutions, correctional institutions, the local coordinated entry system, and other providers that work with these populations.

The CBRA program is not required to participate in the local coordinated entry process but is encouraged to partner with their local coordinated entry organization for referrals and collaboration.

Grantees or their subgrantees must maintain policies and procedures around how referrals will be cultivated, accepted, and prioritized within their community. MOUs or other written documentation of referral partnerships are encouraged but not required.

For CBRA program prioritization requirements, see section [3.1 Priority Population](#)

Service Delivery

Commerce promotes evidence-based program delivery models that align with best practices for providing permanent supportive housing and permanent housing subsidy. The following requirements apply to grantees and subgrantees that deliver PHS.

5.2.1 Permanent Supportive Housing Core Elements

Grantees should adhere to the core elements of Permanent Supportive Housing, as applicable, when administering Permanent Housing Subsidy. For more information, visit the [Substance Abuse and Mental Health Services Administration \(SAMHSA\) Permanent Supportive Housing Evidence-Based Practices Kit](#).

5.2.2 Housing First

Programs must be operated in accordance with Housing First principles. For detail on Housing First, see the [National Alliance to End Homelessness's webpage](#) on the topic.

5.2.3 Voluntary Services

Grantees must not terminate or deny services to households based on a household's refusal to participate in supportive services. Supportive services are intensive services aimed at helping a person obtain and maintain housing. Supportive Housing providers work in partnership with various community entities to provide wrap around support, such as mental health services, alcohol and substance abuse services, long term care services, life skills or independent living skills services and vocational services. These services are not billable to CBRA, but are allowable expenses under the FCS program or other supportive services programs.

All eligible clients and their household members served under this program must be entered into HMIS, in accordance with data entry and quality guidelines as issued by the Department of Commerce (See the most recent [HUD HMIS Data Standards](#)).

All grantees and subgrantees entering data into the HMIS system must sign and comply with the terms of the [Agency Partner HMIS Agreement](#) found on the Commerce [HMIS webpage](#).

5.3.1 Data Quality

Data quality is reviewed quarterly and will be scored annually. Grantees and subgrantees are required to provide quality data to the best of their ability. For more information on data quality requirements and expectations, see [Appendix E: Data Quality](#).

5.3.2 Consent for Entry of Personally Identifying Information

Clients whose identifying data are entered into HMIS may only be done by written consent of the client.

5.3.2.1 Identified Records

- ✓ Personally identifying information (PII)² must not be entered into HMIS unless all adult household members have provided informed consent.
- ✓ Informed consent must be documented with a signed copy of the *Client Release of Information and Informed Consent Form* in the client file. If electronic consent has been received, a copy does not need to be printed for the client file but must be available in HMIS. If telephonic consent has been received, note this on the consent form and then complete the consent form the first time the household is seen in person. See Agency Partner HMIS Agreement.

5.3.2.2 Anonymous Records

The following types of records must be entered anonymously:

- ✓ Households in which one adult member does not provide informed consent for themselves or their dependents.
- ✓ Households entering a domestic violence program or currently fleeing or in danger from a domestic violence, dating violence, sexual assault, human trafficking or a stalking situation.
- ✓ Households in programs which are required by funders to report HIV/AIDS status.

5.3.2.3 Special Circumstances

If the reporting of the HIV/AIDS status of clients is not specifically required, the HIV/AIDS status must not be entered in HMIS.

If a combination of race, ethnicity, gender, or other demographic data could be identifying in your community, those data should not be entered for anonymous records.

Grantees are responsible for documenting habitability for all housing units into which households will be moving, except where a household moves in with friends or family. Housing units must be documented as habitable prior to paying the rent subsidy and following a habitability complaint made by the tenant or a third party.

5.4.1 Allowable Methods for Unit Habitability Determination

Habitability can be documented by the Landlord Habitability Standards Certification Form or inspection. If the housing unit is provided to a different household within 12 months of documented habitability, an additional certification/inspection is not required. One of the following methods must be applied to each subsidized unit:

- The *CBRA Landlord Habitability Standards Certification Form* references the state

² PII includes name, social security number, birthdate, address, phone number, email, and photo.

Landlord Tenant Act (RCW 59.18.060) and requires the landlord (as defined in RCW 59.18.030) to certify that the unit meets the safety and habitability standards detailed in the law. The landlord's failure to comply with the law may result in termination of the rent subsidy.

OR

- Inspections: in lieu of (or in addition to) the above landlord certification, grantees may choose to inspect all or some housing units. Grantees may use the Commerce Housing Habitability Standards (HHS) form or the HUD Housing Quality Standards (HQS) Inspection form.

Documentation of habitability certification or inspection must be kept in the client file.

5.4.2 Habitability Recertification

Grantees must document recertification of habitability upon complaint of the habitability condition of the unit by the tenant or a third party. (see 5.4.1. Allowable Methods for Unit Habitability Determination). Documentation of habitability recertification must be kept in the client file.

5.4.3 Habitability Complaint Procedure

Each household must be informed in writing of the habitability complaint process and assured that complaints regarding their housing unit's safety and habitability will not affect the household's program eligibility.

Each landlord must be informed in writing of the habitability complaint process and that subsidy payments to landlords may be terminated if landlords fail to resolve habitability issues according to the Washington State Landlord-Tenant Act (RCW 59.18).

Lead/subgrantee must have a written procedure describing the response to complaints regarding unit safety and habitability. The procedure must include:

- ✓ Mandatory inspection when a complaint is reported using the HHS Form, HQS Inspection Form, or documenting the specific complaint in an alternate format that includes follow-up and resolution.
- ✓ Actions that will be taken to ensure habitability is restored and steps that may lead to termination of payment to a landlord if they fail to restore habitability according to the Washington Landlord-Tenant Act (RCW 59.18).

The grantee must ensure that a lead-based paint visual assessment is completed prior to payment of a permanent housing subsidy if a child under the age of six or pregnant woman resides in a unit constructed prior to 1978.

To prevent lead poisoning in young children, grantees must comply with the Lead-Based Paint Poisoning Prevention Act of 1973 and its applicable regulations found at 24 CFR 35, Parts A, B, M, and R.

A visual assessment must be conducted upon request from the tenant. Visual assessments must be conducted by a HUD-Certified Visual Assessor and must be documented on the HQS Inspection Form or HHS Form and maintained in the client file.

For a guide to compliance see Appendix F: Lead-Based Paint Visual Assessment Requirements.

5.5.1 Exceptions to the Lead-Based Paint Visual Assessment Requirement

Visual assessments are not required under the following circumstances:

- ✓ Zero-bedroom or SRO-sized units;
- ✓ X-ray or laboratory testing of all painted surfaces by certified personnel has been conducted in accordance with HUD regulations and the unit is officially certified to not contain lead-based paint;
- ✓ The property has had all lead-based paint identified and removed in accordance with HUD regulations;
- ✓ The unit has already undergone a visual assessment within the past 12 months – obtained documentation that a visual assessment has been conducted; or
- ✓ It meets any of the other exemptions described in 24 CFR Part 35.115(a).

If any of the circumstances outlined above are met, grantees must include the information in the client file.

Grantees must provide information on the Washington Residential Landlord Tenant Act (RCW 59.18) to households receiving rent assistance.

For more information on this law, visit Washington Law Help, housing page, tenant rights at www.washingtonlawhelp.com.

A lease or rental agreement between the eligible household and the landlord must be executed at the time of payment of rental assistance. Leases or rental agreements must contain standard lease provisions as shown in 5.7.1 Lease or Rental Agreement.

The lease or rental agreement and any subsequent leases or rental agreements must be kept in the client file.

5.7.1 Lease or Rental Agreement

At a minimum, the lease or rental agreement between the landlord and the eligible household must contain the following:

- ✓ Name of tenant
- ✓ Name of landlord
- ✓ Address of rental property
- ✓ Occupancy (who gets to live at the rental)
- ✓ Term of agreement (lease start and end date)

- ✓ Rent rate and date due
- ✓ Deposits (if any and what for/term)
- ✓ Signature of tenant/date
- ✓ Signature of landlord/date

Rent Limit

Grantees may pay rent amounts up to 120 percent of HUD's Fair Market Rent (FMR). The rent limit is the maximum rent that can be paid for a unit of a given size. Rent calculations must include the cost of utilities as detailed on utility allowance schedules established by the local Housing Authority.

Payment of rents in excess of 120 percent of FMR requires prior approval by Commerce.

Determining Rent Subsidy

Consistent with HUD housing affordability standards, each household is responsible for contributing no more than 30 percent of their income to the cost of their housing³. Documentation of subsidy amount and subsidy determination process must be included in the client file.

If the household share creates a burden for the household, the household share may be waived or reduced, at the discretion of the grantee. The circumstances of the waiver must be documented in the client file.

Grantees should adjust household rent subsidy amount whenever there is a change in household circumstance, income, or need. Documentation of new subsidy determination process and subsidy amount must be included in the client file.

5.10.1 Grievance Procedure

Grantees must have a written grievance procedure for households seeking or receiving subsidies which includes the household's right to review decisions and present concerns to program staff not involved in the grievance.

This procedure must:

- ✓ Clearly describe how households can request a review or report concerns.
- ✓ Be accessible to all households seeking or receiving subsidies

5.10.2 Termination and Denial of Service Policy

Grantees must have a termination and denial policy.

This policy must:

- ✓ Describe the reasons a household would be denied subsidies and/or terminated

³Cost of housing is equal to the tenant's share of the rent plus utilities including electricity, natural gas, propane (if needed for cooking or laundry), water, sewer, and garbage services the tenant must pay.

- from program participation.
- ✓ Describe the notification process.
- ✓ Ensure households are made aware of the grievance procedure.

5.10.3 Records Maintenance and Destruction

Grantees must maintain records relating to this grant for a period of six years following the date of final payment. See CBRA Grant General Terms and Conditions, Section 26 RECORDS MAINTENANCE.

Paper records derived from HMIS which contain personally identifying information must be destroyed within seven years after the last day the household received services from the lead/subgrantee.

5.10.4 Prohibitions

- ✓ Lead/subgrantee may not require households to participate in a religious service as a condition of receiving program assistance.
- ✓ If a program serves households with children, the age of a minor child cannot be used as a basis for denying any household's admission to the program.
- ✓ If a program serves households with children, the program must serve all family compositions.

5.10.5 Nondiscrimination

As stated in the CBRA Grant General Terms and Conditions Section 9 and Section 22, grantees must comply with all federal, state, and local nondiscrimination laws, regulations and policies.

Grantees must comply with the Washington State Law against Discrimination, RCW 49.60, as it now reads or as it may be amended. RCW 49.60 currently prohibits discrimination or unfair practices because of race, creed, color, national origin, families with children, sex, marital status, sexual orientation, age, honorably discharged veteran or military status, or the presence of any sensory, mental, or physical disability or the use of a trained guide dog or service animal by a person with a disability.

Grantees must comply with the Federal Fair Housing Act and its amendments as it now reads or as it may be amended. The Fair Housing Act currently prohibits discrimination because of race, color, national origin, religion, sex, disability or family status. The Fair Housing Act prohibits enforcing a neutral rule or policy that has a disproportionately adverse effect on a protected class.

Local nondiscrimination laws may include additional protected classes.

6 Washington State Landlord Mitigation Law

Washington State's Landlord Mitigation Law ([RCW 43.31.605](#)) became effective on June 7, 2018 to provide landlords with an incentive and added security to work with tenants receiving rental assistance. The program offers up to \$1,000 to the landlord in reimbursement for some potentially required move-in upgrades, up to fourteen days' rent loss and up to \$5,000 in qualifying damages caused by a tenant during tenancy. A move in/move out condition report is required for a landlord to receive reimbursement. For more information, please visit the Commerce Landlord Mitigation Program [website](#).

7 Appendices

Appendix A: Required Policies and Procedures

Policies and Procedures

- ✓ Subcontracting policies and procedures (section 2.1.4)
- ✓ Referral policies and procedures (section 5.1)
- ✓ Habitability Complaint Procedure (section 5.4.3)
- ✓ Grievance Procedure (section 5.10.1)
- ✓ Termination or Denial of Service Policy (section 5.10.2)

Appendix B: Client File Information and Documentation

The following chart summarizes the information and documentation required in each client file. Other documentation may be required based on individual circumstances.

Forms marked with an asterisk (*) indicate a specific form required by CBRA to meet the documentation requirement. Required forms may be modified as long as all content is included.

Up-to-date versions of all required and recommended forms can be found on the Commerce Permanent Housing Subsidy [webpage](#).

Required Documentation	
✓	*CBRA Client File Checklist
✓	*HMIS Client Release of Information and Informed Consent Form signed by all adult household members (unless DV OR client refuses consent) (section 5.3.2)
✓	*CBRA Verification of Eligibility Checklist Form with applicable documentation attached (section 3.2.1)
✓	*CBRA Verification of Recertification with applicable documentation attached, <i>as needed</i> (section 3.2.4)
✓	CBRA Income Eligibility Worksheet , <i>as needed for recertification</i> (section 3.2.3)
✓	*Landlord Habitability Certification or *HHS or *HQS (section 5.4)
✓	Lead-based Paint Assessment, if applicable (section 5.4 , 5.5 , Appendix F)
✓	Executed Lease or Rental Agreement (section 5.7)
✓	Household Rent subsidy amount / Rent determination process (section 5.9)
Required Information	
✓	Dates and Circumstances of temporary absence to an institution (section 4.3.5)
Other Recommended Forms	
✓	CBRA Certification of Long-Term Housing Support Need (section 3.2.1.3)
✓	Move in/Move out condition report (section 6)

Appendix C: Approved Long-Term Supports Programs

The following is a list of long-term supports programs that can provide documentation of eligibility in order to meet Eligibility Criteria Two for the CBRA program.

Approved Long-Term Supports Programs

- ✓ Foundational Community Supports
- ✓ Housing and Recovery through Peer Services
- ✓ Forensic HARPS
- ✓ Health Care Authority SUD only support services
- ✓ DSHS Aging and Long Term Supports Programs
- ✓ Other programs approved on a case-by-case basis*.

*All requests for another long-term supports program to meet eligibility criteria should be routed through your Commerce program manager.

7.4.1 Overview

Performance Measures help evaluate the effectiveness of the Permanent Housing Subsidy program.

The current contract period will serve to gather baseline data to inform the development of performance improvement requirements.

The Department of Commerce (Commerce) has identified the following as the most critical performance measures for Office of Supportive Housing Permanent Housing Subsidy programs:

- ✓ Prioritizing those exiting state psychiatric hospitals and community psychiatric inpatient beds.
- ✓ Increase Percent Exits to or Retention of Permanent Housing

7.4.2 Prioritization Requirements

Grantees must prioritize those exiting a state psychiatric hospital or a community inpatient psychiatric institution.

7.4.2.1 Measurement

The Homeless Management Information System (HMIS) is the data source.

1. Client Universe:

Any head of household or adult who entered into either the CBRA-PH or CBRA-Other project during the report period.

2. Count Priority Status:

Of the client universe, count those with a prior living situation (HMIS element 3.917):

- Psychiatric hospital or other psychiatric facility

3. Calculation:

Divide the total from step 2 by the total from step 1 (client universe) to calculate the percent of people entered who are considered in priority status.

Example:

In Community A, 20 households entered into the CBRA PHS Project during the report period.

Of those, 15 entered with living situations from the list above or came from a priority situation.

$$\text{Prioritization Percentage } 75\% = \frac{15 \text{ entered from a psychiatric facility}}{20 \text{ people entered}}$$

7.4.3 Housing Outcomes

Grantees must improve housing outcomes by increasing exits to or retention of permanent housing.

Acceptable housing outcomes are:

- ✓ Remaining in the Permanent Housing Subsidy program
OR
- ✓ Exiting from the program to a permanent housing situation

7.4.3.1 Measurement

The Homeless Management Information System (HMIS) is the data source.

Data for the previous state fiscal year will serve as the baseline.

Step One: Client Universe

Select all people who were served in either the CBRA-PH or CBRA-Other project and all people who exited either the CBRA PH or CBRA Other project during the reporting period.

Remove from client universe any person active or exited that did not move into housing, as indicated by a null housing move-in date, or a housing move-in date which occurs after the report end date. Note: Housing move-in date is only collected for the head of household, which effectively makes this a measure of households rather than all people.

Of the remaining client universe, remove any person who exited with a destination:

- Foster care home or foster care group home,
- Hospital or other residential non-psychiatric medical facility,
- Long-term care facility or nursing home, or
- Deceased

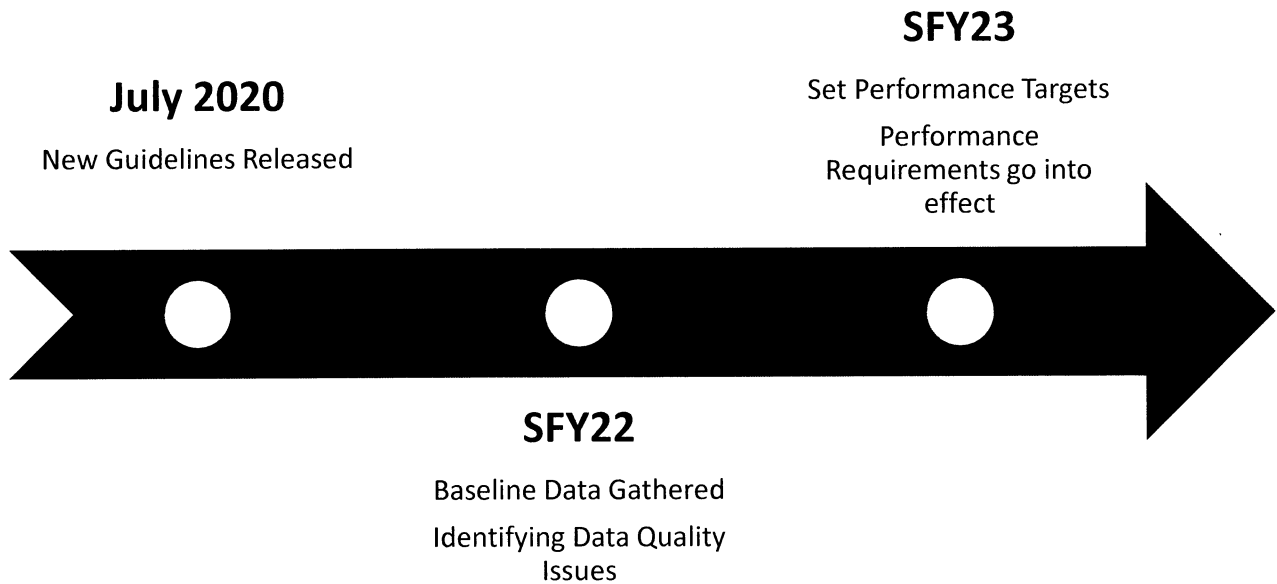
Step Two: Count Exits to or Retention of Permanent Housing

Of the client universe, count those who remained in PSH AND count those with destination categorized as permanent.

Step Three: Calculation

Divide the total from step two by the total from step one (client universe) to calculate the percent of people who exited to or retained permanent housing.

7.4.4 Instituting Performance Requirements: The Process



In **July 2020**, the CBRA guidelines are released to both CBRA and HARPS LTS grantees.

During **SFY21** (July 2020-June 2021), Commerce will work with grantees to provide HMIS set-up, technical assistance and training.

In **SFY22**, Commerce will work with grantees to identify any data quality issues and to gather baseline data for setting future performance targets. Grantees should focus on data quality and aligning the project with performance requirements.

In **SFY23** (July 2021-June 2022), Performance targets will be set and the performance requirements set in Appendix E: Performance Requirements will go into effect. Grantees should be comfortable reviewing performance data on a regular basis and identifying barriers to successfully reaching performance targets.

Appendix E: Data Quality

Projects are required to provide quality data to the best of their ability. Maintaining good data quality is important for effective program evaluation. Data quality has four elements: completeness, timeliness, accuracy, and consistency.

7.5.1 Completeness

Completeness of data is measured by the percentage of incomplete fields in required data elements.

Agencies are expected to collect **first name, last name, date of birth, race, and ethnicity** from clients that give consent on the HMIS consent form. **Agencies will never require a client to provide this information even if they have consented, but should gather it to the best of their ability.**

All clients, consenting and non-consenting, must have complete **prior living situation** and **exit destination** data.

Examples of incomplete entries:

Incomplete Entries	
Data Element	Incomplete if...
Name	[Quality of Name] field contains Partial, Street name, or Code name, Client doesn't know, Client refused or Data not collected; or [First Name] or [Last Name] is missing.
Date of Birth	[Quality of DOB] field contains Approximate, Partial DOB reported, Client doesn't know, Client refused or Data not collected; or [Date of Birth] is missing.
Race	[Race] field contains Client doesn't know, Client refused, Data not collected, or is missing.
Ethnicity	[Ethnicity] field contains Client doesn't know, Client refused, Data not collected, or is missing.
Prior Living Situation	[Prior Living Situation] is client doesn't know, client refused, data not collected, or is missing.
Destination	[Destination] is Client doesn't know, Client refused, No exit interview completed, Data not collected, or is missing.

Expected completeness measures for project types:

Expected Completeness Measures	
Data Element	All other Housing Project Types
Name*	95%
Date of Birth*	95%
Race*	95%
Ethnicity*	95%
Prior Living Situation	100%
Destination	95%
Domestic Violence	95%
Fleeing Domestic Violence	95%

*Only measured for consenting clients.

7.5.2 Timeliness

Client data should be entered into HMIS as close to the date of collection as possible. Entering data as soon as possible supports data quality by avoiding backlogs of pending data and allowing near real time analysis and reporting.

Projects must enter/update project client/household data in HMIS **within 14 calendar days** following the date of project enrollment/exit.

Counties not using the State HMIS (data integration counties), must work with the HMIS Manager to provide full CSV exports every six months. When Commerce is able to accept monthly imports, Counties must upload data to the State’s HMIS using XML or CSV schema compliant with current HUD HMIS Data Standards. Uploads must occur no later than the 30th calendar day following the end of each month. Counties not able to export and upload data to the State HMIS using an approved format must use the State HMIS for direct data entry.

7.5.3 Accuracy

Data entered into HMIS must reflect the real situation of the client/household as closely as possible.

Accurate data is necessary to ensure any project reporting fairly represents the work of the project and each client’s story.

Examples of data accuracy:

Elements of Data Accuracy	
Date of Birth and Project Start Date	Ensure the two are not the same dates
Prior Living Situation data elements	Ensure responses for Prior living situation, Length of stay in prior living situation, Approximate date homelessness started, Number of times the client has experienced homelessness in the last 3 years, and Number of months experiencing homelessness in the last 3 years do not conflict with each other.
Disabling Condition	Ensure the Yes/No answer does not conflict with the specific types of disabling conditions.
Health Insurance	Ensure the Yes/No answer does not conflict with the specific types of health insurance.
Monthly Income	Ensure the Yes/No answer does not conflict with the specific sources of monthly income.
Non-Cash Benefits	Ensure the Yes/No answer does not conflict with the specific sources of non-cash benefits.
Domestic Violence Victim/Survivor	Ensure congruency among the three different data elements specific to domestic violence.
Relationship to Head of Household	Ensure there is only one Head of Household for any given household (including clients served individually) and that this element is entered and accurate for all household members.
Veteran Status	Ensure individuals under 18 years of age are not identified as veterans.

Project Population Specifics	<p>Ensure that projects only serving individuals only enroll individuals and not multi-person households.</p> <p>Ensure that projects only serving families with children only enroll families with children.</p> <p>Ensure that projects only serving clients of a specific age range only enroll clients of that age range.</p>
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7.5.4 Consistency

Consistent data helps ensure that any reporting generated by a project is understood. Data consistency is important for effectively communicating the processes and outcomes of a project.

All data will be collected, entered, and stored in accordance with the Agency Partner Agreement.

All data elements and responses will be entered per the HUD data Standards Manual. To avoid inconsistency, agencies should use language on intake forms that closely matches the elements and responses in HMIS.

Clients who refuse consent must be made anonymous per Department of Commerce Guidance and the consent refused client entry guide.

Appendix F: Lead-Based Paint Visual Assessment Requirements

To prevent lead-poisoning in young children, grantees must comply with the Lead-Based Paint Poisoning Prevention Act of 1973 and its applicable regulations found at 24 CFR 35, Parts A, B, M, and R.

Disclosure Requirements

For ALL properties constructed prior to 1978, landlords must provide tenants with:

- ✓ Disclosure form for rental properties disclosing the presence of known and unknown lead-based paint;
- ✓ A copy of the “Protect Your Family from Lead in the Home” pamphlet.

Both the disclosure form and pamphlet are available at: <https://www.epa.gov/lead/real-estate-disclosure>

It is recommended that rent assistance providers also share this information with their clients.

Determining the Age of the Unit

Grantees should use formal public records, such as tax assessment records, to establish the age of a unit. These records are typically maintained by the state or county and will include the year built or age of the property. To find online, search for your county name with one of the following phrases:

- ✓ “property tax records”
- ✓ “property tax database”
- ✓ “real property sales”

Conducting a Visual Assessment

Visual assessments are required when:

- ✓ The leased property was constructed before 1978;
- AND*
- ✓ A child under the age of six or a pregnant woman will be living in the unit occupied by the household receiving CBRA rent assistance.

A visual assessment must be conducted prior to providing CBRA rent assistance to the unit and on an annual basis thereafter (as long as assistance is provided). Grantees may choose to have their program staff complete the visual assessments or they may procure services from a contractor. Visual assessments must be conducted by a HUD-Certified Visual Assessor.

Anyone may become a HUD-Certified Visual Assessor by successfully completing a 20-minute online training on HUD’s website at:

<http://www.hud.gov/offices/lead/training/visualassessment/h00101.htm>

If a visual assessment reveals problems with paint surfaces, Grantees cannot approve the unit for CBRA assistance until the deteriorating paint has been repaired. Grantees may wait until the repairs are completed or work with the household to locate a

different (lead-safe) unit.

Locating a Certified Lead Professional and Further Training

To locate a certified lead professional in your area:

- ✓ Call your state government (health department, lead poison prevention program, or housing authority).
- ✓ Call the National Lead Information Center at 1-800-424-LEAD (5323).
- ✓ Go to the US Environmental Protection Agency website at <https://www.epa.gov/lead> and click on "Find a Lead-Safe Certified Firm."
- ✓ Go to Washington State Department of Commerce Lead-Based Paint Program website at <http://www.commerce.wa.gov/building-infrastructure/housing/lead-based-paint/lead-based-paint-program-lbpabatment/> and click on "Find a Certified LBP Firm" under Other Resources.

Information on lead-based programs in Washington State can be found at <http://www.commerce.wa.gov/building-infrastructure/housing/lead-based-paint/>.

For more information on the Federal training and certification program for lead professionals, contact the National Lead Information Center (NLIC) at <https://www.epa.gov/lead/forms/lead-hotline-national-lead-information-center> or 1-800-424-LEAD to speak with an information specialist.

The Lead Safe Housing Rule as well as a HUD training module can be accessed at http://portal.hud.gov/hudportal/HUD?src=/program_offices/healthy_homes/enforcement/lshr

8 Appendix G: Acceptable Documentation for Income Certification

Grantees must attempt to document income using the preferred documentation method. However, for some types of income, a written or verbal statement from a third party or self-attestation are allowable as long as all attempts to collect the preferred documentation have been exhausted. Please note the following guidance when using one of these methods.

Written Statement: Types of income for which written verification is allowable are indicated in the table below with an **X** in the box marked “Written Verification.” A written statement must be from a third party responsible for documenting this type of income information (example: wages and salaries could be documented by a written statement from an employer). The statement should also include the following:

- ✓ Date of statement,
- ✓ Name of client,
- ✓ Name of company or organization,
- ✓ Name of individual writing the statement,
- ✓ Wages or income amount,
- ✓ Hour worked per week (if applicable).

Verbal Statement: Types of income for which verbal verification is allowable are indicated in the table below with an **X** in the box marked “Verbal Verification.” A verbal statement must be collected from a third party responsible for documenting this type of income information (example: TANF/Public assistance could be collected via verbal statement from DSHS). A verbal statement must be documented by a written attestation from a case manager or staff person responsible for collecting the statement. The staff person should record the following:

- ✓ Date of statement,
- ✓ Name of client,
- ✓ Name of company or organization,
- ✓ Name of individual writing the statement,
- ✓ Wages or income amount,
- ✓ Hour worked per week (if applicable).

Self-Attestation: Types of income for which self-attestation is allowable are indicated in the table below with an **X** in the box named “Self-Attestation.” Self-attestation should be used only when all other attempts at collecting other forms of documentation have been exhausted. Self-attestation is documented as a signed and dated written statement by the client that includes:

- ✓ Sources of income
- ✓ Income amount
- ✓ Frequency of income

A case manager or staff person must also provide a written statement documenting attempts to obtain other forms of verification and justification for using the self-attestation method.

Type of Income	Preferred Documentation	If preferred documentation is not available, the following are acceptable forms of documentation:		
		Written Verification	Verbal Verification	Self-Attestation
No Income		X	X	X
Wages and Salary Income	Copy of most recent pay stub(s).	X		
Self-Employment and Business Income	Copy of most recent federal and state tax return, profit and loss report from applicant's accounting system, or bank statement.	X		X
Interest and Dividend Income	Copy of most recent interest or dividend income statement OR most recent federal and state tax return.	X		
Pension/Retirement Income	Copy of most recent payment statement, benefit notice from Social Security, pension provider or other source.	X	X	
Unemployment and Disability Income	Copy of most recent payment statement or benefit notice	X	X	
TANF/Public Assistance	Copy of most recent payment statement, benefit notice, or Department of Social and Health Services (DSHS) Benefits Verification System (BVS).	X	X	
Alimony, Child Support, Foster Care Payments	Copy of most recent payment statement, notices, or orders.	X	X	X
Armed Forces Income	Copy of pay stubs, payment statement, or other government issued statement indicating income amount.	X	X	
Student Financial Aid	Copy of student financial assistance award letter or other educational institution issued statement indicating amounts.	X	X	

ATTACHMENT C: BUDGET

Budget Summary

Contractor: Kitsap Community Resources
 Contract No: KC-133-20 C
 Contract Period: 1/1/20-6/30/22

HARPS Subsidies

	Previous Budget	Changes this Amendment	Current Budget
Budget Period: 1/1/20-6/30/20			
Bridge Subsidy	152,000	0	152,000
Administration 5%	8,000	0	8,000
Total	160,000	0	160,000
SUD Subsidy	30,400	0	30,400
Administration 5%	1,600	0	1,600
Total	32,000	0	32,000
Long-Term Subsidy	32,276	0	32,276
Administration 5%	1,699	0	1,699
Total	33,975	0	33,975
Budget Total	225,975	0	225,975

Amendment A

Budget Period: 7/1/20-6/30/21			
Bridge Subsidy	308,750	0	308,750
Administration 5%	16,250	0	16,250
Total	325,000	0	325,000
SUD Subsidy	30,875	0	30,875
Administration 5%	1,625	0	1,625
Total	32,500	0	32,500
Long-Term Subsidy	60,800	0	60,800
Administration 5%	3,200	0	3,200
Total	64,000	0	64,000
Budget Total	421,500	0	421,500

Amendment B

Budget Period: 3/1/2021-6/30/2021

HARPS SABG Support	2,500	0	2,500
Budget Total	2,500	0	2,500

Amendment C			
Budget Period: 7/1/21-6/30/22			
Bridge Subsidy	0	308,750	308,750
Administration 5%	0	16,250	16,250
Total	0	325,000	325,000
SUD Subsidy	0	61,750	61,750
Administration 5%	0	3,250	3,250
Total	0	65,000	65,000
Long-Term Subsidy	0	277,764	277,764
Administration 7.5% of Subsidy only	0	20,832	20,832
Operations		50,000	
Total	0	348,596	348,596
Budget Total	0	738,596	738,596
Contract Total	649,975	738,596	1,388,571

Revenue Source:

SABG Support Funds-Substance Abuse Block Grant

Bridge Subsidy - General Fund State (GFS) through Health Care Authority

SUD Subsidy - General Fund State (GFS-SUD) through Health Care Authority

Long Term Subsidy - General Fund State through Department of Commerce

HARPS Participant Log 7.1.2021

A	B	C	D	E	F	G	H	I	
HARPS Participant Log									
2	Last Name (Doe)	First Name (John)	Client P1 ID	Client's Date of Birth (mm/dd/yyyy)	First Contact with HARPS (mm/dd/yyyy)	Setting the person is discharging from or being diverted from <i>Please use proper nouns like Western State Hospital - Discharge or ABHS - Diversion</i>	Location of first Contact (Library, phone, office, clinic, etc)	Date Housed (mm/dd/yyyy)	Receiving Supportive Housing Services by HARPS Team (Yes or No)
3									
J	K	L	M	N	O	P	Q	R	

First Housing Placement								
Housing Obtained By ?(please specify)	If "Other" please specify	Housing Type	Monthly Income Amount	Monthly Rent Amount	Percent of Income to rent (30% of income to rent is the ideal)	Other subsidies such as HUD/VASH, Section 8, CBRA, Project-based? Which one, not how much	Lease Agreement on file (Yes or No)	Subsidy Amount for current month
HARPS team member Case Manager Homeless Provider Coordinated Entry Discharge Planner Hospital Liaison Other Individual		Clean and Sol Scattered site Scattered site Master Lease Project Based Set aside Oxford House Single Room Transitional h Other						

Second Housing Placement								
Funding source for subsidy (General Fund State (GFS) or GFS SUD)	Purpose of HARPS Subsidy (Deposit, Rent, Storage, Utilities, etc.)	Total Accumulative Subsidies for this individual	Housing Change 1 Reason for change	Date of Housing Change #1	Move-in Date #2	Housing Obtained By ?(please specify)	If "Other" please specify	Housing Type
			Eviction Voluntary move Subsidy Ended Problems with Lz Moved away			HARPS team membe Case Manager Homeless Provider Coordinated Entry Discharge Planner Hospital Liaison Other Individual		Clean and Sol Scattered site Scattered site Master Lease Project Based Set aside Oxford House Single Room Transitional h Other

AD	AE	AF	AG	AH	AI	AJ
Discharge from HARPS project						
6 months housing retention goal date	Achieved 6 month housing retention Yes/No	Date	Reason	Comments		

SAM Search Results
List of records matching your search for :

Search Term : Kitsap Community Resources*
Record Status: Active

ENTITY	Kitsap Community Resources	Status: Active
DUNS: 001459663	+4:	CAGE Code: 5RU67 DoDAAC:
Expiration Date: 11/03/2020	Has Active Exclusion?: No	Debt Subject to Offset?: No
Address: 845 8TH ST Ste B		
City: Bremerton	State/Province: WASHINGTON	
ZIP Code: 98337-1517	Country: UNITED STATES	