



Grants Report

DRAFT

County Executive Office/Legislative Affairs

November 05, 2024

Item No: 19

County of Orange Report on Grant Applications/Awards

The Grants Report is a condensed list of grant requests by County Agencies/Departments that allows the Board of Supervisors to discuss and approve grant submittals in one motion at a Board meeting. County policy dictates that the Board of Supervisors must approve all grant applications prior to submittal to the grantor. This applies to grants of all amounts, as well as to new grants and those that have been received by the County for many years as part of an ongoing grant. Receipt of grants \$50,000 or less is delegated to the County Executive Officer. Grant awards greater than \$50,000 must be presented to the Board of Supervisors for receipt of funds. This report allows for better tracking of county grant requests, the success rate of our grants, and monitoring of County's grants activities. It also serves to inform Orange County's Sacramento and Washington, D.C. advocates of County grant activities involving the State or Federal Governments.

On November 05, 2024, the Board of Supervisors will consider the following actions:

RECOMMENDED ACTIONS

Approve grant applications/awards as proposed and other actions as recommended.

ACTION ITEMS:

1. Receive and File Grants Report
2. Approve Grant Application and Adopt Resolution – Social Services Agency – Housing Navigation and Maintenance Program (HNMP) Round 3, Transitional Housing Program (THP) Round 6, and Transitional Housing Program-Plus Housing Supplement Program (THPSUP) Round 4 - \$2,000,220
3. Approve Retroactive Grant Application – Social Services Agency - Housing and Disability Advocacy Program - \$1,187,103
4. Approve Grant Award – Health Care Agency – High-Impact HIV Prevention and Surveillance Programs - \$4,159,330

If you or your staff have any questions or require additional information on any of the items in this report, please contact Andrea Foster at (714) 834-2009.



CEO-Legislative Affairs Office Grant Authorization eForm

GRANT APPLICATION / GRANT AWARD

Today's Date:	October 25, 2024
Requesting Agency/Department:	Social Services Agency
Grant Name and Project Title:	Housing Navigation and Maintenance Program (HNMP) Round 3, Transitional Housing Program (THP) Round 6, and Transitional Housing Program-Plus Housing Supplement Program (THPSUP) Round 4
Sponsoring Organization/ Grant Source: (If the grant source is not a government entity, please provide a brief description of the organization/foundation)	State of California Department of Housing & Community Development (HCD)
Application Amount Requested:	\$2,000,220
Application Due Date:	November 8, 2024
Board Date when Board Approved this Application:	N/A
Awarded Funding Amount:	\$2,000,220
Notification Date of Funding Awarded:	October 9, 2024
Is this an Authorized Retroactive Grant Application/Award? No	
Recurrence of Grant:	Yes
If this is a recurring grant, please list the funding amount applied for and awarded in the past:	HNMP: \$601,841 (applied for 11-17-2023, award letter issued 02-06-2024) THP: \$1,085,580 (applied for 11-17-2023, award letter issued 02-06-2024) THPSUP: \$199,077 (applied for 11-17-2023, award letter issued 02-06-2024)
Does this grant require CEQA findings?	No
What Type of Grant is this?	Application - Non Competitive
County Match?	No
How will the County Match be fulfilled? (Please include the specific budget)	N/A
Will the grant/program create new part or full-time positions?	No
Purpose of Grant Funds:	Provide summary and brief background on why the Board of Supervisors should accept this grant application/award, and how the grant will be implemented.

Pursuant to statutes of the Budget Act of 2024 and Chapters 1 of the Health and Safety Code (HSC), the Department of Housing and Community Development (HCD) is allocating funding to counties for the HNMP, THP and THPSUP programs.

HNMP

HNMP will support housing navigators to help young adults 18 years and up to 24 years of age, inclusive, secure and maintain housing, with priority given to young adults currently or formerly in the foster care system. The formula allocation is based on each county's percentage of the total statewide number of young adults 17 through 21 years of age in the foster care and probation system.

Use of the funds may include, but is not limited to:

- 1) Assist eligible young adults secure and maintain housing;
- 2) Provide housing case management which includes essential services in emergency supports to foster youth;
- 3) Prevent young adults from becoming homeless; and
- 4) Improve coordination of services and linkages to key resources across the community including those from within the child welfare system and the local Continuum of Care.

THP

THP will help young adults 18 to 24 years of age, inclusive, secure and maintain housing, with priority given to young adults formerly in the foster care or probation systems. The THP allocation is based on each county's percentage of the total statewide number of young adults 18 through 20 years of age in foster care and homeless unaccompanied young adults (ages 18 through 24).

Use of funds may include, but is not limited to:

- 1) Identify and assist housing services for this population in Orange County;
- 2) Assist this population to secure and maintain housing;
- 3) Improve coordination of services and linkages to community resources within the child welfare system and the local Continuum of Care; and
- 4) Provide engagement in outreach and targeting to serve those with the most severe needs.

THPSUP

THPSUP is designated for use by county child welfare services agencies under the THP-Plus Housing Supplement Program. A county shall be eligible to receive funding if the fair market rent for a two-bedroom apartment in the county is one of the 11 most expensive in the state during the 2023-2024 federal fiscal year.

Use of the funds may include, but is not limited to:

- 1) Payment of a monthly rate to THP-Plus providers, that is no less than \$3,411 per youth per month or the rate paid per youth per month on July 1, 2024, whichever is greater;
- 2) Maintaining the bed capacity for THP-Plus that the county contracted for as of July 1, 2022; and
- 3) Maintaining funding for THP-Plus at the amount listed for the county in County Fiscal Letter No. 11/12-18.

Board Resolution Required?	Yes
Deputy County Counsel Name:	Carolyn Frost
Recommended Action(s) (Please specify below)	
1. Authorize the Social Services Agency Director or designee to apply for and accept the Housing Navigation and Maintenance Program Round 3 allocation in the amount of \$671,821, and to execute any agreement or documents necessary to receive and administer the funds, including augmentations up to an additional \$671,821.	

2. Authorize the Social Services Agency Director or designee to apply for and accept the Transitional Housing Program Round 6 allocation in the amount of \$1,129,322, and to execute any agreement or documents necessary to receive and administer the funds, including augmentations up to an additional \$1,129,322.
3. Authorize the Social Services Agency Director or designee to apply for and accept the Transitional Housing Program-Plus Housing Supplement Program Round 4 allocation in the amount of \$199,077, and to execute any agreement or documents necessary to receive and administer the funds, including augmentations up to an additional \$199,077.

Department Contact:

List the name and contact information (telephone, email) of the person to be contacted for further information.

An Tran 714-541-7708 An.Tran@ssa.ocgov.com

Name of individual attending the Board Meeting:

List the name of the individual who will be attending the Board Meeting for this Grant item:

An Tran

RESOLUTION OF THE BOARD OF SUPERVISORS OF
ORANGE COUNTY, STATE OF CALIFORNIA
November 5, 2024

IN THE MATTER OF: ROUND 6 TRANSITIONAL HOUSING PROGRAM, ROUND 3 OF THE
HOUSING NAVIGATION AND MAINTENANCE PROGRAM, AND ROUND 4 OF THE THP -
PLUS HOUSING SUPPLEMENT PROGRAM
RESOLUTION NUMBER

THIS RESOLUTION AUTHORIZES AN APPLICATION FOR, AND ACCEPTANCE OF, THE
COUNTY ALLOCATION AWARD UNDER ROUND 6 OF THE TRANSITIONAL HOUSING
PROGRAM, ROUND 3 OF THE HOUSING NAVIGATION AND MAINTENANCE PROGRAM,
AND ROUND 4 OF THE THP - PLUS HOUSING SUPPLEMENT PROGRAM

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

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

WHEREAS, the Department issued an Allocation Acceptance Form (THPSUP
Allocation Acceptance Form”), dated October 9, 2024 under Round 4 of the THPSUP
Housing Supplement Program (“THPSUP”) authorized by item 2240-102-0001 of Section
2.00 of the Budget Act of 2024 (Chapter 22 of the Statutes of 2024) and Chapter 11.9

(commencing with HSC 50820) of Part 2 of Division 31 of the Health and Safety Code (collectively, the "Statute") of the Health and Safety Code.

WHEREAS, the THP Allocation Acceptance Form, the HNMP Allocation Acceptance Form, and the THPSUP Allocation Acceptance Form are collectively referred to as the "Allocation Acceptance Forms".

WHEREAS, the Allocation Acceptance Forms relate to the availability of the funds under the THP, HNMP, and THPSUP Programs; and

WHEREAS, the County of Orange ("County") is listed as an eligible applicant in the Allocation Acceptance Form, dated October 9, 2024.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Supervisors for the County of Orange does determine and declare as follows:

1. That County is hereby authorized and directed to apply for and accept County's allocation award in the amount of \$1,129,322 as detailed and authorized in the THP Allocation Acceptance Form at the time this resolution is executed and authorized.

2. That County hereby affirms that if THP funds remain available for allocation after the deadline for submitting a signed Allocation Acceptance Form, and if the County is eligible for an additional allocation from the remaining funds for the THP program, the County is hereby authorized and directed to accept this additional allocation of funds ("Additional THP Allocation") up to the amount authorized by Department but not to exceed \$2,258,644.

3. That County is hereby authorized and directed to apply for and accept County's allocation award in the amount of \$671,821 as detailed in the HNMP Allocation Acceptance

Form at the time this resolution is executed and authorized.

4. That County hereby affirms that if HNMP funds remain available for allocation after the deadline for submitting a signed Allocation Acceptance Form, and if the County is eligible for an additional allocation from the remaining funds for the HNMP program, the County is hereby authorized and directed to accept this additional allocation of funds (“Additional HNMP Allocation”) up to the amount authorized by Department but not to exceed \$1,343,642.

5. That County is hereby authorized and directed to apply for and accept County’s allocation award in the amount of \$199,077 as detailed in the THPSUP Allocation Acceptance Form at the time this resolution is executed and authorized.

6. That County hereby affirms that if THPSUP funds remain available for allocation after the deadline for submitting a signed Allocation Acceptance Form, and if the Department advises County that County is eligible for an additional allocation from these remaining funds, County is hereby authorized and directed to accept this additional allocation of funds (“Additional THPSUP Allocation”) up to the amount authorized by Department but not to exceed \$398,154.

7. That Director of the County of Orange Social Services Agency, or his or her designee, is hereby authorized and directed to act on behalf of County in connection with the THP, HNMP, or THPSUP Allocation Award and any Additional THP, HNMP, or THPSUP Allocation, and to enter into, execute, and deliver any and all documents required or deemed necessary or appropriate to participate in the THP, HNMP, or THPSUP Program, including but not limited to a Standard Agreement, be awarded the THP, HNMP, or THPSUP Allocation Award, and any additional THP, HNMP, or THPSUP Allocation, and any amendments to such documents

(collectively, the “Allocation Award Documents”).

8. That County shall be subject to the terms and conditions that are specified in the THP, HNMP, and THPSUP Allocation Award Documents, and that County will use the THP, HNMP, and THPSUP Allocation Award funds, and any additional THP, HNMP, and THPSUP Allocation funds, in accordance with the Allocation Acceptance Form, the THP, HNMP, and THPSUP Allocation Award Documents, and any subsequent amendments or amendment thereto, as well as any and all other THP, HNMP, and THPSUP requirements, or other applicable laws.

9. That County affirms it has the discretion to accept any or all of the THP, HNMP, and THPSUP program funds as detailed herein.

PASSED AND ADOPTED this 5th day of November 2024, by the following vote:

AYES _____

NOES _____

ABSTENTIONS _____

ABSENT _____

By: _____
Chairman

STATE OF CALIFORNIA

County of Orange

I, [REDACTED], County Clerk of the County of Orange, State of California, hereby certify the above and foregoing to be a full, true and correct copy of a resolution adopted by the County Board of Supervisors on this _____ [Insert Numerical Day] day of [Insert Month], 2024

[Insert Printed name of County Clerk Here]

Clerk of the County of Orange, State of California

By: _____

[Insert Printed Name and Title]



M E M O

October 30, 2024

TO: Michelle Aguirre, Interim County Executive Officer

FROM: An Tran, Director, Social Services Agency *AT*

SUBJECT: Retroactive Request to Apply for Housing and Disability Advocacy Program

Digitally signed by Michelle Aguirre
 DN: cn=Michelle Aguirre, email=Michelle.Aguirre@ocgov.com, c=US
 Date: 2024.10.30 12:28:51 -07'00'

This memo is being submitted to request that the CEO place the subject grant application on the November 5, 2024, Board of Supervisors (Board) Meeting Agenda. The Social Services Agency (SSA) requests retroactive approval as the California Department of Social Services released an All County Welfare Directors Letter (ACWDL) on October 4, 2024, requesting grant applications for continued funding for the Housing and Disability Advocacy Program for Fiscal Year 2024-25, be submitted by November 1, 2024. Due to the time constraints of the application process and the unavailability of earlier Board Meetings in October, this request for approval could not be submitted until after the grant application deadline.

SSA now requests retroactive approval to apply for funding in the amount of \$1,187,103, which is the allocation amount for Orange County stated in the ACWDL.

SSA plans to return to the Board with a request to accept funding should the grant application be accepted.

If you have any questions about the grant, please contact Lilian Carmona at (714) 541-7410. Thank you.



CEO-Legislative Affairs Office Grant Authorization eForm

GRANT APPLICATION / GRANT AWARD

Today's Date:	October 29, 2024																
Requesting Agency/Department:	Social Services Agency																
Grant Name and Project Title:	Housing and Disability Advocacy Program																
Sponsoring Organization/ Grant Source: (If the grant source is not a government entity, please provide a brief description of the organization/foundation)	California Department of Social Services																
Application Amount Requested:	\$1,187,103																
Application Due Date:	November 1, 2024																
Board Date when Board Approved this Application:	N/A																
Awarded Funding Amount:	\$																
Notification Date of Funding Awarded:	October 4, 2024																
Is this an Authorized Retroactive Grant Application/Award? Yes																	
Recurrence of Grant:	Yes																
If this is a recurring grant, please list the funding amount applied for and awarded in the past:	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">2018 Applied: \$2,147,651</td> <td style="width: 50%;">2018 Awarded: \$2,147,651</td> </tr> <tr> <td>2019-20 Applied: \$1,091,855</td> <td>2019-20 Awarded: \$1,091,855</td> </tr> <tr> <td>2020 Applied: \$102,634;</td> <td>2020 Awarded: \$102,634</td> </tr> <tr> <td>2020-21 Applied: \$1,270,023</td> <td>2020-21 Awarded: \$1,270,023</td> </tr> <tr> <td>2020-21 Applied: \$127,002</td> <td>2020-21 Awarded: \$127,002</td> </tr> <tr> <td>2021-22 Applied: \$7,659,238</td> <td>2021-22 Awarded: \$7,659,238</td> </tr> <tr> <td>2022-23 Applied: \$7,659,238</td> <td>2022-23 Awarded: \$7,659,238</td> </tr> <tr> <td>2023-24 Applied: \$1,187,103</td> <td>2023-24 Awarded: \$1,187,103</td> </tr> </table>	2018 Applied: \$2,147,651	2018 Awarded: \$2,147,651	2019-20 Applied: \$1,091,855	2019-20 Awarded: \$1,091,855	2020 Applied: \$102,634;	2020 Awarded: \$102,634	2020-21 Applied: \$1,270,023	2020-21 Awarded: \$1,270,023	2020-21 Applied: \$127,002	2020-21 Awarded: \$127,002	2021-22 Applied: \$7,659,238	2021-22 Awarded: \$7,659,238	2022-23 Applied: \$7,659,238	2022-23 Awarded: \$7,659,238	2023-24 Applied: \$1,187,103	2023-24 Awarded: \$1,187,103
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2022-23 Applied: \$7,659,238	2022-23 Awarded: \$7,659,238																
2023-24 Applied: \$1,187,103	2023-24 Awarded: \$1,187,103																
Does this grant require CEQA findings?	No																
What Type of Grant is this?	Application - Non Competitive																
County Match?	No																
How will the County Match be fulfilled? (Please include the specific budget)																	
Will the grant/program create new part or full-time positions?	No																
Purpose of Grant Funds:	Provide summary and brief background on why the Board of Supervisors should accept this grant application/award, and how the grant will be implemented.																

The Housing and Disability Advocacy Program (HDAP) is a county-administered program that is dedicated to assisting individuals with disabilities who are experiencing homelessness. HDAP focuses on providing comprehensive support, including outreach, case management, disability benefits advocacy and housing assistance. The program prioritizes those facing chronic homelessness and individuals who are heavily reliant on

government-funded services. HDAP is a recurring grant that provides funding to the County of Orange (County) System of Care. The funding aims to enhance services for homeless individuals in Orange County and improve care coordination among various agencies, including the County of Orange Social Services Agency, OC Community Resources (OCCR), OC Health Care Agency (HCA) and the Office of Care Coordination.

The California Budget Act of 2024 appropriated \$25 million for HDAP statewide in FY 2024-25, ensuring the continuation of the housing and homelessness assistance. On October 4, 2024, the California Department of Social Services issued an All County Welfare Director Letter announcing the application opportunity for FY 2024-25 HDAP funds. This includes a non-competitive allocation in the amount of \$1,187,103 for the County, available for the expenditure period of July 1, 2024, to June 30, 2025. The letter summarizes recent statutory changes and outlines ongoing requirements and guidance for the HDAP.

All grantees must submit documentation by November 1, 2024, to receive funding. SSA is requesting the Board's approval to submit the application for the HDAP FY 2024-25 allocation funds and will bring back any award agreement received subsequent to the application submission for the Board's approval.

Approval of this application for funds will allow for continuity and development of HDAP services and provide a needed resource to the System of Care as the County continues to address homelessness in our community.

Board Resolution Required?	No
Deputy County Counsel Name:	
Recommended Action(s) (Please specify below)	
Ratify the application for the Housing and Disability Advocacy Program allocation in the amount of \$1,187,103, and authorize the Social Services Agency Director or Deputized designee to execute an agreement with the State of California Department of Social Services to administer the Housing and Disability Advocacy Program funds.	
Department Contact:	List the name and contact information (telephone, email) of the person to be contacted for further information.
An Tran 714-541-7708 An.Tran@ssa.ocgov.com	
Name of individual attending the Board Meeting:	List the name of the individual who will be attending the Board Meeting for this Grant item:
An Tran	



CEO-Legislative Affairs Office Grant Authorization eForm

GRANT APPLICATION / GRANT AWARD

Today's Date:	October 28, 2024
Requesting Agency/Department:	Health Care Agency
Grant Name and Project Title:	High-Impact HIV Prevention and Surveillance Programs
Sponsoring Organization/ Grant Source: (If the grant source is not a government entity, please provide a brief description of the organization/foundation)	California Department of Public Health (CDPH), Office of AIDS (OA)
Application Amount Requested:	N/A
Application Due Date:	N/A
Board Date when Board Approved this Application:	August 8, 2024
Awarded Funding Amount:	\$4,159,330
Notification Date of Funding Awarded:	October 21, 2024
Is this an Authorized Retroactive Grant Application/Award? No	
Recurrence of Grant:	Yes
If this is a recurring grant, please list the funding amount applied for and awarded in the past:	FY 2023 – 2024: \$1,206,73 FY 2022: \$851,813 FY 2021: \$851,813 FY 2020: \$912,429
Does this grant require CEQA findings?	No
What Type of Grant is this?	Award - Allocation
County Match?	No
How will the County Match be fulfilled? (Please include the specific budget)	N/A
Will the grant/program create new part or full-time positions?	No
Purpose of Grant Funds:	Provide summary and brief background on why the Board of Supervisors should accept this grant application/award, and how the grant will be implemented.
The Centers for Disease Control (CDC) provides funding through California Department of Public Health (CDPH), Office of AIDS (OA) for the purpose of grant funding consistent HIV prevention and surveillance evidence-based activities in Orange County, which align with the strategies for 1) Strengthen disease investigation structure, 2) Expand and provide navigation services: · Improve PrEP (HIV pre-exposure prophylaxis) access and utilization · Increase and improve HIV routine testing in healthcare settings	

- Increase availability of STD self-test services
- Expand Partner Services (notifying individuals who may have been exposed to HIV or an STD)
- Improve HIV linkage to medical care

Board Resolution Required?

No

Deputy County Counsel Name:**Recommended Action(s)**

(Please specify below)

The HCA respectfully requests that the Board of Supervisors take the following actions:

1. Accept the grant funding award from the California Department of Public Health, Office of AIDS for High-Impact HIV Prevention & Surveillance Programs, PS 24-0047, for the term August 1, 2024, through May 31, 2025, in the amount of \$717,126.
2. Accept the grant funding award from the California Department of Public Health, Office of AIDS for High-Impact HIV Prevention & Surveillance Programs, PS 24-0047, for the term of August 1, 2024, through May 31, 2029, in the amount of \$4,159,330, and authorize the Health Care Agency to accept subsequent funding allocation awards through funding term without further Board action.
3. Authorize the Health Care Agency Director, or designee, to execute the Grant Award Agreement No. 24-10517, upon review and approval by County Counsel, and delegate authority to the Health Care Agency Director, or designee, to sign and execute the Agreement and/or any documents related to this agreement and award, and to make such future amendments thereto that do not change the Agreement award amount by more than 10% of the original amount and/or make immaterial, ministerial changes to the Agreement.

Department Contact:

List the name and contact information (telephone, email) of the person to be contacted for further information.

Jennifer Sarin 714-834-4099 jsarin@ochca.com Dr. Veronica Kelley 714-834-7024 vkelley@ochca.com

Name of individual attending the Board Meeting:

List the name of the individual who will be attending the Board Meeting for this Grant item:

Dr. Veronica Kelley