INNOVATIVE PROJECT PLAN DESCRIPTION

Executive Summary

Program Summary

Alameda County has been in search of innovative solutions that address affordable supportive housing for individuals with serious mental illness (SMI) because current solutions are not effective due to a housing crisis that continues to escalate and significantly affect this very vulnerable population. The County has been experiencing a decline in available housing units since 2004. During 2015-2017 alone, homelessness grew by 40%. Of these individuals who became homeless, 41% reported a psychiatric or emotional condition impacted their ability to obtain housing. This already dire situation has been recently exacerbated by the Northern California fires in Sonoma, Napa and Butte County.

Stable housing provides the foundation upon which people build their lives. Without a safe, affordable place to live, it’s almost impossible to achieve good health or to achieve one’s full potential. For people living with an SMI, stable and supportive housing not only has the potential to improve mental health, but also physical health, both of which help to increase overall quality of life and wellbeing.

The County is proposing to use a community land trust model to bring permanent affordability and community control to help ease its housing crisis for SMI consumers whose income is 200% of the federal poverty level.

A community land trust is a nonprofit formed to hold title to land to preserve its long-term availability for affordable housing. The trust retains ownership of the land and the homebuyer pays a lease fee on the land, which protects the trust’s investment in the land. With land costs often being 30 to 40 percent of the price of a home, this model allows a buyer to afford a home by only borrowing on the structure. The homeowner can sell the property and make a small profit and recover the down payment, some equity and the cost of improvements. The trust keeps the rest of the money to provide for future buyers. This setup not only fosters pride of ownership and community, it provides an opportunity to move restrictive supportive housing approaches into the private sector for the public good.

Using innovation funds, a nonprofit community land trust entity will be created, which we’ve named, the Alameda County Supportive Housing Community Land Alliance (CLA). The CLA will be developed by an agency chosen through Alameda County’s public request for proposal (RFP) procurement process. The agency chosen will develop an organizing committee, Project Management Team, (PMT); Community Land Trust consultant; a Board of Directors (identified after the PMT is established) comprised of one-third each mental health consumers, family members, and public sector representatives; and legal counsel.
The CLA will be charged with not only creating the community land trust, but also developing housing guidelines, and best practices for board and care operations. Additionally, the CLA will launch an open membership structure within the CLA that provides community members with a means to participate in supporting the goals of the program.

Alameda County is aware that innovation funds cannot be used for the purchase of property or rehabilitation and/or construction of new housing. BHCS’ Finance Department will have a fiscal tracking mechanism to specifically monitor these funds to ensure Innovation funding is appropriately being utilized under CCR§ 3910.010(b)(1).

**Innovative Components**

The Innovation component of the Mental Health Services Act provides counties the “opportunity to develop and test new, unproven mental health models with the potential to become tomorrow’s best practices.”\(^1\) Alameda’s proposed Innovation project’s primary purpose is to increase access to mental health services through permanent supportive housing by using a community land trust model. This model has never been developed to house individuals with a serious mental illness, and if successful, has the potential to become part of tomorrow’s best practices as it’s shared with other counties. Moreover, this pilot project is testing the innovative ideas of the CLA being able sustain and fund itself through its fiscal modeling, and using rental fees to afford additional housing units.

**What Success Will Look Like**

The lack of affordable supportive housing does not provide individuals with SMI the opportunity for long term mental health support and recovery. Success of this model may bring new avenues to supportive housing and mental health services. Currently, homeless individuals receiving mental health care are more likely to continue to be homeless upon discharge or may not be able to continue mental health services due to not having stable housing. With this model, the individual’s home is permanent, versus the current model of being assigned after discharge to what is available and potentially temporary. Having a *safe* and *secure* place to live is a vital part of wellness and recovery.

Success in the short term will include, but not limited to:

- Incorporating the community land trust (CLA) as a 501(c)(3);
- Forming a Board of Directors and staffing structure that allows for equitable participation by mental health consumers and family members, and
- Development of financing models that will sustain the operation of the CLA.

Long Term success will include, but not limited to:

- Effect on board and care closures, and
- The financial model is sustainable with funds being directed towards the development of new units.

\(^1\) [http://www.mhsoac.ca.gov/innovation-0](http://www.mhsoac.ca.gov/innovation-0)
I. Innovations Regulations Requirement Categories

1) General Requirement

The proposed project applies a promising community driven practice or approach that has been successful in a non-mental health context or setting to the mental health system.

2) Primary Purpose

The proposed project increases access to mental health services, including but not limited to, services provided through permanent supportive housing.

II. Project Overview

1) Primary Problem

The need for affordable supportive housing for individuals with a severe mental illness continues to increase in Alameda County as traditional approaches to the problem have not been effective due to a housing crisis that continues to escalate and significantly affect this very vulnerable population. It should also be noted that while the Bay Area has been in a housing crisis for several years now, the recent Northern California fires in Sonoma, Napa and Butte County have drastically increased this crisis to an even more alarming and dire rate.

Across the Bay Area, an inadequate supply of housing stock, particularly affordable housing, has contributed to rising home prices, rental rates, evictions, displacement and homelessness. Households living on fixed incomes such as seniors and people with disabilities, including individuals with severe mental illness, face the most significant challenges in maintaining a home in this environment. In the Bay Area, there are only an estimated 25 affordable housing units for every 100 extremely low-income households. Housing and Urban Development (HUD) Fair Market Rents for one-bedroom apartment units grew by 71% between 2013 and 2018. Conversely, Supplemental Security Income (SSI) payments for disabled individuals in 2018 cover less than half of the rent of a one-bedroom at the 2018 Fair Market Rate in Alameda County. The County requires approximately 54,000 more affordable rental homes to meet current demand. This housing landscape has had a devastating impact on individuals and families impacted by serious mental illness.

In 2006, Alameda County issued a 15-year plan to address homelessness and the housing needs of people with special needs including those with mental illness. This plan called for the creation of an additional 15,000 affordable supportive housing units by 2020. To date, an estimated 1,500 new supportive housing units have been created, far below the pace needed to meet the goal. While some supportive housing units have been created, Alameda County has also experienced significant declines in the number of licensed board and cares, residential hotels, and room and board facilities frequently utilized by individuals with serious mental illness.

2 The County’s 2006 plan was hampered by a number of internal and external factors. None was more damaging than the financial crisis of 2007-2008 which was followed by a global downturn, or the Great Recession. The immediate cause or trigger of the crisis was the collapse of the US housing bubble which peaked in 2006-2007.
Between 2004 and 2015, Oakland experienced a nearly 55% decline in the number of available residential hotel units from 2,237 to 1,224 rooms. Alameda County Behavioral Health Care Services (BHCS) Housing Services Office identified 50 room and board or independent living facilities utilized by individuals with serious mental illness that had either been sold or closed displacing an estimated 500 individuals within a three year period (2014 and 2017). During the same time period, BHCS has lost over 80 licensed board and care beds previously occupied by people with serious mental illness. Inadequate supportive housing unit creation coupled with declines in shared housing options of last resort for seniors and people with disabilities have contributed to steep increases in homelessness and housing instability among people with serious mental illness. Between 2017 and 2019, the number of people experiencing homelessness at a point-in-time (PIT) grew by nearly 43% (2017 PIT was 5,629 and 2019 PIT is 8,022 [6,312 were unsheltered]) of these individuals who became homeless, 41% reported a psychiatric or emotional condition impacted their ability to obtain housing or employment. In FY2014-15, 6% of BHCS clients were homeless upon entry into services and 5% were homeless upon discharge. In FY2017-18 that rose to 9% on admission and 10% on discharge. The situation is dire.

The federal Substance Abuse and Mental Health Services Administration (SAMHSA) identifies “home” as an essential domain for a life in recovery. Alameda County’s current housing and services landscape makes obtaining and maintaining a “home” extremely challenging for individuals struggling with a serious mental illness. Innovative approaches that help create new supportive housing units and that minimize the loss of shared housing options are urgently needed.

Traditional affordable housing financing approaches remain time-consuming and costly when compared to private housing market strategies. A typical Bay Area affordable housing project can take 3-5 years to gather appropriate financing, approvals, and complete construction. Available properties frequently get acquired by private entities before affordable housing developers can even secure initial funding. The major federal and state sources of affordable housing financing often have rules that preclude the blending of market rate and affordable housing units in a single project. In addition, these sources create priorities that make financing smaller projects non-competitive. Publicly financed affordable housing projects also typically preclude family members from investing and securing a supportive housing unit for a loved one with a disability. Innovative approaches to address these traditional housing financing models and identifying ways to target and reduce these barriers are vital to shore up the housing gaps.

Given the critical nature of “home” for recovery and the worsening housing crisis in the Bay Area, several members of East Bay National Alliance for the Mentally Ill (NAMI) chapter created a supportive housing workgroup to investigate ways in which family members could support, advocate for, and invest in the creation of quality supportive housing for their loved ones. Many family members in this workgroup expressed a willingness to invest in a housing project if their investment could result in a guaranteed place for their loved one to live. Traditional affordable housing financing strategies do not allow for consumer/client ownership of their housing. In addition to this workgroup, Alameda County’s recent Community Planning Process (CPP) identified homelessness as the top priority for adults and older adults, and the third priority issue for children, youth, and transition age youth.

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4 [https://www.samhsa.gov/recovery](https://www.samhsa.gov/recovery)
Through its original MHSA housing funds, Alameda has developed 175 units within 25 MHSA housing projects across the County. These units serve all age groups (depending on the development) with subsidies included with multiple units. Even though Alameda is proud of these successful property projects it’s only a “drop in the bucket” of what’s truly needed.

2) **The Proposed Project**

   a) *Provide a brief narrative overview description of the proposed project.*

The Supportive Housing Community Land Alliance pilot project will promote interagency and community collaboration among BHCS, family members, consumers, and affordable housing developers to create a Community Land Alliance using a community land trust model to preserve and create affordable supportive housing units for BHCS clients. A community land trust is a nonprofit organization formed to hold title to land to preserve its long-term availability for affordable housing. The homes are sold to lower-income families. The community land trust:

- Retains ownership of the land and provides long-term lease, generally a ground lease, of the structure(s) to homebuyers;
- Maintains an interest in maintenance of the structures and property while tenant/co-owner makes improvements to the property;
- Retains a long-term option to repurchase the homes at an agreed-upon formula-driven price giving the homeowner partial equity with the remaining equity staying with the community land trust; and
- The structure is re-sold below-market rate and the cost of the land is retained in perpetuity within the trust.

Supportive housing property and subsidy management refers to creating an organization with expertise in direct and third-party property management and master leasing of supportive housing units coupled with expertise in managing long-term rental assistance/housing subsidy funding from programs such as Section 8, MHSA, and HUD Continuum of Care grants.

Innovation funding will be used over five years to create and fully develop a non-profit Supportive Housing Community Land Alliance based on a community land trust and supportive housing model. The first two years will be used to create initial infrastructure, staffing, establish agreements between community partners, and develop policies and procedures.

The proposed community land trust will operate under the auspices of a board of directors comprised of 9-12 individuals with one-third consumers and family member representatives, one-third public sector representatives, and one-third community partners with specific areas of expertise and a commitment to expanding and improving supportive housing in Alameda County.

This community land trust model is designed to balance the interest of individual land trust homeowners with the interests of the community as a whole. The rationale for this structure is based on the recognition that all land trust residents have a common interest in the organization that owns the land the residents live on and also have a degree of control over that organization. The community land
trust model fosters homeownership versus giving subsidies which solely aid initial recipients and leaves the County expending more resources in the future.

The Community Land Alliance, which will be developed by an agency chosen through the County’s Request for Proposal (RFP) procurement process, will establish an organizing committee called the “Project Management Team”, who will be responsible to:

- Draft and outline membership of the board of directors;
- Recruit board members;
- Identify an executive director;
- Develop CLA Advisory Committee to the board of directors comprised of a diverse membership including, but not limited to, the project management team, MHSA Stakeholders, interested community members, NAMI members, consumers, and family members; and
- Acquire legal counsel who will draft documents necessary to create a 501(c)(3) non-profit corporate structure; along with documents that will include, but not be limited to, articles of incorporation, bylaws, and application for federal tax-exemption.

The County has identified MHSA Capital Facilities and Technological Needs (CFTN) funding to purchase initial property for the pilot project, once the Community Land Alliance is up and running. The funding has been secured separately because MHSA Innovation funds are not permitted to be utilized for the purchase of land as Innovation funds cannot be used for projects exceeding five (5) years as specified in CCR§ 3910.010(b)(1).

The BHCS' Finance Department will have a fiscal tracking mechanism to specifically monitor and track these Innovation funds to ensure Innovation funding is not used for the purchase of property or rehabilitation and/or construction of new housing. In BHCS, each MHSA component has a unique organization and program number that’s attached to all projects so that Finance staff can accurately track appropriation and spending by component area. This is BHCS’ standard practice in order correctly document expenditures on the MHSA Annual Revenue and Expenditure Report.

Further funding will be sought to continue operation of the project from other sources such as No Place Like Home, tax credits, or alternative sources identified by the Supportive Housing Community Land Alliance.

The Supportive Housing Community Land Alliance is expected to increase the ability to secure and maintain affordable supportive housing for clients living with a severe mental illness by:

- Leveraging public and private investments in a single property. Examples include family member and client ownership, mixed affordable and market rate developments, and cross-subsidization with condominium developments where some units are purchased at market rate, and the remaining will be less than market rate for affordability for BHCS’ clients;
- Building an organization with supportive housing property management skills, master leasing capacity, housing partnership, and the subsidy management expertise necessary to secure housing units for BHCS consumers when opportunities arise;
- Using a non-profit 501(c)(3) structure to preserve the use of land and associated structures for sustaining supported housing units for people with histories of serious mental illness.
• Developing financial and operational models, and best practices for acquiring, rehabilitating, and managing licensed board and care and independent living shared housing facilities;
• Utilizing publicly-funded rental subsidies in creative ways to expand opportunities for those with rental subsidies, to create opportunities for tenant ownership, and/or reinvestment of subsidy funds into expanding supportive housing unit availability;
• Provide ongoing stewardship to the clients and property co-owners while they own their homes and manage resales to ensure the home or property stays affordable to subsequent buyers.

The primary staffing of the Community Land Alliance and their roles will include:

• BHCS Project Manager: The BHCS Housing Services Office Director will supervise a Project Management consultant to oversee the implementation of the Innovation project, such as developing agency and community support and linkages, developing the initial Request for Proposal (RFP) model for project launch, ensuring the project achieves its intended innovation objectives, and coordinated project evaluation and reporting to stakeholders.

• Community Land Alliance Executive Director: Provide primary oversight of the Community Land Alliance, consultants, and staff; development of a Community Land Trust Board of Directors and By-Laws, financing models, family investment model, and sustainability model; cultivating housing projects.

• Property Management Director: Supportive housing property management policies and practices will need to be developed that integrate existing best practices and the unique requirements created by the mixed funding sources, such as family/client ownership. Management of supportive housing properties requires unique approaches, workflows, and staffing.

• Workforce Development and Training Director: Successful supportive housing projects require that staff members involved in specific projects clearly understand their role and responsibilities, have the supervision and support necessary to fulfill their roles, and have training, feedback, and skill development opportunities that enhance their work performance and job satisfaction. The workforce development and training coordinator will focus on ensuring staff involved with specific supportive housing projects have the supports and tools necessary to maximize the success of housing projects.

• Multiple consultant and contractors: BHCS will engage legal and professional consultants regarding community land trusts, affordable housing development, financing, and operating models.

Once established, the Community Land Alliance will utilize existing and planned financial and other resources to implement its key strategic aims. Examples of these resources include HUD Continuum of Care housing subsidies, MHSA Community Services and Supports (CSS) locally created housing subsidy funds, No Place Like Home MHSA bond funds, and a one-time set-aside of local MHSA Capital Facilities and Technological Needs funds for the Community Land Alliance initiated housing projects.
By developing a new model for securing and governing affordable supportive housing, we hope to assist other counties facing similar housing crises. The County’s model, if successful, could not only reduce the learning curve for other counties who want to develop their own community land trust, but generate an opportunity for larger statewide collaboration.

b) Identify which of the three approaches specified in CCR, Title 9, Sect. 3910(a) the project will implement (introduces a practice or approach that is new to the overall mental health system; makes a change to an existing practice in the field of mental health; or applies to the mental health system a promising community-driven practice approach that has been successful in non-mental health contexts or settings).

This proposal makes a change to an existing practice in the field of mental health through the development of new approaches to securing, governing, financing, and operating supportive housing units for people with serious mental illness. This proposal also applies to the mental health system a promising community-driven practice approach that has been successful in non-mental health contexts or settings.

c) Briefly explain how you have determined that your selected approach is appropriate. For example, if you intend to apply to mental health a practice from outside of mental health, briefly describe how the practice has been historically applied.

This approach blends a variety of strategies utilized in other settings to address the needs of individuals with serious mental illness in a challenging housing market. As discussed in question 2, pages 4-6, each of the strategies being used has successfully addressed some aspect of the problem.

Community land trusts secure land and property for long-term affordability, create home and property ownership opportunities for low-income households, and provide ongoing stewardship of land for a defined public purpose.

Supportive housing property management and subsidy expertise has been utilized in other communities to master lease housing from private owners and to maximize the quality of supportive housing operations.

Continuing Care Retirement Communities (CCRC) provide models of tiering several levels of supportive care within a single property. In addition, some CCRCs highlight the possibility of combining market rate and affordable units within a single development.

The proposed Community Land Alliance creates an opportunity to integrate these models into an organization focused on the creation of quality supportive housing units for individuals struggling with a serious mental illness and their families.

d) Estimate the number of individuals expected to be served annually and how you arrived at this number.
Alameda County Behavioral Health Care clients will be directly served by this Innovation project. During the proposed five-year initial funding cycle, BHCS anticipates completing at least two new supportive housing projects through the new organizational infrastructure:

- One of the projects will incorporate a home ownership model for clients with serious mental illness, and
- The other project will utilize a land trust model to secure an independent living or licensed board and care home(s) for individuals with serious mental illness.

At least 10 BHCS clients will be served through these two housing projects. In addition, it’s anticipated that over 200 BHCS clients will benefit from the newly created alliance’s housing subsidy and property management skills and capabilities over the five-year innovation cycle. These estimates come from:

- Initial plans to start with two smaller housing projects of 4-6 units in size; and
- Coordination efforts of the alliance’s housing subsidy and property management skills for at least 200 of Alameda County’s current supportive housing inventory units.

Over the long-term, BHCS anticipates that this organizational model developed with Innovation funds will accelerate the creation and maintenance of supportive housing units within the County.

e) Describe the population to be served, including relevant demographic information (age, gender identity, race, ethnicity, sexual orientation, and/or language used to communicate).

The target population includes adults with serious mental illness residing in Alameda County that are living with extremely low incomes. Participants’ income is to be roughly 200% of the federal poverty level or below; on SSI and/or Medi-Cal; have been referred through BHCS’ healthcare system; and are not receiving the care they need because of their housing needs. The population of Alameda County in 2017 was 1,663,190 residents, of which there’s an estimated 4%, or 66,528, Alameda County residents who struggle with serious mental illness, so the need for housing and supportive services in the County is high.5

3) Research on Innovative Component

a) What are you proposing that distinguishes your project from similar projects that other counties and/or providers have already tested or implemented?

While this project borrows from a number of models, it’s innovative in the following ways:

- A community land trust model allows for more financing models that traditionally are used for creating affordable supportive housing.
  - It creates opportunities to secure properties for public use more quickly which can lead to an increase in preserving and developing housing projects.

**b) Describe the efforts made to investigate existing models or approaches close to what you’re proposing.**

There are over 200 community land trusts in the United States. Most of these community land trusts vary from one another depending on their targeted community. The model’s targeted population served affects the type and tenure of whatever housing is developed; amount of subsidy for affordability; type of funds available from governmental sources; design of the resale formula; marketing plan; selection criteria; and organizing strategy.

There are **no community land trust models whose targeted populations are individuals with severe mental illness**. However, there are programs that are using inventive ways for supportive housing through the collaborative efforts between the private market and a government agency:

- **Brilliant Corners in Los Angeles**, in cooperation with the Conrad N. Hilton Foundation, has launched a new supportive housing rental subsidy program called Flexible Housing Subsidy Pool. Their goal is to secure decent, safe, affordable housing for homeless DHS patients and have complex physical and behavioral health conditions. Tenants will be linked with wrap-around, intensive case management services to support them from transition to permanent housing. [http://brilliantcorners.org/brilliant-solutions/housing-for-health/](http://brilliantcorners.org/brilliant-solutions/housing-for-health/)

- **Seattle’s Landlord Liaison Project**, which currently is operated by King County, WA, is a collaborative partnership between property managers and service providers that helps people who can afford rent,
but have barriers to accessing housing.  https://kingcounty.gov/depts/community-human-services/housing/services/homeless-housing/landlord-liaison-project.aspx

Many of the current community land trusts have been in existence for 20 years or more. A number of community land trusts are in the Bay Area and along the West Coast. Executive Director, and founder of the Lopez Community Land Trust, Sandy Bishop; and Executive Director of the Housing Land Trust of Sonoma County, Devika Goetschius, are being consulted on an ongoing basis. https://www.lopezclt.org/staff/; https://housinglandtrust.org/. It must be noted that Ms. Goetschius is also a consultant for Burlington Associates, a national consulting cooperative who specializes in the development of community land trusts and other shared equity homeownership strategies. http://www.burlingtonassociates.com/#!/home

The controversy of affordable housing tends to trigger an immediate NIMBY (“Not in my backyard”) response. Ironically, most communities would agree that affordable housing should be OKIMBY (“Okay in my backyard”) if that housing contributed to the neighborhood and made it possible for stable families and individuals to live in the neighborhood. A common denominator for any affordable housing plan is effective communication among stakeholders which must exist for the plan to be successful6.

The County’s proposal is clear on who to serve and why. As part of this project, the County will be meeting with the surrounding communities and communicating with stakeholders. We believe the key is education and taking the time to provide information and receive feedback through various methods (in-person community meetings, emails, written comments, phone discussions, etc.).

4) Learning Goals / Project Aims

a) What is it that you want to learn or better understand over the course of the INN Project, and why have you prioritized these goals?

Alameda has four Learning Goals:

1. Can a community land trust model, targeting the SMI population, facilitate a successful financing model that results in adequate resources to sustain operation of a community land trust?

2. Can Alameda County within two years of using a community land trust model create an equitable representation on a well-run/effective Board of Directors (BOD) that includes one-third consumers, one-third family members, and one-third community housing experts?

3. Can the use of a community land trust model for supportive affordable housing targeted to the SMI population have an effect on the rates of closure on various supportive housing models (i.e. respites) in Alameda County?

4. Can the community land trust model provide an opportunity to build personal wealth, balanced with community wealth using the private sector for public good?

b) How do your learning goals relate to the key elements/approaches that are new, changed or adapted in your project?

The proposed learning goals match the intentions of the proposed community land trust innovation model.

Overall, Alameda is wanting to test the hypothesis that the traditional land trust model can be introduced into the behavioral health environment for the benefit of individuals with a severe mental illness and their family members.

By utilizing MHSA Innovation funds as “seed” funding to set up the proposed land trust we envision a sustainable entity, with equitable stakeholder representation, that in the long run utilizes non Innovation funds to create supported housing units. The stability from the supportive housing environment will ultimately increase access to mental health services and promote wellness and recovery.

5) Evaluation or Learning Plan
Specifically, please identify how each goal will be measured and the proposed data you intend on using.

- Can a community land trust model, targeting the SMI population, facilitate a successful, financing model that results in adequate resources to sustain operation of a community land trust?

<table>
<thead>
<tr>
<th>Data to collect</th>
<th>Data collection method</th>
</tr>
</thead>
<tbody>
<tr>
<td>What funding types can this model attract and secure? (funding from foundations, healthcare, local/state revenue, MHSA, reinvestment of rental income, etc.)</td>
<td>The land trust records including, but not limited to, grant proposal, contracts, rental, agreements, and loan documents. The Project Coordinator will also track length of time and effort it takes to secure funds.</td>
</tr>
<tr>
<td>Operating and Expense analysis</td>
<td>Comparison and research of operating/expense costs between different fiscal models. Various fiscal models that are developed</td>
</tr>
</tbody>
</table>

- Can Alameda County within two years of using a community land trust model create an equitable representation on a well-run/effective Board of Directors (BOD) that includes one-third consumers, one-third family members, and one-third community housing experts?
### Data to collect

<table>
<thead>
<tr>
<th>Current assessment of board and care facilities in Alameda County:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• # of facilities</td>
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<tr>
<td>• Provider satisfaction with being a board and care operator</td>
</tr>
<tr>
<td>• Training/resource needs of board and care operators</td>
</tr>
<tr>
<td>• Other items the evaluation team will define</td>
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<table>
<thead>
<tr>
<th>Follow-up assessment of board and care facilities once the land trust model is up and running:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• # of facilities</td>
</tr>
<tr>
<td>• Provider satisfaction with being a board and care operator</td>
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<tr>
<td>• Training/resource needs of board and care operators</td>
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### Data collection method

<table>
<thead>
<tr>
<th>• The assistant to the BOD will collect membership rosters, sign-in sheets, meeting minutes, etc.</th>
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<tbody>
<tr>
<td>• Annual surveys, focus groups and/or key informant interviews with BOD members.</td>
</tr>
<tr>
<td>• Application documents, decision-making documents, meeting minutes, and bylaws.</td>
</tr>
</tbody>
</table>

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- Can the use of a community land trust model for supportive affordable housing targeted to SMI population have an effect on board and care closure rates in Alameda County.
- Can the community land trust model provide an opportunity to build personal wealth, balanced with community wealth using the private sector for public good?

<table>
<thead>
<tr>
<th>Data to collect</th>
<th>Data collection method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the financing model developed enable family/clients to purchase units, this will include:</td>
<td>• Consumer/family response to guidelines and process established. Survey of BHCS consumers/family members after the guidelines are drafted.</td>
</tr>
<tr>
<td>• Financing and legal structure for family ownership of housing for adult relatives.</td>
<td>• Gathering copies of written materials outlining proposed ownership method and associated legal issues.</td>
</tr>
<tr>
<td>• What investments from family members have been made in specific land trust projects?</td>
<td>• Copies of records of family investments in specific housing projects.</td>
</tr>
<tr>
<td>For clients who become stably housed as a result of the community land trust model:</td>
<td>• SSI and income before and after being housed in a supportive housing unit facilitated through the community land trust</td>
</tr>
<tr>
<td>• Percent who have employment income</td>
<td>• Comparison of acute services used before and 1-year after. Data will be obtained through the County Medi-Cal billing system or current EHR.</td>
</tr>
<tr>
<td>• Percent of consumer’s usage of acute mental health services after 1-year</td>
<td>• Comparison of consumers’ having health insurance before and 1-year after. Data will be collected through interviews and/or County Medi-Cal billing system or current EHR.</td>
</tr>
<tr>
<td>• Percent of consumers who have obtained health insurance after 1-year.</td>
<td></td>
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</table>

Data collection, evaluation and reporting for this project will be in alignment with the current Innovation Regulations. This includes collecting indicated demographic data, tracking changes made to the project in the course of implementation, and providing annual and final reports covering all required elements.

Evaluation of this project will be contracted out. The evaluators will assist in finalizing the evaluation plan, developing the appropriate tools, gathering and analyzing the data, and vetting the evaluation plan and tools with appropriate stakeholders. They will document factors that might affect the outcomes and will attempt to increase the validity of the results.

III. Additional Information for Regulatory Requirements

1) Contracting

The implementation of this project will be led by the BHCS Housing Services Office Director. He will supervise a project manager hired to oversee and implement this project. After receiving approval from the Mental Health Services Oversight and Accountability Commission (MHSOAC) for the project, BHCS will conduct a Request for Proposal (RFP) process seeking an existing affordable housing developer and mental health service provider with an interest and commitment to creating a Supportive Housing
Community Land Alliance. A review panel inclusive of family members, consumers, housing finance experts, service providers, and County staff will select the nonprofit partner(s) to help implement this proposed Innovation project.

2) **Community Program Planning/Public Comment**

The Community Planning Process (CPP) for the MHSA Three Year Plan was conducted from June – October 2017. During that process BHCS staff provided updates and information on current MHSA programs and community members provided input on mental health needs and services.

There were three modes for providing input:

- Five large community forums (one in each Supervisorial District);
- Eighteen focus groups were conducted throughout Alameda County: Chinese speaking family members, African American family members, providers for refugees, providers for LGBTQ community, transitional age youth (2), Afghan immigrants, older adults, API and refugee providers and advocates, providers for individuals with developmental disabilities and mental illness, and Pool of Consumer Champions (BHCS’s mental health consumer group);
- Community Input Surveys in all threshold languages: submitted by 550 unique individuals. Respondents were very diverse in age, race, and ethnicity. Fifty percent of respondents were from Oakland, while they make up only 30% of Alameda’s population. Survey respondents included: Mental health consumers (25%), family members (17%), community members (15%), education agency (2%), community mental health providers (14%), homeless/housing services (6%), County Behavioral Health staff (1%), faith-based organization (2%), substance abuse services provider (<1%), hospital/provider care (4%), law enforcement (1%), NAMI (1%), Veteran/Veteran services (1%), other community (Non-MH) service provider (5%), other/decline to state (9%).

*Throughout the CPP housing and homelessness was a key theme:*

- 72% of community respondents ranked homelessness as the number one issue for adult and older adults;
- 70% ranked homelessness as the number three issue for children/youth/transitional age youth, and
- 63% ranked “persons experiencing homeless” the top underserved population.

Moreover, when community members were asked open-ended questions about potential new Innovation project ideas they’d like to see planned and implemented 21% of respondents mentioned multiple areas around housing including: creating a land trust, purchasing property for more supportive housing, creating more board and cares, supporting and “cleaning up” existing board and care facilities, etc.

Other innovative project areas included new mobile crisis services, school-based services for children, more peer support programs, substance use (cannabis) education and culturally responsive programing;
of which several of these topic areas have already been incorporated into other Innovation projects.

Details of the CPP are provided in the Alameda County MHSA Three Year Plan (www.ACMHSA.org under Resources/MHSA Plans).

Based on the data from the CPP and public comment/input from the Alameda County MHSA Stakeholder Committee, the BHCS Housing Department submitted a proposal framework to the BHCS Department. The proposed project was vetted by County BHCS MHSA staff based on whether it addressed community priorities, as well as other factors such as MHSA Innovation criteria. This project was approved for planning in late 2017 and was presented to the Alameda County MHSA Stakeholder Committee at their December 2017 meeting for initial input. From there, BHCS staff worked on the proposal internally with additional input from BHCS housing staff, MHSOAC staff, and the Alameda County Social Services Agency, which may become a collaborative partner for this project once approved.

Public comment

The following comments were received during Alameda’s 30 day Public Comment period for its FY 18/19 MHSA Plan Update

<table>
<thead>
<tr>
<th>Name</th>
<th>Email Address</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morgan Kanninen</td>
<td><a href="mailto:morgan.kanninen@gmail.com">morgan.kanninen@gmail.com</a></td>
<td>I recently skimmed the Alameda County Health Plan update, and while I did not do it justice, I was pleased by the inclusion of an affordable, supportive housing community land trust (page 303). Thank you for the comment. As the Land Trust proposal moves forward we will keep people updated through our MHSA website at <a href="http://www.acMHSA.org">www.acMHSA.org</a> We’ll also keep your email and send out notices on the movement of the Land Trust.</td>
</tr>
<tr>
<td>Amber Straus</td>
<td><a href="mailto:astraus@ccsf.edu">astraus@ccsf.edu</a></td>
<td>I am a long-time Oakland resident who has witnessed the devastating impact that homelessness has had on many of our community members. My Sister also lives in Oakland and has a disabling mental health condition -- luckily she has low-rent in a shared house. I often think about what could happen to her if her landlord were to sell her home or if she were to be displaced because the dilapidated house becomes wholly unsafe to live in. For the above personal reasons and because it makes good sense to invest in housing infrastructure, I strongly support the proposed Alameda County Behavioral Health Care Services (BHCS) Plan for Alameda County Supportive Housing Community Land Alliance. Implementation will bring agencies together with community collaborators and affordable housing developers to create a community land trust focused on preserving and creating supportive housing units to keep people with mental health condition housed in safe and stable conditions. &quot;Using a nonprofit structure to preserve the use of land and associated structures for sustaining supportive housing units for people with histories of serious mental illness,&quot; is a humane approach to caring for our vulnerable community members in our expensive county. I strongly urge you to move this vital plan forward.</td>
</tr>
</tbody>
</table>
Thank you for the comment. As the Land Trust proposal moves forward we will keep people updated through our MHSA website at www.acMHSA.org. We’ll also keep your email and send out notices on the movement of the Land Trust.

### Alan Dones
alandones@aol.com
Alan E. Dones, Managing Partner of Strategic Urban Development Alliance, LLC
(510) 206-7203 Cell & Message
(510) 482-7020 Office
(510) 985-1544 Home-Office
alan@sudallc.com
www.sudallc.com

This email is to provide my strong expression of support and appreciation of establishing a Community Land Trust as described on page 303 of the MENTAL HEALTH SERVICES ACT ALAMEDA COUNTY FY 2018 - 2019 ANNUAL PLAN UPDATE.

The land trust idea is one of several remedies that are critically needed to more effectively address the growing crisis of providing adequate/affordable housing, and supportive services, solutions for at-risk populations in the East Bay region.

Thank you for the comment. As the Land Trust proposal moves forward we will keep people updated through our MHSA website at www.acMHSA.org. We’ll also keep your email and send out notices on the movement of the Land Trust.

### Alison Monroe
510-575-5926
amonroe@jps.net
Email/Public Hearing Comment Card

Here are a few reactions to the document:
I am greatly in favor of the Land Trust innovation proposal. I appreciate that the discussion of that proposal acknowledges that 500 “room and board” beds and perhaps 1600 “board and care” beds have been LOST in this county over three years. Together with the LOSSES in acute and subacute hospital beds, the situation for our children is getting worse every year.

Thank you for the comment. As the Land Trust proposal moves forward we will keep people updated through our MHSA website at www.acMHSA.org. We’ll also keep your email and send out notices on the movement of the Land Trust.

### Julia Eagan MHSA Stakeholder Committee member

1. What are the strengths of the program(s)?

   Reserving space for low income individuals who need housing. Quite a crisis in Alameda County these days (and bay area in general). Affordable realistic housing is necessary.

2. What are challenges of the program(s)?

   Sustainability given the expense to build and operate buildings on the property. This project may take many years, which does not impact the current crisis.

   ACBH agrees that this project is a long term investment that won’t immediately effect the housing crisis, but we hope that if approved and implemented it will create long term housing resources for clients with SMI and their family members. In the short term ACBH has invested an additional $13 million dollars in housing and homelessness which include additional Full Service Partnership slots coupled with housing subsidies, staffing to better coordinate county outreach efforts, increased board and care rates, additional respite beds, and an increase in the Supplemental Security Income (SSI) subsidy rate for clients on general Assistance awaiting their SSI approval.
3) **MHSA General Standards**

a) Community Collaboration: This project includes clients, family members, and other stakeholders in the process of developing a community land trust and the governance structure of the community land trust.

b) Cultural Competency: This project will serve the diverse BHCS client population. While the model will include an option to purchase a housing unit, it’s not necessary, so finances are not a barrier to who can be served. The supportive services provided will be governed by the same requirements all BHCS services are in terms of ensuring cultural competence of staff, reducing disparities in access, and cultural appropriateness of housing units and services.

c) Client-Driven: Clients will be included in the collaborative process of developing and the governance structure of the community land trust. This includes participating in developing policies, procedures, and the evaluation.

d) Family-Driven: Families will be included in the collaborative process of developing and the governance structure of the community land trust. This includes participating in developing policies, procedures, and the evaluation.

e) Wellness, Recovery, and Resilience-Focused: Supportive housing aims to house people in the least restrictive environment with the maximum amount of self-determination and self-responsibility. In addition, the community land trust model supports client empowerment through participation in the governance structure.

f) Integrated Service Experience for Clients and Families: Supportive housing aims to provide services “at-home” to increase access to services, as well as housing stability.

4) **Cultural Competence and Stakeholder Involvement in Evaluation**

a) *Explain how you plan to ensure that the Project evaluation is culturally competent.*

The evaluation of this project will aim to be culturally competent by including family members and consumers in the initial design and implementation of the project evaluation. This project intends to utilize a community-based participatory research approach that serves as a vehicle for ongoing improvement of the model and its effectiveness. The evaluation plan and tools will be discussed with BHCS’ Cultural Responsiveness Committee.

b) *Explain how you plan to ensure meaningful stakeholder participation in the evaluation.*

Clients and family members will be part of the collaboration to develop the community land trust, including the development of the RFP process, evaluation of RFP proposals, seats on the CLA Advisory Committee as well as the governance structure of the community land trust. These bodies will participate in developing the evaluation, assisting to implement any tools such as satisfaction surveys, as well as analyzing and presenting the results.
5) **Innovation Project Sustainability and Continuity of Care**

   a) **Will individuals with serious mental illness receive services from the proposed project?**

If the pilot project proves successful, BHCS will support the continuation of the project or components of the project based on a number of internal and external factors and processes including: 1) the evaluation results from the project, 2) recommendations from the MHSA Stakeholder Committee and 3) available funding. Ideally this project will result in a financial model that will allow for the sustainment of the operation of the Community Land Alliance as well as funding for future purchase and maintenance of properties.

As stated in 2) *The Project Proposal, pages 5-9*, further funding will be sought for sustainability of the project through other funding sources. There is also continuing negotiations with several consumer family members, and private donors, interested in either donating property or purchasing housing through a community land trust if the pilot proves successful.

In addition to other funding sources BHCS will utilize the first several years of funding to develop and learn about various fiscal modeling tools to sustain the operation of the organization and to learn how to re-invest funding for future properties and land opportunities, these models include:

- Affordable Pricing and Resale Formula Design or Review
- Shared Equity Business Planning
- Fee and Revenue Analysis
- Shared Equity Program Adoption Analysis
- Integrating Lasting Affordability into Policies and Investments
- Market Research and Financial Feasibility Analysis
- Revenue Generation and Housing Trust Funds
- Co-Op/Shared Housing Programmatic and Fiscal Models
- Affordable Housing Preservation Strategies

6) **Communication and Dissemination Plan**

   a) **How do you plan to disseminate information to stakeholders within your County and (if applicable) to other counties?**

The Project Coordinator will be responsible for developing updates and coordinating dissemination plans. Updates on the project will be provided to stakeholders on an ongoing basis via email and presentations at existing meetings. The CLA Advisory Committee will be responsible for disseminating updates and results to their agencies, other stakeholders, and other counties. The final evaluation report for this project will be shared widely by posting it on the BHCS website and announcements via email to stakeholders, including to mental health directors, mental health housing offices, supportive housing agencies, and MHSA coordinators throughout the state. In addition, presentations will be made by Advisory Committee members to the MHSA Stakeholder Group, the Alameda County Mental Health Board, the Cultural Responsiveness Committee, other consumer groups, NAMI, the Board of Supervisors, and affordable housing development stakeholder groups and conferences.
b) How will program participants or other stakeholders be involved in communication efforts?

The Advisory Committee members will share updates with their agencies and stakeholders, as well as participate in providing presentations to the organizations listed above. The project coordinator will be responsible for website postings, email announcements, and coordinating communication plans.

c) KEYWORDS for search:

Key words that were used in research for this innovation project were: supportive housing, Community Land Alliance, community land trust, housing crisis, mental health supportive housing, and mental health community land trust.

7) Timeline

a) Specify the expected start date and end date of your INN Project:
   Start: July 2019   End: June 30, 2024

b) Specify the total timeframe (duration) of the INN Project? 5 years

c) Include a project timeline that specifies key activities, milestones and deliverables – by quarter.

<table>
<thead>
<tr>
<th>Timeline</th>
<th>Activities/Milestones</th>
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<tbody>
<tr>
<td>July 2019</td>
<td>Preparation and release of RFP</td>
</tr>
<tr>
<td>September 2019</td>
<td>Selection of nonprofit partner(s) for land trust implementation</td>
</tr>
<tr>
<td>December 2019 – June 2020</td>
<td>Development and creation of Supportive Housing Alliance organization – recruitment of board members, finalize by-laws and governance charter, complete articles of incorporation and new legal entity, identify and hire executive director.</td>
</tr>
<tr>
<td>June 2020 – January 2021</td>
<td>Secure and establish work space for organization, establish nonprofit operational infrastructure, hire key leadership positions, develop supportive housing property management policies and procedures for differing housing models, develop workforce development and training plan, start financial modeling for first two housing projects. Secure MHSA one-time CFTN funding for first two housing projects.</td>
</tr>
<tr>
<td>November 2020 – January 2021</td>
<td>Develop master leasing and housing subsidy management policies and procedures, hire and train key staff to operationalize property and subsidy management plans, begin transition of property and subsidy management approach from existing entities to this new entity.</td>
</tr>
<tr>
<td>February – July 2021</td>
<td>Initiate master leasing and housing subsidy arrangements with existing private owners. Identify properties and land for potential acquisition. Establish third-party property management activities in at least two properties. Develop business plan for condominium home ownership and cross-subsidization with at least one supportive housing unit on the property. Develop business plan for licensed board and care. Develop business plan for shared independent living/cooperative housing.</td>
</tr>
<tr>
<td>August - October 2022</td>
<td>Secure additional financing necessary for acquisition and rehabilitation of property. Acquire first land trust property using separate funding because innovation funds cannot be used under CCR§ 3910.010(b)(1).</td>
</tr>
<tr>
<td>----------------------</td>
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</tr>
<tr>
<td>November – July 2022</td>
<td>Renovate and prepare first land trust property for occupancy utilizing model(s) developed by organization.</td>
</tr>
<tr>
<td>August – December 2022&lt;sup&gt;7&lt;/sup&gt;</td>
<td>Selection and move-in of residents/owners to first land trust property; implementation of supportive housing model for property.</td>
</tr>
<tr>
<td>January – September 2023</td>
<td>Renovate and prepare second land trust property for occupancy utilizing model(s) developed by organization.</td>
</tr>
<tr>
<td>October – December 2023</td>
<td>Move-in of residents/owners to second land trust property; implementation of supportive housing model for property.</td>
</tr>
<tr>
<td>January 2024 – March 2024</td>
<td>Acquisition and rehabilitation of new properties for land trust; expand and test models; continue supportive housing property and subsidy management with staged expansions over time</td>
</tr>
<tr>
<td>April – June 2024</td>
<td>Completion of final evaluation report on land trust model; dissemination of findings to key stakeholders</td>
</tr>
</tbody>
</table>

### IV. INN Project Budget and Source of Expenditures

#### 1) INN Project Budget and Source of Expenditures

This INN Plan will utilize any remaining AB114 funds that were deemed reverted and returned to the County for use until June 30, 2020. These funds will include funding from FY 10/11 funds as well as non-AB114 funds from FYs 17/18 and FY 18/19.

#### 2) Budget Narrative

**Salaries**

**FY 19/20:**

Alameda County Staff Salary and Benefits (benefits are calculated at 50%)

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<sup>7</sup>The County’s research has shown that, minimally, it can take up to two to three years for the non-profit entity formed with all necessary legal requirements approved, along with the property in place before being able to have the first move in.
Innovation Coordinator: .25 FTE ($96,616 + 48,308-benefits) x .25 FTE= $36,231 (Program Specialist classification). This staff will provide MHSA technical assistance and support so that the project is set up correctly and Innovation Regulations are followed.

BHCS Procurement Staff: 4 months at .33 FTE ($105,040 + $52,520-benefits) x .33 = $51,995/12= $4,333/mo x 4 mo= $17,332 (Supervising Program Specialist classification). This staff will work with the BHCS Project Manager to develop and release the Request for Proposal (RFP) and submit the results to the Board of Supervisors.

BHCS Project Manager from the BHCS Housing Department: 1.0 FTE ($99,403 + 49,702-benefits) = $149,105 (Senior Program Specialist classification) This staff will oversee the implementation of the Innovation project, such as developing agency and community support and linkages, developing the initial RFP model (in collaboration with the procurement staff) for project launch, ensuring the project achieves its intended innovation objectives, and coordinating the project evaluation and reporting to stakeholders.

Community Land Alliance Staff and Benefits (benefits are calculated at 35%)

Executive Director: 1 FTE ($144,200 + $50,470) = $194,670 This position will provide primary oversight of the Community Land Alliance, consultants, and staff; development of a community land trust Board of Directors and By-Laws, financing models, family investment model, and sustainability model; cultivating housing projects.

Director of Property Management: 1 FTE (95,000 + 32,250 ) = $128,250 This position will develop and integrate supportive housing property management policies and practices, existing best practices and the unique requirements created by the mixed funding sources, such as family/client ownership. Management of supportive housing properties requires unique approaches, workflows, and staffing. This position will also require a real estate license, as per California law, in order to provide property management and supervise property staff.

Workforce Dev/Training Director: 1 FTE ($103,000 + $36,050) = $139,050 This position will focus on ensuring staff involved with specific supportive housing projects have the supports and tools necessary to maximize the success of housing projects. Successful supportive housing projects require that staff members involved in specific projects clearly understand their role and responsibilities, have the supervision and support necessary to fulfill their roles, and have training, feedback, and skill development opportunities that enhance their work performance and job satisfaction.

Administrative Assistant: 1 FTE ($60,000 + $21,000) = $81,000 This position will perform a variety of administrative and clerical tasks. Duties of the Administrative Assistant include providing support to the Executive Director and other Community Land Alliance staff, assisting in daily office needs and managing the agency’s general administrative activities.

Total FY 19/20: All Salaries and Benefits= $745,638
FY 20/21:
Includes 3% COLA for ALL personnel listed below

**Alameda County Staff Salary and Benefits (benefits are calculated at 50%)**
BHCS Project Manager from the BHCS Housing Department: $153,578

**Community Land Alliance Staff and Benefits (benefits are calculated at 35%)**
Executive Director: $200,510
Director of Property Management: $132,098
Workforce Dev/Training Manager: $143,222
Administrative Assistant: $83,430

Total FY 20/21: All Salaries= $712,837

FY 21/22
Includes 3% COLA for ALL personnel listed below

**Alameda County Staff Salary and Benefits (benefits are calculated at 50%)**
BHCS Project Manager from the BHCS Housing Department: $158,186

**Community Land Alliance Staff and Benefits (benefits are calculated at 35%)**
Executive Director: $206,525
Director of Property Management: $136,061
Workforce Dev/Training Manager: $147,518
Administrative Assistant: $85,933

Total FY 21/22: All Salaries= $734,222

FY 22/23
Includes 3% COLA for ALL personnel listed below

**Alameda County Staff Salary and Benefits (benefits are calculated at 50%)**
BHCS Project Manager from the BHCS Housing Department: $162,931

**Community Land Alliance Staff and Benefits (benefits are calculated at 35%)**
Executive Director: $212,721
Director of Property Management: $140,142
Workforce Dev/Training Manager: $151,944
Administrative Assistant: $85,511
Total FY 21/22: All Salaries= $756,249

FY 23/24
Includes 3% COLA for ALL personnel listed below

**Alameda County Staff Salary and Benefits (benefits are calculated at 50%)**
BHCS Project Manager from the BHCS Housing Department: $167,819
Community Land Alliance Staff and Benefits (benefits are calculated at 35%)

Executive Director: $219,103
Director of Property Management: $144,347
Workforce Dev/Training Manager: $156,502
Administrative Assistant: $91,166

Total FY 21/22: All Salaries = $778,937

Total Salaries and Benefits FY 19/20-23/24: $3,727,883
Total Indirect Costs (15%) FY 19/20-23/24: $559,182

TOTAL Personnel Costs: $4,287,066

Operating Costs

The operating costs of the Community Land Alliance are based on the standard County budgeting process where the total personnel costs are multiplied by 30% to closely estimate the operating costs of a new program. Once the project is up and running the operating costs may be adjusted, but funds will not exceed the budgeted request that the MHSOAC approves. Operational costs will include, but not limited to: rent, utilities, communications/phone service, technology maintenance, maintenance services, audit services, furniture, insurance, travel and transportation/mileage, training services, accounting/payroll.

FY 19/20: Total CBO personnel costs = $692,075 x 30% = $162,891
FY 20/21: Total CBO personnel costs = $712,837 x 30% = $167,778
FY 21/22: Total CBO personnel costs = $734,222 x 30% = $172,811
FY 22/23: Total CBO personnel costs = $756,249 x 30% = $177,995
FY 23/24: Total CBO personnel costs = $778,936 x 30% = $183,335

TOTAL Operating Costs (including 15% indirect costs): $994,532

Non Re-occurring Costs

FY 19/20: Incorporation and legal fees $10,000

FY 19/20 start-up costs: $75,000 This will include, but not limited to, furniture, computers, printers, cell phones, signage, first/last month’s rent, internet/phone set up, photocopier, printed materials (business cards, agency brochure, etc.) initial software licenses, etc.

TOTAL Non Re-occurring Costs: $85,000

Consultants/Contractors

This project will entail contracting for various areas of expertise including: legal counsel, evaluation services, land trust consultants (including the Burlington Land Trust Association), real estate consultant, Restorative Economics consultant to assist with project management and strategic guidance for community-owned and community governed projects that are exploring new economic models-including sustainability of the land trust entity, expertise to develop multiple
agreements/templates such as ground lease, condominium ownership, master lease agreements, rent to own agreements, etc.

Consultation costs (excluding the evaluation) will initially be budgeted at the following amounts:

FY 19/20: $175,000
FY 20/21: $150,000
FY 21/22: $150,000
FY 22/23: $125,000
FY 23/24: $100,000

It should be noted that once the project starts the consultant costs may be adjusted, but funds will not exceed the budgeted request that the MHSOAC approves.

The evaluation costs will be budgeted at $45,000/yr x 5 years=$225,000

**TOTAL Contractor/Consultant Costs**
(including 15% indirect costs): $805,000

**Indirect Costs**

As a standard practice Alameda County BHCS requests 15% for county administration of the project. This 15% rate has also been applied to the land Trust Alliance CBO that will be created-this percent for the CBO is in alignment and within the approved CBO limit for indirect costs. This 15% applies to Personnel, Operating and Contract expenditures to provide Human Resources, Accounting, Budgeting, Information Technology, Business Services Office, and Legal management of staff and contract positions; rent, utilities, insurance; and other expenses necessary to administer and implement the project.

**TOTAL Indirect Costs across all Budget Categories: $793,904**

**Expend by Fund Source – Narrative**

**Administration**

70% of Innovation Coordinator time= $25,362
70% of BHCS Project Manager time= $554,113
80% of Administrative Assistant time= $344,032
Indirect expenses (as stated above) = $793,904

Total = $1,717,431

**Evaluation**

30% of Innovation Coordinator time= $7,609
30% of BHCS Project Manager time= $237,486
30% of Administrative Assistant time= $86,008
Evaluator: $45,000/yr x 5 years=$225,000

Total = $556,102
### B. New Innovative Project Budget By FISCAL YEAR (FY)*

#### EXPENDITURES

<table>
<thead>
<tr>
<th></th>
<th>FY 19-20</th>
<th>FY 20-21</th>
<th>FY 21-22</th>
<th>FY 22-23</th>
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</tr>
<tr>
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<td></td>
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<td>$0</td>
</tr>
<tr>
<td>16 Total Other expenditures</td>
<td>$0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$0</td>
</tr>
<tr>
<td><strong>BUDGET TOTALS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personnel (line 1)</td>
<td>$745,638</td>
<td>$712,837</td>
<td>$734,222</td>
<td>$756,249</td>
<td>$778,937</td>
<td>$3,727,883</td>
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<tr>
<td>Direct Costs (add lines 2, 5 and 11 from above)</td>
<td>$337,891</td>
<td>$317,778</td>
<td>$322,811</td>
<td>$302,995</td>
<td>$283,335</td>
<td>$1,564,810</td>
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<tr>
<td>Indirect Costs (add lines 3, 6 and 12 from above)</td>
<td>$162,529</td>
<td>$154,592</td>
<td>$158,555</td>
<td>$158,887</td>
<td>$159,341</td>
<td>$793,904</td>
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<tr>
<td>Non-recurring costs (line 10)</td>
<td>$85,000</td>
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<td>$85,000</td>
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<tr>
<td>Other Expenditures (line 16)</td>
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<td></td>
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<td>$0</td>
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<tr>
<td>TOTAL INNOVATION BUDGET</td>
<td>$1,331,058</td>
<td>$1,185,207</td>
<td>$1,215,588</td>
<td>$1,218,131</td>
<td>$1,221,613</td>
<td>$6,171,599</td>
</tr>
</tbody>
</table>

### CONSULTANT COSTS/CONTRACTS

- (clinical, training, facilitator, evaluation)

### OTHER EXPENDITURES

- (please explain in budget narrative)

### BUDGET TOTALS
### C. Expenditures By Funding Source and FISCAL YEAR (FY)

#### Administration:

<table>
<thead>
<tr>
<th>FY 19-20</th>
<th>FY 20-21</th>
<th>FY 21-22</th>
<th>FY 22-23</th>
<th>FY 23-24</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Innovative MHSA Funds</td>
<td>$357,065</td>
<td>$328,841</td>
<td>$338,031</td>
<td>$343,747</td>
<td>$349,747</td>
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<tr>
<td>Federal Financial Participation</td>
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<td></td>
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</tr>
<tr>
<td>1991 Realignment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$-</td>
</tr>
<tr>
<td>Behavioral Health Subaccount</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$-</td>
</tr>
<tr>
<td>Other funding*</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>6 Total Proposed Administration</strong></td>
<td>$357,065</td>
<td>$328,841</td>
<td>$338,031</td>
<td>$343,747</td>
<td>$349,747</td>
</tr>
</tbody>
</table>

#### Evaluation:

<table>
<thead>
<tr>
<th>FY 19-20</th>
<th>FY 20-21</th>
<th>FY 21-22</th>
<th>FY 22-23</th>
<th>FY 23-24</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Innovative MHSA Funds</td>
<td>$113,540</td>
<td>$107,759</td>
<td>$109,642</td>
<td>$111,581</td>
<td>$113,579</td>
</tr>
<tr>
<td>Federal Financial Participation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$-</td>
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<tr>
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<td></td>
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<tr>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>6 Total Proposed Evaluation</strong></td>
<td>$113,540</td>
<td>$107,759</td>
<td>$109,642</td>
<td>$111,581</td>
<td>$113,579</td>
</tr>
</tbody>
</table>

#### TOTAL:

<table>
<thead>
<tr>
<th>FY 19-20</th>
<th>FY 20-21</th>
<th>FY 21-22</th>
<th>FY 22-23</th>
<th>FY 23-24</th>
<th>Total</th>
</tr>
</thead>
<tbody>
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<tr>
<td>Other funding*</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td><strong>6 Total Proposed Expenditures</strong></td>
<td>$1,331,058</td>
<td>$1,185,207</td>
<td>$1,215,588</td>
<td>$1,218,131</td>
<td>$1,221,613</td>
</tr>
</tbody>
</table>

*If "Other funding" is included, please explain.