

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**



ITEM: 3.18
(ID # 26502)

MEETING DATE:
Tuesday, December 17, 2024

FROM : PUBLIC SOCIAL SERVICES

SUBJECT: DEPARTMENT OF PUBLIC SOCIAL SERVICES: Adoption of Resolution Number 2024-237, authorizing and delegating the Director of the Department of Public Social Services, or Designee, to accept the Transitional Housing Program County Allocation Round 6 Award, to accept the Housing Navigation and Maintenance Program County Allocation Round 3 Award, and to execute all documents required or deemed necessary or appropriate by the California Department of Housing and Community Development to participate in each program to include receiving and administering additional funds. All Districts [Total Cost \$2,305,121 - 100% State]

RECOMMENDED MOTION: That the Board of Supervisors:

1. Adopt Resolution No. 2024-237 authorizing and delegating the Director of the Department of Public Social Services, or Designee, to accept the Transitional Housing Program County Allocation Round 6 Award, to accept the Housing Navigation and Maintenance Program County Allocation Round 3 Award, and to execute all documents required or deemed necessary by the California Department of Housing and Community Development to participate in each program to include receiving and administering additional funds.

ACTION:Policy

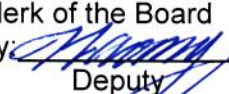

Charity Douglas, DPSS Director

11/27/2024

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Gutierrez seconded by Supervisor Jeffries and duly carried by unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Jeffries, Spiegel, Washington, Perez and Gutierrez
Nays: None
Absent: None
Date: December 17, 2024
xc: DPSS

Kimberly A. Rector
Clerk of the Board
By: 
Deputy

**SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,
STATE OF CALIFORNIA**

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$2,305,121	\$ 0	\$2,305,121	\$ 0
NET COUNTY COST	\$ 0	\$ 0	\$ 0	\$ 0
SOURCE OF FUNDS: State 100%			Budget Adjustment:	No
			For Fiscal Year: 24/25 – 26/27	

C.E.O. RECOMMENDATION: Approve

BACKGROUND:

Summary

At the request of the California Department of Housing and Community Development (HCD), DPSS is bringing forth this joint resolution to accept funds for both the Transitional Housing Program (THP) and Housing Navigation and Maintenance Program (HNMP).

Transitional Housing Program: THP services assist young adults who are 18 to 25 years of age to secure and maintain housing by increasing their life skills, reducing the waitlist for housing, and providing linkage to community services for emancipated young adults.

The Board of Supervisors previously approved the first round of THP funding (for FY 19/20) from HCD to DPSS on May 19, 2020, (Agenda Item No. 3.27). A second round of funding in the amount of \$257,600 was approved on October 27, 2020, (Agenda Item 3.14). A third round of funding in the amount of \$257,600 was approved on January 25, 2022, (Agenda Item 3.42). A fourth round of funding in the amount of \$1,291,873 was approved on January 31, (Agenda Item 3.15). And a fifth round of funding in the amount of \$1,411,920 was approved on December 12, 2023, (Agenda Item 3.43). HCD has allocated a sixth round of funding in the amount of \$1,472,449 to DPSS for THP services. DPSS has two years to spend each allocation.

Housing Navigation and Maintenance Program: HNMP funding is used for housing navigators to act as housing specialists to assist young adults between the ages of 18-21 to secure and maintain housing. Priority is given to young adults in foster care. The funding will assist with case management, preventative measures to protect youth from homelessness, and assist youth with linkages to community resources.

The Board of Supervisors previously approved the first round of HNMP funding (for FY 22/23) from HCD to DPSS on January 31, 2023 (Agenda Item 3.15). A second round of funding in the amount of \$863,470 was approved on December 12, 2023 (Agenda Item 3.43). HCD has allocated a third round of funding in the amount of \$832,672 to Riverside County DPSS for the HNMP program. This funding is to be expended by June 30, 2027.

Impact on Residents and Businesses

**SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,
STATE OF CALIFORNIA**

This funding will ensure that young adults between the ages of 18 to 25 secure and maintain safe and stable housing.

Additional Fiscal Information

Funding must be expended by June 30, 2027. No General Fund match is required for receipt of these funds. The Transitional Housing Program and Housing Navigation and Maintenance Program are 100% funded through State funds.

ATTACHMENTS:

- ATTACHMENT A.** Resolution No. 2024-237
- ATTACHMENT B.** THP Allocation Acceptance Form
- ATTACHMENT C.** HNMP Allocation Acceptance Form
- ATTACHMENT D.** Government TIN Form


Brianna Lontajo, Principal Management Analyst 12/11/2024


Gregg Gu, Chief of Deputy County Counsel 12/2/2024

2
3 RESOLUTION NO. 2024-237

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5 **A RESOLUTION OF THE BOARD OF SUPERVISORS OF THE COUNTY OF RIVERSIDE**
6 **AUTHORIZING AND DELEGATING TO THE DIRECTOR OF THE DEPARTMENT OF**
7 **PUBLIC SOCIAL SERVICES , OR DESIGNEE, TO ACCEPT THE TRANSITIONAL HOUSING**
8 **PROGRAM COUNTY ALLOCATION ROUND 6 AWARD, TO ACCEPT THE HOUSING**
9 **NAVIGATION AND MAINTENANCE PROGRAM COUNTY ALLOCATION ROUND 3**
10 **AWARD, AND TO EXECUTE ANY AND ALL DOCUMENTS REQUIRED OR DEEMED**
11 **NECESSARY OR APPROPRIATE BY THE CALIFORNIA DEPARTMENT OF HOUSING AND**
12 **COMMUNITY DEVELOPMENT TO PARTICIPATE IN EACH PROGRAM.TO INCLUDE**
13 **RECEIVING AND ADMINISTERING THESE FUNDS.**

14
15 **WHEREAS**, the State of California, Department of Housing and Community Development
16 (“Department”) issued an Allocation Acceptance Form (the “THP Allocation Acceptance Round 6 Form”),
17 dated October 9, 2024 under Round 6 of the Transitional Housing Program (“THP”), authorized by item
18 2240-102-0001 of section 2.00 of the Budget Act of 2024 (Chapter 22 of the Statutes of 2024) and Chapter
19 11.7 (commencing with Section 50807) of part 2 of Division 31 of the Health and Safety Code; and,

20 **WHEREAS**, the Department issued an Allocation Acceptance Form (the “HNMP Allocation
21 Acceptance Round 3 Form”), dated October 9, 2024 under Round 3 of the Housing Navigation and
22 Maintenance Program (“HNMP”) authorized by Item 2240-103-0001 of Section 2.00 of the Budget Act of
23 2024 (Chapter 22 of the Statutes of 2024) and Chapter 11.8 (commencing with Section 50811) of Part 2 of
24 Division 31 of the Health and Safety Code; and,

25 **WHEREAS**, the THP Allocation Acceptance Round 6 Form and the HNMP Allocation Acceptance
26 Round 3 Form are collectively referred to as the “Allocation Acceptance Forms”; and,

27 **WHEREAS**, the Allocation Acceptance Forms relate to the availability and use of the funds under
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FORM APPROVED COUNTY COUNSEL
BY GREGG M GU
DATE 12.13.24

1 both the THP and HNMP Programs.

2 **NOW, THEREFORE, BE IT RESOLVED, DETERMINED, AND ORDERED**, by the
3 Riverside County Board of Supervisors (“Board”) in regular session assembled on December 17, 2024, at
4 9:00 a.m. or soon thereafter, in the meeting room located on the first floor of the County Administrative
5 Center, 4080 Lemon Street, Riverside, California, that this Board does hereby determine and declare as
6 follows:

7 SECTION 1. That the Board authorizes and delegates authority to the Director of DPSS, or
8 designee, to accept the County’s allocated \$1,472,449 award, as detailed in the THP Allocation Acceptance
9 Round 6 Form, immediately upon the adoption and execution of this resolution.

10 SECTION 2. That the Board hereby affirms that if additional THP funds become available to the
11 County, the Board authorizes and delegates authority to the Director of DPSS, or designee, to accept the
12 additional funds (“Additional THP Allocation”) up to the amount awarded by HCD, but not to exceed
13 \$2,944,898 in additional funding, by executing all necessary forms.

14 SECTION 3. That the Board authorizes and delegates authority to the Director of DPSS, or
15 designee, to accept the County’s allocated \$832,672 award, as detailed in the HNMP Allocation Acceptance
16 Round 3 Form, immediately upon the adoption and execution of this resolution.

17 SECTION 4. The Board hereby affirms that if additional HNMP funds become available to the
18 County, the Board authorizes and delegates authority to the Director of DPSS, or designee, to accept the
19 additional funds (“Additional HNMP Allocation”) up to the amount awarded by HCD, but not to exceed
20 \$1,727,344 in additional funding, by executing all necessary forms.

21 SECTION 5. That the Board authorizes and delegates authority to the Director of DPSS, or
22 designee, to act on behalf of the County in connection with the Transitional Housing Program, and to enter
23 into, execute, and deliver any and all documents required or deemed necessary or appropriate to participate
24 in the THP Program, including but not limited to a Standard Agreement, be awarded the THP Allocation
25 Award, and any additional THP Allocation, and any amendments to such documents.

26 SECTION 6. That the Board authorizes and delegates authority to the Director of DPSS, or
27 designee, to act on behalf of the County in connection with the Housing Navigation and Maintenance
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1 Program and to enter into, execute, and deliver any and all documents required or deemed necessary or
2 appropriate to participate in the HNMP Program, including but not limited to a Standard Agreement, be
3 awarded the HNMP Allocation Award, and any additional HNMP Allocation, and any amendments to such
4 documents.

5 SECTION 7. That DPSS shall be subject to the terms and conditions that are specified in the
6 Allocation Acceptance Forms, and that DPSS will use these funds and any additional allocation funds in
7 accordance with said terms and conditions, and any subsequent amendments or amendment thereto, as well
8 as any and all other THP and HNMP requirements, or other applicable laws.

9 SECTION 8. That the Board authorizes and delegates authority to the Director of DPSS, or
10 designee, with the discretion to accept both the THP and HNMP program funds as detailed herein but, in
11 the event that one of the two allocations are not made available for DPSS or DPSS opts not to receive one
12 of the allocations, DPSS is authorized to accept either of the allocations independent of each other.

13 **BE IT FURTHER RESOLVED, DETERMINED, AND ORDERED** that this Board hereby
14 authorizes this resolution to take effect immediately upon its adoption.

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16 PASSED AND ADOPTED this 17th day of December 2024, by the following vote:

17
18 AYES _____
19 NOES _____
20 ABSTENTIONS _____
21 ABSENT _____

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23 By: 
24 Chuck Washington, Chairman of the Board


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STATE OF CALIFORNIA

County of Riverside

I, Kimberly Rector, County Clerk of the County of Riverside, State of California, hereby certify the above and foregoing to be a full, true and correct copy of a resolution adopted by the County Board of Supervisors on this 17th day of December 2024.

Kimberly A. Rector
Clerk of the County of Riverside, State of California

By: 
DEPUTY

ROLL CALL:

- Ayes:** Jeffries, Washington, Spiegel, Perez, and Gutierrez
- Nays:** None
- Absent:** None

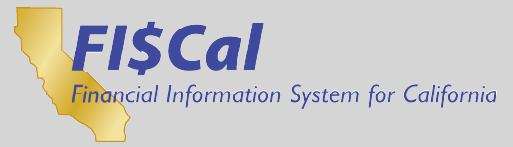
The foregoing is certified to be a true copy of a resolution duly adopted by said Board of Supervisors on the date therein set forth.

KIMBERLY A. RECTOR, Clerk of said Board

By: 
Deputy

State of California
Financial Information System for California (FI\$Cal)
GOVERNMENT AGENCY TAXPAYER ID FORM

2000 Evergreen Street, Suite 215
Sacramento, CA 95815
www.fiscal.ca.gov
1-855-347-2250



The principal purpose of the information provided is to establish the unique identification of the government entity.

Instructions: You may submit one form for the principal government agency and all subsidiaries sharing the same TIN. Subsidiaries with a different TIN must submit a separate form. Fields marked with an asterisk (*) are required. Hover over fields to view help information. Please print the form to sign prior to submittal. You may email the form to: vendors@fiscal.ca.gov, or fax it to (916) 576-5200, or mail it to the address above.

Principal Government Agency Name*

Remit-To Address (Street or PO Box)*

City* State * Zip Code*+4

Government Type: City County Special District Federal Other (Specify) Federal Employer Identification Number (FEIN)*

List other subsidiary Departments, Divisions or Units under your principal agency's jurisdiction who share the same FEIN and receives payment from the State of California.

Dept/Division/Unit Name	<input type="text"/>	Complete Address	<input type="text"/>
Dept/Division/Unit Name	<input type="text"/>	Complete Address	<input type="text"/>
Dept/Division/Unit Name	<input type="text"/>	Complete Address	<input type="text"/>
Dept/Division/Unit Name	<input type="text"/>	Complete Address	<input type="text"/>

Contact Person* Title

Phone number* E-mail address

Signature* Date

Transitional Housing Program (THP) Allocation Acceptance Round 6										Rev. 10/09/24	
County Allocation (select Applicant County in row 7 below):										\$1,472,449	
Pursuant to item 2240-102-0001 of Section 2.00 of the Budget Act of 2024 (Chapter 22 of the Statutes of 2024) 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 funding to counties for the purpose of housing stability to help young adults 18 to 24 years of age, inclusive, secure and maintain housing, with priority given to young adults formerly in the foster care or probation systems.											
Housing First											
The Contractor shall certify to employ the core components of Housing First, pursuant to Welfare and Institutions Code Section 8255.											
Allocation Applicant											
Allocation Applicant is a County										Yes	
Pursuant to Section 50807(b) of the HSC, HCD consulted with the Department of Social Services, the Department of Finance, and the County Welfare Directors Association to develop a formula allocation schedule for the purpose of distributing these funds to counties. The allocation is based on each county's percentage of the total statewide number of young adults 18 through 20 years of age in foster care and homeless unaccompanied young adults (ages 18 through 24).											
Applicant County		Riverside County									
Legal name of Applicant as stated on resolution:		County of Riverside									
Address			4060 County Circle Dr.			City		Riverside		State	CA
Auth Rep Name		Charity Douglas		Title		Director		Auth Rep Email		chdougl@rivco.org	
Contact Name		Brianna Cervantes		Title		Contracts and Grants Analyst		Email		bcervant@rivco.org	
Address			4060 County Circle Dr.			City		Riverside		State	CA
Federal Tax ID Number (FEIN)		95-6000930									
Administrative Fiscal Representative											
Legal Name			Gergis Kirnalous			Contact Name			Gergis Kirnalous		
Phone		951-358-4104		Address		4060 County Circle Dr.		City		Riverside	
State		CA		Zip		92503					
File Name:		App Resolution		Reference sample resolution document				Attached to email?		Yes	
File Name:		App GovTIN Form		Reference Taxpayer Identification Number (TIN) document				Attached to email?		Yes	
Use of Funds											
Funds shall be used to help young adults who are 18 to 24 years of age, inclusive, secure and maintain housing with priority given to young adults formerly in the state's foster care or probation systems. Use of funds may include, but are not limited to:											
1) Identify and assist housing services for this population in your community; 2) Assist this population to secure and maintain housing (with priority given to those in the state's foster care or probation system); 3) Improve coordination of services and linkages to community resources within the child welfare system and the Homeless Continuum of Care; and 4) Provide engagement in outreach and targeting to serve those with the most severe needs.											
Expenditure of Funds											
Any grant funds remaining unexpended as of two years from the "Effective Date" of the fully executed Standard Agreement as stated in the STD 213, paragraph 2, must be returned to the State. Checks shall be payable to the Department of Housing and Community Development and mailed to 651 Bannon Street, 8th floor, Sacramento CA 95811 and must reference the Contract Number.											
Allocation Acceptance Requirements											
In order to accept and receive an allocation, applicants must submit the following: 1. Signed Allocation Acceptance form, 2. GovTIN Form, and 3. Signed Resolution. If Signed Resolution is not available by submittal date please include the scheduled date of Board of Supervisors meeting and anticipated date the Signed Resolution will be submitted to the Department. The Department will only accept applications electronically via email no later than 5:00 p.m. on:											
Friday, November 8, 2024 HCD will only accept applications electronically at the following email address: TAY@hcd.ca.gov											
Reporting Requirements											
Applicant acknowledges and agrees to submit an bi-annual report to the Department for the two years following contract execution addressing the following:											
A. Number of program participants served who were homeless at time of program entry; B. Number of program participants served who were in the State's foster care system; C. Number of program participants served who were formerly in the State's foster care or probation systems; D. Number of program participants who exited homelessness into temporary housing; E. Number of program participants who exited homelessness into permanent housing; F. Itemization on use of program fund expenditures; G. Who were the housing navigators or other subcontractor(s)? H. Subpopulation data including:										Yes	
1. Number of participants that are employed; 2. Number of participants identified as LGBTQ+; 3. Number of participants having a disability; 4. Number of participants with minor children in the household; and, 5. Average number of children per household.											
Certification											
On behalf of the entity identified in the signature block below, I certify that: The information, statements and attachments included in this Allocation Acceptance form are, to the best of my knowledge and belief, true and correct. I possess the legal authority to submit this Allocation Acceptance form on behalf of the entity identified above. In addition, I acknowledge that all information in this application and attachments is public, and may be disclosed by the State.											
Charity Douglas			Director			[Signature]			12/17/24		
Printed Name			Title of Signatory			Signature			Date		
Name:		Charity Douglas			Phone Number:		951-358-6995				
Address:			4060 County Circle Dr.			City:		Riverside		State:	CA
						Zip:		92503			

Housing Navigation and Maintenance Program (HNMP) Allocation Acceptance Round 3		Rev. 10/09/24
County Allocation (select Applicant County in row 7 below):		\$832,672
Pursuant to item 2240-103-0001 of Section 2.00 of the Budget Act of 2024 (Chapter 22 of the Statutes of 2024) and Chapter 11.8 (commencing with Section 50811) of Part 2 of Division 31 of the Health and Safety Code (HSC), the Department of Housing and Community Development (HCD) shall allocate funding to counties for the support of housing navigators to help young adults 18 years and up to 24 years of age, inclusive, secure and maintain housing, with priority given to young adults currently or formerly in the foster care system.		
Housing First		
The Contractor shall certify to employ the core components of Housing First, pursuant to Welfare and Institutions Code Section 8255.		
Allocation Applicant		
Allocation Applicant is a County		Yes
Pursuant to Section 50811 of the HSC, HCD consulted with the Department of Social Services, the Department of Finance, and the County Welfare Directors Association to establish the formula allocation for the purpose of distributing these funds to counties. The formula allocation is based on each county's percentage of the total statewide number of young adults 17 through 21 years of age in the foster care and probation system. The allocation excludes Alpine and Mono counties because their calculation did not demonstrate need. The housing navigation and maintenance program for a county that accepts an allocation of money pursuant to this section shall provide training to its child welfare agency social workers and probation officers who serve nonminor dependents. The training shall address an overview of the housing resources available through the local coordinated entry system, homeless continuum of care, and county public agencies, including, but not limited to, housing navigation, permanent affordable housing, THP-Plus, and housing choice vouchers. The training shall also address how to access and receive a referral to existing housing resources, the social worker's and probation officer's role in identifying unstable housing situations for youth, and referring youth to housing assistance programs.		
Applicant County		Riverside County
Legal name of Applicant as stated on resolution:		County of Riverside
Address	4060 County Circle Dr.	City Riverside State CA Zip 92503
Auth Rep Name	Charity Douglas	Title Director Auth Rep Email chdougl@rivco.org Phone 951-358-6995
Contact Name	Brianne Cervantes	Title Contracts and Grants Analyst Email bcervant@rivco.org Phone 951-358-3529
Address	4060 County Circle Dr.	City Riverside State CA Zip 92503
Federal Tax ID Number (FEIN)	95-6000930	
Administrative Fiscal Representative		
Legal Name	Gergis Kirnalous	Contact Name Gergis Kirnalous Contact Email gekirnal@rivco.org
Phone	951-358-4104	Address 4060 County Circle Dr. City Riverside State CA Zip 92503
File Name:	App Resolution	Reference sample resolution document Attached to email? Yes
File Name:	App TIN	Reference Taxpayer Identification Number (TIN) document Attached to email? Yes
Use of Funds		
The HNMP program funds housing navigators for counties. The role of a housing navigator is to act as a housing specialist to assist young adults with their pursuits of locating available housing and overcoming barriers to locating housing. Housing navigation and maintenance activities may include, but are not limited to:		
<ol style="list-style-type: none"> 1) Assist young adults aged 18-24 years of age, inclusive, secure and maintain housing (with priority access given to young adults in the state's foster care system); 2) Provide housing case management which include essential services in emergency supports to foster youth; 3) Prevent young adults from becoming homeless; and 4) Improve coordination of serves and linkages to key resources across the community including those from within the child welfare system and the local Continuum of Care. 		
Expenditure of Funds		
Any grant funds remaining unexpended as of two years from the "Effective Date" of the fully executed Standard Agreement as stated in the STD 213, paragraph 2, must be returned to the State. Checks shall be payable to the Department of Housing and Community Development and mailed to 651 Bannon Street, 8th Floor, Sacramento CA 95811 and must reference the Contract Number.		
Allocation Acceptance Requirements		
In order to accept and receive an allocation, applicants must submit the following: 1. Signed Allocation Acceptance form, 2. GovTIN Form, and 3. Signed Resolution. If Signed Resolution is not available by submittal date please include the scheduled date of Board of Supervisors meeting and anticipated date the Signed Resolution will be submitted to the Department. The Department will only accept applications electronically via email no later than 5:00 p.m. on:		
<p>Friday, November 8, 2024</p> <p>HCD will only accept applications electronically at the following email address:</p> <p>TAY@hcd.ca.gov</p>		
Reporting Requirements		
Applicant acknowledges and agrees to submit an bi-annual report to the Department for the two years following contract execution addressing the following:		Yes
<ol style="list-style-type: none"> A. Number of program participants served with program funds; B. Itemization of use of program funds; C. Details on housing navigators and other subcontractors; D. Number of program participants served who were in the State's foster care system; E. Number of program participants who were homeless at time of program entry; F. Number of program participants who exited homelessness into temporary housing; G. Number of program participants who exited homelessness into permanent housing; and, H. Subpopulation data including: <ol style="list-style-type: none"> 1. Number of participants that are employed; 2. Number of participants identified as LGBTQ+; 3. Number of participants with a disability; 4. Number of participants with minor children in the household; and, 5. Average number of children per household. 		
Certification		
On behalf of the entity identified in the signature block below, I certify that:		

The information, statements and attachments included in this Allocation Acceptance form are, to the best of my knowledge and belief, true and correct.
I possess the legal authority to submit this Allocation Acceptance form on behalf of the entity identified above.
In addition, I acknowledge that all information in this application and attachments is public, and may be disclosed by the State.

Charity Douglas		Director				12/17/24			
Printed Name		Title of Signatory		Signature		Date			
Name:	Charity Douglas			Phone Number:	951-358-6995				
Address:	4060 County Circle Dr.			City:	Riverisde	State:	CA	Zip:	92503