(Provided by Clerk of Board of Supervisors)

## **Grant Resolution Information Form**

(Effective July 2011)

Purpose: Accompanies proposed Board of Supervisors resolutions authorizing a Department to accept and expend grant funds.

The following describes the grant referred to in the accompanying resolution:

- 1. Grant Title: Emergency Housing Voucher Program
- 2. Department: Department of Homelessness and Supportive Housing
- 3. Contact Person: Dylan Schneider Telephone: 628.652.7742
- 4. Grant Approval Status (check one):
  - [X] Approved by funding agency [] Not yet approved
- 5. Amount of Grant Funding Approved or Applied for: not to exceed \$3,171,000
- 6. a. Matching Funds Required: n/a
  - b. Source(s) of matching funds (if applicable): n/a
- 7. a. Grant Source Agency: U.S. Department of Housing and Urban Development
  - b. Grant Pass-Through Agency (if applicable): San Francisco Housing Authority (SFHA)

**8.** Proposed Grant Project Summary: The grant funds will provide a variety of support services to eligible EHV individuals and families. Description of all eligible services under this grant are included in the MOU.

9. Grant Project Schedule, as allowed in approval documents, or as proposed:

Start-Date: February 1, 2022 End-Date: June 30, 2026

- **10.** a. Amount budgeted for contractual services: \$3,171,000
  - b. Will contractual services be put out to bid? No.
  - c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements? No.
  - d. Is this likely to be a one-time or ongoing request for contracting out? Yes, one-time.
- **11.** a. Does the budget include indirect costs?
  - []Yes [X]No
  - b. 1. If yes, how much?
  - b. 2. How was the amount calculated?
  - c. 1. If no, why are indirect costs not included?

[] Not allowed by granting agency [X] To maximize use of grant funds on direct services [] Other (please explain):

c. 2. If no indirect costs are included, what would have been the indirect costs? Approximately 5% or \$158,550.

**12.** Any other significant grant requirements or comments: None.

## \*\*Disability Access Checklist\*\*\*(Department must forward a copy of all completed Grant Information Forms to the Mayor's Office of Disability)

13. This Grant is intended for activities at (check all that apply):

[X] Existing Site(s)	[X] Existing Structure(s)	[ X] Existing P
[] Rehabilitated Site(s)	[] Rehabilitated Structure(s)	[] New Progra
[] New Site(s)	[] New Structure(s)	-

[X] Existing Program(s) or Service(s) ] New Program(s) or Service(s)

14. The Departmental ADA Coordinator or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local disability rights laws and regulations and will allow the full inclusion of persons with disabilities. These requirements include, but are not limited to:

1. Having staff trained in how to provide reasonable modifications in policies, practices and procedures;

2. Having auxiliary aids and services available in a timely manner in order to ensure communication access;

3. Ensuring that any service areas and related facilities open to the public are architecturally accessible and have been inspected and approved by the DPW Access Compliance Officer or the Mayor's Office on Disability Compliance Officers.

If such access would be technically infeasible, this is described in the comments section below:

Comments: The services funded though this grant will support HSH clients to locate and move into housing across the City, primarily in private market rental units. The community-based providers who receive HSH funding are contractually bound to comply with the requirements of the ADA, including providing reasonable modifications to their policies, practices and procedures and ensuring communication access to their clients. Furthermore, it is the role of staff at the agencies funded by this grant to match clients to housing that is appropriate to their needs, including any identified accessibility needs. All the organizations receiving funds through this grant have been providing similar services to homeless individuals and families for many years and hold other contracts with HSH and other CCSF departments.

Departmental ADA Coordinator or Mayor's Office of Disability Reviewer:

HSH Transfer Requests Manager (Title) Date Reviewed: 4/22/2022 (Signed by: Heaflur Venisse (Signed by: (Signed by:	Heather Venisse (Name)	
Date Reviewed. 4/22/2022 Heather Venisse		DecuSigned but
	Date Reviewed:	
(Oighature Required)		(Signature Required)

## Department Head or Designee Approval of Grant Information Form:

Gigi Whitley	
(Name)	
Deputy Director of Administration and Finance	
(Title)	Docusigned by: Ligi Whitley
Date Reviewed:	Sigi Mutey

(Signature Required)