File No. 201099

Committee Item No.8Board Item No.15

## COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget & Finance Committee

Date	October 21, 2020
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Board of Supervisors Meeting

Date October 27, 2020

### Cmte Board

	Motion Resolution Ordinance Legislative Digest Budget and Legislative Youth Commission Re Introduction Form Department/Agency Co MOU Grant Information Form Grant Budget Subcontract Budget Contract/Agreement Form 126 – Ethics Com Award Letter Application Public Correspondence	port over Letter and n nmission	
OTHER	(Use back side if addit	ional space is r	needed)
Completed	<b>by:</b> Linda Wong	Date _	October 15, 2020
Completed	by: Linda Wong	Date_	October 22, 2020

1 2	[Apply for Funds Allocation - California Department of Housing and Community Development - Child Welfare Agency Allocation - Transitional Housing Program - Not to Exceed \$459,200]
2	Resolution authorizing the Human Services Agency to apply for and accept a County
4	Child Welfare Agency Allocation for an amount not to exceed \$459,200 from the
5	California Department of Housing and Community Development under the Transitional
6	Housing Program to help young adults secure and maintain housing.
7	
8	WHEREAS, The State of California, Department of Housing and Community
9	Development ("Department") issued an Allocation Acceptance form, dated July 27, 2020
10	under the Transitional Housing Program ("THP" or "Program") for \$8,000,000 authorized by
11	item 2240-102-0001 of section 2.00 of the Budget Act of 2020 (Chapter 6 of the Statutes of
12	2020) and Chapter 11.7 (commencing with Section 50807) of part 2 of Division 31 of the
13	Health and Safety Code; and
14	WHEREAS, The Allocation Acceptance form relates to the availability of Transitional
15	Housing Program funds for the purpose of housing stability to help young adults 18 to 25
16	years old secure and maintain housing, with priority given to young adults formerly in the
17	foster care or probation systems; and
18	WHEREAS, City and County of San Francisco was included in the Allocation
19	Acceptance form dated July 27, 2020 as a county child welfare agency eligible to apply for
20	funding; and
21	WHEREAS, The total allocation of \$459,200 shall be distributed to county child welfare
22	services agencies based on each county's percentage of the total statewide number of young
23	adults aged 18 to 25 years in foster care; now, therefore, be it
24	RESOLVED, That the Human Services Agency is hereby authorized to apply for and
25	accept the Transitional Housing Program Allocation award, as detailed in the Allocation

1 Acceptance form, up to the amount authorized by the Allocation Acceptance form and

2 applicable state law; and, be it

3 FURTHER RESOLVED, That the Executive Director of the Human Services Agency is hereby authorized to act on behalf of the City and County of San Francisco in connection with 4 5 the Transitional Housing Program Allocation award, and to enter into, execute, and deliver 6 any and all documents required or deemed necessary or appropriate to be awarded the 7 Transitional Housing Program Allocation award, and all amendments thereto; and, be it 8 FURTHER RESOLVED, That the Human Services Agency will use the Transitional 9 Housing Program award funds in accordance with the Allocation Acceptance form, other 10 applicable rules and laws, and the Transitional Housing Program requirements. 11 12 13 **APPROVED:** 14 15 /s/ 16 **Trent Rhorer** 17 Executive Director, Human Services Agency 18 19 20 21 22 23 24 25

# **Transitional Housing Program (THP)**

# **Round 2 Allocation Acceptance Form**



Gavin Newsom, Governor State of California

Lourdes M. Castro Ramírez, Secretary Business, Consumer Services and Housing Agency

Gustavo F. Velasquez, Director California Department of Housing and Community Development

> 2020 West El Camino Avenue, Suite 150 Sacramento, CA 95833 Phone: (916) 263-2771 Email: <u>THP@hcd.ca.gov</u>

> > July 2020

	onai Housi	ng Program (	(THP) Allo	cation Accepta	nce Round 2			Re	1. 7/27/20
			(	County Allocation	(select Applicant	County in	row 7 below):	\$45	9,200
Pursuant to item 2240-102-0001 of Section 2.00 31 of the Health and Safety Code (HSC), the De stability to help young adults 18 to 25 years sec	epartment of H	ousing and Comm	nunity Develo	pment (HCD) shall al	locate \$8 million in fu	unding to cou	unties for the pu		
			Allocation A	Applicant					
Allocation Applicant is a County Child Welfa	re Agency								
Pursuant to Section 50807(b) of the HSC, HCD develop a formula allocation schedule for the pu young adults aged 18 to 25 years in foster care. Applicant County	rpose of distri	buting these funds n excludes Alpine	to counties. and Sierra co	The allocation is bas ounty because their ca	ed on each county's	percentage o	of the total state	wide num	per of
Legal name of Applicant as stated on resolution		and County of S			· · · · · · · · · · · · · · · · · · ·			0.4400	
Address City and County of San Francico Hum	nan Services A			City San Fra		State CA		94120	0544
Auth Rep Name Trent Rhorer		Title Executive D		Auth Rep Email	trent.rhorer@sfgov.c		Phone	(415)557	
Contact Name Joan Miller				ildren Services Email	joan.miller@sfgov.o		Phone	(415) 55	3-2660
Address City and County of San Francico Hum		gency PO Box 79	88	City San Fra	INCISCO	State CA	A Zip	94120	
Federal Tax ID Number (FEIN)         94-60004           Administrative Fiscal Representative	-17								
Legal Name Heather Davis		Contact Name	Heather Da	avie	Contact Emai	heather	.davis@sfgov.org		
Phone (415)557-5542 Address	City and County of			Box 7988 City San Fra		State		94120	
File Name: App Resolution		mple resolution do		City San Ta		State		to email?	Yes
File Name: App TIN		xpayer Identificati		TIN) document				to email?	
		ixpuyer lucitational	Use of F				7 ((100))00	to ornair.	100
<ol> <li>Assist this population to secure and maintain</li> <li>Improve coordination of services and linkage</li> <li>Provide engagement in outreach and targetin</li> <li>Any grant funds remaining unexpended as of Ju</li> </ol>	s to community og to serve tho	/ resources within se with the most s	the child well evere needs. Expenditure	fare system and the l	Homeless Continuun				
mailed to 2020 West El Camino Ave. Room 300				necks shall be bavar	ne to the Departmen	L OL HOUSING	and Community		
	,			nce the Contract Num				Develop	ment and
	,					5		Bovelop	ment and
In order to accept and receive an allocation, accept applications electronically via email no la	applicants m	Allocation	on Acceptan	nce the Contract Num	ber.	-			
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accept applications electronically via email no la	applicants m ater than 5:00 p HCD will (	Allocati ust submit the fo o.m. on: Thurso only accept applic. R	on Acceptan Ilowing: Sig <i>day, Novei</i> ations electro <u>THP@hcd</u> eporting Rec	nce the Contract Num ice Requirements and Allocation Acce mber 12, 2020 inically at the followin ica.gov quirements	ptance form, Signe	d Resolutio	on, and TIN For	nHCD will	
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Subject:	FW: Invitation to accept allocation for the Round 2 Transitional Housing Program (THP)
Attachments:	Transitional Housing Program Acceptance 072720.xlsx; THP R2 Resolution 072720.docx; Cover
	Letter_Apply and Accept for Transitional Housing and Housing Navigators Programs_Mar 20.pdf;
	Transitional Housing Program Apply and Accept Resolution (Mar 2020 signed).pdf

From: Tran-Houangvilay, Stephanie@HCD <<u>Stephanie.Tran-Houangvilay@hcd.ca.gov</u>> On Behalf Of THP@HCD Sent: Monday, July 27, 2020 2:36 PM Subject: Invitation to accept allocation for the Round 2 Transitional Housing Program (THP)

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

#### Good Afternoon,

Pursuant to item 2240-102-0001 of Section 2.00 of the Budget Act of 2020 (Chapter 6 of the Statutes of 2020) and Chapter 11.7 (commencing with Section 50807) of Part 2 of Division 31 of the Health and Safety Code (HSC), the Department of Housing and Community Development (HCD) shall allocate \$8 million in funding of the Transitional Housing Program (THP) to counties for the purpose of housing stability to help young adults 18 to 25 years secure and maintain housing, with priority given to young adults formerly in the foster care or probation systems.

In agreement with the Department of Social Services, the Department of Finance, and the County Welfare Directors Association, the allocation for Round 2 of the Transitional Housing Program will remain the same as Round 1. As with Round 1, this allocation excludes Alpine and Sierra because their calculation did not demonstrate a need for young adults aged 18 to 25.

In order to accept and receive an allocation for Round 2, applicants must submit the following: **Signed Allocation Acceptance form, Signed Resolution, and a signed GovTIN form**. HCD will only accept completed applications and relevant documentation via email to <u>THP@hcd.ca.gov</u> no later than **5:00 p.m. on Thursday, November 12, 2020**. Please find attached the THP Allocation Acceptance form, Resolution template and GOVTIN form. These forms can also be found on the <u>THP</u> webpage.

The anticipated timeline is as follows:

lubz	Release of the Invitation to accept Round 2 Transitional				
July	Housing Program Allocation via email				

November 12	Allocation Acceptance form due
December - February	Award / Standard Agreement Execution

Please feel free to reach out to us with questions at <u>THP@hcd.ca.gov</u>.

Stay safe and healthy!

CCSF-HSA - All outbound HSA email is automatically scanned for PII and PHI by Zix Email Encryption

	Transiti	onal Housi	ng Program (1	THP) Alloc	ation Acceptar	nce Round 2			Rev. 7/27/20
			· ·		ounty Allocation (		County in ro	ow 7 below):	
31 of the Health an	240-102-0001 of Section 2.00 nd Safety Code (HSC), the De ung adults 18 to 25 years sec	epartment of H	ousing and Comm	oter 6 of the Si unity Develop	tatutes of 2020) and ment (HCD) shall all	Chapter 11.7 (comr ocate \$8 million in fu	mencing with S unding to coun	ection 50807) o ties for the purp	
				Allocation Ap	plicant				
Allocation Applic	ant is a County Child Welfa	re Agency			• • •				
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develop a formula young adults aged	n 50807(b) of the HSC, HCD allocation schedule for the pu 18 to 25 years in foster care.	rpose of distri	buting these funds	to counties. T	he allocation is base	ed on each county's	percentage of	the total statewi	de number of
Applicant County									
	plicant as stated on resolu	tion:			0:5.1		Otata	7:	
Address Auth Rep Name			Title		City Auth Rep Email	1	State	Zip Phone	
Contact Name			Title		Email	dqf		Phone	
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	scal Representative								
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File Name: App	p TIN	Reference Ta	axpayer Identification		/			Attached to	o email?
				Use of Fu	nds				
4) Provide engage Any grant funds re	ation of services and linkage ment in outreach and targetin maining unexpended as of Ju st El Camino Ave. Room 300	ig to serve tho ine 30, 2023, r	se with the most se E nust be returned to	were needs. Expenditure of the State. Ch	<b>f Funds</b> necks shall be payab	le to the Departmen		nd Community [	Development and
					e Requirements				
	t and receive an allocation, s electronically via email no la		o.m. on:		ed Allocation Accepted Allocation Accepted and the state of the state	ptance form, Signe	ed Resolution,	, and TIN Form <del>i.</del>	ICD will only
		HCD will o	only accept applica		ically at the following	g email address:			
			Re	porting Requ	lirements				
Applicant acknowledges and agrees to submit an annual report to the Department for the three years following distribution of TAY Program funds addressing the following: 1) How many people were served? 2) What were the funds used for? 3) Who were the housing navigator(s)? 4) How many people served were in foster care? 5) How many people served were in probation system?									
				Certificat	ion				
The information, st I possess the legal	entity identified in the signa atements and attachments in authority to submit this Alloc weldge that all information in	cluded in this a ation Acceptar	Allocation Acceptar	of the entity id	lentified above.	-	true and correc	ot.	
	ted Name		Fitle of Signatory			Signature	•		Date
Name:					Phone Nur	mber:			
Address:					City:		State:	Zip:	

# **Introduction Form**

By a Member of the Board of Supervisors or Mayor

Time stamp or meeting date

I hereby submit the following item for introduction (select only one):

✓ 1. For reference to Committee. (An Ordinance, Resolution, Motion or Charter Amendment).
2. Request for next printed agenda Without Reference to Committee.
3. Request for hearing on a subject matter at Committee.
4. Request for letter beginning :"Supervisor inquiries"
5. City Attorney Request.
6. Call File No. from Committee.
7. Budget Analyst request (attached written motion).
8. Substitute Legislation File No.
9. Reactivate File No.
10. Topic submitted for Mayoral Appearance before the BOS on
Please check the appropriate boxes. The proposed legislation should be forwarded to the following:
Small Business Commission Vouth Commission Ethics Commission
Planning Commission Building Inspection Commission
Planning CommissionBuilding Inspection CommissionNote: For the Imperative Agenda (a resolution not on the printed agenda), use the Imperative Form.
Note: For the Imperative Agenda (a resolution not on the printed agenda), use the Imperative Form.
Note: For the Imperative Agenda (a resolution not on the printed agenda), use the Imperative Form. Sponsor(s):
Note: For the Imperative Agenda (a resolution not on the printed agenda), use the Imperative Form.         Sponsor(s):         Yee         Subject:         Apply for Funds Allocation – Child Welfare Agency Allocation – California Department of Housing and Community
Note: For the Imperative Agenda (a resolution not on the printed agenda), use the Imperative Form.         Sponsor(s):         Yee         Subject:
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Note: For the Imperative Agenda (a resolution not on the printed agenda), use the Imperative Form.         Sponsor(s):         Yee         Subject:         Apply for Funds Allocation – Child Welfare Agency Allocation – California Department of Housing and Community Development – Transitional Housing Program         The text is listed:         Resolution authorizing the Human Services Agency to apply for and accept an allocation from the California
Note: For the Imperative Agenda (a resolution not on the printed agenda), use the Imperative Form.         Sponsor(s):         Yee         Subject:         Apply for Funds Allocation – Child Welfare Agency Allocation – California Department of Housing and Community Development – Transitional Housing Program         The text is listed:         Resolution authorizing the Human Services Agency to apply for and accept an allocation from the California Department of Housing Program to help young adults
Note: For the Imperative Agenda (a resolution not on the printed agenda), use the Imperative Form.         Sponsor(s):         Yee         Subject:         Apply for Funds Allocation – Child Welfare Agency Allocation – California Department of Housing and Community Development – Transitional Housing Program         The text is listed:         Resolution authorizing the Human Services Agency to apply for and accept an allocation from the California

Signature of Sponsoring Supervisor: /s/Norman Yee

For Clerk's Use Only

From:	Smith, Susie (HSA)
To:	BOS Legislation, (BOS); Low, Jen (BOS)
Cc:	Hsieh, Frances (BOS); Vejby, Caitlin (BOS); Yee, Norman (BOS); LaBarre, Elizabeth (HSA); Gendelman, Johanna (HSA); RIES, DAVID (CAT)
Subject:	RE: Yee - Resolution - Apply for Funds Allocation – Child Welfare Agency Allocation – California Department of Housing and Community Development – Transitional Housing Program
Date:	Thursday, September 24, 2020 10:02:13 AM
Attachments:	Round 2Transitional Housing Program Acceptance 072720.xlsx
	image001.png
	<u>201099.docx</u>
	Materials for Round 2 Grant-Resolution-Information-Form07 2011 Transitional Housing Program (HSA Sept
	<u>2020).pdf</u>

Good morning, Jocelyn.

The State Department of Housing and Community Development requires a Board resolution for permission to apply for funds but not a separate resolution to accept the funds; therefore, I listed the total statewide allocation, \$8,000,000; however, the Round 2 Transitional Housing Program Acceptance excel file lists the San Francisco allocation amount of \$459,200 so I amended the resolution accordingly.

Attached please find:

- Revised resolution
- Email from State Department of Housing and Community Development announcing the invitation to apply for this funding
- Allocation acceptance form (excel file)

Please let me know if you need anything further.

Thank you,

Susie Smith Deputy Director, Policy and Planning Human Services Agency, City and County of San Francisco Cell: (415) 307-3291

From: BOS Legislation, (BOS) <bos.legislation@sfgov.org>
Sent: Wednesday, September 23, 2020 4:34 PM
To: BOS Legislation, (BOS) <bos.legislation@sfgov.org>; Low, Jen (BOS) <jen.low@sfgov.org>
Cc: Hsieh, Frances (BOS) <frances.hsieh@sfgov.org>; Vejby, Caitlin (BOS) <caitlin.vejby@sfgov.org>;
Yee, Norman (BOS) <norman.yee@sfgov.org>; LaBarre, Elizabeth (HSA)
<elizabeth.labarre@sfgov.org>; Gendelman, Johanna (HSA) <johanna.gendelman@sfgov.org>; RIES, DAVID (CAT) <David.Ries@sfcityatty.org>; Smith, Susie (HSA) <susie.smith@sfgov.org>
Subject: RE: Yee - Resolution - Apply for Funds Allocation – Child Welfare Agency Allocation – California Department of Housing and Community Development – Transitional Housing Program

Please disregard the draft that was sent. The \$8,000 amount listed is incorrect. Can you please

confirm what the allocation amount would be, as we would like to add the amount to the title? We would still like request the documents that would reflect that confirmed allocation amount. Thank you.

Best regards. Jocelyn Wong San Francisco Board of Supervisors 1 Dr. Carlton B. Goodlett Place, Room 244 San Francisco, CA 94102 T: 415.554.7702 | F: 415.554.5163 jocelyn.wong@sfgov.org | www.sfbos.org

**(VIRTUAL APPOINTMENTS)** To schedule a "virtual" meeting with me (on Microsoft Teams), please ask and I can answer your questions in real time.

Due to the current COVID-19 health emergency and the Shelter in Place Order, the Office of the Clerk of the Board is working remotely while providing complete access to the legislative process and our services

Click <u>here</u> to complete a Board of Supervisors Customer Service Satisfaction form

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**Disclosures:** Personal information that is provided in communications to the Board of Supervisors is subject to disclosure under the California Public Records Act and the San Francisco Sunshine Ordinance. Personal information provided will not be redacted. Members of the public are not required to provide personal identifying information when they communicate with the Board of Supervisors and its committees. All written or oral communications that members of the public submit to the Clerk's Office regarding pending legislation or hearings will be made available to all members of the public for inspection and copying. The Clerk's Office does not redact any information that a member of the public elects to submit to the Board and its committees—may appear on the Board of Supervisors' website or in other public documents that members of the public arony.

From: BOS Legislation, (BOS) <<u>bos.legislation@sfgov.org</u>>

Sent: Wednesday, September 23, 2020 4:29 PM

To: Low, Jen (BOS) <<u>ien.low@sfgov.org</u>>; BOS Legislation, (BOS) <<u>bos.legislation@sfgov.org</u>>
Cc: Hsieh, Frances (BOS) <<u>frances.hsieh@sfgov.org</u>>; Vejby, Caitlin (BOS) <<u>caitlin.vejby@sfgov.org</u>>;
Yee, Norman (BOS) <<u>norman.yee@sfgov.org</u>>; LaBarre, Elizabeth (HSA)
<<u>elizabeth.labarre@sfgov.org</u>>; Gendelman, Johanna (HSA) <<u>johanna.gendelman@sfgov.org</u>>; RIES, DAVID (CAT) <<u>David.Ries@sfcityatty.org</u>>; Smith, Susie (HSA) <<u>susie.smith@sfgov.org</u>>
Subject: RE: Yee - Resolution - Apply for Funds Allocation – Child Welfare Agency Allocation –
California Department of Housing and Community Development – Transitional Housing Program

Greetings,

Please see attached for proof of clerical edits, indicating the amount of up to \$8,000 in the short and long titles. Kindly review and confirm if the changes are acceptable.

We will need a copy of the department's most recent draft of the Allocation Acceptance form as referenced in the legislation, as well as any document that reflects the \$8,000 allocation, and any additional supporting documents relevant for applying for the allocation (program description by the awarding body). Please provide those documents for inclusion to the file by noon, tomorrow. Thank you.

Best regards, Jocelyn Wong San Francisco Board of Supervisors 1 Dr. Carlton B. Goodlett Place, Room 244 San Francisco, CA 94102 T: 415.554.7702 | F: 415.554.5163 jocelyn.wong@sfgov.org | www.sfbos.org

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From: Low, Jen (BOS) <<u>jen.low@sfgov.org</u>>

Sent: Tuesday, September 22, 2020 5:25 PM

To: BOS Legislation, (BOS) < bos.legislation@sfgov.org >

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**Subject:** Yee - Resolution - Apply for Funds Allocation – Child Welfare Agency Allocation – California Department of Housing and Community Development – Transitional Housing Program **Importance:** High

Dear Clerk Staff,

Please find attached **Yee - Resolution - Apply for Funds Allocation – Child Welfare Agency Allocation – California Department of Housing and Community Development – Transitional Housing Program**. The application is included for the file. The staff at Human Services Agency are cc'ed if you need any further clarification on the materials provided.

Thank you,

Jen