



Lee County
Southwest Florida

LEE COUNTY BOARD OF COUNTY COMMISSIONERS
HUMAN AND VETERAN SERVICES

American Rescue Plan Act

Sub-recipient Agreement

with

Community Assisted and Supported Living, Inc.

January 1, 2022 – December 31, 2024

FEDERALLY-FUNDED SUBAWARD AND FUNDING ASSISTANCE AGREEMENT

The following information is provided pursuant to 2 C.F.R. §200.331(a)(1):

Name of sub-recipient: **Community Assisted and Supported Living, Inc.**

SAM Organization Identifier: **HMBJWPX9JKA1**

DUNS #: **940621519**

ARPA Unique Identification Number: **ARPA-DC311B3**

Federal Award Identification Number: **SLT-2390**

Federal Award Date: **June 14, 2021 (first payment/tranche received)**

Subaward Period of Performance: Start Date: **January 1, 2022**

Subaward Period of Performance: End Date: **December 31, 2024**

Total Amount Obligated by this Action: **\$357,645.66**

Total Federal Obligation by Lee County to Sub-recipient: (including this obligation)
\$357,645.66

Total Federal Award Commitments by Lee County to Sub-recipient: **\$357,645.66**

Award is R&D: **NO**

Program Description: On March 11, 2021, the American Rescue Plan Act (ARPA) was signed into law by the President. Section 9901 of ARPA amended Title VI of the Social Security Act (the Act) to add section 602, which establishes the Coronavirus State Fiscal Recovery Fund, and section 603, which establishes the Coronavirus Local Fiscal Recovery Fund (together, the Fiscal Recovery Funds). The Fiscal Recovery Funds are intended to provide support to state, local, and tribal governments (together, recipients) in responding to the impact of COVID-19 and in their efforts to contain COVID-19 on their communities, residents, and businesses. The Fiscal Recovery Funds build on and expand the support provided to these governments over the last year, including through the Coronavirus Relief Fund (C.R.F.).

The American Rescue Plan will deliver \$350 billion for state, local, territorial, and tribal governments to respond to the COVID-19 emergency and restore jobs. The Coronavirus State and Local Fiscal Recovery Funds provide a substantial infusion of resources to help turn the tide on the pandemic, address its economic fallout, and lay the foundation for a strong and equitable recovery. Recipients may use Coronavirus State and Local Fiscal Recovery Funds to:

- Support public health expenditures by funding COVID-19 mitigation efforts, medical expenses, behavioral healthcare, and certain public health and safety staff;
- Address negative economic impacts caused by the public health emergency, including economic harms to workers, households, small businesses, impacted industries, and the public sector;
- Replace lost public sector revenue by using this funding to provide government services to the extent of the reduction in revenue experienced due to the pandemic;

- Provide premium pay for essential workers by offering additional support to those who have borne and will bear the greatest health risks because of their service in critical infrastructure sectors; and,
- Invest in water, sewer, and broadband infrastructure by making necessary investments to improve access to clean drinking water, to support vital wastewater and stormwater infrastructure, and to expand access to broadband internet.

Federal awarding agency: **U.S. Department of Treasury**

Pass-through entity: **Lee County, FL**

CFDA number: **21.027**

CFDA name: **Coronavirus State and Local Fiscal Recovery Funds (CSLFRF)**

R&D designation: **Non R&D**

Should you have any question about this sub-award, please contact: **Glen Salyer, Assistant County Manager at 239-533-2221**

As required by Federal Regulations and the terms and conditions of this award, the applicant agrees to complete and sign this document to ensure that they are eligible for any future COVID-19 funding from Lee County. This also includes that the Sub recipient agrees to report any fraud, waste or abuse of these funds to Lee County Administration.

**SUBRECIPIENT CONTRACT BETWEEN
THE LEE BOARD OF COUNTY COMMISSIONERS
AND COMMUNITY ASSISTED AND SUPPORTED LIVING, INC.**

THIS AGREEMENT is entered into by Lee County, a charter county and political subdivision of the State of Florida, herein referred to as COUNTY and **Community Assisted and Supported Living, Inc.** whose address is **2911 Fruitville Road, Sarasota, FL 34237**, herein referred to as SUBRECIPIENT.

RECITALS

WHEREAS, Lee County is a body corporate and politic established under the Florida Constitution and the Laws of Florida, and is authorized to, among other things, accept and administer grants from State and Federal authorities to enhance the quality of life in Lee County; and

WHEREAS, Congress passed the American Rescue Plan Act (ARPA) on March 10, 2021 and President Biden signed the American Rescue Plan Act into law on March 11, 2021; and

WHEREAS, the American Rescue Plan Act, in part, amends the Social Security Act (42 U.S.C. 601) by establishing the Fund in the amount of \$350 billion dollars for payments to States, Tribal governments and units of local government based on their populations.

WHEREAS, Lee County accepted American Rescue Plan Act funding from the United States Department of the Treasury; and

WHEREAS, this Agreement is consistent with American Rescue Plan Act guidelines to respond to the public health emergency or its negative economic impacts; and

WHEREAS, the SUBRECIPIENT requests and the COUNTY agrees, to provide funding to the SUBRECIPIENT for eligible expenditures under the American Rescue Plan Act, specifically pursuant to the terms and conditions specified herein relating to COVID-19; and

NOW, THEREFORE, in consideration of the mutual covenants, promises, and representations contained in this Agreement and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the Parties agree as follows:

Section 1. Recitals

The foregoing recitals are true and correct and form a material part of this Agreement upon which the Parties relied.

Section 2. Term

This Agreement is effective on _____ and ends on December 31, 2024 unless terminated earlier in accordance with this Agreement.

The Subaward Period of Performance is from January 1, 2022 and ends on December 31, 2024.

The Subaward Budget Period is from January 1, 2022 and ends on December 31, 2024.

Section 3. American Rescue Plan Act Funding

- a) The American Rescue Plan (ARP) Act, Section 603(c)(1) of the Social Security Act, established the \$350 billion Coronavirus State and Local Fiscal Recovery Funds. The United States Department of Treasury made payments from the Fund to States and eligible units of local government. The American Rescue Plan Act requires that payments from the Coronavirus State and Local Fiscal Recovery Fund (CSLFRF) only be used to cover expenses that: (a) To respond to the public health emergency or its negative economic impacts, including assistance to households, small businesses, and nonprofits, or aid to impacted industries such as tourism, travel, and hospitality; (b) To respond to workers performing essential work during the COVID-19 public health emergency by providing premium pay to eligible workers; (c) For the provision of government services to the extent of the reduction in revenue due to the COVID-19 public health emergency relative to revenues collected in the most recent full fiscal year prior to the emergency; and (d) To make necessary investments in water, sewer, or broadband infrastructure.
- b) For the purposes this Agreement, the COUNTY serves as the pass-through entity for a Federal award and the SUBRECIPIENT serves as the recipient of a sub award. This Agreement is entered into based on the following representations:
1. The SUBRECIPIENT represents that it is fully qualified and eligible to receive these grant funds per the funding requirements.
 2. The COUNTY received these funds from the Federal government, and the COUNTY has the authority to sub grant these funds to the SUBRECIPIENT upon the terms and conditions outlined below.
 3. The COUNTY has authority to disburse the funds under this Agreement.

The COUNTY agrees to provide financial assistance to the SUBRECIPIENT in an amount not-to-exceed **\$357,645.66**. The SUBRECIPIENT must use this financial assistance for expenses eligible under 603(c)(1) of the Social Security Act, specifically the Coronavirus State and Local Fiscal Recovery Fund (CSLFRF) to mitigate financial hardships incurred because of COVID-19 during the Term. These funds must be spent in accordance with the guidance on the United States Treasury's website <https://home.treasury.gov/policy-issues/coronavirus/assistance-for-state-local-and-tribal-governments/state-and-local-fiscal-recovery-funds>. SUBRECIPIENTS are responsible for ensuring that any procurement using CSLFRF funds, or payments under procurement contracts using such funds are consistent with the procurement standards set forth in the Uniform Guidance at 2 CFR 200.317 through 2 CFR 200.327, and Appendix II to Part 200, as applicable.

- c) SUBRECIPIENT is required to review the United States Treasury's website for updates to ensure compliance with the most updated CSLFRF guidance.
- d) For each SUBRECIPIENT, the COUNTY will assess the risk to successfully fulfilling the project objective pertaining to this agreement. The results of subrecipient risk assessments will have an effect on the frequency and level of scrutiny during the monitoring process and may result in additional requirements being imposed on the SUBRECIPIENT.

- e) The SUBRECIPIENT must comply with 2 CFR 200 for accounting standards and cost principles.
- f) The SUBRECIPIENT must comply with COUNTY rules and 2 CFR 200 for conflicts of interest.
- g) The SUBRECIPIENT shall be responsible for indirect cost associated with this grant.
- h) SUBRECIPIENT acknowledges that it has read, understands, will be bound by and agrees to have carried out, shall carry out, or cause to be carried out the terms, conditions, and services as described in the agreement attachments, including:
 - 1. ATTACHMENT A: PROJECT DETAILS – Application, Budget and Eligible activities.
 - 2. ATTACHMENT B: REPORTING REQUIREMENTS – Description of the reporting requirements. Additional United States Treasury reporting requirements may be identify and required after the execution of this agreement.
 - 3. ATTACHMENT C: EQUITY-BASED REQUIREMENT – Description of the project’s equitable design and implementation by addressing the program’s equity goals, awareness, access and distribution, and outcomes.
 - 4. ATTACHMENT D: EVIDENCE-BASED REQUIREMENT – Description of the supporting evidence or evidence-producing strategy related the project selection, design, and implementation.
 - 5. Award Payment:
 - a. All payments made under this Agreement shall be on a reimbursement basis. These reimbursement monies are from CFDA 21.027. In order to obtain reimbursement for expenditures, the SUBRECIPIENT must file with the COUNTY, through the portal, its request for reimbursement and any other information required to justify and support the payment request. Reimbursement requests may be submitted as frequently as monthly. The final reimbursement request is due on or before January 10, 2025, for costs incurred through December 31, 2024.
 - b. Reimbursement requests must include a certification, signed by an official who is authorized to legally bind the SUBRECIPIENT, which reads as follows:

By signing this request, I certify to the best of my knowledge and belief that the request is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the reimbursement. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729–3730 and 3801–3812).

- c. The COUNTY shall verify all documentation received prior to expending Funds under this Agreement and may request additional documentation, if needed. Reimbursements will only be made for expenditures that the COUNTY provisionally determines are eligible under the CSLFRF. The COUNTY retains the right to deny any requests for Funds under this Agreement if in the COUNTY'S sole discretion the request is not for and documentation does not substantiate an eligible expenditure. However, the COUNTY'S provisional determination that an expenditure is eligible does not relieve the SUBRECIPIENT of its duty to repay the COUNTY for any expenditures that are later determined by the COUNTY or the Federal government to be ineligible.
- d. COUNTY shall not be liable to any vendor, supplier or subcontractor for any expenses or liabilities incurred in connection with any Project and SUBRECIPIENT shall be solely liable for such expenses and liabilities.
- e. SUBRECIPIENT acknowledges that the COUNTY intends to award a portion of the CSLFRF funding to SUBRECIPIENT, and further acknowledges that the CSLFRF funding may be utilized only for the uses authorized by American Rescue Plan Act. Accordingly, SUBRECIPIENT covenants that the use of the CSLFRF funding by SUBRECIPIENT pursuant to this Agreement is limited to only those uses for which the CSLFRF funding may be utilized under American Rescue Plan Act.
- f. SUBRECIPIENT will retain any equipment purchased with CSLFRF funding through December 31, 2026.

Section 4. Enforcement

SUBRECIPIENT certifies that the information provided is complete, accurate, and current demonstrating SUBRECIPIENT'S eligibility to receive the Funds. SUBRECIPIENT is liable for recapture of Funds if any representation made in the reimbursement requests, reporting or supporting documentation is at any time false or misleading in any respect, or if SUBRECIPIENT is found in non-compliance with laws, rules or regulations governing the use of the Funds provided pursuant to this Agreement. The provisions of this Section 4 shall survive the termination of this Agreement.

Section 5. Recapture of Expenses

- A. Any funds that are not expended as authorized under this Agreement must be refunded to the COUNTY within fourteen (14) days of receipt of written notice provided by the COUNTY.
- B. Any funds that are not expended within the anticipated timeframe under this Agreement are subject to recapture. If requested, a refund to the COUNTY must be made within fourteen (14) days of receipt of written notice for a refund provided by the COUNTY.
- C. The COUNTY'S determination that an expenditure is eligible does not relieve the SUBRECIPIENT of its duty to repay the COUNTY in full for any expenditures that are later determined by the COUNTY or the Federal Government, in each of its sole discretion, to be ineligible expenditures or the discovery of a duplication of benefits.

- D. If requested by the COUNTY, all refunds, return of improper payments, or repayments due to the COUNTY under this Agreement are to be made payable to Lee County and mailed directly to the COUNTY pursuant to Section 18 Notice and this Agreement.
- E. The SUBRECIPIENT has responsibility for identifying and recovering grant funds that were expended in error, disallowed, or unused. The SUBRECIPIENT will also report all suspected fraud to the county.

Section 6. Maintenance and Review of Records

SUBRECIPIENT shall maintain all records and accounts, including property, personnel and financial records, contractual agreements, memoranda of understanding, subcontracts, proof of insurance, and any other records related to or resulting from the Agreement to assure a proper accounting and monitoring of all funds awarded and shall maintain all accounts pertaining to such services, including, but not limited to, property, personnel and financial records, and supporting documentation, and any additional records required as a result of or associated with the utilization of the CSLFRF funding as outlined in the United States Treasury Compliance and Reporting Guidance, State and Local Fiscal Recovery Funds, or as maybe amended, which, among other things, shall enable ready identification of SUBRECIPIENT'S cost of goods and use of funds. If any litigation, claim, negotiation, audit, monitoring, inspection or other action has been started before the expiration of the required record retention period, records must be retained until completion of the action and resolution of all issues that arise from it, or the end of the required period, whichever is later.

With respect to all matters covered by this Agreement, records will be made available for examination, audit, inspection or copying purposes at any time during normal business hours and as often as COUNTY may require. SUBRECIPIENT will permit same to be examined and excerpts or transcriptions made or duplicated from such records, and audits made of all contracts, invoices, materials, records of personnel and of employment and other data relating to all matters covered by this Agreement.

The SUBRECIPIENT must maintain records and financial documents in compliance with all standards in the ARPA CSLFRF guidance and 2 CFR 200. Generally, records and financial documents must be maintained for five years after all funds have been expended or returned. The COUNTY or Treasury may request transfer of records of long-term value at the end of such period. Wherever practicable, such records should be collected, transmitted, and stored in open and machine-readable formats.

SUBRECIPIENT must agree to provide or make available such records to the COUNTY upon request, to Treasury upon request, and to the Government Accountability Office ("GAO"), Treasury's Office of Inspector General ("OIG"), and their authorized representative in order to conduct audits or other investigations.

The COUNTY may access the SUBRECIPIENT records and financial statements as necessary to conduct monitoring activities.

Section 7. Monitoring

The SUBRECIPIENT agrees to permit persons duly authorized by the COUNTY, the Federal or State grantor agency (if applicable) or any representatives to inspect all records, papers, documents, facility's goods and services of the SUBRECIPIENT and/or interview any clients and employees of the SUBRECIPIENT to be assured of satisfactory performance of the terms and conditions of this contract to

the extent permitted by the law after giving the SUBRECIPIENT reasonable notice. The monitoring is a limited scope review of the contract and agency management and does not relieve the SUBRECIPIENT of its obligation to manage the grant in accordance with applicable rules and sound management practices.

Following such monitoring, the COUNTY will deliver to the SUBRECIPIENT a written report regarding the manner in which services are being provided. The SUBRECIPIENT will rectify all noted deficiencies within the specified period of time indicated in the monitoring report or provide the COUNTY with a reasonable and acceptable justification for not correcting the noted shortcomings. The SUBRECIPIENT'S failure to correct or justify the deficiencies within the time specified by the COUNTY may result in the withholding of payments, being deemed in breach or default, or termination of this contract.

Section 8. Audits

A. The COUNTY may perform an audit of the records of the SUBRECIPIENT at any time during the Term of this Agreement and after final disbursements have been made, even if the Agreement has expired or terminated. Audits may be performed at a time mutually agreeable to the SUBRECIPIENT and the COUNTY. When conducting an audit of the SUBRECIPIENT'S performance under this Agreement, the COUNTY must use Generally Accepted Government Auditing Standards ("GAGAS"). As defined by 2 C.F.R. §200.50, GAGAS, also known as the Yellow Book, means generally accepted government auditing standards issued by the Comptroller General of the United States, which are applicable to financial audits.

B. If an audit shows that all or any portion of the Funds disbursed were not spent in accordance with the conditions of and strict compliance with this Agreement, the SUBRECIPIENT will be held liable for reimbursement to the COUNTY of all Funds not spent in accordance with these applicable regulations and this Agreement, within fourteen (14) days after the COUNTY has notified the SUBRECIPIENT of such non-compliance.

C. If the COUNTY elects to have the SUBRECIPIENT perform an audit, the SUBRECIPIENT must have all audits completed by an independent auditor, which is defined in § 215.97(2)(i), Florida Statutes, as "an independent certified public accountant licensed under chapter 473." The independent auditor must state that the audit complied with the applicable provisions noted above. The audits must be received by the COUNTY no later than six (6) months from the end of the SUBRECIPIENT'S fiscal year.

D. The SUBRECIPIENT must send copies of reporting packages required under this paragraph directly to the COUNTY in accordance with Section 18 Notice.

E. Single Audit Requirements. SUBRECIPIENTS, that expend more than \$750,000 in Federal awards during their fiscal year will be subject to an audit under the Single Audit Act and its implementing regulation at 2 C.F.R. Part 200, Subpart F regarding audit requirements.

Section 9. Closeout

SUBRECIPIENT will comply will all closeout procedures of the awards, to include full compliance with the agreement terms and conditions, ARPA, CSLFRF rule and guidance, and 2 CFR 200. Key tasks will be closeout communications, confirmation for maintenance of records and financial documents, receipt of all final reimbursement requests or payment requests, receipt of all financial reports and performance reports, fulfillment of any requests to reconcile reports and payment requests. The retention period per

CSLFRF compliance and reporting is 5 years.

Section 10. Indemnification

SUBRECIPIENT shall indemnify, hold harmless, and defend COUNTY from and against any and all liabilities, losses, claims, damages, demands, expenses or actions, either at law or in equity, including court costs and attorneys' fees (at the trial and all appellate levels), that may hereafter at any time be made or brought by anyone on account of personal injury, property damage, loss of monies, or other loss, allegedly caused or incurred, in whole or in part, as a result of any negligent, wrongful, or intentional act or omission, or based on any act of fraud or defalcation or breach of any provision or covenant of this Agreement or applicable law by the SUBRECIPIENT, its agents, subcontractors, assigns, heirs, and employees resulting from or arising under this Agreement.

The provisions of this Section 11 shall survive the termination of this Agreement.

Section 11. Termination

This Agreement may be terminated by the SUBRECIPIENT or the COUNTY at any time, with Cause or without Cause, upon not less than thirty (30) days prior written notice delivered to the SUBRECIPIENT as provided for in this Agreement or, at the option of COUNTY, immediately in the event that SUBRECIPIENT fails to fulfill any of the terms, understandings, or covenants of this Agreement. COUNTY will not be obligated to pay for costs incurred by SUBRECIPIENT after SUBRECIPIENT has received notice of termination.

Section 12. Remedies

The COUNTY may exercise any other rights or remedies, which may be available under law. If the COUNTY waives any right or remedy in this Agreement or fails to insist on strict performance by the SUBRECIPIENT, it will not affect, extend or waive any other right or remedy of the COUNTY, or affect the later exercise of the same right or remedy by the COUNTY for any other default by the SUBRECIPIENT.

Section 13. Equal Opportunity; Non-Discrimination

SUBRECIPIENT shall comply with the requirements of all applicable federal, state and local laws, rules, regulations, ordinances and executive orders prohibiting and/or relating to discrimination, as amended and supplemented. All of the aforementioned laws, rules, regulations, and executive orders are incorporated herein by reference.

Section 14. Governing Laws; Venue

This Agreement and terms and conditions shall be governed by the laws, rules, and regulations of the State of Florida, and venue shall be in Lee County, Florida.

Section 15. Public Records Law

This Agreement, including attachments, is subject to disclosure under Florida's public records law subject to limited applicable exemptions. SUBRECIPIENT acknowledges, understands, and agrees that, except as noted below, all information in its application and attachments will be disclosed, without any notice to SUBRECIPIENT, if a public records request is made for such information, and the COUNTY will not be liable to SUBRECIPIENT for such disclosure. Social security numbers are collected, maintained and reported by the COUNTY must comply with IRS 1099 reporting requirements and are exempt from public records pursuant to Florida Statutes §119.071.

If SUBRECIPIENT believes that information in the Agreement, including attachments, contains information that is confidential and exempt from disclosure, SUBRECIPIENT must include a general description of the information and provide reference to the Florida Statute or other law which exempts such designated information from disclosure in the event a public records request is made. The COUNTY does not warrant or guarantee that information designated by SUBRECIPIENT as exempt from disclosure is in fact exempt, and if the COUNTY disagrees, it will make such disclosures in accordance with its sole determination as to the applicable law.

IF THE SUBRECIPIENT HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE SUBRECIPIENT'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THE CONTRACT, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT 239-533-2221, 2115 SECOND STREET, FORT MYERS, FL 33901, <http://www.leegov.com/publicrecords>.

Section 16. Independent Contractor

SUBRECIPIENT acknowledges that it is acting as an independent contractor and not as an agent, officer or employee of COUNTY. In no event shall any provision of this Agreement make COUNTY liable to any person or entity that contracts with or provides goods or services to SUBRECIPIENT in connection with this Agreement. There is no contractual relationship, either express or implied, between COUNTY or any political subdivision of the State of Florida and any person or entity supplying any work, labor, services, goods or materials to SUBRECIPIENT as a result of this Agreement.

Section 17. Compliance with Applicable Laws

SUBRECIPIENT shall comply with the requirements of all applicable federal, state and local laws and the rules and regulations promulgated thereunder, including, but not limited to, Florida's Public Records Act, Chapter 119, Florida Statutes and specifically including, but not limited to ARPA.

Section 18. Notice

Any notice delivered with respect to this Agreement must be in writing and will be deemed to be delivered (whether or not actually received) when (1) hand delivered to the persons designated below, or (2) when deposited in the United States Mail, postage prepaid, certified mail, return-receipt requested, addressed to the person at the address for the party as set forth below, or such other or to such other person as the Party may have specified by written notice to the other Party delivered according to this Section:

As to COUNTY:

Roger Desjarlais
County Manager
PO Box 398
Fort Myers, FL 33902

As to SUBRECIPIENT:

Community Assisted and Supportive Living, Inc.
J. Scott Eller, CEO
2911 Fruitville Road
Sarasota, FL 34237

Section 19. Risk Management

A. Hold Harmless and Indemnity Clause

To the fullest extent permitted by applicable law, SUBRECIPIENT shall protect, defend, indemnify, save and hold the COUNTY, the BoCC, its agents, officials, and employees harmless from and against any and all claims, demands, fines, loss or destruction of property, liabilities, damages, for claims based on the negligence, misconduct, or omissions of the SUBRECIPIENT resulting from the SUBRECIPIENT'S work as further described in this contract and its attachments, which may arise in favor of any person or persons resulting from the SUBRECIPIENT'S performance or non-performance of its obligations under this contract except any damages arising out of personal injury or property claims from third parties caused solely by the negligence, omission(s) or willful misconduct of the COUNTY, its officials, commissioners, employees or agents, subject to the limitations as set out in Florida general law, Section 768.28, Florida Statutes, as amended from time to time. Further, SUBRECIPIENT hereby agrees to indemnify the COUNTY for all reasonable expenses and attorney's fees incurred by or imposed upon the COUNTY in connection therewith for any loss, damage, injury, liability or other casualty. SUBRECIPIENT additionally agrees that the COUNTY may employ an attorney of the COUNTY's own selection to appear and defend any such action, on behalf of the COUNTY, at the expense of the SUBRECIPIENT. The SUBRECIPIENT further agrees to pay all reasonable expenses and attorney's fees incurred by the COUNTY in establishing the right to indemnity.

The SUBRECIPIENT further agrees that it is responsible for any and all claims arising from the hiring of individuals relating to activities provided under the contract. All individuals hired are employees of the SUBRECIPIENT and not of the COUNTY.

B. Insurance Requirements

Insurance – Nonprofit SUBRECIPIENTs

The SUBRECIPIENT agrees to secure and maintain the insurance coverage outlined below during the term of this contract. The SUBRECIPIENT agrees that this insurance requirement shall not relieve or limit SUBRECIPIENT'S liability and that the COUNTY does not in any way represent that the insurance required is sufficient or adequate to protect the SUBRECIPIENT'S interests or liabilities, but are merely minimums. It is the responsibility

of the SUBRECIPIENT to insure that all subcontractors comply with the insurance requirements.

Certificate(s) of Insurance *naming Lee Board of County Commissioners as Certificate Holder and additional insured* will be attached to this contract as an exhibit. Name and address for Certificate Holder should be: Lee Board of County Commissioners, P.O. Box 398, Fort Myers, FL 33902. Certificate(s) must be provided for the following coverage's at the time of contract execution and upon policy renewal. Renewal certificates are due to the COUNTY on or before expiration date.

1. Workers' Compensation– Statutory benefits as defined by Florida Statute 440 encompassing all operations contemplated by this contract or agreement to apply to all owners, officers, and employees. Employers' liability will have minimum limits of:
 - \$100,000 per accident
 - \$500,000 disease limit
 - \$100,000 disease limit per employee

2. Commercial General Liability – Coverage shall apply to premises and/or operations, products and/or completed operations, independent contractors, contractual liability, and broad form property damage exposures with minimum limits of:
 - \$500,000 bodily injury per person (B.I.)
 - \$1,000,000 bodily injury per occurrence (B.I.)
 - \$500,000 property damage (PD) or
 - \$1,000,000 combined single limit (C.S.L.) of B.I. and P.D.

The General Liability Policy Certificate shall name "Lee County, a political subdivision and Charter County of the State of Florida, its agents, employees, and public officials" as "Additional Insured". The SUBRECIPIENT agrees that the coverage granted to the Additional Insured applies on a primary basis, with the Additional Insured's coverage being excess.

3. Business Auto Liability – The following Automobile Liability will be required and coverage shall apply to all owned, hired, and non-owned vehicles used with minimum limits of:
 - \$100,000 bodily injury per person (B.I.)
 - \$300,000 bodily injury per occurrence (B.I.)
 - \$100,000 property damage (PD) or
 - \$300,000 combined single limit (C.S.L.) of B.I. and P.D.

4. Directors & Officers Liability – Entity coverage to cover claims against the organization directly for wrongful acts with limits not less than \$100,000.

5. Fidelity Bonding – Covering all employees who handle the agency's funds. The bond amount must be equivalent to the highest daily cash balance or a minimum amount of \$50,000.

Insurance – Government/Municipality

Documentation of the above coverage requirements are not applicable to government/municipalities that are self-insured.

Section 20. Disclaimer of Third Party Beneficiaries

This Agreement is made for the sole benefit of the Parties of this Agreement and their respective successors and assigns, and is not intended to and will not benefit any third party. No third party will have any rights under this Agreement, because of this Agreement or any right to enforce any provisions of this Agreement.

Section 21. Dispute Resolution

In the event of a dispute related to any performance or payment obligation arising under this Agreement, the Parties shall exhaust COUNTY administrative dispute resolution procedures prior to filing a lawsuit or otherwise pursuing legal remedies.

In the event that COUNTY administrative dispute resolution procedures are exhausted, either Party to this Agreement may notify the other Party in writing that it wishes to commence formal dispute resolution with respect to any unresolved problem under this Agreement. The Parties agree to submit the dispute to a Florida Certified Circuit Court Civil Mediator for mediation, within sixty (60) days following the date of this notice. In the event that any dispute cannot be resolved by mediation, the dispute may be filed as a civil action in the Circuit Court of the Twentieth Judicial Circuit of Florida, in and for Lee County, Florida, which is the sole venue for any such civil action.

Section 22. Assignment

This Agreement may not be assigned nor subcontracted in whole or in part without the prior written consent of the COUNTY.

Section 23. Headings

Article headings have been included in the Agreement solely for the purpose of convenience and shall not affect the interpretation of any of the terms of this Agreement.

Section 24. Survivability

Any term, condition, covenant or obligation which requires performance by either party subsequent to termination of this Agreement shall remain enforceable against such party subsequent to such termination.

Section 25. Modifications

This writing embodies the entire agreement and understanding between the parties hereto and there are no other agreements and/or understandings, oral or written, with respect to the subject matter hereof, that are not merged herein and superseded hereby. This Agreement may only be amended or extended by a written instrument executed by the COUNTY and the SUBRECIPIENT expressly for that purpose.

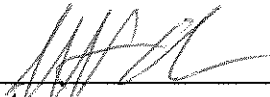
Section 26. Entire Agreement

It is understood and agreed that the entire agreement of the Parties is contained in this Agreement, which supersedes all oral agreements, negotiations, and previous agreements between the Parties relating to the subject matter of this Agreement.

Any alterations, amendments, deletions, or waivers of the provisions of this Agreement will be valid only when expressed in writing and duly signed by the Parties, except as otherwise specifically provided in this Agreement.

IN WITNESS WHEREOF, the SUBRECIPIENT and the COUNTY respectively, have caused this Agreement to be executed by their duly authorized representatives.

SUBRECIPIENT: Community Assisted and Supportive Living, Inc

BY: 
Signature

02/23/2022
Date

Julian Scott Heller
Name (print)

ATTEST:
CLERK OF CIRCUIT COURT

BOARD OF COUNTY COMMISSIONERS
OF LEE COUNTY, FLORIDA

BY: _____

BY: _____
Chair

APPROVED AS TO FORM FOR THE
RELIANCE OF LEE COUNTY ONLY

County Attorney's Office

ATTACHMENT A: PROJECT DESCRIPTION AND BUDGET

Application and Budget attached following page 23.

PROJECT REPORTING

The reporting for this program must be done in HMIS in accordance with local policies and procedures.

<https://csnlee.com/hmis/>

PAYMENT REQUEST

Line-Item Contract (Exhibit 1) on page 23.

If a project cost overrun is identified, the SUBRECIPIENT must receive approval from the County before additional costs are incurred.

ELIGIBLE ACTIVITIES

A. Expense Category

Project(s) direct services must follow the restrictions from U.S Treasury rules and fit within the ARPA expense category: **3.11 Housing Support: Services for Unhoused Persons*** ^

* Denotes areas where recipients must identify the amount of the total funds that are allocated to evidence-based interventions.

^ Denotes areas where recipients must report on whether projects are primarily serving disadvantaged communities.

B. Back-up Project Eligible Use Justification:

31 CFR 35.6(b)(3)(ii)(A)(1) and (11) Final Rule pp. 418-421

(ii) Responding to the negative economic impacts of the public health emergency for purposes including:

(A) Assistance to households and individuals, including:

(1) Assistance for food; **emergency housing needs**; burials, home repairs, or weatherization; internet access or digital literacy; cash assistance; and assistance accessing public benefits;

(11) A program, service, capital expenditure, or other assistance that is provided to a disproportionately impacted household, population, or community, including:

(i) Services to address health disparities of the disproportionately impacted household, population, or community;

(ii) Housing vouchers and relocation assistance;

See also p. 82 of the Final Rule, which states:

Treasury Response: In response to requests for elaboration on the types of eligible services for eviction prevention, Treasury has provided further guidance that these services include “housing stability services that enable eligible households to maintain or obtain housing, such as housing counseling, fair housing counseling, case management related to housing stability, outreach to households at risk of eviction or promotion of housing support programs, housing related services for survivors of domestic abuse or human trafficking, and specialized services for individuals with disabilities or seniors that support their ability to access or maintain housing,” as well as “legal aid such as legal services or attorney’s fees related to eviction proceedings and maintaining housing stability, court-based eviction prevention or eviction diversion programs, and other legal services that help households maintain or obtain housing.”

See also p. 83 of the Final Rule, which states:

This eligible use category also includes emergency assistance for individuals experiencing homelessness, either individual-level assistance (e.g., rapid rehousing services) or assistance for groups of individuals (e.g., master leases of hotels, motels, or similar facilities to expand available shelter).

ATTACHMENT B: REPORTING REQUIREMENTS (Example)

Below is an example of information that will be requested. There may be additional reporting requirements that the US Treasury requires or Lee County identifies during the project.

1. **Equity:** Describe how you ensure that your program is designed and implemented with equity in mind for disproportionately affected populations. Additional Information – ATTACHMENT C: EQUITY-BASED REQUIREMENT
2. **Community Engagement:** Describe your communication, outreach, and engagement plan to make participants and the community aware of your project.
3. **Evidence Based or Evidence Producing:** If the project is an **evidence-based** practice, identify the source(s), the level of evidence, and explain how this project incorporates this principle.

If the project is an **evidence-producing** practice, identify related source(s) of your hypothesis and state your hypothesis clearly. Outline how evidence will be collected to validate that it presents as evidence-producing.

Additional Information – ATTACHMENT D: EVIDENCE-BASED REQUIREMENT
 See Treasury's Compliance and Reporting Guidance State and Local Fiscal Recovery Fund, <https://home.treasury.gov/system/files/136/SLFRF-Compliance-and-Reporting-Guidance.pdf>

4. **One-Time Reporting:**

Organization Name
Business Type (IRS classification)
Nonprofit type (IRS classification)
IRS Determination Letter (if applicable, for nonprofits)
Tax ID #
DUNS #
Address (Physical)
Address Line 2
City, State, ZIP Code
Name of Organization's Main Contact
Phone (Main contact)
Email (Main contact)
Name of Person Responsible for this project.
Phone (Project contact)
Email (Project contact)
Organization Website Url
Provide a SHORT summary of your organization's mission.
Number of employees in Lee County?
Board member roster (Required for nonprofits.)
IRS Form 990 or equivalent (Required for nonprofits.)
Statement of Profit & Loss (Most recent year ended profit & loss comparative to prior year; not the auditor's report.) (Required for nonprofits.)
Audit Report (Most recent audit if available) (Required for nonprofits)

Single Audit Report (if applicable)
Agency Budget (Your most recent year-ended profit & loss compared to budget). (Required for nonprofits).
Provide a demographics summary of service for this project for the previous year. Summary will show your organization capability to track service by demographics and your service volumes. Summary may include # served by: geographic areas of the county, total served from Lee County, totals by age, race, ethnicity, etc. (If available for nonprofits).
Attach copies of your policies and practices of internal controls related to the program expenditure of program funds, record management (5-years required) (Required for nonprofits).
Attach your statement of compliance with Title VI of the Civil Rights Act of 1964.
Does this project serve an economically disadvantaged community as defined by HUD's Qualified Census Tract?
In what census tract(s) is the service provided? If the tract is unknown, in what area of the county is the service provided?
Primary place (address) for service delivery/performance.
Are you able to measure or access data related to the economic characteristics of the primary intended beneficiaries of your program or service? If yes, describe the methodology.
Certificate of Insurance

5. Quarterly Reporting: All data must be completed in HMIS, within 10 business days after the reporting period ends. <https://csnlee.com/hmis/>

Schedule:

Reporting Periods	Notes
Award Start Date – March 31, 2022	Due 10 working days after end of quarter
April 1, 2022 – June 30, 2022	
July 1, 2022 – September 30, 2022	
October 1, 2022 – December 31, 2022	
January 1, 2023 – March 31, 2023	
April 1, 2023 – June 30, 2023	
July 1, 2023 – September 30, 2023	
October 1, 2023 – December 31, 2023	
January 1, 2024 – March 31, 2024	
April 1, 2024 – June 30, 2024	
July 1, 2024 – September 30, 2024	
October 1, 2024 – December 31, 2024	
Close Out Report	

- A. Reimbursement requests will detail expenditures. This project will report expenditures after reimbursement requests are approved and payment is distributed.

B. Disadvantaged Communities Summary

Is project is serving an economically disadvantaged community?
How much of the grant has been expended to serve disadvantaged communities through program or service that is provided at a physical location in a <u>Qualified Census Tract</u> (for multi-site projects, if a majority of sites are within <u>Qualified Census Tract</u>);
How much of the grant has been expended to serve disadvantaged communities through program or service where the primary intended beneficiaries live within a <u>Qualified Census Tract</u> ;
How much of the grant has been expended to serve disadvantaged communities through program or service for which the eligibility criteria are such that the primary intended beneficiaries earn less than 60 percent of the median income for the relevant jurisdiction (e.g., State, county, metropolitan area, or other jurisdiction); or
How much of the grant has been expended to serve disadvantaged communities through program or service for which the eligibility criteria are such that over 25 percent of intended beneficiaries are below the federal poverty line.

C. Performance Success Summary

Project Status: Choice <ul style="list-style-type: none">• Not Started• Completed less than 50 percent• Completed 50 percent or more• Completed
Provide a success story or summary of successes from this program that can be shared publicly. Always protect the privacy of beneficiaries.
Provide a report of key outputs for the past period [between ____ and ____]. <ul style="list-style-type: none">• Number of people that are housed (Goal 50)
Provide a report of key outcomes for the past period [between ____ and ____]. <ul style="list-style-type: none">• Average length of time from program enrollment to housing should be <30 days• Less than 10% of households should return to homelessness within 6 months after program exit.• Less than 10% of households should return to homelessness within 12 months after program exit.• Less than 30% of households should return to homelessness within 24 months after program exit.• At least 45% of households should increase their income upon program exit.• At least 85% of clients will have a program exit to permanent housing.

ATTACHMENT C: EQUITY-BASED REQUIREMENT

Below is an example of information that will be requested. There may be additional reporting requirements that the US Treasury requires or Lee County identifies during the project.

Equity: Describe how you ensure that your program is designed and implemented with equity in mind for disproportionately affected populations. Address the following:

- a. **Goals:** Are there particular historically underserved, marginalized, or adversely affected groups that you intend to serve within your jurisdiction?
- b. **Awareness:** How do you market the program to Lee County residents with equity in mind? How equal and practical is the ability for residents or businesses to become aware of the services funded by the SLFRF?
- c. **Access and Distribution:** Are there differences in levels of access to benefits and services across groups? Are there administrative requirements that result in disparities in ability to complete applications or meet eligibility criteria?
- d. **Outcomes:** Are intended outcomes focused on closing gaps, reaching universal levels of service, or disaggregating progress by race, ethnicity, and other equity dimensions where relevant for the policy objective?

ATTACHMENT D: EVIDENCE-BASED REQUIREMENTS

SUBRECIPIENTS must briefly describe the goals of the project, and the evidence base for the interventions funded by the project.

- a) Demonstrate that the intervention is implemented as a program evaluation, see OMB M-20-12. "Recipients are exempt from reporting on evidence-based interventions in cases where a program evaluation is being conducted. Criteria requires the recipient to:

Required

- i. describe the evaluation design including whether it is a randomized or quasi experimental design;
- ii. state the key research questions being evaluated;
- iii. describe whether the study has sufficient statistical power to disaggregate outcomes by demographics;
- iv. post the evaluation publicly and link to the completed evaluation in the Recovery Plan;
- v. describe the timeframe for the completion of the evaluation (including a link to completed evaluation if relevant)
- vi. after sufficient evidence of efficacy has been provided, determine whether the spending for the evaluated interventions should be counted towards the dollar amount categorized as evidence-based for the relevant project
- vii. Recipient may be selected to participate in a nation evaluation which would study the project along with similar projects.

Encouraged

- viii. Consider how a Learning Agenda, either narrowly focused on SLFRF or broadly focused on the recipient's broader policy agenda, could support their overarching evaluation efforts in order to create an evidence-building strategy for their jurisdiction. See OMB M-19-23
- b) Strong Evidence-based interventions- Is the intervention, based on a "well-designed and well-implemented experimental studies conducted on the proposed program with positive findings on one or more intended outcomes".
- i. If yes, identify the program as "Strong Evidence Based", cite the study, summarize the findings, and provide the associations to the COUNTY program.
- c) Moderate evidence-based interventions – the intervention is based on one or more quasi-experimental studies with positive findings on one or more intended outcomes OR two or more non-experimental studies with positive findings on one or more intended outcomes.
- d) Preliminary evidence – the intervention is based on conclusions drawn from a non-experimental study which demonstrates improvement in program beneficiaries over time on one or more intended outcomes OR an implementation (process evaluation) study used to learn and improve program operations would constitute preliminary evidence. Examples of research that meet the standards include: (1) outcome studies that track program beneficiaries through a service pipeline and measure beneficiaries' responses at the end of the program, (2) pre- and post-test research that determines whether beneficiaries have improved on an intended outcome.

EXHIBIT 1 PAYMENT REQUEST Line Item Contract

Human and Veteran Services

2440 Thompson Street
Ft. Myers, FL 33901

submit by E-Mail: LMoisan@leegov.com

Phone: 239-533-2901

FAX: 239-533-7960

Contract No. _____

Program: ARPA

Contract Term: _____

Reporting Period

____/____/____ - ____/____/____

Check appropriate line:

____ Regular Reimbursement

____ Final Reimbursement

Agency: Community Assisted and Supported Living, Inc.

Mailing Address: 2911 Fruitville Road

Sarasota, FL 34237

Phone: (941) 225-2373

FAX: _____

E-mail: lmoisan@leegov.com

ARPA Project ID: ARPA-DC311B3

Reports are due by the twentieth calendar day after the end of the reporting period.

A: Approved Budget Categories	B: Approved Annual Budget Amount	C: Balance Forward end of prior month	D: Total Paid Expenditures for Reporting Period	E: Remaining Balance End of Reporting Period (Col. C-D)
	\$ -	\$ -		\$ -
Total:	\$ -	\$ -	\$ -	\$ -

PROVIDER: By signing this request, I certify to the best of my knowledge and belief that the request is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the reimbursement. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

Signature of Authorized Official: _____

Date approved: _____

FOR LEE COUNTY USE ONLY

By signing below, I certify that to the best of my knowledge and abilities, the work and/or services provided have been inspected, monitored or reviewed and appear to be in compliance with all applicable statutes, regulations, and approved County contract.

AUTHORIZED BY: _____

APPROVED AMOUNT: \$ _____

DATE APPROVED: _____

12. Completeness Checklist

Applicants must complete chart below and attach as PAGE 1 of the submission.

Application Forms and Attachments	Page #
Project Name: 2022 - CASL ARP Supportive Services	
Project Applicant: Community Assisted and Supported Living, Inc.	
Table of Contents (COMPLETENESS CHECKLIST)	1
1. Applicant Information	2
2. Project Information	2
3. Certification	3
4. Project Description	4
5. Quality of Service Questionnaire	6
6. Ability to Complete Activities Outline	12
7. Budget Narrative	13
8. Budget Form	16
9. Performance Outcomes	17
10. Equity Outcomes	18
11. Required Attachments	
b. Applicants Annual Operating Budget	20
c. Chart of Key Project Staff	21
d. Documentation of Project's Alignment with Community Goals	22
e. Documentation of National Best Practices or Evidence Based Program design	34
g. Proof of 501c3 Status	37



COMMU-7

OP ID: EG

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/15/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Brown Insurance and Financial A031711 7800 113th St N, Ste 201 Seminole, FL 33772 Chris Bradley	727-586-1601	CONTACT NAME: Michelle Bernier PHONE (A/C, No, Ext): 727-586-1601 FAX (A/C, No): 727-518-0002 E-MAIL ADDRESS: Certificates@BrownInsuranceServices.com														
INSURED Community Assisted And Supported Living, Inc 2911 Fruitville Rd Sarasota, FL 34237		<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A : Michigan Commercial Ins Mutual</td> <td>10998</td> </tr> <tr> <td>INSURER B :</td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Michigan Commercial Ins Mutual	10998	INSURER B :		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
INSURER(S) AFFORDING COVERAGE	NAIC #															
INSURER A : Michigan Commercial Ins Mutual	10998															
INSURER B :																
INSURER C :																
INSURER D :																
INSURER E :																
INSURER F :																

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A	WC1000174882022A	02/17/2022	02/17/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

Lee County Board of County Commissioners
 PO Box 398
 Fort Myers, FL 33902

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

SECTION V: Application Forms

All forms must be complete for application to be considered for conditional award.

1. Applicant Information

Organization Name: Community Assisted and Supported Living, Inc.	Authorized Organization Representative Name/Title: J. Scott Eller
Address: 2911 Fruitville Rd.	Telephone: 941-225-2373
City, State/Zip: Sarasota, FL 34237	Organization Website: www.caslinc.org
Contact Person Name/Title: Phillip J. "PJ" Brooks	DUNS #: 940621519
Contract Person E-mail: Pj.Brooks@caslinc.org	Federal Employer ID #: 65-0869993

2. Project Information

Project Name: 2022 - CASL ARP Supportive Services
Project Address (if different from organization address): Lee County, FL
This is a/an: <input checked="" type="checkbox"/> New Project or <input type="checkbox"/> Expanded Project
Total Funding Requested for this Project: \$ <u>351,783.49</u>

Services Provided (check the services that will be provided with the funding requested):	
<input checked="" type="checkbox"/> Case Management <input type="checkbox"/> Employment Assistance and Job Training <input type="checkbox"/> Outpatient Health Services <input type="checkbox"/> Child Care <input checked="" type="checkbox"/> Transportation <input type="checkbox"/> Street Outreach Engagement/Supplies <input checked="" type="checkbox"/> Life Skills <input type="checkbox"/> Education Services <input type="checkbox"/> Assessment of Service Needs	<input type="checkbox"/> Legal Services <input type="checkbox"/> Housing Search Assistance <input checked="" type="checkbox"/> SOAR Assistance <input checked="" type="checkbox"/> Behavioral Health Services <input checked="" type="checkbox"/> Housing <input type="checkbox"/> Services for Special Populations, describe: <hr/> <hr/>

Target Population (check as many as applicable below):	
<input checked="" type="checkbox"/> Chronically Homeless <input checked="" type="checkbox"/> Single Individuals <input type="checkbox"/> Victims of Domestic Violence <input type="checkbox"/> LGBTQI+ Individuals/Families/Youth <input type="checkbox"/> Other: _____	<input type="checkbox"/> Families <input type="checkbox"/> Unaccompanied Youth (ages 18-24) <input type="checkbox"/> Veterans <input checked="" type="checkbox"/> Individuals with Severe and Persistent Mental Illness
Target Service Location (check as many as applicable below):	
<input type="checkbox"/> City of Cape Coral <input type="checkbox"/> City of Fort Myers <input type="checkbox"/> City of Bonita Springs <input type="checkbox"/> City of Sanibel	<input type="checkbox"/> Town of Fort Myers Beach <input type="checkbox"/> Unincorporated Lee County <input checked="" type="checkbox"/> All of Lee County <input type="checkbox"/> Other: _____

3. Certification

To the best of my knowledge, I certify that the information in this application is true and correct and that the document has been duly authorized by the governing body of the applicant. I will comply with the program rules and regulations if assistance is approved. I also certify that I am aware that providing false information on the application can subject the individual signing such application to criminal sanctions. I further certify that I am authorized to submit this application and have followed all policies and procedures of my agency regarding grant application submissions.

Authorized Organization Representative:

Signature: _____

Typed Name: J. Scott Eller

Title: CEO

Date: 1-5-2022

Section 4 – Project Description

Community Assisted and Supported Living, Inc. (CASL) is a 501c3 corporation formed in 1998 for the purpose of developing permanent supportive housing and operating various programs to provide wrap around case management, PSH housing, and combat homelessness. Over the past 23 years, CASL has served over 2,500 individuals with a Disabling Condition and/or Homeless. To date, our housing inventory includes 48 single family homes, over 300 multifamily units, four group homes, and a 50-bed assisted living facility. In 2004, CASL began providing permanent supportive housing in Lee County and currently has 80 units in scattered sites throughout the county. In November 2021, CASL and its development partner, opened Cypress Village, a 95-unit garden style apartment that allocated at least 50% of the units to serve individuals who are homeless.

Scope

CASL proposes the following Scope to address the need for additional Permanent Supportive Housing services in Lee County. The requested funding will support the creation of two case management staff, one peer specialist, and a portion of one case management supervisor position to serve clients residing within Lee County. There will be a total of 3.6 FTE's funded through the ARP assistance if awarded.

Number of Clients:

50 Clients

Type of Clients:

Our experience in serving the community demonstrates that most residents will come from (1) a state of homelessness; (2) an institution or a group home; (3) an inpatient or acute care facility or (4) jail. Homelessness coupled with mental illness, substance abuse or, co-occurring addictive disorders leaves the individual lacking the characteristics of stably housed individuals and households.

Our clientele is generally ill-equipped with: 1) Basic skills necessary for activities of daily living; 2) The skills necessary to cope and address their homelessness, mental illness or substance abuse disorder; 3) The skills necessary to reside in stable permanent housing; 4) lack of education 5) poor credit and 6) lack of employment and employable skills.

Services to be Provided:

Approximately 60 percent of our residents were at one time or another, chronically homeless or at risk of becoming homeless. CASL's case managers utilize individual service plans (ISPs), should the client choose to participate, to set short- and long-term goals which are essential on maintaining stability and recovery. For the duration of residency, all residents have an assigned case manager, if they so wish, who is available to help clients meet goals, resolve challenges, barriers and obstacles, and access outside resources and additionally assists with issues such as; literacy skills, job/volunteer search skills, accessing government benefits, budgeting skills, healthcare access,

transportation, community services, crisis intervention, finding clothing resources, computer skills, nutrition, social skills, hygiene management, security management, safety management and housekeeping skills.

Cost of Proposed Activities:

\$351,783.49

Housing First Approach

While CASL’s primary mission is to assist individuals and households who have a mental illness, substance abuse, or developmental disability; we find many in this population intersect with being at-risk of, currently, or chronically homeless. To that end, our organization is intent on helping households obtain permanent housing as quickly as possible.

CASL’s permanent supportive housing model, an approach to “Housing First”, transitions people directly from homelessness into permanent supportive housing. The keys to this are wrap around services and collaborations between partnering agencies. CASL’s case managers assess each resident to determine their specific needs. Following the initial assessment, each resident is linked to services specific to their needs, ensuring their continued residence in permanent supportive housing.

Coordination

CASL staff attend the CoC Governing Board meetings and the Lee County Homeless Coalition meetings to discuss referrals that are made based on the homeless individuals VI-SPDAT score. The CoC coordinated entry system prioritizes prospective clients according to various items including length of time homeless and need, which culminates into the individuals VI-SPDAT score. Persons scoring ten or above are generally referred to permanent supportive housing and housing first options, as these individuals are ranked as the highest need and users of the Lee County acute care system.

Often, CASL clients require services beyond the case management offered by CASL. In these situations, CASL leverages its collaborative partnerships with local service agencies to provide the specialized care or service needed. In many cases, these specialized services are provided by other participating CoC agencies. CASL has entered into an MOU with SalusCare, a local mental health provider, to encourage cooperation recognizing that individuals with disabling conditions are diverse in terms of their strengths, motivations, goals, backgrounds, and needs. Additionally, CASL is contracted by Central Florida Behavioral Health Network (CFBHN) the regional Managing Entity responsible DCF funds for behavioral health services. As part of its goal to support client engagement in services and supports, CASL will be adding a Recovery Peer Specialist to its Lee County team. A Recovery Peer Specialist is a person with lived experience who is in recovery from substance use or co-occurring mental health disorders. Their life experiences and recovery allow them to provide recovery support in such way that others can benefit from their experiences.

Ensuring Homelessness is Rare, Brief, and One-Time

CASL is a SAMHSA designated “Projects for Assistance in Transition from Homelessness (PATH) provider organization. Through its PATH status, CASL engages in outreach with the individuals identified by the Stand Down and Point-In-Time Count surveys of persons living in homelessness.

When a potential client/resident is referred to CASL, its PATH and SOAR trained case management staff schedule and conduct a Functional Assessment Rating Scale (FARs) assessment for all referrals. The FARs assessment is a both a best practice and a requirement for DCF and PATH funding. This ensures that an applicant’s eligibility and pre-entry needs are established, creating a benchmark to provide for goal setting and future evaluations. During the initial screening, case managers gather information on six domains which include medical, social, legal, daily living skills, work/school, and security management. CASL provides the initial layer of supportive case management and further links its clients/residents with outside agencies to target areas of need within the six domains.

Overall Demonstration of Need

As part of the gap analysis performed within the “Opening Lee County’s Doors” 2019-2028 Strategic Plan, it was identified that there is an inadequate supply of Permanent Supportive Housing (PSH) units. Additionally, that alternative funding sources are needed to develop additional housing units and facilities to serve persons who are homeless. CASL has pioneered the development and expansion of permanent supportive housing units within Lee County. CASL recently finalized construction and development of its 95-unit Low Income Housing Tax Credit Development (LIHTC), Cypress Village.

With ARP support and funding, CASL could serve an additional 50 clients within Lee County. CASL is conducting feasibility estimates for applying with FHFC for additional LIHTC developments to serve homeless and chronically homeless individuals within Lee County. Leveraging funding available through the local funding sources will help to build momentum for future large-scale development projects to address the homelessness crisis that Lee County faces.

Section 5 – Quality of Service Questionnaire

- 1. Describe how the project is innovative, based on national best practices, and designed in accordance with an existing evidence-based program, or will be subject to a formal program evaluation.**

CASL is a SAMHSA designated Projects for Assistance in Transition from Homelessness (PATH) provider organization. Through its PATH status, CASL engages in outreach with the individuals identified by the Stand Down and Point-In-Time Count surveys of persons living in homelessness.

Housing First - CASL’s plan is to utilize ARP funding for supportive services and case management in conjunction with its PATH and other Permanent Supportive Housing rental assistance funding to wrap supportive services to meet each person’s specific needs. By incorporating the Housing First Approach, CASL’s PATH outreach, and CASL’s supportive

housing team, the outcomes of recidivism to jails, emergency rooms and forensic hospitals will dramatically reduce.

FARs Assessment - When a potential client is referred to CASL through coordinated entry, its PATH and SOAR trained case management staff schedule and conduct a Functional Assessment Rating Scale (FARs) assessment. The FARs assessment is a both a best practice and a requirement for DCF and PATH funding.

Case Management - Primary service offered to individuals and families experiencing homelessness. The National Association of State Mental Health Program Directors (NASMHPD) defines case management as “a range of services provided to assist and support individuals in developing their skills to gain access to needed medical, behavioral health, housing, employment, social, educational, and other services essential to meeting basic human services.” This also includes providing “linkages and training for the patient served in the use of basic community resources, and monitoring of overall service delivery.”

Peer Support – Peer support is a SAMHSA recognized evidence-based practice for individuals with mental health conditions or challenges. Both quantitative and qualitative evidence indicate that peer support lowers the overall cost of mental health services by reducing re-hospitalization rates and days spent in inpatient services, increasing the use of outpatient services. Peer support improves quality of life, increases and improves engagement with services, and increases whole health and self-management.

Trauma Informed Care - This is a Substance Abuse and Mental Health Services Administration (SAMHSA) best practice. Most of our clients have a long-term history of trauma. The individual’s experience of these trauma events influences approaches of restoring a sense of self-worth, and case managers can use their training to set achievable goals with the client. The effects of trauma heavily weigh on a client’s ability to achieve stable permanent housing. This best practice equips our organization and case managers with the tools and understanding of the frequent triggers and vulnerabilities of trauma survivors.

2. Describe how the project will engage and gather feedback from program participants, persons with lived experience in homelessness, and persons of any particular historically underserved, marginalized, or adversely affected groups.

In recent years CASL has placed a focus on hiring Peer Support Specialists, persons with lived experience and who are individuals who are in recovery from substance use or co-occurring mental health disorders. These individuals will be able to use their past experience as a peer to support others in helping them to recover from the effects of mental illness. Certified Peer Support Specialists have standardized knowledge and competency to peer support individuals with substance abuse and co-occurring mental health disorders. CASL’s primary population is individuals with disabling conditions, conditions that impair their ability to carry out basic Activities of Daily Living. These individuals come to CASL as a marginalized and disadvantaged population. Our Peer Specialists demonstrate to our clients that recovery is possible, and are able

to help share with clients, the tips and tricks that helped make them successful in their own recovery.

- 3. Describe how the project will be marketed to individuals who may need assistance, and how marketing will be targeted to those least likely to apply for assistance, specifically those persons of any particular historically underserved, marginalized, or adversely affected groups.**

The project is marketed to individuals coming through the Lee County Continuum of Care. These individuals rank high on the VI-SPDAT assessment as being persons who historically have been underserved. These referral clients have often not had the types social and economic opportunities afforded to them as many others in the community. Additionally, CASL provides outreach through our service programs in order to assist individuals in accessing the CoC resources, to receive an assessment, and link them to resources appropriate to their situation. These are individuals who are coming from the street, from homeless shelters, and other states of homelessness.

Our organization works closely with the Lead Agency of the CoC to link CoC referred clients to mainstream benefits, food from local pantries, case management through the State of Florida Managing Entities, targeted case management and other psychiatric services through mental health providers, as well as local job board agencies and trainers to help our referred clients develop the skills necessary to bring about social and racial equity.

- 4. Explain how your agency is actively participating in the Coordinated Entry System, the Homeless Management Information System (HMIS), and the Continuum of Care (CoC), and how this project will integrate with the CoC's Coordinated Entry System.**

All our programs are actively designed to reduce barriers for housing entry, incorporating systems for accurate tracking, and focused on sub-populations including households who are homeless or at risk of homelessness, often due to with mental illness, substance abuse and other special needs which would not be barriers for entry.

CASL has made it a standard practice to enter all of its assisted clients into HMIS as the local CoC has developed more defined coordinated entry procedures. CASL has prioritized a significant number of its beds for persons who are chronically homeless. As bed vacancies open, persons who are chronically homeless will be given first priority through the referrals that are generated through the coordinated entry system in accordance with the CoC's written standards and guidelines. CASL's ensures that its lead case management staff regularly attend the By Name List (BNL) committee meetings as part of the general membership meetings.

CASL's SOAR trained case managers conduct initial screening and intake to determine an applicant's eligibility, readiness for our program, and any pre-entry needs. From the initial screening process, case managers gather information on six domains. These domains include medical, social, legal, daily living skills, work/school, and security management. CASL provides an initial layer of case management to its clients which is used as a base in which to further link

clients with a variety of supportive services. CASL's case managers work with local food banks to provide clients as they come into our residences with a source of donated food stuffs. CASL's case managers, through their SOAR training, also work to help clients obtain their social security benefits and supplementary social security as well as Medicare and Medicaid benefits. CASL also works with other community agencies to link residents to other agencies who assist with work programs.

5. Describe your procedure for assessing participant's needs and making client referrals to other service providers.

CASL staff attend the COC general meetings and By Name List committee meetings to discuss referrals that are made based on the homeless individual's VI-SPDAT score. The CoC prioritizes its prospective clients according to various items including length of time homeless and need, which culminates into the individuals VI-SPDAT score. Persons scoring a ten or above are generally referred to permanent supportive housing and housing first options, as these individuals are ranked as the highest need and highest utilizers of acute care systems. CASL has prioritized a number of its beds for persons who are chronically homeless as spaces within units open up. Persons who are chronically homeless are given first priority through referrals in the coordinated intake system as defined by the CoC's written standards.

When a potential resident is referred to CASL, CASL's PATH and SOAR trained case management staff schedule a screening and conduct a Functional Assessment Rating Scale (FARs) assessment. Initial screening and intake procedures determine an applicant's eligibility and pre-entry needs establishing an entry benchmark for which subsequent goals and evaluations may be based. During the initial screening, case managers gather information on six domains, including medical, social, legal, daily living skills, work/school, and security management. CASL provides an initial layer of intensive case management to its clients which help to link clients with a variety of supportive services. CASL's PATH case managers are SOAR trained, which gives the best and fastest route to SSI/SSDI benefits. CASL's case managers work with local food banks to provide clients as they come into our residences with a source of donated food stuffs.

CASL's case managers also work to help clients obtain their social security benefits and supplementary social security as well as Medicare and Medicaid benefits. CASL's SOAR specialist have a 98% success record on attaining people benefits within six (6) months or less. CASL's PATH contract provides small amount of incidental funding for items such as medication, clothing, medical care, toiletries and other items which includes bus passes which are considered crucial to their well-being and mobility. CASL also works with other community agencies to link residents to these agencies which assist with employment programs, peer programs, dental, medical and/or psychiatric services as needed based upon the initial FARs assessment and subsequent goal setting assessments.

6. Explain your agency's experience providing services to individuals and families experiencing homelessness, including federal, state, and/or local government grant

experience and capacity of the organization to administer the project and oversee all compliance requirements.

In 2020, CASL served more than 670 individuals with a disabling condition, with more than half coming from homelessness. CASL's annual budget is approximately \$6 million, which is funded through Federal (HOME, CDBG, HUD-Rental Assistance and CoC programs), State (Central Florida Behavioral Health Network, Medicaid HMO), local government contract dollars, donors, and resident rents. Of the total \$6 million budget, approximately \$4 million is reserved for services that are provided to CASL's residents. As part of that total \$6 million budget, CASL receives \$2,693,677 in contracted funding from CFBHN. CASL coordinates and administers rental assistance contracts and multiple state and federal contracts and acts as Medicaid Managed Care organization and functions as a representative payee organization for a portion of its residents.

While CASL's primary mission is to assist individuals and households who have a mental illness, substance abuse, or developmental disability; we find many in this population intersect with being at-risk of, currently, or chronically homeless. To that end, our organization is intent on helping households obtain permanent housing as quickly as possible – whether through rapid re-housing or permanent supportive housing. CASL has been focused on utilizing Housing First principles since our organization's inception.

Each Case Manager that works for CASL has a case load of approximately twenty to thirty clients at any one time. This roughly breaks down to an approximate 1:25 Staff-to-Client ratio. Due to the amount of time it takes to plan and develop significant capital expansion, the universal population of the number of beds and clients that CASL can serve at any one time remains relatively static for the period. With the recent pandemic, CASL is working to subscribed to HUD's best practices for Case Management Ratios in mind with the national Covid-19 Homeless System Response, which recommends a ratio of 1:20 for single site supportive housing for Critical Time Intervention caseloads. This is an evidence-based practice where case managers provide wrap-around services more intensely at the beginning of the person becoming rapidly re-housed, decreasing as and after the tenant becomes stabilized.

7. Describe how your agency has worked to remove traditional barriers to housing and services for individuals and families who are experiencing homelessness.

CASL provides housing to its CoC clients who are persons with a disabling condition without placing pre-conditions or eligibility requirements, beyond HUD's eligibility requirements, in line with Housing First. CASL does not require program participants to participate in supportive service activities and does not make other rules such as sobriety, a condition of housing. CASL offers and encourages program participants to participate in services, but there is not a time limit or requirement as to when he or she must participate.

We offer a variety of supports in the effort for our clients to end their chronic homelessness and to empower them to live independently. CASL offers clean, well maintained, and furnished residences even though our participants may initially be unable to pay for rent or services CASL. Rental assistance funding is vital to support CASL's efforts to employ the Housing First model as most people who are chronically homeless have no income and cannot afford to pay rent.

Upon referral from the CoC's Coordinated Entry and subsequent to the VI-SPDAT assessment; CASL's SOAR trained case management staff will schedule, interview and conduct a Functional Assessment Rating Scale (FARs) assessment. This assessment is a best practice across the board for all its clients and is a requirement of DCF funding.

CASL does not place a timeline on a person's recovery and offers housing on a continuing and permanent basis. Entry into CASL's housing should be the end goal for persons who were formerly homeless and chronically homeless. Should a client wish to exit CASL's permanent supportive housing, every effort will be made to assist the tenant to move into other private permanent housing. If clients require a higher level of care, CASL's case managers will follow up with the tenant to determine if a return to the PSH unit is sufficient or if the higher level of care, such as permanent supported living, is needed.

8. Does your agency conduct an internal annual evaluation of services provided (other than HMIS)? If yes, please provide a copy of the most recent evaluation.

Client Satisfaction Surveys are sent out to residents at least once a year. The surveys are sent directly from the client to Central Florida Behavioral Health Network (CFBHN) who then reviews the survey and provides the results to CASL through the Quality Assurance process. The results of these survey are the main contributor as to how we design our supportive housing programs for building design to service provision. As a result of this, we have witnessed a reduction in recidivism to the forensic and acute care systems.

On an annual or bi-annual basis, CASL's programs are monitored by AHCA, HUD, Lee County and CFBHN. These audits are client and outcome focused. Assurances are made which include thoroughness of documentation and consistent review of FARs every 6 months or upon significant change of circumstances for the client. Over the past five years, CFBHN not only awarded CASL as a 5-star provider but provided CASL a commendation for the quality of our documentation and the significance of our outcomes. CASL is one of only 5 agencies who had 100% on the CFBHN provider Scorecards for FY 20-21. For the past 20 years, the Florida Agency for Health Care Administration (AHCA) has concluded their bi-annual survey with only two minor deficiencies. CASL has been recognized by AHCA for our success in reducing recidivism to Hospitals and CSU admissions.

9. Describe how the agency will continue to provide quality services in the community in the case of reduced or loss of funding (i.e., reallocation of services based on CoC established priorities, how services would be scaled to meet changing needs, etc.)

CASL has increased its operating budget from \$360,000 per year to over \$6,000,000 per year over the past twenty-three years in operation. Due to our diligent efforts, we have expanded capacity through matching and leveraging Federal, state and local sources for our organizations on-going operations.

CASL's strategy of diversifying its funding agencies and sources, as well as its programs provides the best insurance policy that CASL will be able to continue to operate in the event of loss of funding from any one source. Over the past twenty-three years CASL has never had to reduced

capacity due to a of loss of funding. Rather, CASL has developed collaborative relationships and partnerships with over thirty separate providers across five counties to assure we maintain access to services on behalf of our clients. We will be our clients primary champion to address and break the barriers that exist to Florida's most vulnerable citizens, the homeless, chronically homeless, and the disabled. CASL has consistently maintained a recidivism rate of less than 5 percent over the past twenty-three years due to its continued efforts. CASL and it collaborative partners have supported each other over the years in order to achieve these results. CASL's has designed its model in conjunction with partnerships and collaboration being the primary goal in its strategic planning.

Section 6 - Ability to Complete Activities Outline

The applicant shall provide an outline that documents their ability to complete the funded activities in the allotted timeframe. This outline shall include:

- Timelines of critical tasks to be accomplished for each proposed activity;
- Monthly spending plans and proposed drawn down schedules; and
- Reporting schedule for outcomes achieved.

CASL proposes the following outline and schedule of activities:

Month	Critical Task 1	Critical Task 2	Critical Task 3	Critical Task 4	Draw Amount	Match Amount
1	Project Award	Environmental Clearance	Receive HMIS Referrals	Initial Clients Identified/Screened	\$29,315.29	\$7,328.82
2	Clients Served	HMIS data updated	Receive HMIS Referrals	Additional Clients Identified/Screened	\$29,315.29	\$7,328.82
3	Clients Served	HMIS data updated	Receive HMIS Referrals	Additional Clients Identified/Screened	\$29,315.29	\$7,328.82
4	Clients Served	HMIS data updated	Receive HMIS Referrals	Additional Clients Identified/Screened	\$29,315.29	\$7,328.82
5	Clients Served	HMIS data updated	Receive HMIS Referrals	Additional Clients Identified/Screened	\$29,315.29	\$7,328.82
6	Performance Measure Reporting 6 month	Clients Served/HMIS Data Updated	Receive HMIS Referrals	Additional Clients Identified/Screened	\$29,315.29	\$7,328.82

	return to homeless ness					
7	Clients Served	HMIS data updated	Receive HMIS Referrals	Additional Clients Identified/Screened	\$29,315.29	\$7,328.82
8	Clients Served	HMIS data updated	Receive HMIS Referrals	Additional Clients Identified/Screened	\$29,315.29	\$7,328.82
9	Clients Served	HMIS data updated	Receive HMIS Referrals	Additional Clients Identified/Screened	\$29,315.29	\$7,328.82
10	Clients Served	HMIS data updated	Receive HMIS Referrals	Additional Clients Identified/Screened	\$29,315.29	\$7,328.82
11	Clients Served	HMIS data updated	Receive HMIS Referrals	Additional Clients Identified/Screened	\$29,315.29	\$7,328.82
12	Clients Served	HMIS data updated	Receive HMIS Referrals	Additional Clients Identified/Screened	\$29,315.29	\$7,328.82

Section 7 – Budget Narrative

The applicant shall provide a budget narrative to describe the overall project budget and sources of match funds expected for the period of the grant. The budget narrative must include the following criteria:

- Description and justification of all costs
- Clearly identify the timeframes and methods for obligating grant funds, and how the agency plans to ensure funds are spent before the deadline.
- If the applicant plans to provide additional services, other than those eligible under the funding this application, clearly denote the type of other services or program and the funding sources.

The American Rescue Plan funds that have been requested through this application will fund additional services through case management and peer support staff for our permanent supportive housing units. Our programs are designed for persons who are homeless and chronically homeless with a disabling condition, generally a severe and persistent mental illness or co-occurring disorder. CASL has received additional funding from CFBHN for leverage and matching dollars that may be used by CASL. Though not required through the ARP funding, CASL is willing to offer a 25% match in the amount of \$87,945.87 to fund additional supportive service related activities. This is demonstrated by the attached CFBHN contract and funding detail.

Type	Position	Salary Cost	Fringe	Cost	# FTE's	Total Cost
Case Management	TCM Supervisor	\$71,240.00	\$22,013.16	\$93,253.16	0.6	\$55,951.90
Case Management	Case Manager	\$60,000.00	\$18,540.00	\$78,540.00	2	\$157,080.00
Supportive Services	Peer Recovery Specialist	\$45,000.00	\$13,905.00	\$58,905.00	1	\$58,905.00
Operating Expenses						\$63,095.00
Total						\$335,031.90

Operating expense funds will assist with the funding for the beds for the fifty clients that will be served through this activity in order to operationalize the space available for use due to CoC referrals of individuals coming from a state of homelessness with a disabling condition. CASL also requests admin totaling \$16,751.59 which represents 5% of requested costs.

Compensation expenses represent a substantial portion of CASL's annual budget, however the justification for this is due to CASL employing a significant number of individuals that carry out case management duties. While on the surface it may seem to be a high amount, costs are representative of the current labor market to ensure continuity of care by our case management and peer support specialist staff. CASL generally provides case management compensation and benefits slightly above the median average due to the nature and constant turnover that is systemic to the industry. CASL feels that it is important for its clients to have consistent case management staff that they are able to feel comfortable and bond with to increase the success rate and lower recidivism or a return to homelessness. CASL provide standard employment fringe benefits in the form of payroll taxes, social security, insurance, and an employee 401k plan. Fringe benefits are based on a recent report issued by the Bureau of Labor Statistics on December 16, 2021 demonstrating an average fringe rate of 30.9%.

Due to CASL's nature as a real estate developer, housing and service provider, the budget describes the costs that are required to fund its operations. CASL strives to maintain a healthy maintenance budget in order to provide quality residences and address any potential issues. Additionally, CASL is required to address the associated occupancy costs to run, manage, and operate housing for persons who were homeless and have a disability. These costs can be substantial as CASL operates a 24/7 assisted living facility, large multi-family housing complexes that require constant security, and as well as direct payments by CASL for all utility costs for each one of its residences. This is one way in which CASL reduces the barriers to continued permanent housing, as often clients are unable or incapable of handling such tasks as regularly paying for their basic utilities. Any surpluses that CASL receives is allocated towards capital expenditures or operational reserves for the next fiscal year.

CASL currently has a substantial number of unfunded units in Lee County. Additional funding through the American Recovery Plan will support additional capacity for chronically homeless persons. We have a track record of obligating rental assistance funds within 30 days of contract execution, and regular invoice requests to subsidize clients on a monthly basis. CASL expects a

continuing trend of expending the totality of funds at the very least, two months prior to the contract end date.

8. Budget and Match Form

Complete each line as applicable to the proposed project. An excel version of the budget and match form, which automatically calculates totals is available at <https://www.legov.com/dhs/funding/rfp>.

Budget Template Notice of Funding Availability #ARP3.11SS

Complete ONLY BLUE fields. Do not edit grey fields.

Supportive Services (All projects)		
Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Assessment of Service Needs		
2. Employment Assistance and Job Training		
3. Case Management	2.6 FTE Case Manager and Supervisor Staff	\$213,031.90
4. Housing Search Assistances		
5. Child Care		
6. Housing/Counseling Services		
7. Legal Services		
8. Life Skills		
9. Mental Health Services	1 Peer Support Specialist and Additional Support Staff	\$58,905.00
10. Outpatient Health Services		
11. Street Outreach Engagement/Supplies		
12. Substance Abuse Treatment Services		
13. Transportation		
14. SOAR Assistance		
15. Services for Special Populations, describe.		
16. Operating Expenses	Operating Expenses to support CASL operations in Lee County.	\$63,095.00
17. Other		
Subtotal Requested		\$ 335,031.90 -
Admin Requested (max of 5%)		\$16,751.59
Total Amount Requested		\$ 351,783.49 -

9. Performance Outcomes

Applicants must provide anticipated outcomes for each of the following performance measures.

Performance Measure	Desired Outcome	Describe the project component(s) that will be used, and how the outcome will be achieved and monitored.
Length of time persons remain homeless <i>Based on demonstrating a reduction of the average and median length of time persons remain enrolled in emergency shelter, transitional housing, or safe haven projects before exiting to permanent housing.</i>	<p style="text-align: center;"><u>0</u> days</p> Enter the estimated number of days between project enrollment and placement into permanent housing.	Not Applicable. CASL is proposing a project that will immediately place a person into permanent supportive housing upon referral from the CoC Coordinated Entry System. Placement into CASL's program is the end goal to address homelessness.
The extent to which persons who exit homelessness to permanent housing destinations return to homelessness <i>Based on demonstrating a reduction in the percent of persons who have left homelessness (i.e., exited continuum projects into permanent housing destinations) who return to homelessness after 6 months, 12 months, and 24 months (i.e., return to any continuum projects for which homelessness is an eligibility criterion).</i>	<p style="text-align: center;"><u>90</u> %</p> Enter the estimated percent of clients that will remain housed after 6 mo. <p style="text-align: center;"><u>85</u> %</p> Enter the estimated percent of clients that will remain housed after 12 mo. <p style="text-align: center;"><u>80</u> %</p> Enter the estimated percent of clients that will remain housed after 24 mo.	CASL will provide supportive services and case management through this project to address homelessness. Individuals entering CASL's PSH program will generally receive rental assistance subsidies with a standard lease which does not require participation in services. CASL however, will make every effort to support the client with case management and peer support staff to assist the individual to remain permanently housed. CASL will monitor the goals through the HMIS system and any service plans developed between the client in partnership with the case manager.
Number of persons that are no longer homeless <i>Based on the geographic coverage of the project, and the projects ability engage clients, including those who are unsheltered, through street outreach efforts.</i>	<p style="text-align: center;"><u>50</u></p> Enter the estimated number of persons that will be housed.	CASL will track this goal based on successful Coordinated Entry referrals through the Lee County HMIS system.
Jobs and income growth <i>Based on demonstrating that the number and percent of homeless adults being served in the project increase their earned (i.e., employment) income and/or other income between their enrollment in the system and their exit (or follow-up assessment).</i>	<p style="text-align: center;"><u>8</u> # <u>15</u> %</p> Enter the estimated number and percent of clients that will increase their earned income. <p style="text-align: center;"><u>40</u> # <u>80</u> %</p> Enter the estimated number and percent of clients that will increase their unearned income. <p style="text-align: center;"><u>50</u> # <u>100</u> %</p> Enter the estimated number and percent of clients that will maintain their earned or unearned income.	CASL's SOAR trained case management staff will track this data. These individuals work actively with each client to ensure they are getting access to their eligible benefits. We anticipate all clients will maintain their current income. We anticipate a majority of our clients will receive their SSI/SSDI benefits as a result of the guidance by SOAR trained staff. Unfortunately due to the nature of the population we serve, many individuals are unable to obtain stable employment and generate earned income through traditional employment. This is generally due to the disabling condition of the client. We make every effort to ensure clients access their unearned income benefits and track this data through our internal case management system.

Section 10 – Equity Outcomes

1. Describe how your project prioritizes economic and racial equity as a goal.

All of our programs have been developed and are designed to reduce barriers for housing entry and ensure racial equity among the clients we serve. We understand that all different sorts of individuals are affected by chronic homelessness, however the cultural needs may be different in order to address disparate impacts within our community. Our case managers take the individuals needs into account, incorporating systems with accurate tracking of outcomes, and focus on underserved statistical areas, often due to the disparate impacts of mental illness, substance abuse, and other special needs for individuals within our community.

We actively monitor CoC referrals that come to us within CASL. Ensuring our team can positively influence outcomes with associated grant funding. We work to ensure referrals are quickly followed up on, and if an applicant is referred to us that is not currently in HMIS, that they are entered immediately, so we can ensure all individuals receive equitable treatment within our organization and within the CoC.

2. Name specific targets intended to produce meaningful equity results and articulate the strategies to achieve those targets.

Our organization specifically targets the disparities in access to mainstream benefits by our clients. We understand that different populations and racial groups often have differing experiences when it comes to receiving federal funding. Our case management staff's past experience predicts that more than 99% of persons served by CASL, regardless of race attain either employment or social security benefits. Of that number, on average 20% attain either a full or part-time job. The income of residents who are coming from a state of homelessness to CASL's residences will attain on average upwards of \$12,000 per year. To date, 98% of persons who have been assisted by our SOAR trained case management staff with applications for SSI/SSDI benefits have been awarded within six months or less. We continue to provide training to our staff to successfully navigate each individual's personal and cultural background in order to provide the supports they require to reach economic and social equity.

3. Explain how your agencies overall equity strategy translates into the specific services or programs offered by your agency in the following Expenditure Categories?

a. Services to address health disparities and the social determinants of health

While we do not provide targeted case management services that directly target a person's mental illness, nor do we provide psychiatric services directly to clients, we do work with other CoC providers to ensure that the health disparities and the social determinates of health are adequately addressed in order to achieve racial equity.

b. Building stronger neighborhoods and communities.

We build stronger neighborhoods by equipping our case managers with the type of cultural and social sensitivity training required to help a potential client navigate themselves towards permanent supportive housing. CASL works to provide permanent supportive housing to all in need without regard to race or socio-economic factors. We employ case managers covering a wide variety of backgrounds and a spectrum of races and ethnicities in order to match, if needed, case managers and peer support specialists with clients in order to communicate shared experiences and ultimately specialize our care with our client.

4. Are intended outcomes focused on closing gaps, reaching universal levels of service, or disaggregating progress by race, ethnicity, and other equity dimensions where relevant for the policy objective?

Our program is focused on closing gaps and reaching universal levels of service among all of the CoC referrals that we receive through the Coordinated Entry system. We track our project goals and progress disaggregated by race, ethnicity, and other equity dimensions, looking purely at the outcomes achieved by individuals entering the CoC Coordinated Entry system.

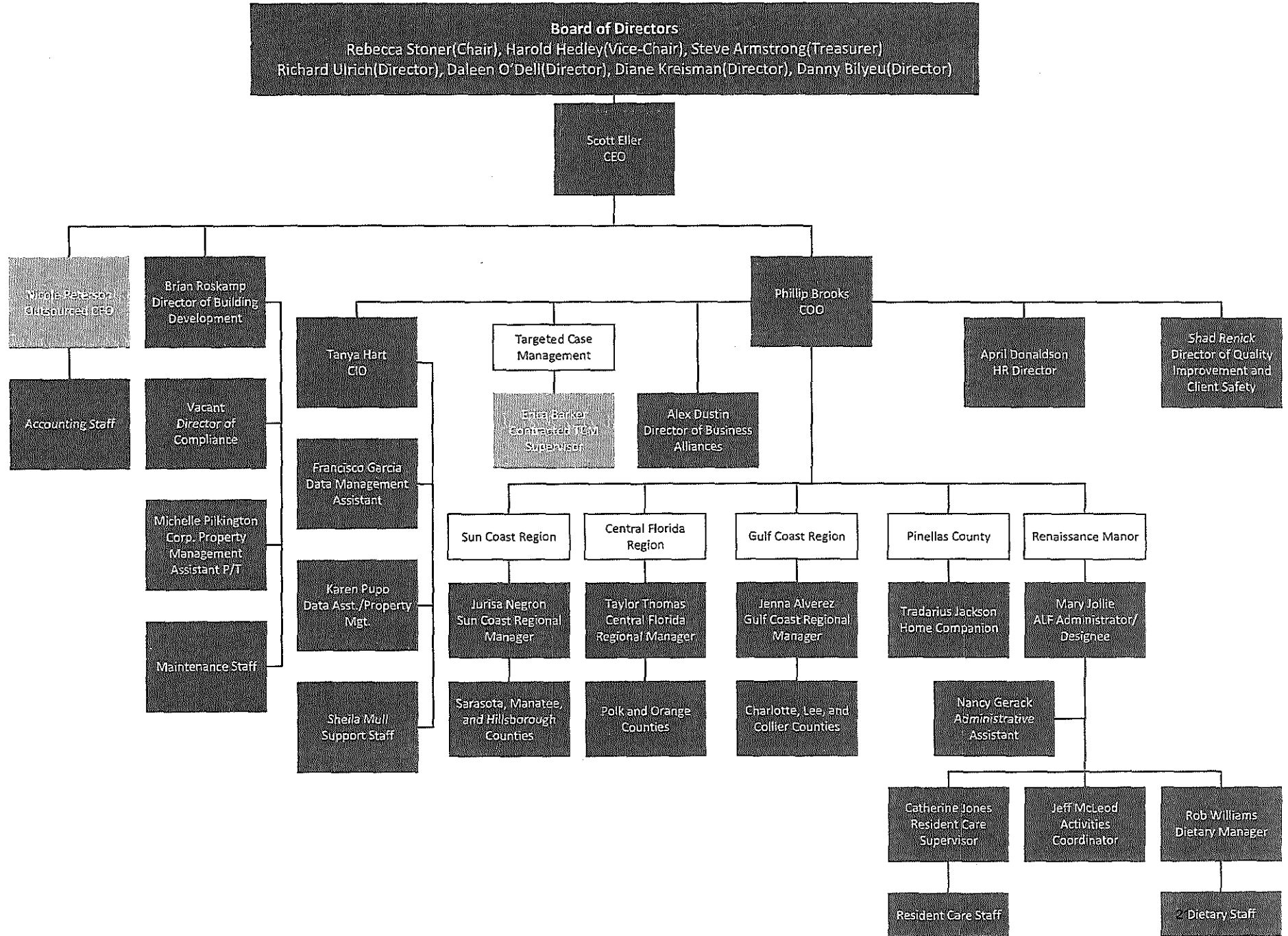
We understand that all different sorts of individuals are affected by chronic homelessness, however the cultural needs may be different in order to address disparate impacts within our community. Our case managers take the individuals needs into account, incorporating systems for accurate tracking, and focused underserved statistical areas, often due to disparate impacts of mental illness, substance abuse and other special needs for individuals in our community.

**Community Assisted and Supported Living
2021 -22 Projected Budget**

**Based on previous years actuals*

	<u>2021-22 Budget</u>
Ordinary Income/Expense	
Projected Income	
50000 · Revenue	
50100 · Earned Revenue	
Total 50110 · Resident Housing Income	2,138,317.75
50130 · 3rd Party Rental Assistance	60,000.00
50140 · Medicaid-ST of FLA-ACS	300,000.00
50141 · Case Management	
50145 · Independent Supportive Services	39,600.00
50190 · Management Services	80,400.00
50195 · Application & NonRefundable Fees	300.00
Total 50100 · Earned Revenue	<u>2,618,617.75</u>
55000 · Unearned Revenue	
Total 55100 · Contributions Income	156,494.10
55200 · Grant Income	
55210 · Cent FI Behavioral Hlth Contr	1,686,000.00
55215 · Federal HUD Grant	100,000.00
55250 · Grants - State of Florida (DCF)	
55260 · Grants-Lee Co	374,000.00
55270 · Grants-Sarasota Cty	408,000.00
55280 · Grants - Collier Co	33,000.00
55281 · Collier/Owner Occupied Rehab	
55290 · Unrestricted Grant Income	
Total 55200 · Grant Income	<u>2,601,000.00</u>
Total 55000 · Unearned Revenue	<u>2,757,494.10</u>
Total 50000 · Revenue	5,376,111.85
5001-IH · Revenue - Independence House	
Total 5001-IH · Revenue - Independence House	
Total Projected Income	<u>5,376,111.85</u>
Projected Gross Profit	5,376,111.85
Projected Expense	
Total 60000 · Program Expenses	1,713,161.59
Total 70000 · Personnel Expenses	2,415,430.09
Total 80000 · General & Administrative Exp	1,060,053.44
Total Projected Expense	<u>5,188,645.11</u>
Projected Net Ordinary Income	<u>187,466.74</u>
Other Income/Expense	
Total 95000 · Other Non-Operating Income	91,258.38
Total Other Expense	75,000.00
Projected Net Income	<u>203,725.12</u>

Community Assisted and Supported Living Corporate Organizational Chart Effective 10-25-21



Executive Summary

ES-05 Executive Summary - 24 CFR 91.200(c), 91.220(b)

1. Introduction

The 2019-2023 Consolidated Plan is a required submission to sustain entitlement funding from the U.S. Department of Housing and Urban Development (HUD). The Community Development Block Grant (CDBG), HOME Investment Partnership Program (HOME), and the Emergency Solutions Grant (ESG) programs are continued through this process. This five-year plan identifies community needs, and sets goals and objectives to address those needs with this funding. The Annual Action Plan for HUD Program Year 2019 is also included herein, and will provide more detailed information regarding the first year's use of funds.

2. Summary of the objectives and outcomes identified in the Plan Needs Assessment Overview

There are five priority needs identified here within. Those needs are affordable housing, housing and services for the homeless, public facility improvements, economic development and community revitalization.

This plan outlines eight goals and a variety of outcome indicators to address the identified needs. Those goals and outcomes are as follows:

1. Affordable Housing Development

Outcome 1: Rental Housing Added: 100 units

Outcome 2: Homeowner Housing Added: 5 units

2. Housing Rehabilitation and Reconstruction

Outcome 1: Rental Housing Rehabilitated: 20 units

Outcome 2: Homeowner Housing Rehabilitated: 198 units

3. Down Payment Assistance

Outcome 1: Assistance to Homebuyers: 131 households

4. Housing and Services for Persons who are Homeless

Outcome 1: Public Service Activities (other than housing): 2125 persons

Outcome 2: Tenant Based Rental Assistance/Rapid Re-Housing: 315 households

5. Public Services for Community Revitalization

Outcome 1: Public Service Activities (other than housing): 9495

6. Infrastructure Improvements

Outcome 1: Infrastructure Activities (other than housing): 10,000 persons

7. Economic Development

Outcome 1: Businesses Assisted: 1 business

8. Public Facility Improvements

Outcome 1: Public Facilities Improved: 5 non-profit organization

Housing Market Analysis

MA-05 Overview

Housing Market Analysis Overview:

The majority of Lee County's housing units are single family detached units.

Housing needs were discussed at length during the public participation and consultation processes undertaken for the completion of this plan. Discussions from these meetings revealed a need for a variety of housing units. Such units include those providing services and housing for elderly and disabled individuals. Participants also stated the need for shared and single room occupancy housing for persons experiencing homelessness, persons with severe and persistent mental illness, and persons with disabilities. Consultation with the Affordable Housing Committee, PHA, and City of Fort Myers, also revealed the need for large units to meet the housing needs of households with 5 or more members.

Affordable housing has been identified as the most significant need within the County.

MA-10 Number of Housing Units – 91.210(a)&(b)(2)

Introduction

Lee County's housing stock includes four categories: single-family dwelling units, multi-family dwelling units, mobile homes and other types of units. Single-family units are attached or detached dwelling units usually on individual lots of land. In 2017, single-family housing units comprised 62.23 percent. The City of Cape Coral had the highest proportion of single-family housing units in the County followed by unincorporated County areas and the Village of Estero.

Multi-family units consist of structures with two or more units. Multi-family dwelling units comprised 27.86 percent of the County's housing stock in 2017. The Town of Fort Myers Beach and the City of Fort Myers had higher proportions of multi-family units, while the City of Cape Coral and unincorporated County areas had higher proportion of single-family units.

Mobile homes or manufactured homes are typically located at mobile home parks in Lee County. Mobile-home units comprised 9.77 percent of the County's housing stock in 2017. Most of the County's 37,452 mobile homes are located in the unincorporated areas of the County followed by the City of Bonita Springs.

Single-family home sales rose steadily between 2012 and 2017. Since 2012, home values have steadily risen. According to Florida Realtors "Florida Residential Market Sales Activity Report, January 2019" median sales price in the Cape Coral - Fort Myers MSA for a single family home was \$264,498, an increase of more than \$69,000 from the 2014 median of \$195,000, and nearly the same amount as the 2004 median.

SP-25 Priority Needs - 91.215(a)(2)

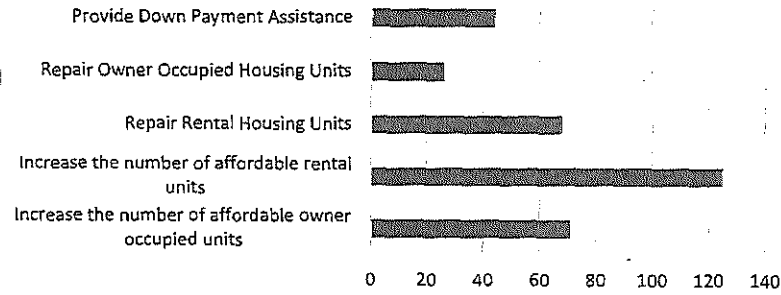
Table 48 – Priority Needs Summary

1	Priority Need Name	Affordable Housing
	Priority Level	High
	Population	Extremely Low Low Moderate Middle Large Families Families with Children Elderly Public Housing Residents Elderly Frail Elderly Persons with Mental Disabilities Persons with Physical Disabilities Persons with Developmental Disabilities Persons with Alcohol or Other Addictions
	Associated Goals	Affordable Housing Development Housing Rehabilitation and Reconstruction Down Payment Assistance
	Description	<div>Affordable housing is needed for all income levels and in all areas of the jurisdiction.</div>
	Basis for Relative Priority	<div>Data, consultation, and public input all reveal a need for affordable housing opportunities in Lee County.</div>
	2	Priority Need Name
Priority Level		High
Population		Extremely Low Low Chronic Homelessness Individuals Mentally Ill Chronic Substance Abuse Persons with HIV/AIDS Unaccompanied Youth
Associated Goals		Housing and Services for Persons who are Homeless

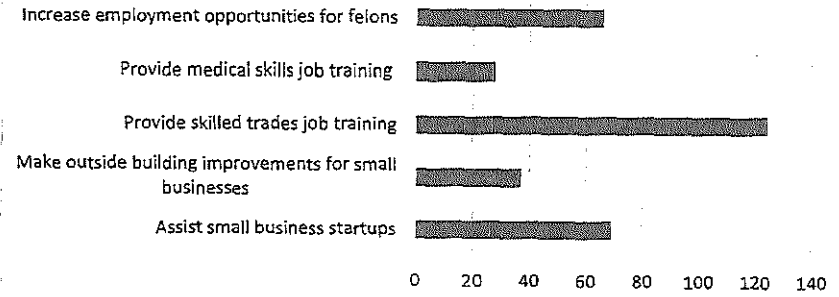
Grand Total		Rank your top three priorities in each category, using 1 for your highest priority and 3 for your lowest.			1's	2's	3's	Category with Highest Points Wins
Housing	Increase the number of affordable owner occupied units	9	16	12			71	
	Increase the number of affordable rental units	29	14	10			125	
	Repair Rental Housing Units	13	11	7			68	
	Repair Owner Occupied Housing Units	4	6	2			26	
	Provide Down Payment Assistance	5	6	17			44	
Economic Development	Assist small business startups	11	14	8			69	
	Make outside building improvements for small businesses	7	5	6			37	
	Provide skilled trades job training	26	20	6			124	
	Provide medical skills job training	2	7	8			28	
	Increase employment opportunities for felons	10	12	12			66	
Homelessness	Increase emergency shelter beds	12	9	7			61	
	Increase rental assistance programs	11	11	7			62	
	Increase Mental Health and Substance Abuse Treatment Programs	24	14	6			106	
	Increase Health Care Services	3	8	11			36	
	Increase street outreach efforts	7	11	10			53	
Seniors/Individuals with Disabilities/Veterans	Provide crime prevention and safety education	8	3	8			38	
	Provide accessible housing	25	12	3			102	
	Provide services to support independent living	14	20	7			89	
	Increase the capacity of adult daycare or other assisted living facilities	12	15	12			78	
	Increase opportunities for community engagement	1	7	11			28	
Adults	Increase Mental Health and Substance Abuse Treatment Programs	20	17	7			101	
	Increase Health Care Services	7	10	14			55	
	Provide budgeting and financial education	9	6	3			42	
	Provide crime prevention and safety education	7	4	8			37	
	Increase emergency shelter beds for victims of human trafficking and domestic violence	11	12	5			62	
	Increase counseling and services for victims of human trafficking and domestic violence	5	4	8			31	
Youth	Increase low cost child care programs	16	10	11			79	
	Increase afterschool programs	10	14	7			65	
	Increase health care services	4	5	8			30	
	Increase Mental Health and Substance Abuse Treatment Programs	13	11	7			68	
	Increase emergency shelter beds	8	10	2			46	
	Increase crime and drug prevention programs	9	10	8			55	
Transportation	Increase bus routes to areas where jobs are located	22	21	10			118	
	Increase transportation options for persons who are elderly and/or disabled	14	11	19			83	
	Increase bus routes in areas with high low-income and minority populations	17	13	14			91	

Fair Housing	Provide education about fair housing rights for renters and homebuyers	10	20	14		84
	Provide education about fair housing laws for landlords/mortgage lenders/realtors/etc.	14	19	14		94
	Use a secret shopper to identify discrimination	5	4	3		26
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Public Facilities	Increase parks and recreational facilities	14	12	12		78
	Put in new sidewalks	21	14	6		97
	Improve and expand non-profit organization's buildings	14	7	9		65
	Create new community gardens	5	14	12		55

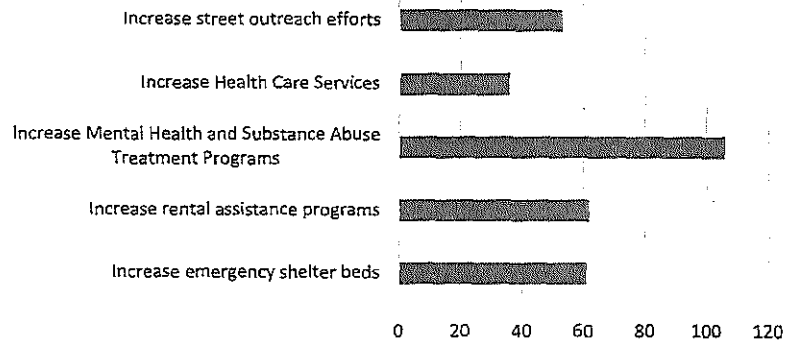
Housing



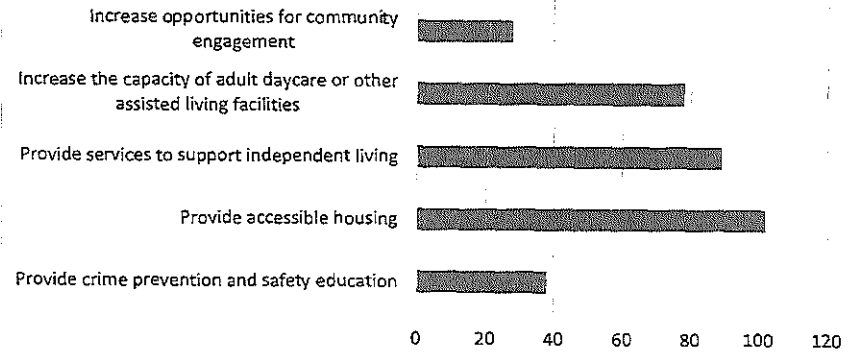
Economic Development



Homelessness



Special Populations



Executive Summary

ES-05 Executive Summary - 24 CFR 91.200(c), 91.220(b)

1. Introduction

The 2019-2023 Consolidated Plan is a required submission to sustain entitlement funding from the U.S. Department of Housing and Urban Development (HUD). The Community Development Block Grant (CDBG), HOME Investment Partnership Program (HOME), and the Emergency Solutions Grant (ESG) programs are continued through this process. This five-year plan identifies community needs, and sets goals and objectives to address those needs with this funding. The Annual Action Plan for HUD Program Year 2019 is also included herein, and will provide more detailed information regarding the first year's use of funds.

2. Summary of the objectives and outcomes identified in the Plan Needs Assessment Overview

There are five priority needs identified here within. Those needs are affordable housing, housing and services for the homeless, public facility improvements, economic development and community revitalization.

This plan outlines eight goals and a variety of outcome indicators to address the identified needs. Those goals and outcomes are as follows:

1. **Affordable Housing Development**
 - Outcome 1: Rental Housing Added: 100 units
 - Outcome 2: Homeowner Housing Added: 5 units
2. **Housing Rehabilitation and Reconstruction**
 - Outcome 1: Rental Housing Rehabilitated: 20 units
 - Outcome 2: Homeowner Housing Rehabilitated: 198 units
3. **Down Payment Assistance**
 - Outcome 1: Assistance to Homebuyers: 131 households
4. **Housing and Services for Persons who are Homeless**
 - Outcome 1: Public Service Activities (other than housing): 2125 persons
 - Outcome 2: Tenant Based Rental Assistance/Rapid Re-Housing: 315 households
5. **Public Services for Community Revitalization**
 - Outcome 1: Public Service Activities (other than housing): 9495
6. **Infrastructure Improvements**
 - Outcome 1: Infrastructure Activities (other than housing): 10,000 persons
7. **Economic Development**
 - Outcome 1: Businesses Assisted: 1 business
8. **Public Facility Improvements**
 - Outcome 1: Public Facilities Improved: 5 non-profit organization

Housing Market Analysis

MA-05 Overview

Housing Market Analysis Overview:

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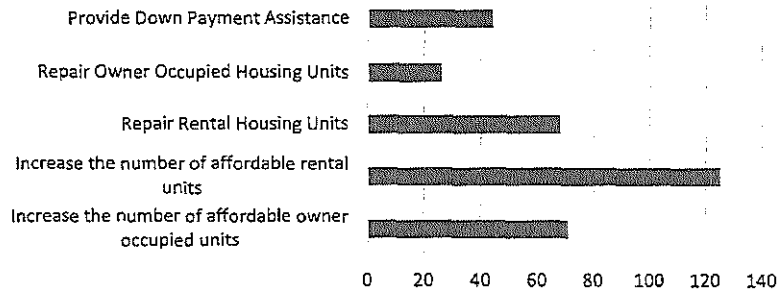
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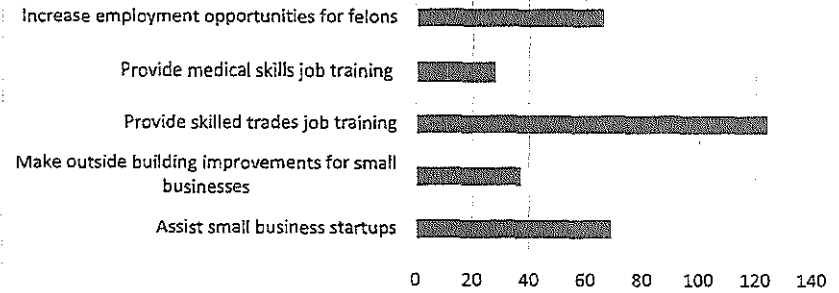
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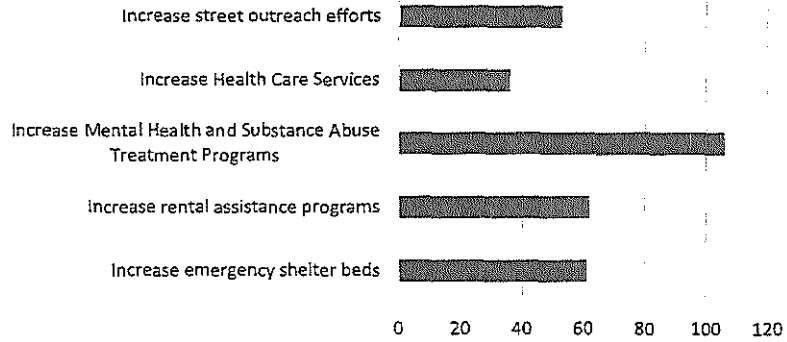
Housing



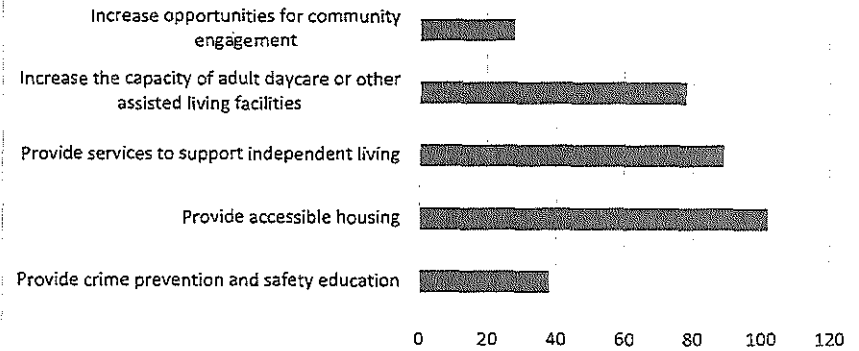
Economic Development



Homelessness



Special Populations



Best Practices

1. Permanent Supportive Housing

Permanent Supportive Housing (PSH) is a nationally recognized, proven and cost-effective solution to the needs of vulnerable people with disabilities who are homeless, institutionalized, or at greatest risk of these conditions. The PSH approach integrates permanent, affordable rental housing with the best practice community-based supportive services needed to help people who are homeless and/or have serious and long-term disabilities - such as mental illnesses, developmental disabilities, physical disabilities, substance use disorders, and chronic health conditions - access and maintain stable housing in the community.

Key components of PSH that facilitate successful housing tenure include:

- § Individually tailored and flexible supportive services that are voluntary, can be accessed 24 hours a day/7 days a week, and are not a condition of ongoing tenancy
- § Leases that are held by the tenants without limits on length of stay
- § Ongoing collaboration between service providers, property managers, and tenants to preserve tenancy and resolve crisis situations that may arise.

The evidence on PSH demonstrates that the housing preferences of homeless people and people with disabilities are consistent with the PSH model which provides independent housing that is integrated in the community; offering greater satisfaction and perceived choice to the individuals it serves. The expansion of PSH using innovative systems-level approaches such as those authorized in HUD's reformed Section 811 Program holds great promise for systematically expanding new integrated supportive housing opportunities in states and localities across the country. Integrated supportive housing approaches are responsive to the community integration mandates within the 1999 U.S. Supreme Court's *Olmstead* decision, a landmark disability rights case which affirms the right of people with disabilities under the Americans with Disabilities Act (ADA) to live in the most integrated setting appropriate to their needs.

2. Housing First

See attached PDF

3. Case Management

Case management is one of the primary services offered to individuals and families experiencing homelessness. The National Association of State Mental Health Program Directors (NASMHPD) defines case management as "a range of services provided to assist and support individuals in developing their skills to gain access to needed medical, behavioral health, housing, employment, social, educational, and other services essential to meeting basic human services." This also includes providing "linkages and training for the patient served in the use of basic community resources, and monitoring of overall service delivery."

Case managers work with people and families experiencing homelessness and those who are at risk of homelessness. Case managers identify households of greatest risk and determine the type of support needed to prevent homelessness. They also help clients develop independent living skills, provide support with treatment, and serve as the point of contact between clients and people in their social and professional support systems. To be successful, case managers need the right skills and adequate community knowledge.



FACT SHEET: HOUSING FIRST



WHAT IS HOUSING FIRST?

Housing First is a homeless assistance approach that prioritizes providing permanent housing to people experiencing homelessness, thus ending their homelessness and serving as a platform from which they can pursue personal goals and improve their quality of life. This approach is guided by the belief that people need basic necessities like food and a place to live before attending to anything less critical, such as getting a job, budgeting properly, or attending to substance use issues. Additionally, Housing First is based on the theory that client choice is valuable in housing selection and supportive service participation, and that exercising that choice is likely to make a client more successful in remaining housed and improving their life.¹

HOW IS HOUSING FIRST DIFFERENT FROM OTHER APPROACHES?

Housing First does not require people experiencing homelessness to address all of their problems including behavioral health problems, or to graduate through a series of services programs before they can access housing. Housing First does not mandate participation in services either before obtaining housing or in order to retain housing. The Housing First approach views housing as the foundation for life improvement and enables access to permanent housing without prerequisites or conditions beyond those of a typical renter. Supportive services are offered to support people with housing stability and individual well-being, but participation is not required as services have been found to be more effective when a person chooses to engage.² Other approaches do make such requirements in order for a person to obtain and retain housing.

WHO CAN BE HELPED BY HOUSING FIRST?

A Housing First approach can benefit both homeless families and individuals with any degree of service needs. The flexible and responsive nature of a Housing First approach allows it to be tailored to help anyone. As such, a Housing First approach can be applied to help end homelessness for a household who became homeless due to a temporary personal or financial crisis and has limited service needs, only needing help accessing and securing permanent housing. At the same time, Housing First has been found to be particularly effective approach to end homelessness for high need populations, such as chronically homeless individuals.³

WHAT ARE THE ELEMENTS OF A HOUSING FIRST PROGRAM?

Housing First programs often provide rental assistance that varies in duration depending on the household's needs. Consumers sign a standard lease and are able to access supports as necessary to help them do so. A variety of voluntary services may be used to promote housing stability and well-being during and following housing placement.

Two common program models follow the Housing First approach but differ in implementation. Permanent supportive housing (PSH) is targeted to individuals and families with chronic illnesses, disabilities, mental health issues, or substance use disorders who have experienced long-term or repeated homelessness. It provides long-term rental assistance and supportive services.

A second program model, rapid re-housing, is employed for a wide variety of individuals and

families. It provides short-term rental assistance and services. The goals are to help people obtain housing quickly, increase self-sufficiency, and remain housed. The Core Components of rapid re-housing—housing identification, rent and move-in assistance, and case management and services—operationalize Housing First principals.

■ DOES HOUSING FIRST WORK?

There is a large and growing evidence base demonstrating that Housing First is an effective solution to homelessness. Consumers in a Housing First model access housing faster^{iv} and are more likely to remain stably housed.^v This is true for both PSH and rapid re-housing programs. PSH has a long-term housing retention rate of up to 98 percent.^{vi} Studies have shown that rapid re-housing helps people exit homelessness quickly—in one study, an average of two months^{vii}—and remain housed. A variety of studies have shown that between 75 percent and 91 percent of households remain housed a year after being rapidly re-housed.^{viii}

More extensive studies have been completed on PSH finding that clients report an increase in perceived levels of autonomy, choice, and control in Housing First programs. A majority of clients are found to participate in the optional supportive services provided,^{ix} often resulting in greater housing stability. Clients using supportive services are more likely to

participate in job training programs, attend school, discontinue substance use, have fewer instances of domestic violence,^x and spend fewer days hospitalized than those not participating.^{xi}

Finally, permanent supportive housing has been found to be cost efficient. Providing access to housing generally results in cost savings for communities because housed people are less likely to use emergency services, including hospitals, jails, and emergency shelter, than those who are homeless. One study found an average cost savings on emergency services of \$31,545 per person housed in a Housing First program over the course of two years.^{xii} Another study showed that a Housing First program could cost up to \$23,000 less per consumer per year than a shelter program.^{xiii}

ⁱTsemberis, S. & Eisenberg, R. Pathways to Housing: Supported Housing for Street-Dwelling Homeless Individuals with Psychiatric Disabilities. 2000.

ⁱⁱEinbinder, S. & Tull, T. The Housing First Program for Homeless Families: Empirical Evidence of Long-term Efficacy to End and Prevent Family Homelessness. 2007.

ⁱⁱⁱGulcur, L., Stefancic, A., Shinn, M., Tsemberis, S., & Fishcer, S. Housing, Hospitalization, and Cost Outcomes for Homeless Individuals with Psychiatric Disabilities Participating in Continuum of Care and Housing First Programmes. 2003.

^{iv}Gulcur, L., Stefancic, A., Shinn, M., Tsemberis, S., & Fishcer, S. Housing, Hospitalization, and Cost Outcomes for Homeless Individuals with Psychiatric Disabilities Participating in Continuum of Care and Housing First programs. 2003.

^vTsemberis, S. & Eisenberg, R. Pathways to Housing: Supported Housing for Street-Dwelling Homeless Individuals with Psychiatric Disabilities. 2000.

^{vi}Montgomery, A.E., Hill, L., Kane, V., & Culhane, D. Housing Chronically Homeless Veterans: Evaluating the Efficacy of a Housing First Approach to HUD-VASH. 2013.

^{vii}U.S. Department of Housing and Urban Development. Family Options Study: Short-Term Impacts. 2015.

^{viii}Byrne, T., Treglia, D., Culhane, D., Kuhn, J., & Kane, V. Predictors of Homelessness Among Families and Single Adults After Exit from Homelessness Prevention and Rapid Re-Housing Programs: Evidence from the Department of Veterans Affairs Supportive Services for Veterans Program. 2015.

^{ix}Tsemberis, S., Gulcur, L., & Nakae, M. Housing First, Consumer Choice, and Harm Reduction for Homeless Individuals with a Dual Diagnosis. 2004.

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^{xii}Perman, J. & Parvensky, J. Denver Housing First Collaborative: Cost Benefit Analysis and Program Outcomes Report. 2006.

^{xiii}Tsemberis, S. & Stefancic, A. Housing First for Long-Term Shelter Dwellers with Psychiatric Disabilities in a Suburban County: A Four-Year Study of Housing Access and Retention. 2007.



Consumer's Certificate of Exemption
 Issued Pursuant to Chapter 212, Florida Statutes

DR-14
 R. 01/18

85-8012579193C-4	05/31/2019	05/31/2024	501(C)(3) ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

COMMUNITY ASSISTED AND SUPPORTED
 LIVING INC
 1401 16TH ST
 SARASOTA FL 34236-2519

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.



Important Information for Exempt Organizations

DR-14
 R. 01/18

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (F.A.C.).
2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.
3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, F.A.C.).
5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.
6. If you have questions about your exemption certificate, please call Taxpayer Services at 850-488-6800. The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.

**Central Florida Behavioral Health Network, Inc.
Subcontractor Agreement Amendment**

THIS AMENDMENT, entered into by
**Central Florida Behavioral Health
Network, Inc.**
CONTRACTOR

**Community Assisted and Supported
Living, Inc. (CASL)**
SUBCONTRACTOR

Amends Subcontract QG041-21:

- Amend **Subcontract** to update total Subcontract amount.
- Amend **Exhibit B** to adjust funding:
 - Nonrecurring increase in Current FY funding in MHA00 (+\$3,756); NR MH000 funds.
 - Recurring increase in Base funding in MHA00 (+\$439,084); Recurring funding for Drop-In Centers in Sarasota & DeSoto. Annual amount: \$448,444.
 - Nonrecurring increase in Current FY funding in MHCOS (+\$272,489); NR funding in ME MH Services MHBG Supplemental 1, \$270,000 for supported housing & recovery support in Lee & Charlotte Counties.
 - Nonrecurring increase in Current FY funding in MHCOS (+\$199,861); NR funding in ME Emergency COVID-19 Supplemental Grant, funding ends 5/31/2022.
 - Nonrecurring increase in Current FY funding in MHRM5 (+\$1,250,000); Special Appropriation for FY 21-22.
 - Recurring decrease in Base funding in MSA00 (-\$320); Reduction in Annual Operating Budget (AOB) in MS000.
 - Nonrecurring increase in Current FY funding in MSCOM (+\$5,792); NR funding in ME SA Services SAPT Supplemental 1.
 - This caused an increase in FY 21-22 funding by (+\$2,170,662).
 - This caused an increase in FY 22-23 funding by (+\$438,764).
 - This caused an increase in the overall subcontract by (+\$2,609,426).
- Amend **Exhibit C** to add CAS01, CAS02, and CAS03 measures.

1. **Subcontract**, Section D.2., Line 4, delete "... totaling **\$2,732,123**, subject to the availability of funding..." and replace with "... totaling **\$5,341,549**, subject to the availability of funding..." and delete Fiscal Table and replace with:

State Fiscal Year	Base	Current Fiscal Year Only (Nonrecurring)	Carry Forward (Nonrecurring)	Total Value of Subcontract
2020-2021	\$566,093	\$1,120,000	\$0	\$1,686,093
2021-2022	\$961,779	\$1,731,898	\$0	\$2,693,677
2022-2023	\$961,779	\$0	\$0	\$961,779
Total	\$2,489,651	\$2,851,898	\$0	\$5,341,549

2. **Exhibit C**, Performance Measures, dated 07/01/2021 are deleted and replaced with **Exhibit C**, Performance Measures, dated 08/24/2021.

Subcontract Number QG041-21
Amendment No. 7

This amendment shall begin on July 1, 2021.

All provisions not in conflict with this amendment are still in effect and are to be performed at the level specified in the Master Contract and Subcontract.

This amendment and all its attachments are hereby made a part of the Subcontract.

THE PARTIES HERETO by and through their duly authorized representatives, whose signatures appear below, have caused this amendment to be executed.

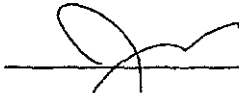
CONTRACTOR

SUBCONTRACTOR

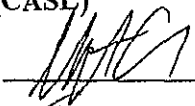
Central Florida Behavioral Health
Network, Inc.

Community Assisted and Supported
Living, Inc. (CASL)

Approved by: _____



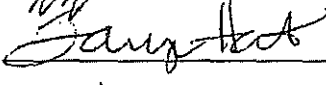
Approved by: _____



Witness: _____

Janet Higgins-Weston

Witness: _____



Date: _____

08.27.2021

Date: _____

08/27/2021

Fiscal Year	Provider Name	Contract Number	Base Recurring	Non-Recurring	Total
2020-2021	Community Assisted and Supported Living, Inc. (CASL)	QG041	\$566,093	\$1,120,000	\$1,686,093
2021-2022	Community Assisted and Supported Living, Inc. (CASL)	QG041	\$961,779	\$1,731,898	\$2,693,677

Supplemental Funding Detail

Fiscal Year	Provider Name	Contract Number	Activity	OCA	OCA Title	Base Recurring	Non-Recurring
2020-2021	Community Assisted and Supported Living, Inc. (CASL)	QG041	500000	MHA00	Managing Entity Services and Supports Provider Activity - Adult Mental Health	\$178,484	
2020-2021	Community Assisted and Supported Living, Inc. (CASL)	QG041	500000	MHAPG	Grants PATH	\$355,000	\$20,000
2020-2021	Community Assisted and Supported Living, Inc. (CASL)	QG041	500000	MHRM5	Mental Health Renaissance Manor 5		\$1,100,000
2020-2021	Community Assisted and Supported Living, Inc. (CASL)	QG041	600000	MSA00	Managing Entity Services and Supports Provider Activity - Adult Substance Abuse	\$32,609	
2021-2022	Community Assisted and Supported Living, Inc. (CASL)	QG041	500000	MHA00	Managing Entity Services and Supports Provider Activity - Adult Mental Health	\$617,568	\$3,756
2021-2022	Community Assisted and Supported Living, Inc. (CASL)	QG041	500000	MHAPG	Grants PATH	\$311,922	
2021-2022	Community Assisted and Supported Living, Inc. (CASL)	QG041	500000	MHCOM	ME MH Services MHBG Supplemental 1		\$272,489
2021-2022	Community Assisted and Supported Living, Inc. (CASL)	QG041	500000	MHCOS	ME Emergency COVID-19 Supplemental Grant		\$199,861
2021-2022	Community Assisted and Supported Living, Inc. (CASL)	QG041	500000	MHRM5	Mental Health Renaissance Manor 5		\$1,250,000
2021-2022	Community Assisted and Supported Living, Inc. (CASL)	QG041	600000	MSA00	Managing Entity Services and Supports Provider Activity - Adult Substance Abuse	\$32,289	
2021-2022	Community Assisted and Supported Living, Inc. (CASL)	QG041	600000	MSCOM	ME SA Services SAPT Supplemental 1		\$5,792
						\$1,527,872	\$2,851,898

Covered Services Funding Tool Detail

Provider Name	Community Assisted & Supported Living, Inc. (CASL)	Contract No.	QG041-21
Contract Type	Fee for Service	Contract Amendment ID	10877
			9/20/2021 5:19:44 PM

Program	Activity	Category	Rollup OCA	Rollup OCA Amount	OCA	OCA Amount	Covered Service / Cost Reimbursement Item	Facility	Contracted Value	Contract Rate	Justification							
Adult Mental Health	502018	100610	MHA00	\$621,324.00	MHA09	\$621,324.00	02 - Case Management	58 - Sarasota	\$5,054.42	\$67.09								
							07 - Drop-In/Self-Help Centers	14 - DeSoto	\$66,840.00	\$65.92								
							07 - Drop-In/Self-Help Centers	58 - Sarasota	\$372,444.00	\$65.92								
							15 - Outreach	11 - Collier	\$3,756.00	\$47.34								
							15 - Outreach	36 - Lee County	\$60,000.00	\$47.34								
							15 - Outreach	58 - Sarasota	\$66,280.31	\$47.34								
							26 - Supported Housing/Living	36 - Lee County	\$25,068.00	\$63.72								
							26 - Supported Housing/Living	58 - Sarasota	\$22,081.55	\$63.72								
							Adult Mental Health	502018	100610	MHAPG	\$311,922.00	MHAPG	\$311,922.00	02 - Case Management	11 - Collier	\$8,000.00	\$67.09	
														02 - Case Management	36 - Lee County	\$5,000.00	\$67.09	
02 - Case Management	58 - Sarasota	\$10,000.00	\$67.09															
15 - Outreach	11 - Collier	\$39,034.00	\$47.34															
15 - Outreach	36 - Lee County	\$25,882.00	\$47.34															
15 - Outreach	58 - Sarasota	\$49,571.00	\$47.34															
26 - Supported Housing/Living	11 - Collier	\$63,266.00	\$63.72															
26 - Supported Housing/Living	36 - Lee County	\$36,440.00	\$63.72															
26 - Supported Housing/Living	58 - Sarasota	\$68,729.00	\$63.72															
28 - Incidental Expenses	11 - Collier	\$3,000.00	\$50.00															
28 - Incidental Expenses	36 - Lee County	\$3,000.00	\$50.00															
Adult Mental Health	502018	105153	MHCOM	\$272,489.00	MH09S	\$272,489.00								26 - Supported Housing/Living	08 - Charlotte	\$75,524.50	\$63.72	
														26 - Supported Housing/Living	36 - Lee County	\$76,864.00	\$63.72	
							46 - Recovery Support - Individual	08 - Charlotte	\$60,000.00	\$46.50								
							46 - Recovery Support - Individual	36 - Lee County	\$60,000.00	\$46.50								
Adult Substance Abuse	603007	105153	MHCOS	\$199,861.00	MHCOS	\$199,861.00	26 - Supported Housing/Living	58 - Sarasota	\$199,861.00	\$63.72								
Adult Mental Health	502018	100778	MHRM5	\$1,250,000.00	MHRM5	\$1,250,000.00	26 - Supported Housing/Living	08 - Charlotte	\$96,458.00	\$63.72								
							26 - Supported Housing/Living	11 - Collier	\$139,724.00	\$63.72								
							26 - Supported Housing/Living	36 - Lee County	\$454,783.00	\$63.72								
							26 - Supported Housing/Living	58 - Sarasota	\$559,035.00	\$63.72								
Adult Substance Abuse	603007	100618	MSA00	\$32,289.00	MSA11	\$32,289.00	26 - Supported Housing/Living	58 - Sarasota	\$32,289.00	\$63.72								
Adult Substance Abuse	603007	105153	MSCOM	\$5,792.00	MS11S	\$5,792.00	26 - Supported Housing/Living	58 - Sarasota	\$5,792.00	\$63.72								

**Memorandum of Understanding
Between SalusCare, Inc.
and
Community Assisted and Supported Living, Inc.**

This *Memorandum of Understanding (MOU)* is to establish a collaborative partnership of support between SalusCare, Inc. (SalusCare) and Community Assisted and Supported Living, Inc. (CASL), further, to be known as the Key Partners.

WHEREAS, the sole purpose of this *Memorandum of Understanding* is to encourage cooperation between the Key Partners,

WHEREAS, SalusCare wishes to partner with CASL as a permanent supportive housing provider with respect to the housing and support needs of individuals with disabling conditions to include mental illness or co-occurring disorders and those experiencing homelessness, and

WHEREAS, SalusCare desires to collaborate with CASL because of their commitment to the behavioral health needs for individuals with disabling conditions to include mental illness or co-occurring disorders and those experiencing homelessness in Lee County, and

WHEREAS, The Key Partners recognize the extraordinary community value of linking behavioral health services and clean, safe, affordable housing to low-income individuals with disabilities, and

WHEREAS, the Key Partners understand that this collaboration which is unique and specialized; is critical to helping individuals with disabling conditions to include mental illness or co-occurring disorders and those experiencing homelessness receive community-based behavioral health and permanent supportive housing services information from Lee County Continuum of Care and

THEREFORE, the Key Partners agree that it is in the best interests of all concerned to enter this *Memorandum of Understanding*.

II. GUIDING PRINCIPLES

Key Partners to this *Memorandum of Understanding* jointly recognize that individuals with disabling conditions to include mental illness or co-occurring disorders and those experiencing homelessness are diverse in terms of their strengths, motivation, goals, backgrounds, and needs;


- Those individuals are members of the community with all the rights, privileges, opportunities accorded to the greater community;
- Those individuals have a right to privacy, and the right to determine for themselves matters affecting their lives;
- In designing and implementing services, the input of the individuals shall be sought.


TERM

This MOU Agreement will begin effective the date of September 20, 2021 and will continue through September 30, 2025. This Agreement may be terminated in accordance with the section on Termination below.

- IV. TERMINATION** Key Partners may terminate their participation with this Agreement for any reason by giving the other parties ninety (90) days prior written notice.

- V. **NONDISCRIMINATION.** There shall be no discrimination of any individual on account of race, color, creed, religion, sex, marital status, sexual orientation, age, handicap, ancestry or national origin in the administration of this program.
- VI. **AMENDMENTS.** This MOU may be amended only with the mutual consent of the Key Partners.
- VII. **CERTIFICATION OF AUTHORITY TO SIGN MOU.** The persons signing this MOU on behalf of the Key Partners hereto certify by said signatures that they are duly authorized to sign this document.

Signed:  _____ Date: 09/21/2021
Stacey Cook
President/CEO, SalusCare, Inc.

Signed:  _____ Date: 09-21-2021
Scott Eller,
CEO, Community Assisted and Supported Living, Inc.

**Memorandum of Understanding
Between Centerstone of Florida, Inc.
and
Community Assisted and Supported Living, Inc.**

This *Memorandum of Understanding (MOU)* is to establish a collaborative partnership of support between Centerstone of Florida, Inc. (Centerstone) and Community Assisted and Supported Living, Inc. (CASL), further, to be known as the Key Partners.

WHEREAS, the sole purpose of this *Memorandum of Understanding* is to encourage cooperation between the Key Partners,

WHEREAS, Centerstone wishes to partner with CASL as a permanent supportive housing provider with respect to the housing and support needs of individuals with disabling conditions to include mental illness or co-occurring disorders and those experiencing homelessness, and

WHEREAS, Centerstone desires to collaborate with CASL because of their commitment to the behavioral health needs for individuals with disabling conditions to include mental illness or co-occurring disorders and those experiencing homelessness in Sarasota County, and

WHEREAS, The Key Partners recognize the extraordinary community value of linking behavioral health services and clean, safe, affordable housing to low-income individuals with disabilities, and

WHEREAS, the Key Partners understand that this collaboration which is unique and specialized; is critical to helping individuals with disabling conditions to include mental illness or co-occurring disorders and those experiencing homelessness receive community-based behavioral health and permanent supportive housing services information from Sarasota County Continuum of Care and

THEREFORE, the Key Partners agree that it is in the best interests of all concerned to enter this *Memorandum of Understanding*.

II. GUIDING PRINCIPLES

Key Partners to this *Memorandum of Understanding* jointly recognize that individuals with disabling conditions to include mental illness or co-occurring disorders and those experiencing homelessness are diverse in terms of their strengths, motivation, goals, backgrounds, and needs;

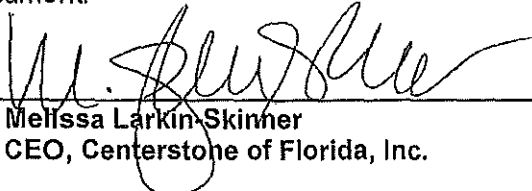
- Those individuals are members of the community with all the rights, privileges, opportunities accorded to the greater community;
- Those individuals have a right to privacy, and the right to determine for themselves matters affecting their lives;
- In designing and implementing services, the input of the individuals shall be sought.


TERM

This MOU Agreement will begin effective the date of September 20, 2021 and will continue through September 30, 2025. This Agreement may be terminated in accordance with the section on Termination below.

- IV. TERMINATION** Key Partners may terminate their participation with this Agreement for any reason by giving the other parties ninety (90) days prior written notice.

- V. **NONDISCRIMINATION.** There shall be no discrimination of any individual on account of race, color, creed, religion, sex, marital status, sexual orientation, age, handicap, ancestry or national origin in the administration of this program.
- VI. **AMENDMENTS.** This MOU may be amended only with the mutual consent of the Key Partners.
- VII. **CERTIFICATION OF AUTHORITY TO SIGN MOU.** The persons signing this MOU on behalf of the Key Partners hereto certify by said signatures that they are duly authorized to sign this document.

Signed:  Date: 9/21/21
Melissa Larkin-Skinner
CEO, Centerstone of Florida, Inc.

Signed:  Date: 9/27/21
Scott Eller,
CEO, Community Assisted and Supported Living, Inc.