

**LOS ANGELES HOMELESS SERVICES AUTHORITY**  
**FISCAL YEAR 2022 – 2023 AMENDMENT AGREEMENT**  
**SAFE SLEEP PROGRAM AGREEMENT**  
**AMENDMENT NUMBER TWO**

**Contractor:** **Urban Alchemy**  
**Original Contract Number:** **N/A**  
**Allocation Reference Number:** **2021SSLP02**  
**Amendment Number:** **Amendment Number Two to 2021SSLP02**  
**Original EGMS ID Number:** **AD-SS-SS-001-01**  
**Previous EGMS ID Number:** **AD-SS-SS-001-02**  
**Current EGMS ID Number:** **AD-SS-SS-001-03**  
**EGMS Amendment Request Number:** **CR-AD-SS-SS-001-02-00**  
**Grant ID Number (EGMS):** **GT-SS-SS-001**  
  
**Program Name:** **Lincoln Theatre Safe Sleep Village**  
**This Amendment Term:** **July 1, 2022 to June 30, 2023**  
**Total Contract Term:** **July 1, 2021 to June 30, 2023**

**CFDA:** **N/A**

**EGMS UNIQUE ENTITY ID (UEI):** **ENRECZD3KMX7**

**AMENDMENT NUMBER TWO  
TO CONTRACT NUMBER 2021SSLP02  
BETWEEN  
LOS ANGELES HOMELESS SERVICES AUTHORITY  
AND  
URBAN ALCHEMY  
RELATING TO THE  
FISCAL YEAR 2022 – 2023 SAFE SLEEP PROGRAM AGREEMENT**

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**THIS AMENDMENT NUMBER TWO** (“Amendment Number Two”) to Agreement Number 2021SSLP02 for EGMS ID Number AD-SS-SS-001-03 (collectively referred to as the “Agreement”), pursuant to EGMS Amendment Request Number CR-AD-SS-SS-001-02-00, is made and entered into by and between the Los Angeles Homeless Services Authority (“LAHSA”), a joint powers authority of the City and County of Los Angeles, and **Urban Alchemy** (“Contractor”), a 501(c)(3) organization incorporated under the laws of the State of California, collectively the (“Parties”).

**NOW, THEREFORE**, in consideration of the mutual covenants herein set forth and the mutual benefits to be derived therefrom, the Parties agree as follows:

**FISCAL YEAR 2022 – 2023 AMENDMENT AGREEMENT**

Effective on the date of LAHSA’s Executive Director’s signature, the Agreement is amended.

1. **RECITALS** is hereby amended and restated hereunder as follows:

Add the following:

**“WHEREAS**, the LAHSA Board of Commissioners has authorized the Executive Director of LAHSA to enter into agreements for up to five hundred thousand dollars and no cents (\$500,000.00) without the Commission’s approval;

**WHEREAS**, on November 23, 2022, Contractor and LAHSA executed Amendment Number One for Agreement Number 2021SSLP02 under EGMS ID Number AD-SS-SS-001-02, with **Exhibit C-1, Program Budget and Services** (Fiscal Year 2022 – 2023, July 1, 2022 to June 30, 2023);

**WHEREAS**, for administrative purposes, for Fiscal Year 2022 – 2023 (July 1, 2022 to June 30, 2023), EGMS ID Number AD-SS-SS-001-02 is amended to AD-SS-SS-001-03, pursuant to EGMS Amendment Request Number CR-AD-SS-SS-001-02-00;

**WHEREAS**, LAHSA and Contractor now desire to amend the Agreement for the purposes of: (a) updating **Exhibit C, Program Budget and Services**, pursuant to EGMS Amendment Request Number CR-AD-SS-SS-001-02-00 for EGMS ID Number AD-SS-SS-001-03; and (b) making such other changes as are required in connection with all of the foregoing, as detailed elsewhere in this Amendment Number **Two**;

**WHEREAS, Section 72., Changes and Amendments to Terms and Conditions, provides for said amendments;”**

2. **Exhibit C, Program Budget and Services**, is hereby amended as follows:

Amend **Exhibit C-1, Program Budget and Services**, AD-SS-SS-001-02, Fiscal Year 2022 to 2023 (budget period of July 1, 2022 to June 30, 2023), and replace with **Exhibit C-2, Program Budget and Services**, AD-SS-SS-001-03, Fiscal Year 2022 to 2023 (budget period of July 1, 2022 to June 30, 2023), *attached hereto and incorporated herein by such reference*. Any and all references to Exhibit C, Program Budget and Services, in the Agreement and its Table of Contents, and/or Exhibits and any related amendments shall hereby incorporate Exhibit C-2, Program Budget and Services for EGMS ID Number AD-SS-SS-001-03, for Fiscal Year 2022 – 2023 (budget period of July 1, 2022 to June 30, 2023).

3. Except as herein amended, all other terms and conditions of the Agreement remain in full force and effect.

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4. This Amendment Number Two may be executed in counterparts, each of which shall be deemed to be an original, but all of which, taken together, shall constitute one and the same Amendment Number Two, which, together with the Agreement, and all Exhibits and Attachments constitute the entire understanding and agreement of the Parties.

**IN WITNESS WHEREOF**, the Los Angeles Homeless Services Authority and Contractor have caused this Amendment Number Two to be executed by their duly authorized representatives.

**APPROVED AS TO FORM FOR LAHSA on May 27, 2022:**

Dawyn R. Harrison  
**Acting County Counsel**

Aleen Langton  
**Principal Deputy County Counsel**

**APPROVED AS TO FORM FOR LAHSA on May 27, 2022:**

Michael N. Feuer  
**City Attorney**

Catrina M. Archuleta-Silva  
**Deputy City Attorney**

**For: Los Angeles Homeless Services Authority**

By:   
Name: Stephen Simon  
Title: Interim Executive Director

Executed this day 03/17/2023

**For: Urban Alchemy**

Internal Revenue Service ID Number:  
**82-5408579**

By:   
Name: Lena Miller  
Title: Chief Executive Officer

Executed this day 03/14/2023

Said Agreement shall be referenced as **Amendment Number Two to 2021SSLP02** of LAHSA Contracts and shall further be referred to under **EGMS ID Number AD-SS-SS-001-01**

**Exhibit C-2**  
**Program Budget and Services**  
**(Fiscal Year 2022 – 2023)**  
**(On next page)**

**Agreement Number:** **2021BHRTV06**

**EGMS ID Number:** **AD-SS-SS-001-03**

**Contractor Name:** **Urban Alchemy**

# Subaward - 2021-2022: Urban Alchemy - Safe Sleep (Lincoln) - Adults - 6

EGMS ID	Status	Grant ID	Budget Period
AD-SS-SS-001-03	Pending Activation	GT-SS-SS-001	7/1/2022 - 6/30/2023

## Overview

### Subaward Information

Subaward Title 2021-2022: Urban Alchemy - Safe Sleep (Lincoln) - Adults - 6	Subaward Type Amendment	Version 2
Grant Period Start Date 07/01/2021	Grant Period End Date 06/30/2023	Grant Abbreviation SS-SS
Budget Period Start Date 07/01/2022	Budget Period End Date 06/30/2023	Program Code 306
Operational Term Start Date 07/01/2022	Operational Term End Date 06/30/2023	Program Name Safe Sleep
Population Adult - Men & Women	Service Planning Area (SPA) SPA 6	Allocation/Reference ID

### Subrecipient Information

Subrecipient Organization URBAN ALCHEMY	Unique Entity ID (UEI) ENRECZD3KMX7	EIN 825408579
SAM Expiration Date		

03/05/2023

### Sites

Site Name	Address	City	State	Zip Code	Service Planning Area	State Assembly District	Supervisoral District	US Congressional District	LA City Council District	Census Tract
Lincoln Safe Sleeping Vilalge	2320 S. Central Avenue	Los Angeles	CA	90011	SPA 6	59th Assembly District	Second	40th Congressional District	Council District 9	2270.10

### Contacts

Authority/Role	Name	Email	Authorized Organization Representative?
Fiscal Officer; Program Officer;	Michael Anderer	mikea@urban-alchemy.us	true
Authorized Signatory; Executive Director; Chief Finance Officer;	Lena Miller	lenam@urban-alchemy.us	false
Chief Program Officer;	Bayron Wilson	bayronw@urban-alchemy.us	false
Chief Finance Officer;	Kate Hultin-Schott	kate.hultin@amllp.com	false
Chief Finance Officer; Fiscal Officer;	Sean Armijo	sean.armijo@armaninollp.com	false
Fiscal Officer;	Emily Trujillo	emily.trujillo@armaninollp.com	false
Data (e.g. HMIS); Program Officer;	Kenon Joseph	kenonj@urban-alchemy.us	false
Data (e.g. HMIS); Program Officer;	Wanda Williams	wandaw@urban-alchemy.us	false

Fiscal Officer; Program Officer;	Ian Clark-Johnson	ianc@urban-alchemy.us	false
Fiscal Officer;	Kristin Hergert	kristin.hergert@armaninollp.com	false
Chief Finance Officer;	Kristen Grownay	kristengrownay@urban-alchemy.us	false

### Special Issues, Conditions, and Waivers

**EGMS ID:** TC-13488

**Title:** Allocation and Site Info w correct rate

**Source:** Amendment

**Type:** Program - Special Issue and Condition

**Created Date:** 03/13/2023 5:31 PM

**Effective From:** 07/01/2022

**Effective To:** 06/30/2023

### Budget

#### Budget Period Details

Awarded Amount \$3,056,875.00	Budgeted Amount \$3,056,875.00	Subaward Budget \$3,056,875.00
Plan to bill indirect costs to LAHSA? Yes	Negotiated Indirect Cost Rate	Budget Redirection Threshold 10.00%

Estimated Program Income  
\$0.00

### Funding Accounts

**EGMS ID:** FA-NGO-193

**Title:** City Roadmap County FY22-23 Operations for Safe Sleep Village (2300 S. Central Ave.)+FFE FA

**Grantor:** HCID

**Funding Source:** County SCF

**Strategy:**

**Program:** Safe Sleep

**SPA:**

**Population:**

**CFDA Number:**

**FAIN:**

**Subrecipient Admin Rate %:** 10

**Subrecipient Indirect Cost Rate %:** 0

**Start Date:** 07/01/2022

**End Date:** 06/30/2023

**Allowable Advance %:** 17.00

**Available Balance:** \$0

**Subaward Allocation:** \$3,056,875.00

**Change in Funding:** \$0.00

**Total Budgeted Amount:** \$3,056,875.00

**Status:** Funded

### Subaward Budget

Budget Category	Budget Category	Funding Account EGMS ID	Direct Costs
: -- HCID/ County SCF/ / Exp.6/30/2023	33 : Supportive Services/Financial Services (Non-Personnel)	FA-NGO-193	\$0.00
: -- HCID/ County SCF/ / Exp.6/30/2023	34 : Supportive Services/Financial Services (Personnel)	FA-NGO-193	\$24,351.00
: -- HCID/ County SCF/ / Exp.6/30/2023	35 : Financial Assistance	FA-NGO-193	\$0.00
: -- HCID/ County SCF/ / Exp.6/30/2023	37 : Operating Costs (Non-Personnel)	FA-NGO-193	\$658,154.00
: -- HCID/ County SCF/ / Exp.6/30/2023	38 : Operating Costs (Personnel)	FA-NGO-193	\$2,096,812.00
: -- HCID/ County SCF/ / Exp.6/30/2023	40 : Admin	FA-NGO-193	\$277,558.00
Grand Total			\$3,056,875.00

### Performance

#### Related Key Performance Indicators (KPIs)

EGMS ID	Title	Measure	Unit of Measurement	Target	Actual
KPI-0094	Contracted to Serve	Minimum number of people to be served Refer to HMIS Report: [GNRL-220] Program Details Report, Look at Exits spreadsheet.	Number (#)	125	0
KPI-0045	Average Nightly Bed Utilization Rate	Refer HMIS Report: [HSNG-104] Monthly Housing Report; [HSNG-108] Housing Census	Percentage (%)	95	0

KPI-0096	Exits to Successful Housing Destination Safe Sleep	"Successful Housing Destination" includes: o Exits to any Permanent Housing Destination o Exit to temporary stays with family or friends "Successful Housing Destination" for purposes of Safe Sleep program this also includes: o Exits to any Interim Housing Destination Refer HMIS Report: [GNRL-220] Program Details Report` Look at the Exits spreadsheet to see the destinations	Percentage (%)	15	0
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## Attachments

### Forms: Complete Forms using the Edit icon

Form Name	Required	Applies To
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### Supporting Documents Checklist

Description	Required	Applies To	Status	Template Link	Subrecipient Document Link
Advance Certification Form	Mandatory	Advance Request	Active	<a href="#">View</a>	Not Applicable
Certificate of Occupancy	Optional	Award	Active	<a href="#">Not Applicable</a>	Not Applicable
Scope of Required Services - SRS (for reference)	Optional	Award	Active	<a href="#">View</a>	Not Applicable
Scope of Required Services - SRS (for reference)	Optional	Reimbursement Request	Active	<a href="#">View</a>	Not Applicable
Evidence of Required Insurance, including Form CG 20 26, naming LAHSA and Funders as additional insured	Mandatory	Award	Active	<a href="#">Not Applicable</a>	Not Applicable
Evidence of Workers Compensation	Mandatory	Award	Active	<a href="#">Not Applicable</a>	Not Applicable

Insurance Requirements (for reference)	Optional	Award	Active	View	Not Applicable
Program Income Report (required if program generated income)	Optional	Budget Period Closeout	Active	Not Applicable	Not Applicable
Cost Verification Forms (required if funded by ESG)	Optional	Reimbursement Request	Active	View	Not Applicable
Supporting Financial Documentation (e.g. Trial Balance, P&L, GL, etc.)	Mandatory	Reimbursement Request	Active	Not Applicable	Not Applicable
Asset Purchase Authorization Form	Optional	Reimbursement Request	Active	View	Not Applicable
Reimbursement Certification Form	Optional	Reimbursement Request	Active	View	Not Applicable

**Files: Add additional files at your discretion**

Title	Classification	File Extension	Description	Created Date

# REVIEW 1: AD-SS-SS-001-03 - Urban Alchemy - 2021SSLP02 - Amendment Two

Final Audit Report

2023-03-14

Created:	2023-03-14
By:	Laud Ankrah (lankrah@lahsa.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAAT8ZpMi0fqrV3OJJPQvr3qjghOorhhIXz

## "REVIEW 1: AD-SS-SS-001-03 - Urban Alchemy - 2021SSLP02 - Amendment Two" History

-  Document created by Laud Ankrah (lankrah@lahsa.org)  
2023-03-14 - 3:03:17 PM GMT- IP address: 45.51.77.111
-  Document emailed to Tyler Douglas (tdouglas@lahsa.org) for signature  
2023-03-14 - 3:03:59 PM GMT
-  Email viewed by Tyler Douglas (tdouglas@lahsa.org)  
2023-03-14 - 3:16:15 PM GMT- IP address: 172.113.137.35
-  Document e-signed by Tyler Douglas (tdouglas@lahsa.org)  
Signature Date: 2023-03-14 - 3:16:59 PM GMT - Time Source: server- IP address: 172.113.137.35
-  Agreement completed.  
2023-03-14 - 3:16:59 PM GMT



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# AD-SS-SS-001-03 - Urban Alchemy - 2021SSLP02 - Amendment Two - signed

Final Audit Report

2023-03-17

Created:	2023-03-14
By:	Laud Ankrah (lankrah@lahsa.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAAGA5X90usWB87ot_pdWrPc4RqSNfr8wqW

## "AD-SS-SS-001-03 - Urban Alchemy - 2021SSLP02 - Amendment Two - signed" History

-  Document created by Laud Ankrah (lankrah@lahsa.org)  
2023-03-14 - 9:08:10 PM GMT- IP address: 45.51.77.111
-  Document emailed to Lena Miller (lenam@urban-alchemy.us) for signature  
2023-03-14 - 9:09:57 PM GMT
-  Email viewed by Lena Miller (lenam@urban-alchemy.us)  
2023-03-14 - 11:36:22 PM GMT- IP address: 172.226.212.6
-  Document e-signed by Lena Miller (lenam@urban-alchemy.us)  
Signature Date: 2023-03-14 - 11:36:42 PM GMT - Time Source: server- IP address: 50.208.34.185
-  Document emailed to Laud Ankrah (lankrah@lahsa.org) for signature  
2023-03-14 - 11:36:44 PM GMT
-  Email viewed by Laud Ankrah (lankrah@lahsa.org)  
2023-03-14 - 11:57:18 PM GMT- IP address: 45.51.77.111
-  Document e-signed by Laud Ankrah (lankrah@lahsa.org)  
Signature Date: 2023-03-14 - 11:57:42 PM GMT - Time Source: server- IP address: 45.51.77.111
-  Document emailed to Kristina Dixon (kdixon@lahsa.org) for signature  
2023-03-14 - 11:57:43 PM GMT
-  Document e-signed by Kristina Dixon (kdixon@lahsa.org)  
Signature Date: 2023-03-15 - 1:58:23 AM GMT - Time Source: server- IP address: 216.86.220.194
-  Document emailed to Stephen David Simon (sdsimon@lahsa.org) for signature  
2023-03-15 - 1:58:24 AM GMT



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 Email viewed by Stephen David Simon (sdsimon@lahsa.org)

2023-03-15 - 3:58:21 PM GMT- IP address: 146.75.146.1

 Document e-signed by Stephen David Simon (sdsimon@lahsa.org)

Signature Date: 2023-03-17 - 4:23:31 PM GMT - Time Source: server- IP address: 23.240.241.36

 Agreement completed.

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**LOS ANGELES HOMELESS SERVICES AUTHORITY**  
**FISCAL YEAR 2022 – 2023 AMENDMENT AGREEMENT**  
**SAFE SLEEP PROGRAM AGREEMENT**  
**AMENDMENT NUMBER ONE**

**Contractor:** **Urban Alchemy**

**Original Contract Number:** **N/A**

**Allocation Reference Number:** **2021SSLP02**

**Amendment Number:** **Amendment Number One to 2021SSLP02**

**Original EGMS ID Number:** **AD-SS-SS-001-01**

**Previous EGMS ID Number:** **AD-SS-SS-001-01**

**Current EGMS ID Number:** **AD-SS-SS-001-02**

**EGMS Amendment Request Number:** **CR-AD-SS-SS-001-01-01**

**Grant ID Number (EGMS):** **GT-SS-SS-001**

**Program Name:** **Lincoln Theatre Safe Sleep Village**

**This Amendment Term:** **July 1, 2022 to June 30, 2023**

**Total Contract Term:** **July 1, 2021 to June 30, 2023**

**CFDA:** **N/A**

**EGMS UNIQUE ENTITY ID (UEI):** **ENRECZD3KMX7**

**AMENDMENT NUMBER ONE  
TO CONTRACT NUMBER 2021SSLP02  
BETWEEN  
LOS ANGELES HOMELESS SERVICES AUTHORITY  
AND  
URBAN ALCHEMY  
RELATING TO THE  
FISCAL YEAR 2022 – 2023 SAFE SLEEP PROGRAM AGREEMENT**

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**THIS AMENDMENT NUMBER ONE** (“Amendment Number One”) to Agreement Number 2021SSLP02 for EGMS ID Number AD-SS-SS-001-01 (collectively referred to as the “Agreement”), pursuant to EGMS Amendment Request Number CR-AD-SS-SS-001-01-01, is made and entered into by and between the Los Angeles Homeless Services Authority (“LAHSA”), a joint powers authority of the City and County of Los Angeles, and **Urban Alchemy** (“Contractor”), a 501(c)(3) organization incorporated under the laws of the State of California, collectively the (“Parties”).

**NOW, THEREFORE**, in consideration of the mutual covenants herein set forth and the mutual benefits to be derived therefrom, the Parties agree as follows:

**FISCAL YEAR 2022 – 2023 AMENDMENT AGREEMENT**

Effective on the date of LAHSA’s Executive Director’s signature, the Agreement is amended.

1. **RECITALS** is hereby amended and restated hereunder as follows:

Add the following:

**“WHEREAS**, LAHSA has implemented the Enterprise Grants Management System (EGMS) to manage and administer funding to subrecipients, including to Contractor;

**WHEREAS**, LAHSA is authorized by the City and the County under a Joint Powers Agreement to enter into contracts to allocate funding for homeless programs for individuals and families experiencing homelessness in the City and County of Los Angeles;

**WHEREAS**, LAHSA has been designated by the City and County to provide for the proper planning, coordination, direction and management of various community development activities;

**WHEREAS**, LAHSA cooperates with private organizations and agencies of other governmental jurisdictions to carry out certain functions and programs which are its responsibility;

**WHEREAS**, the LAHSA Board of Commissioners has authorized the Executive Director of LAHSA to enter into agreements for up to five hundred thousand dollars and no cents (\$500,000.00) without the Commission’s approval;

**WHEREAS**, on October 28, 2022, the LAHSA Board of Commissioners voted to award this Agreement to Contractor;

**WHEREAS**, the Program, which is the subject of this Agreement, has been established by LAHSA via the Funding Agreement(s);

**WHEREAS**, Contractor was awarded under LAHSA approved procurement processes in accordance with this Agreement;

**WHEREAS**, due to the ongoing COVID-19 pandemic, LAHSA temporarily suspended procurement for ongoing homeless service programs currently under contract due to the extreme hardship that having to respond to a Request For Proposal would place upon our nonprofit partners during this difficult time;

**WHEREAS**, LAHSA will extend all currently funded contracts for homeless services for the 2022-2023 Fiscal Year to ensure the continuity of services in the community and to avoid the hardship that requiring LAHSA partners to respond to RFPs would impose on them;

**WHEREAS**, prior to execution of this Agreement, Contractor has met the Conditions Precedent that are attached as Exhibit B;

**WHEREAS**, the Program which is the subject of this Agreement has been funded with Funds as specified in Exhibit C, Program Budget and Services;

**WHEREAS**, Funder-specific recitals are included in the Funder Terms and Conditions that are attached as Exhibit F, Funder Terms and Conditions and are incorporated by reference herein;

**WHEREAS**, Agreement Number 2021SSLP02 has been originally entered into the EGMS as EGMS ID Number AD-SS-SS-001-01;

**WHEREAS**, on December 6, 2021, Contractor and LAHSA executed Agreement Number 2021SSLP02 for EGMS ID Number AD-SS-SS-001-01 with **Exhibit C, Program Budget and Services**, for Fiscal Year 2021 – 2022 (July 1, 2021 to June 30, 2022), such being subsequently amended;

**WHEREAS**, for administrative purposes, for Fiscal Year 2022 – 2023 (July 1, 2022 to June 30, 2023), EGMS ID Number AD-SS-SS-001-01 is amended to AD-SS-SS-001-02, pursuant to EGMS Amendment Request Number CR-AD-SS-SS-001-01-01;

**WHEREAS**, LAHSA and Contractor now desire to amend the Agreement for the purposes of: (a) administering this Agreement through EGMS for Fiscal Year 2022 – 2023 (July 1, 2022 to June 30, 2023); (b) extending the term through June 30, 2023, such that the total amended Agreement term hereunder for Fiscal Years 2021 to 2023, is July 1, 2021 to June 30, 2023; (c) updating the **Statement of Work, Part 1: Scope of Required Services** and **Part 2: Performance Targets** for Fiscal Year 2022-2023 for the time period of July 1, 2022 to June 30, 2023; (d) updating **Exhibit B, Conditions Precedent**; (c) updating **Exhibit C, Program Budget and Services**, pursuant to EGMS Amendment Request Number CR-AD-SS-SS-001-01-01 for EGMS ID Number AD-SS-SS-001-02; and (e) making such other changes as are required in connection with all of the foregoing, as detailed elsewhere in this Amendment Number **One**;

**WHEREAS, Section 7., Time of Performance**, provides for modifications and/or extensions;

**WHEREAS, Section 72., Changes and Amendments to Terms and Conditions**, provides for said amendments;

2. **Section 7. Time of Performance**, solely with respect to **paragraph A.**, is hereby amended and replaced with the following:

“A. The term of this Agreement shall be from July 1, 2021 to June 30, 2023 unless otherwise terminated or extended, in whole or in part, as provided in this Agreement.”

3. **Section 9. Compensation**, is amended and restated as follows, and includes the 2022 – 2023 Fiscal Year:

A. LAHSA shall pay Contractor an amount not to exceed the total dollar amount identified in Exhibit C, Program Budget and Services, attached hereto and incorporated herein by reference, for the complete and satisfactory performance of the terms of this Agreement, as solely determined by LAHSA.

LAHSA shall prepare Exhibit C, Program Budget and Services, which shall be executed by the LAHSA Executive Director or his/her designee and Contractor’s Executive Director or his/her designee.

LAHSA has initially provided Contractor with a Letter of Intent ("LOI") related to allocation of funding for the 2021 – 2022 Fiscal Year and the 2022-2023 Fiscal Year contingent upon authorization by LAHSA’s Board of Commissioners and receipt of funds from LAHSA’s funders, as specified in Exhibit H, which is attached hereto and incorporated herein by reference. Exhibit C, Program Budget and Services shall supersede Exhibit H, LOI.

Agreement funds shall be allocated from Funding Entity(ies) as identified in Exhibit C, Program Budget and Services and shall be expended in accordance with Exhibit C, Program Budget and Services. Contractor's authority to expend such funds shall be for specific time periods as set forth in this Agreement. Contractor's right to receive compensation is conditioned upon compliance with LAHSA's indemnification and insurance requirements, satisfactory performance, and compliance with this Agreement, as solely determined by LAHSA.

- B. Funding as set forth by the foregoing subsection A is subject to change in accordance with the availability of funds provided to LAHSA by the Funding Entity(ies). If LAHSA does not receive the adequate funding for its performance under this Agreement, then LAHSA shall be relieved of obligations under this Agreement, or this Agreement shall be amended to conform to the changes in funding allocations as elected by LAHSA.
- C. LAHSA reserves the right to modify the Program Budget or funding (e.g., increase, decrease, reallocate) during the term of this Agreement. To implement a Program Budget or funding modification, a revised replacement Exhibit C, Program Budget and Services to the Agreement shall be prepared by LAHSA and then executed by the LAHSA Executive Director or his/her designee and Contractor's Executive Director or his/her designee.
- D. Contractor may submit a request to modify the Program Budget or funding, during the term of this Agreement, in the manner specified by LAHSA, including via LAHSA Enterprise Grants Management System (EGMS) or LAHSA Sub-Recipient Contract Amendment, Modification or Waiver policy, attached hereto as Exhibit Y, and attached hereto and incorporated herein by reference. Once approved, the modification will be implemented via a revised replacement Exhibit C, Program Budget and Services to the Agreement, which shall be prepared by LAHSA and then executed by the LAHSA Executive Director or his/her designee and Contractor's Executive Director or his/her designee.
- E. Notwithstanding the above paragraphs, LAHSA may, in its sole discretion, unilaterally reduce the Program Budget or funding of this Agreement, as a whole, in part, or as to a cost category; may limit the rate of Contractor's authority to commit and spend funds; or may restrict Contractor's use of both its uncommitted and its unspent funds, in the event that:
  - 1) The Funding Entity(ies) decrease(s) or rescind(s) funding available for this Program;
  - 2) Contractor will have unexpended funds at the end of the Agreement's term based on the Contractor's spending pattern and invoices submitted to LAHSA for payment;
  - 3) LAHSA determines that reallocating the funds, or a portion thereof, from this Agreement to another LAHSA-funded agreement would better serve the Los Angeles Continuum of Care;
  - 4) Contractor is not meeting its contracted performance measures;
  - 5) as permitted by any other terms of this Agreement; and/or
  - 6) any legally justifiable reason.

To implement such a reduction, the parties agree that a revised replacement Exhibit C, Program Budget and Services to the Agreement shall be prepared by LAHSA and executed by the LAHSA's Executive Director or his/her designee and provided **via written notice** to Contractor's Executive Director or his/her designee.

In no event, however, shall any modification made by LAHSA affect expenditures and legally binding commitments made by Contractor before it received written notice of such modification, provided that such amounts have been committed in good faith and are otherwise allowable, and that such commitments are consistent with Funding Entity(ies)' cash withdrawal guidelines.

- F. Contractor shall not expend funds provided under this Agreement prior to the commencement date of this Agreement, or subsequent to suspension or its termination. Further, expenditures shall be in direct support of the Program, which is the subject of this Agreement. If Contractor is operating another program simultaneously with the Program herein, Contractor shall notify LAHSA in writing of any expenditures for items jointly used for any other program(s) and the expenditures shall be apportioned according to the percentage of direct use for the Program funded herein.

G. LAHSA assumes no responsibility to pay for expenses not specifically enumerated in this Agreement. Further, Contractor understands that LAHSA makes no commitment to fund this Program beyond the initial Program Term of this Agreement.

H. Contractor shall not be entitled to payment or reimbursement for any tasks or services performed, nor for any incidental or administrative expenses whatsoever incurred in or incidental to performance hereunder, except as specified herein. Assumption or takeover of any of Contractor's duties, responsibilities, or obligations, or performance of same by any entity other than Contractor, whether through assignment, subcontract, delegation, merger, buyout, or any other mechanism, with or without consideration for any reason whatsoever, shall occur only with LAHSA's express prior written approval.

I. Contractor shall have no claim against LAHSA for payment of any money or reimbursement, of any kind whatsoever, for any service provided by Contractor after the expiration or other termination of this Agreement. Should Contractor receive any such payment it shall immediately notify LAHSA and shall immediately repay all such funds to LAHSA. Payment by LAHSA for services rendered after expiration or termination of this Agreement shall not constitute a waiver of LAHSA's right to recover such payment from Contractor. This provision shall survive the expiration or other termination of this Agreement.

J. Funds provided by LAHSA shall not be used for costs associated with activities in violation of any law or for any activities not consistent with the intent of the Program and the eligible uses identified in applicable funder(s) Terms and Conditions. Use of funds to pay for ineligible activities will result in the repayment of these funds to LAHSA.

K. Applicable Discounts: Contractor warrants that any applicable discounts have been included in the costs billed to LAHSA.

L. Concurrent Enrollment: If Contractor is serving customers, concurrently utilizing more than one funding stream, Contractor is responsible for tracking the services delivered and the expenditures reported to ensure that services and expenditures are not duplicated.

M. Match Requirements: Contractor shall report in its invoice the required match of non-federal funds, if applicable. If required to provide a match of funds, as set forth above in this compensation section of this Agreement, Contractor shall report in each invoice the funds being matched. Documentation shall be maintained and made available for review.

N. Overtime Work: Unless specifically stated herein or authorized by LAHSA in writing, Contractor shall not incur overtime work expenditures.

O. Travel: Travel must be approved in advance by LAHSA and included in the Budget. Contractor shall be compensated for its reasonable travel expenses incurred in the performance of the Statement of Work and in compliance with 2 C.F.R §200.474.

P. Profit: Contractor shall comply with any LAHSA directives regarding profit or return on investment.

Q. Contractor shall submit to LAHSA its cost allocation plan along with a complete budget, as requested by LAHSA.

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4. **Exhibit A, Statement of Work**, is hereby amended as follows:

- (1) Add **Exhibit A-1, Statement of Work, Part 1: Scope of Required Services (SRS)** for Fiscal Year 2022 – 2023 (July 1, 2022 to June 30, 2023), *attached hereto and incorporated herein by such reference*. Any and all references to Exhibit A, Statement of Work in the Agreement and its Table of Contents, and/or Exhibits, and any related amendments shall hereby incorporate and include **Exhibit A-1, Statement of Work, Part 1: Scope of Required Services (SRS)** for Fiscal Year 2022 to 2023 (July 1, 2022 to June 30, 2023).
- (2) Add **Exhibit A-1, Statement of Work, Part 2: Performance Targets** for Fiscal Year 2022 – 2023 (July 1, 2022 to June 30, 2023), *attached hereto and incorporated herein by such reference*. Any and all references to Exhibit A, Statement of Work in the Agreement and its Table of Contents, and/or Exhibits, and any related amendments shall hereby incorporate and include **Exhibit A-1, Statement of Work, Part 2: Performance Targets** for Fiscal Year 2022 to 2023 (July 1, 2022 to June 30, 2023).

5. **Exhibit B, Conditions Precedent** is hereby amended to include updated Conditions Precedent under **Exhibit B-1, Conditions Precedent**, for Fiscal Year 2022 – 2023, *attached hereto and incorporated herein by such reference*. Any and all references to Exhibit B, Conditions Precedent in the Agreement, and its Table of Contents, and/or Exhibits, and any related amendments, shall hereby incorporate and include **Exhibit B-1, Conditions Precedent**, and its Attachments thereto.
6. Notwithstanding the Attachments to Exhibit B, Conditions Precedent, contained in the Agreement hereof, Exhibit B, Conditions Precedent, is hereby further amended to include the following Attachments, as specified hereunder:

**Exhibit B-1, Conditions Precedent, Attachment 25**, Covid-19 Vaccination Certification of Compliance, *attached hereto and incorporated herein by such reference*.

7. Exhibit C, Program Budget and Services is hereby amended to add **Exhibit C-1, Program Budget and Services** for Fiscal Year 2022 – 2023 (July 1, 2022 to June 30, 2023) as follows:

**Exhibit C-1, Program Budget and Services**, is added to the Agreement for EGMS ID Number AD-SS-SS-001-02, Fiscal Year 2022 to 2023 (budget period of July 1, 2022 to June 30, 2023), and is *attached hereto and incorporated herein by such reference*, including Appendix 1 – Subrecipient Advance, Administration Rate, Indirect Cost Rate Table, *attached and incorporated herein by such reference*. Any and all references to Exhibit C, Program Budget and Services, in the Agreement and its Table of Contents, and/or Exhibits and any related amendments shall hereby incorporate Exhibit C-1, Program Budget and Services for EGMS ID Number AD-SS-SS-001-02, for Fiscal Year 2022 – 2023 (budget period of July 1, 2022 to June 30, 2023), including the Appendix 1 – Subrecipient Advance, Administration Rate, Indirect Cost Rate Table.

8. **Exhibit F, Funder Terms and Conditions**, is hereby amended as follows:

Exhibit F, Funder Terms and Conditions, is amended to include Exhibit F-1, Funder Terms and Conditions which includes updated County of Los Angeles Terms and Conditions, attached hereto and incorporated herein by such reference. Any and all references to Exhibit F, Funder Terms and Conditions in the Agreement, and its Table of Contents, and/or Exhibits, and any related amendments, shall hereby incorporate and include the original Exhibit F, Funder Terms and Conditions, County of Los Angeles Terms and Exhibit F-1, Funder Terms and Conditions, County of Los Angeles Terms and Conditions as updated.

9. Except as herein amended, all other terms and conditions of the Agreement remain in full force and effect.

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10. This Amendment Number One may be executed in counterparts, each of which shall be deemed to be an original, but all of which, taken together, shall constitute one and the same Amendment Number One, which, together with the Agreement, and all Exhibits and Attachments constitute the entire understanding and agreement of the Parties.

**IN WITNESS WHEREOF**, the Los Angeles Homeless Services Authority and Contractor have caused this Amendment Number One to be executed by their duly authorized representatives.

**APPROVED AS TO FORM FOR LAHSA on May 27, 2022:**

Dawyn R. Harrison  
**Acting County Counsel**

Aleen Langton  
**Principal Deputy County Counsel**

**APPROVED AS TO FORM FOR LAHSA on May 27, 2022:**

Michael N. Feuer  
**City Attorney**

Catrina M. Archuleta-Silva  
**Deputy City Attorney**

**For: Los Angeles Homeless Services Authority**

By:   
Name: Stephen Simon  
Title: Interim Executive Director

Executed this day 11/23/2022

**For: Urban Alchemy**

Internal Revenue Service ID Number:  
**82-5408579**

By:   
Name: Lena Miller  
Title: Chief Executive Officer

Executed this day 11/22/2022

Said Agreement shall be referenced as **Amendment Number One to 2021SSLP02** of LAHSA Contracts and shall further be referred to under **EGMS ID Number AD-SS-SS-001-01**

**Exhibit A-1**  
**Statement of Work**  
**Part 1: Scope of Required Services (SRS)**  
**(Fiscal Year 2022 – 2023)**  
**(On next page)**

**Agreement Number:** **2021BHRTV06**

**EGMS ID Number:** **AD-SS-SS-001-02**

**Contractor Name:** **Urban Alchemy**



## 2022-23 Safe Sleep Village Program Scope of Required Services (SRS)

The Scope of Required Services (SRS) for the Safe Sleep Village Program contains a written summary of, and links to, detailed information regarding the services that must be provided to eligible participants experiencing homelessness receiving RM-IH services. The Safe Sleep Village Program SRS and the documents that are linked hereto, in combination with the LAHSA Program Standards, LAHSA Facility Standards, and Performance Targets, together, comprise the entire Statement of Work for the Safe Sleep Village Program. LAHSA reserves the right to make any necessary changes related to prioritization, matching, and other aspects of the implementation of the complete Coordinated Entry System. Contractors will be notified through policies, interim guidance, and other forms of guidance when deemed necessary.

### BACKGROUND AND PROJECT OVERVIEW

The City of Los Angeles' Homelessness Roadmap is comprised of several interventions that are meant to provide emergency housing and/or supportive services to individuals and families experiencing homelessness based on the vulnerability level of the individual person, with the most vulnerable prioritized. Other prioritization factors include people experiencing homelessness who are residing near freeway underpasses and high-traffic ramps, individuals aged 65 and older, and/or individuals who are vulnerable to COVID-19 (per the Centers for Disease Control guidelines). The Safe Sleep Village associated with the Homelessness Roadmap provides a safe place for people experiencing homelessness to sleep, have meals, and receive case management, on a 24-hour basis.

### PROJECT DESCRIPTION

The Safe Sleep Village is a 24-hour program that consists of outdoor tent spaces for individuals to sleep in their tents safely with their personal belongings, so long as their belongings can fit in a designated area. This program aims to mitigate the risks of living in an encampment by providing on-site security, case management, laundry services, showers, bathrooms, and meals.

The Safe Sleep Village serves as an access point into the Coordinated Entry System (CES). Service providers enter clients into CES, provide housing-focused case management, and connect clients to housing navigation services within the homelessness response services system. This program, as with all LAHSA-administered programs, is required to incorporate low barrier, trauma-informed care, and harm reduction policies and procedures into its program design and operations.

### ELIGIBILITY FOR SERVICES

- 1 **Population Served:** Adults over the age of 18 who are experiencing homelessness in the City of Los Angeles.
- 2 **Homeless Status:** Participants must be determined to be homeless under Categories 1 and 4 per the United States Department of Housing and Urban Development (HUD)'s final rule on

“defining homeless” (24 CFR Parts 91, 576, 578). Clients will be identified through a centralized matching process that will be determined by LAHSA and the City of Los Angeles.

- 2.1 Contractor will be responsible for documenting the determination of all Safe Sleep participants’ homeless status utilizing the LAHSA-approved Los Angeles Continuum of Care (LA CoC) Homeless Certification Forms.
- 2.2 Contractors will be responsible for documenting the determination of the participant’s homeless status utilizing LAHSA Approved Homeless Certification Forms, depending on the participant’s unique situation:
  - HMIS Client Summary Report,
  - Form 1444 – Third Party Verification of Homeless Status Form,
  - Form 2199 – Observation of Homeless Status Form, or
  - Form 1448 – Self-Certification of Homeless StatusPlease refer to the following training video on how to complete the forms: LAHSA Approved Homeless Certification Forms: <https://www.youtube.com/watch?v=PMkGNLKi3E>
- 2.3 All documentation is required to be uploaded to HMIS. In the case where homelessness is being documented based solely on the HMIS Client Summary Report, the provider must make a case note in HMIS indicating the HMIS Client Summary Report shows the participant was homeless within 7 days of program entry.
  - 2.3.1 If hard copy files are maintained, the homeless status documentation must be placed inside the participant’s master file in addition to being uploaded to HMIS. Please see the following video on how to upload documents to HMIS: <https://www.wevideo.com/view/1324198999>

## **IDENTIFYING PARTICIPANTS**

3. The population eligible for interim housing services at the Safe Sleep Village Programs shall be people experiencing homelessness in the City of Los Angeles who are staying within catchment areas identified by the City and County of Los Angeles.
4. Prioritization factors for the Safe Sleep Village Program may include the following:
  - 4.1 Individuals experiencing homelessness within 500 feet of freeway overpasses, underpasses and/or ramps;
  - 4.2 Individuals experiencing homelessness age 65+;
  - 4.3 Individuals experiencing homelessness who are COVID-19 vulnerable.
5. Participants for the program are referred via LAHSA’s centralized matching process.
6. Unaccompanied Minors are not eligible for enrollment or services in program. An exemption exists for unaccompanied minors who are legally emancipated.

## SERVICES AND ACTIVITIES

- 7 **Staffing:** The Safe Sleep Village shall be heavily staffed with practitioners with special de-escalation skills critical to ensuring that the site runs smoothly. Safe Sleep providers are funded for and shall provide the services below:
- 8 **Facilities and Operations:** Contractor must operate a clean, safe, and well-maintained Safe Sleep Village for participants experiencing homelessness which includes providing the following:
  - 8.1.1 Tent
  - 8.1.2 Tent Space
  - 8.1.3 Cot
  - 8.1.4 Bedding (i.e. blanket and pillow)
  - 8.1.5 Two (2) storage bins for belongings
  - 8.1.6 24-hour site availability
    - 8.1.6.1 Contractor must notify LAHSA in writing of any programmatic changes (e.g. changes in site addresses or the number of parking spaces available for Safe Sleep use) prior to their occurrence
  - 8.1.7 24-hour site safety
  - 8.1.8 Janitorial and Maintenance Services 7 days per week
  - 8.1.9 Shower services a minimum of 5 days per week
  - 8.1.10 Laundry services a minimum of 2 days per week
  - 8.1.11 Provision of three (3) nutritious meals a day (breakfast, lunch, and dinner).  
**Please refer to LAHSA Facility Standards for more information**
- 9 **Site Amenities:** Safe Sleep Programs should include access to as many on-site amenities as possible, such as, food, showers, Wi-Fi, phone charging stations, etc. On-site office space is also critical for consistent provision of housing-focused case management.
10. **Problem Solving (Diversion):** The first conversation upon entry will be to assess for the possibility of Problem Solving to assist the person to quickly self-resolve their housing and/or make reasonable efforts to re-connect with supportive family and/or friends who could temporarily or permanently house the participant.
  - 10.1. If, through the Problem Solving (Diversion) efforts, it is identified that assistance funds are needed to resolve the participant's housing crisis and successfully divert entry into the Safe Sleep Village program, the Contractor must either: make a referral to a CES Prevention program if participant is determined to meet Category 2 or 4 Homeless Status criteria, or submit a for Problem Solving Assistance Funds if participant is determined to meet Category 1 or 4 Homeless Status criteria.
  - 10.2. If Problem Solving is not initially successful at program entry, Contractor should continue to have Problem Solving conversations while the participant is enrolled in Safe Sleep Village Programs.

10 **Intake and Assessment:** Contractor must enroll participants in the Safe Sleep Village program in HMIS **within 1 business day of their admission** to the site. Contractor must also ensure that the appropriate LA CoC Homeless Certification Form has been completed and uploaded to HMIS.

11 **Case Management:** Case Management Services are provided by Safe Sleep Programs staff to assist participants in moving forward in accessing permanent housing. The primary objective of Case Management/Support Services for Safe Sleep Programs is to support participants with obtaining an ID and any identification documents needed. Additionally, case management shall also include an organized approach to tracking and managing participant progress including referrals and connections to housing navigation and permanent housing programs.

11.1 Contractor must provide Case Management that is offered in accordance with Housing First and trauma-informed care principles to assist participants to self-resolve their housing crisis and/or be connected to a permanent housing provider.

11.2 Contractor must document the content and outcome of case management meetings with participants as case notes under the designated program in HMIS. **Please see LAHSA's Program Level Case Note video on how to do this:**  
[https://www.youtube.com/watch?v=Hg39kR6ms\\_s](https://www.youtube.com/watch?v=Hg39kR6ms_s)

11.3 To maintain the momentum of participants' progress towards obtaining permanent housing, the Contractor must offer case management services to each participant at least one (1) time per month. The frequency of how often case management services is offered to each participant can be increased depending on need and availability.

11.4 Contractors must ensure that participants have documents prepared for permanent housing placements included but not limited to: Identification and Driver's license cards, Social Security verification, employment verification, and other necessary documents to move swiftly into permanent housing.

11.5 Contractor must develop an organized approach to tracking participant status and progress towards obtaining Identification in addition to tracking the progress of referrals to housing navigation and permanent housing programs.

11.5.1 All efforts on behalf of the Contractor to engage a participant in case management services should be documented in HMIS as well as the response from the participant.

11.5.2 Case notes in HMIS should be documented in a manner that is succinct, objective, and factual.

11.6 **Case Management Ratio:** Contractors are recommended to maintain a ratio of approximately one (1) staff to every twenty-five (25) participants for optimal service delivery.

11.6.1 The specific ratio of staff members to participants for case management services should be determined through consultation with Supervising or Managing level staff, taking into consideration the frequency of services needed for participants based on individual need.

12 **Resource Coordination Meetings:** Interim Housing contractors are required to coordinate and support oversight of program placements between service providers for participants to move swiftly into permanent housing. Contractors will hold regular meetings with Housing Navigation and Time Limited Subsidy service providers to coordinate care and movement into permanent housing and will have access to overall planning for participants

13 **Mainstream Benefits:** Contractor must establish procedures for referring eligible and interested participants to mainstream benefit services (e.g., services available through Department of Social Services, Department of Health Services – Countywide Benefits Entitlement Service Team (CBEST), Department of Mental Health, Department of Public Health - Substance Abuse Prevention and Control (SAPC)). The program aims to improve access to these resources and assess the impact of their service/resource connections on participant permanent housing outcomes. Contractor must establish procedures for referring eligible and interested participants to mainstream benefit services.

13.1 **Connection to The County's Mainstream Services Pilot Program:** The Mainstream Services Pilot Program is designed to facilitate and enhance access to mainstream health and social services for people accessing Interim Housing programs. Mainstream services are provided by Departments of Health Services (DHS), Mental Health (DMH), Public Health-Substance Abuse and Prevention Control (DPH-SAPC) and Public Social Services (DPSS). The program aims to improve access to these resources and assess the impact of their service/resource connections on participant permanent housing outcomes. Contractor must establish procedures for referring eligible and interested participants to mainstream benefit services.

14 **Financial Assistance:** Assistance is offered only when it is not available through existing mainstream resources.

14.1 Contractor will not provide financial assistance directly to any program participant and will ensure that financial assistance is paid directly to the third-party entity. Eligible categories of financial assistance and guidance can be found in **Appendix III.**

14.1.1 Contractor must monitor and coordinate the use and disbursement of financial assistance. This includes timely and accurate data entry in HMIS, and documentation of financial expenditures in HMIS.

14.1.2 Contractor must ensure that receipts of all financial assistance payments that are made to support the participant's needs are placed in the participant's master file.

## **HARM REDUCTION AND TRAUMA INFORMED PROGRAM DESIGN**

15 These principles shall be incorporated into all aspects of the program's site. Core design components are listed below.

- 15.1 Creating trauma-informed programs requires continual review of policies to see what works and what may be re-traumatizing to trauma survivors. Contractor must have a regular review of policies to update practices and guidelines to make them as relevant as possible to the participants being served.
- 15.2 Contractor must train all staff in the administering of Narcan and must have a Narcan supply on site to support participants that may be in an emergency overdose situation.
- 15.3 Contractor must utilize the Trauma-Informed Organizational Toolkit to self-assess its program and site for fidelity to the trauma-informed model and to develop aligned policies and procedures. (Trauma-Informed Organizational Toolkit – <https://www.lahsa.org/documents?id=1691-trauma-informed-organizational-toolkit.pdf>)
- 15.4 Contractors are permitted to prohibit the possession and/or use of weapons, alcohol, and/or illegal drugs on the site.
  - 15.4.1 Contractors must, however, establish Harm Reduction policies, practices, and procedures designed to minimize negative consequences resulting from participants use or possession of contraband items as referenced above.
  - 15.4.2 Contractor must ensure that a sharps container is available on-site and is accessible to participants. Sharps must be disposed of in an appropriate manner.

## **COVID-19 PREVENTION AND RESPONSE PRACTICES**

16 Contractor is required to abide by all screening, prevention, and response practices designated by the LA County Department of Public Health (DPH) as it relates to COVID-19. Contractor will ensure that staff and participants adhere to any Orders issued by the State or County's Health Officer when in effect.

- 16.1 Contractor must educate staff and participants on the latest COVID-19 best practices as per the Center for Disease Control (CDC) and DPH and ensure that these practices are integrated into the facility's daily operations. This may include but is not limited to:
  - 16.1.1 COVID-19 Symptom Screenings for all participants, staff, and volunteers; this can be completed by trained staff and does not require medical personnel.

16.2 Communications with DPH and LAHSA:

- 16.2.1 Contractor must notify DPH whenever there are any symptomatic or COVID-19 positive participants or staff on-site.
- 16.2.2 Contractor must submit a completed Incident Report to LAHSA whenever there are any positive COVID-19 cases or outbreaks on-site.
- 16.2.3 Contractor must inform and share with LAHSA any site-specific guidance/recommendations provided by DHS/DPH.

**POLICIES AND PROCEDURES**

- 17 The Safe Sleep Village provider must incorporate as part of their program, a set of program participation guidelines that serve as protocols for ensuring the safety and security of program participants, as well as program staff. These guidelines must be presented to LAHSA staff prior to the start of operations for review and approval by LAHSA.
- 18 Contractor must submit copies of all Policies and Procedures to LAHSA for approval within ten (10) business days of a site opening OR when new policies/procedures are created OR when changes are made to existing policies and procedures.
  - 18.1 Policies and Procedures that must be submitted to LAHSA include but are not limited to policies and procedures that address the following:
    - 18.1.1 Participant guidelines
    - 18.1.2 Mental health crises and psychiatric emergencies
    - 18.1.3 Substance use, including on-site use, sale, and substance use-related emergencies
    - 18.1.4 Conflict response and de-escalation
    - 18.1.5 Threats, physical altercations, and incidents of violence
    - 18.1.6 Participant exits (voluntary and involuntary)
    - 18.1.7 Re-enrollment of previously exited participants
    - 18.1.8 Storage, training and distribution of Narcan
    - 18.1.9 ADA Accessibility (**See Appendix C of the LAHSA Facility Standards for details on ADA compliance**)
  - 18.2 Participant guidelines must abide by the following Criteria:
    - 18.2.1 Rules must ensure the safety and security of program participants, volunteers, and staff.
    - 18.2.2 Rules must reflect a Housing First, Low Barrier, Trauma-Informed, and Harm Reduction approach.
    - 18.2.3 Contractor must review all program rules with participants as part of the intake process, and have participants sign and date the form. The completed form must be uploaded to HMIS and placed in the participant master file.

## LENGTH OF ENROLLMENT AND EXITS

- 19 Contractor must strive to assist participants in moving out of Safe Sleep Village and into permanent housing as quickly as possible. The total length of stay can and should be individually determined, based on the participants' needs. To remain eligible, progress and engagement towards housing goals must be documented and reviewed when participant is approaching an initial 90-day length of stay and, so long as participant stays in the program, every 90 days after.
- 20 Contractor must develop and document clear Policies and Procedures regarding allowable reasons and procedures for exiting participants from the Safe Sleep Village Program.
- 21 The following are reasons for which a participant must be exited from the Safe Sleep Village program:
  - 21.1 Participant successfully secures permanent housing.
  - 21.2 Reunification services are utilized or the participant self-resolves their housing crisis.
  - 21.3 Participant relocates outside of Los Angeles County.
  - 21.4 Participant is enrolled in another Interim Housing program (Crisis, Bridge, Recuperative Care, Stabilization, etc.) or Transitional Housing Program.
  - 21.5 Participant's actions or behaviors are deemed to pose a serious or imminent risk to the safety of the contractor's staff or other participants.
  - 21.6 Participant will be hospitalized or incarcerated for seven (7) consecutive days or more.
- 22 If the participant returns for services after being exited, efforts must be made to address the participant's needs and re-enroll into Safe Sleep Village Program.
- 23 Contractor must not exit a Participant from Roadmap Interim Housing Program for the following reasons:
  - 23.1 Active substance use
  - 23.2 Failure to have an income
  - 23.3 Active health issues
  - 23.4 Mental health conditions
  - 23.5 Failure to abide by personal budget
  - 23.6 Medication non-compliance
- 24 As an interim housing program, it is anticipated that participants will stay in the program most nights; however, there may be circumstances in which a participant works overnight and sleeps during the day, or where participants have an alternate place to stay on some nights. If participants are not staying in the program regularly and have not notified the Contractor of their absence for three or more consecutive days/nights, Contractors must make at least three attempts to contact the participant prior to exiting them from the program. Attempts must be made using at least two (2) different methods (e.g., calls, texts, e-mail).
  - 24.1 If these attempts are unsuccessful, the Contractor may exit the participant.
- 25 In instances in which a participant is involuntarily exited, Contractor should avoid discharging

participants directly to the streets or places not meant for human habitation and instead attempt to facilitate a transition to another interim housing program.

- 25.1 When a participant has been successfully linked to another interim housing program, Contractor should provide the necessary support to ensure a successful transition.
- 26 When the participant has been successfully linked to a permanent housing program, Contractor must work collaboratively with the Permanent Housing Provider to facilitate a quick and successful transition that is not disruptive to the participant.
- 27 **Exit Plan:** Contractor must complete an Exit Summary Plan Form for all exited participants.
  - 27.1 Exit Plans for participants not entering permanent housing should include referrals and linkages to other interim housing resources, with a warm hand-off (i.e., documented transition between providers) that show a smooth transition between providers.
  - 27.2 When participants exit the facility before completing the exit interview, Contractor is expected to maintain a copy of the Exit Plan and list of interim housing resources for the participant should they return to the facility.
  - 27.3 Contractor must complete the Program Exit page in HMIS indicating where the participant has exited to. “Unknown destination” and “Other” entries in HMIS are to be discouraged. If new information about a participant’s exit destination becomes available after they’ve exited from the program, Contractor should proceed with updating the exit destination on the Program Exit page in HMIS.
  - 27.4 Contractor should include a final case note in HMIS that includes supporting details about the participant’s exit from the program.

## **HMIS**

- 28 LAHSA-funded contractors are responsible for utilizing the Los Angeles Continuum of Care Homeless Management Information System (LA CoC HMIS) and participating in the Coordinated Entry System (CES).
- 29 HMIS will be used for the following:
  - 29.1 Problem-Solving Tracking Tool
  - 29.2 LAHSA-approved LA CoC Homeless Certification Forms (must be documented/uploaded in HMIS as part of enrollment process)
  - 29.3 Program Enrollment and Exits (must be tracked in HMIS **within 1 business day of program enrollment or exit**)
  - 29.4 Documenting case notes, services provided, and referrals made (must be completed in HMIS **within 3 business days of each meeting** with participants)
  - 29.5 Accepting Program Referrals (when system utilizes HMIS for referrals)
- 30 Contractor will perform quality control actions on a regular basis to ensure accurate, timely data entry in HMIS. **See LAHSA Program Standards and Practice Standards for more information.**

## **REPORTING**

31 Please refer to the “Program Reports” and “Health, Safety and Incident Reports” sections in **LAHSA’s Program Standards** document for reporting requirements

**PARTICIPANT MASTER FILE**

32 Contractor must maintain a file for each participant that contains, but not limited to documents listed in **Appendix II** below.

**SEE INTERIM HOUSING PRACTICE STANDARDS FOR THE FOLLOWING ADDITIONAL REQUIREMENTS OF YOUR CONTRACT**

33 This document outlines the requirements of the whole homeless services system in The City and County of Los Angeles. The requirements outlined in the document applies to all interim housing programs funded by the Department of Health Services (DHS), The Department of Mental Health (DMH) and The Los Angeles Homeless Services Authority (LAHSA).

**SEE LAHSA PROGRAM STANDARDS FOR THE FOLLOWING ADDITIONAL REQUIREMENTS OF YOUR CONTRACT**

34 This document contains program practices and requirements that are specific to all LAHSA funded programs in The City and County of Los Angeles.

**SEE LAHSA FACILITY STANDARDS FOR THE FOLLOWING ADDITIONAL REQUIREMENTS OF YOUR CONTRACT**

35 This document outlines the facility requirements for all LAHSA funded programs in The City and County of Los Angeles. This document was developed in accordance with LA County Code (Title 8 and Title 11) and 2010 ADA Standards for Accessible Design.

<b>APPENDIX I: Safe Sleep Village Program Eligibility</b>		
<b>Population</b>	<b>Individuals</b>	<b>Families</b>
<b>Population Defined</b>	<p>Adults: Individuals over the age of 18</p> <p>Youth: Individuals who are between the age of 18-24 or if under the age of 18 must be legally emancipated.</p> <ul style="list-style-type: none"> <li>• If a member of the household requesting access to the Safe Sleep Program is between the ages of eighteen (18) and twenty-one (21), as a part of the assessment process, Contractor shall complete and submit an Independent Living Program (ILP) Eligibility Verification Form to the Department of Children and Family Services (DCFS) to determine if the youth is eligible for ILP. Participants screened as eligible for ILP shall be encouraged to use ILP housing and resources.</li> </ul>	<ul style="list-style-type: none"> <li>• Families are households consisting of one or more minor children (17 or under) in the legal custody of one or two adults who are living together and working cooperatively to care for the children.</li> <li>• This includes both 2-parent and 1-parent families, including those with same sex partners, families with intergenerational or extended family members, unmarried couples with children, families that contain adults who are not the biological parents of the children, and other family configurations.</li> </ul>
<b>Participant Driver's License and household members' identification</b>	<p>Participant Identification is required but not necessary for program enrollment/intake if the license is lost and needs to be replaced.</p> <p>If lost, Contractor must work with participant to assist the participant in obtaining Identification as soon as possible. Safe Sleep providers must work to obtain valid identification for all household members while they are in the Safe Sleep program. Valid identification is not necessary at enrollment/intake for household members.</p>	
<b>Homeless Status</b>	<p>Participants must be determined to be homeless (Categories 1 &amp; 4) per United States Department of Housing and Urban Development (HUD)'s final rule on "defining homeless" (24 CFR Part 578) AND living in their vehicle.</p> <p>Category 1: Literal Homeless- An individual or family who lacks a fixed, regular, and adequate nighttime residence, which includes one of the following:</p> <ol style="list-style-type: none"> <li>Has primary nighttime residence that is a public or private place not meant for human habitation. Examples include street, park, vehicle, abandoned building, bus/train station, airport, camping ground);</li> <li>Is living in a publicly or privately-operated shelter designated to provide temporary living arrangements (Emergency shelter, transitional housing, motel/motel paid by government or charitable organization); or</li> <li>Exiting an institution where (s)he has resided for 90 days or less AND were residing in an emergency shelter or place not meant for human habitation immediately before entering institution. Examples of Institutions include a medical hospital, psychiatric hospital, jail, prison, substance abuse treatment facility, and dependent care facility.</li> </ol>	

	<p>Category 4: Individuals/families fleeing or attempting to flee domestic violence, dating violence, violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or family member and includes ALL of the following:</p> <ol style="list-style-type: none"> <li>i. Have no identified residence, resources or support networks; AND</li> <li>ii. Lack the resources and support networks needed to obtain other permanent housing.</li> </ol>
<b>The LA CoC Homeless Certification Forms</b>	<p>Participants who meet HUD Category 1 &amp; 4 must have their Homeless status documented using the LA CoC Homeless Certification forms and follow prescribed LAHSA Homeless Status documentation standards. Upon being presented with a request for services, Safe Sleep Programs must run the participant's HMISCLNT-125 Client Summary Report. They must use the information in the report to identify the appropriate LA CoC Homeless Certification Form needed to document the participant's current homelessness and use the information to make necessary referrals.</p> <p>The LA CoC Homeless Certification forms include the following:</p> <ul style="list-style-type: none"> <li>• HMIS Client Summary Report</li> <li>• Observation of Homeless Status Form- Form 2199</li> <li>• Third Party Verification of Homeless Status Form-Form 1444</li> <li>• Self-Certification of Homeless Status Form- Form1448</li> </ul> <p>The LA CoC Homeless Certification Form that should be used will depend on the participant's housing situation the night prior to Program Entry. Participants should not be turned away because they are unable to provide third-party documentation of homelessness.</p> <p>If Safe Sleep Programs with Light Touch Case Management is unable to establish a participant's current homelessness using the LA CoC Homeless Certification Forms at Program Entry, they may complete an Observation of Homeless Status Form- Form 2199 to enroll the participant in the Safe Sleep Program.</p> <p>The LA CoC Homeless Certification form must be uploaded to HMIS in the file upload tab in the program profile.</p>
<b>Population Appropriate CES Triage Tool</b>	<p>The Safe Sleep population specific site will determine what appropriate CES Triage Tool to use.</p> <ul style="list-style-type: none"> <li>• CES Survey Packet for Youth (Formerly called Next Step Tool for Youth)</li> <li>• CES Survey Packet for Adults</li> <li>• VI-FSPDAT for Families with Children</li> </ul> <p>Note: Must be completed and entered into HMIS within ten (10) days of program enrollment, if not previously administered.</p>
<b>Ongoing Need</b>	<p>Participant continues to demonstrate they are in need of Safe Sleep Program on a monthly basis. Information on participant's needs must be documented in HMIS via case notes.</p>
<b>Geography</b>	<p>Must be a current resident of the County of Los Angeles. If the participant reports they were residing the night before within the County of Los Angeles, the night before assessment they would be considered a current resident of the County of Los Angeles.</p>
<b>Unaccompanied Minors</b>	<p>Unaccompanied Minors are not eligible for enrollment or services in programs that serve adults. An exemption exists for unaccompanied minors who are legally emancipated.</p>

APPENDIX II: Participant Master File	
Document	Guidance
Participant Identification	<ul style="list-style-type: none"> <li>Required</li> <li>See <a href="#">Form 4452</a> on the LAHSA Document Library</li> <li>See <a href="#">Appendix I</a> for details.</li> </ul>
Program Guidelines	<ul style="list-style-type: none"> <li>Completed upon program intake.</li> <li>Must be dated and signed by the participant and contractor.</li> </ul>
Grievance Procedure Acknowledgement Form	<ul style="list-style-type: none"> <li>Must be dated and signed by the participant and contractor.</li> <li>The document should be uploaded to HMIS</li> </ul>
LA CoC Homelessness Certification Form	<ul style="list-style-type: none"> <li>See <a href="#">Appendix I</a> for details.</li> <li>If HMIS indicates that the participant was staying in a shelter or was engaged by a street outreach worker within the past 7 days Homelessness is verified in HMIS, print the "Client Summary Report" from HMIS</li> </ul>
Consent to Share PPI	<ul style="list-style-type: none"> <li>Upload in HMIS</li> <li>Use LAHSA-approved form (<a href="#">Form 1119- Consent to Share Protected Personal Information</a>)</li> </ul>
HMIS Intake & Enrollment	<ul style="list-style-type: none"> <li>Complete in HMIS within 24 of enrollment</li> <li>Use LAHSA-approved form (<a href="#">Form 1125- HMIS Intake and Enrollment</a>)</li> </ul>
Income Documents	<ul style="list-style-type: none"> <li>Current proof of income must be uploaded to HMIS if it has not already been uploaded.</li> <li>If proof of income is outdated or not currently available, the participant should <a href="#">complete Form 1087 - Self Declaration Of Income/ No Income Form</a> and the form should be uploaded to HMIS.</li> <li>Income is not required for program entry and participants must not be screened out due to lack of income or employment.</li> </ul>
CES Survey Result	<ul style="list-style-type: none"> <li>Complete in HMIS within fourteen (14) days of program enrollment if there is no record in of a CES Survey in HMIS.</li> <li>If there is a record that is accurate and does not need to be updated print the "Client Summary Report" from HMIS</li> </ul>
Housing and Services Plan	<ul style="list-style-type: none"> <li>Use LAHSA approved form (<a href="#">Form 1186- Housing &amp; Services Plan</a>) and track the date the HSP was completed in HMIS</li> <li>If a Housing and Services Plan has not been created, the Contractor will work with the participant to develop one and upload to HMIS.</li> </ul>
Monthly Update Form	<ul style="list-style-type: none"> <li>Use LAHSA-approved form (<a href="#">Form 1082- Monthly Update</a>) or document using HMIS case notes.</li> <li>Track service in HMIS</li> </ul>
Budget Tool	<ul style="list-style-type: none"> <li>Optional - use as needed (<a href="#">Form 1090 - Org Code Honest Budget Template</a>)</li> </ul>

Case Notes and Service Notes	<ul style="list-style-type: none"> <li>• All services and referrals provided must be documented in HMIS. Program-level case notes must be entered in HMIS within 24 hours of each participant engagement. Please see LAHSA's <a href="#">Program Level Case Note video</a> on how to do this.</li> <li>• HMIS Report [CLNT-106] Client Service Notes (<i>updated monthly</i>)</li> <li>• HMIS Report [CLNT-101] Case Notes (<i>updated monthly</i>)</li> <li>• Documentation of the referrals made and the outcome of the warm hand-offs (if applicable)</li> </ul>
Housing Documents	<ul style="list-style-type: none"> <li>• Copies of rental applications or other documents showing the effort that was done to get the person into housing (if applicable)</li> <li>• Financial Assistance receipts and documentation (if applicable)</li> </ul>
Incident Reports, Notice of Noncompliance	<ul style="list-style-type: none"> <li>• If applicable</li> <li>• Use LAHSA-approved form (<a href="#">Form 1174 - LAHSA Incident Report</a>)</li> </ul>
HMIS Update and Annual Assessment	<ul style="list-style-type: none"> <li>• If applicable</li> <li>• See <a href="#">Form 1156</a> on the LAHSA Document Library</li> </ul>
Termination Letter	<ul style="list-style-type: none"> <li>• Please see Termination Policy and Procedures outlined below</li> </ul>
Exit Summary Form	<ul style="list-style-type: none"> <li>• Use the LAHSA-approved form (<a href="#">Form 1126 - HMIS Exit Form</a> and <a href="#">Form 1081 - Exit Summary</a>) and complete in HMIS when exiting participants from the program.</li> <li>• Include the <a href="#">1095 - Reunification Form</a> as appropriate.</li> </ul>

APPENDIX III: Financial Assistance For all Populations		
Financial Assistance	Guidance	Participant's File
<b>Emergency Transportation Assistance</b>	<p>A contractor may provide transportation assistance if it will enhance housing stability. For example, a participant may require assistance with transportation to a job interview or a medical appointment. Because the use of public transportation is generally less expensive than the use of private vehicles and may be more sustainable in the long-term, grantees should consider providing public transportation tokens or vouchers before offering financial assistance for personal vehicles.</p> <p><b>Public Transportation:</b></p> <p>Public transportation is an eligible cost if it will enhance housing stability.</p> <p>Maximum assistance of four (4) total, one (1) month LA County Metro (or transit agency in Los Angeles County) passes in a two (2) year period. Providers are encouraged to use transportation on an as needed basis, including using tokens or replenishing TAP cards with limited funds as needed.</p> <p>Public transportation cards/tokens must be given to the Head of Household only.</p> <p><b>Gas Cards:</b></p> <p>The issuance of Gas Vouchers may be allowable under the conditions listed below:</p> <ol style="list-style-type: none"> <li>1. A gas voucher is allowable as transportation cost only towards needs directly related to housing stability and is incorporated in the participant's Housing Plan.</li> <li>2. Payment must be made by the contractor directly to a third party.</li> </ol> <p>For example, the contractor may make arrangements with a local gas station by pre-paying for gasoline only, require gas station to view identification of participant prior to approval of any gasoline purchase, and provide grantee with receipts for all gasoline purchases.</p>	<p><b>Public Transportation:</b></p> <ul style="list-style-type: none"> <li>• Receipt of any transportation passes/tokens purchased</li> <li>• Receipt/Proof of vehicle repair</li> <li>• <a href="#">Gift Card Verification Form 3896</a> (form can be found on LAHSA website)</li> <li>• Document service in HMIS</li> </ul> <p><b>Gas Cards:</b></p> <ul style="list-style-type: none"> <li>• <a href="#">Gift Card Verification Form 3896</a> (form can be found on LAHSA website)</li> <li>• Receipts for Gas Cards.</li> <li>• HMIS- "Provided Services"</li> <li>• HMIS- Must record the date and amount paid</li> <li>• Gas Cards must be given to the Head of Household only</li> <li>• Verification of activity/appointment required</li> </ul>

	<p>A maximum of six gas card(s) may be provided to each head of household each fiscal year based on the amount required to reach their destinations. The maximum allowable amount per gas card is \$50. Activities must not be covered or allowed under any other program(s)</p>	
<b>General Housing Stability Assistance</b>	<p>There are two classes of Housing Stability Assistance expenses, outlined below, that can be authorized up to a maximum of \$1,500 per participant household.</p> <p>(1) Expenses associated with gaining or keeping employment: Eligible items include but are not limited to uniforms, tools, driver's license fees, license/certification costs required for employment, documentation acquisition fees such as for Social Security Number or birth certificate, document court filing fees, and short-term training leading to employment, where other funding is not available.</p> <p>(2) Expenses necessary for securing appropriate permanent housing: Eligible items include but are not limited to fees for rental applications, background checks, housing inspections, credit score checks, credit counseling, criminal background check, tenancy screening reports, financial literacy class, document court filing fees, and documentation acquisition such as for Social Security Number or birth certificates</p> <p>Payment must be made by the grantee directly to a third party.</p> <p><b>Assistance Limit:</b></p> <p>Items in the two classes add up to a maximum total of \$1,500 per participant household. Items for life and safety add up to a maximum of \$500 within the overall \$1,500 limit.</p>	<ul style="list-style-type: none"> <li>• Receipt</li> <li>• Proof of payment</li> <li>• Document service in HMIS</li> </ul>
<b>IRS Compliance</b>	<p>Contractor must comply with IRS rules reporting payments to independent contractors. See IRS guidance <a href="https://www.irs.gov/businesses/small-businesses-self-employed/reporting-payments-to-independent-contractors">https://www.irs.gov/businesses/small-businesses-self-employed/reporting-payments-to-independent-contractors</a></p>	<p>No documentation needed in participant's file, but the agency must be able to show they are complying with IRS requirements.</p>

**Exhibit A-1 (continued)**  
**Statement of Work**  
**Part 2: Performance Targets**  
**(Fiscal Year 2022 – 2023)**  
**(On next page)**

**Agreement Number:** **2021BHRTV06**

**EGMS ID Number:** **AD-SS-SS-001-02**

**Contractor Name:** **Urban Alchemy**

#	EGMS ID	Title	Measure	Unit of Measurement	Target	Actual
1	KPI-0094	Contracted to Serve	Minimum number of people to be served Refer to HMIS Report: [GNRL-220] Program Details Report, Look at Exits spreadsheet.	Number (#)	125	0
2	KPI-0045	Average Nightly Bed Utilization Rate	Refer HMIS Report: [HSNG-104] Monthly Housing Report; [HSNG-108] Housing Census	Percentage (%)	95	0
3	KPI-0096	Exits to Successful Housing Destination Safe Sleep	"Successful Housing Destination" includes: o Exits to any Permanent Housing Destination o Exit to temporary stays with family or friends â€œSuccessful Housing Destinationâ€ for purposes of Safe Sleep program this also includes: o Exits to any Interim Housing Destination Refer HMIS Report: [GNRL-220] Program Details Report` Look at the Exits spreadsheet to see the destinations	Percentage (%)	15	0

**Exhibit B-1  
Conditions Precedent  
(On next page)**

**Agreement Number:** 2021BHRTV06

**EGMS ID Number:** AD-SS-SS-001-02

**Contractor Name:** Urban Alchemy

**Exhibit**  
**Conditions Precedent**  
**As Applicable Based on Funding Agreement**

Prior to the execution of this Agreement, Contractor shall provide LAHSA with copies of the following documents. Forms for Attachments marked with \* are available at <https://www.lahsa.org/contracts>. Completed Attachment documents should be submitted to LAHSA, are identified by number, and shall be attached hereto (unless otherwise specified), and are incorporated herein by reference.

"EGMS" refers to LAHSA's Enterprise Grants Management System.

General Conditions Precedent apply to all Agreements with LAHSA. Additional conditions precedent for Funders apply as identified below.

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Attachment 1 - Certification of No Conflict of Interest\*

Attachment 2 - Certification and Disclosure Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions\*

Attachment 3 - Certification of Compliance with Equal Benefits Ordinance\*

Attachment 4 - LAHSA's Authorization to Execute Agreements\*

Attachment 5 - LAHSA's Authorization to Sign Invoices\*

Attachment 6 - Certification Regarding Compliance with the Service Contract Worker Retention Ordinance and the Living Wage Ordinance\*

Attachment 7 - Contractor's Articles of Incorporation

Attachment 8 - Grounds for Rejection\*

Attachment 9 - Contractor Employee Acknowledgement and Confidentiality Agreement\*

Attachment 10 - Contractor Non-Employee Acknowledgement and Confidentiality Agreement\*

Attachment 11 - Employee Jury Service Program and Certification\*

Attachment 12 - Charitable Contributions Certification\*

Attachment 13 - Standardized Tuberculosis ("TB") Guidelines\*

Attachment 14 - Contractor's Termination Policies and Procedures

Attachment 15 - Contractor's Grievance Policies and Procedures

Attachment 16 - Federal Certification and Disclosure Regarding Lobbying\*

Attachment 17 - Certification Regarding Compliance with the Americans with Disabilities Act\*

Attachment 18 - Contractor's Match Documentation

Attachment 19 - Contractor's Affirmative Action Plan

Attachment 20 - Contractor's Bylaws

Attachment 21 - Contractor Responsibility Ordinance

Attachment 22 - Certification Regarding Notice of Prohibition Against Retaliation\*

Attachment 23 - Certification of Compliance With First Source Hiring Ordinance/Reasonable Measures

Application for First Source Hiring Ordinance\*

Attachment 24 - Certification of Compliance with the Slavery Disclosure Ordinance\*

Attachment 25 - COVID-19 Vaccination Certification of Compliance

**\*These Attachment forms are located at the following Internet hyperlink:**  
<https://www.lahsa.org/contracts> for Contractor's completion and submission to LAHSA.

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A. General Conditions Precedent

1. Authorization for Direct Deposits – Automated Clearing House Credits. Contractor will upload its Authorization for Direct Deposits - Automated Clearing House Credits in EGMS prior to execution of the Agreement.
2. Certification of No Conflict of Interest, Attachment 1.
3. Certification and Disclosure Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions as required by Executive Order 12549, Attachment 2.
4. Certificate of Insurance containing coverage as specified in Section 47 of the Agreement, Insurance, unless otherwise required by Funder Terms & Conditions, Exhibit F. Contractor will upload proof of insurance via a certificate of insurance and endorsement in EGMS prior to execution of the Agreement.
5. Certification of Compliance with Equal Benefits Ordinance, Attachment 3
6. LAHSA's Authorization to Execute Agreements form, along with evidence of a corporate action ratifying such authority, Attachment 4.
7. LAHSA's Authorization to Sign Invoices form, Attachment 5. If there is a change in the names or titles of any authorized signatory listed in Attachment 5, Contractor will give written notice to LAHSA within five (5) business working days of said change, along with evidence of a corporate action ratifying said change.
8. Current list of Board of Directors, providing each member's name, position on the Board and contact information (including business address, telephone number(s), and email addresses. Contractor will upload Board of Directors information described in this section in EGMS prior to execution of the Agreement.
9. A Certification Regarding Compliance with the Service Contract Worker Retention Ordinance and the Living Wage Ordinance of the Los Angeles Homeless Services Authority, Attachment 6.
10. Copy of Adopted Code of Conduct. Contractor will upload its Code of Conduct in EGMS prior to execution of the Agreement.

11. Contractor's Articles of Incorporation and all amendments thereto, as filed with the Secretary of State, Attachment 7.
12. Grounds for Rejection, Attachment 8.
13. Contractor Employee Acknowledgement and Confidentiality Agreement, Attachment 9. Contractor shall save Attachment 9 in its files, as indicated in the Contractor Acknowledgement and Confidentiality Agreement.
14. Contractor Non-Employee Acknowledgement and Confidentiality Agreement, Attachment 10. Contractor shall return the Contractor Non-Employee Acknowledgement and Confidentiality Agreement form if applicable.
15. Employee Jury Service Program and Certification, Attachment 11.
16. Charitable Contributions Certification, Attachment 12.
17. Standardized Tuberculosis ("TB") Guidelines, indicating Contractor's TB Liaison's contact information, Attachment 13.
18. Contractor's Termination Policies and Procedures, Attachment 14.
19. Contractor's Grievance Policies and Procedures, Attachment 15.
20. The Federal Certification and Disclosure Regarding Lobbying; Contractor shall comply with all provisions of 31 USC §1352 *et seq.* and 29 CFR Part 93, Attachment 16.

**B. Federal Conditions Precedent**

If this Agreement is funded either in whole, or in part, by Federal Funds, the following Condition Precedent applies:

1. Certification Regarding Compliance with the Americans with Disabilities Act (42 U.S.C. 11201 *et seq.*, and its implementing regulations), as evidenced by the execution of a certification to this Agreement, Attachment 17.
2. Contractor's Match Documentation as required in Section 15 of the Agreement, Match Requirements, Attachment 18.

**C. City Conditions Precedent**

If this Agreement is funded either in whole, or in part, by funds from the City of Los Angeles (City Funds), the following Conditions Precedent also apply. Prior to the execution of this Agreement, Contractor shall submit to the LAHSA for approval in writing the documents listed below. During the Term of this Agreement, Contractor shall provide immediate updates to these documents to the LAHSA in the event that the information changes.

1. An Affirmative Action Plan, Attachment 19, in accordance with PSC-26, Exhibit F, City of Los Angeles Terms and Conditions.
2. Contractor's Bylaws (if any), and all amendments to those Bylaws, as adopted by Contractor's Board of Directors and properly attested, Attachment 20.
3. A current and valid license to do business in the City of Los Angeles. Contractor represents that it has obtained and presently holds the Tax Registration Certificate(s) required by the City's Business Tax Ordinance (Article 1, Chapter 2, §21.00, *et seq.*, of the Los Angeles Municipal Code). For the term of this Agreement, Contractor shall maintain, or obtain as necessary, all Certificates required

of it under the Business Tax Ordinance and shall not allow the Certificates to be revoked or suspended. If applicable, an exemption may be filed. Contractor will upload its license to do business in the City of Los Angeles in EGMS prior to execution of the Agreement.

4. An Internal Revenue Service taxpayer identification number, as disclosed in EGMS prior to execution of the Agreement.
5. The Contractor Responsibility Ordinance, if applicable, including the pledge and questionnaire in accordance with PSC – 31 on Exhibit F, City of Los Angeles Terms and Conditions and Los Angeles Administrative Code §10.40 *et seq.*, Attachment 21. The pledge and questionnaires can be found at the following links:  
Pledge: [https://bca.lacity.org/Uploads/cro/CRO\\_Pledge%20of%20Compliance\\_Fillable%20%281%29.PDF](https://bca.lacity.org/Uploads/cro/CRO_Pledge%20of%20Compliance_Fillable%20%281%29.PDF)  
Questionnaire for service  
<https://bca.lacity.org/Uploads/cro/CRO%20Personal%20Services%20Questionnaire%20FINAL%2001.23.2020.pdf>  
Questionnaire for construction  
<https://bca.lacity.org/Uploads/cro/CRO%20Construction%20Questionnaire%20FINAL%2001.23.2020.pdf>.
6. A Certification Regarding Notice of Prohibition Against Retaliation attached hereto as Exhibit F and in accordance with PSC – 28 on Exhibit F, City of Los Angeles Terms and Conditions, Attachment 22.
7. A Certification of Compliance With First Source Hiring Ordinance/Reasonable Measures Application for First Source Hiring Ordinance in accordance with PSC – 34 on Exhibit F, City of Los Angeles Terms and Conditions and Los Angeles Administrative Code §10.8.3, Attachment 23.
8. A Certification of Compliance with the Slavery Disclosure Ordinance in accordance with PSC – 33 on Exhibit F, City of Los Angeles Terms and Conditions and Los Angeles Administrative Code §10.41, Attachment 24.
9. A Management Representation Statement fully executed in accordance with City's fiscal policies. Contractor will upload its Management Representation Statement in EGMS prior to execution of the Agreement.
10. An Iran Contracting Act of 2010 Compliance Affidavit in accordance with PSC-36 on Exhibit F, City of Los Angeles Terms and Conditions. Contractor will upload its license to do business in the City of Los Angeles in EGMS prior to execution of the Agreement.

D. County Conditions Precedent

If this Agreement is funded either in whole, or in part, by funds from the County of Los Angeles (County Funds), the following Conditions Precedent also apply. Prior to the execution of this Agreement, Contractor, if not already submitted, shall submit to LAHSA for approval in writing the documents listed below. During the Term of this Agreement, Contractor shall provide immediate updates to these documents to the LAHSA in the event that the information changes.

1. A Certification of Compliance with the County's COVID-19 Mandatory Vaccination requirements for all Contractor personnel per Urgency Ordinance, County Code Title 2 – Administration, Division 4 – Miscellaneous – Chapter 2.212 (COVID-19 Vaccinations of County Contractor Personnel) in accordance with Section 11 on Exhibit F, County of Los Angeles Terms & Conditions. If the Urgency Ordinance expires and is no longer in effect, during the term of the agreement, this condition shall not apply. Contractor will upload its COVID-19 Compliance Certification in EGMS prior to the execution of the agreement.

**Attachment 1**  
**Certification of No Conflict of Interest**  
**(Contractor, please provide)**  
Form is located at the following internet hyperlink:  
<https://www.lahsa.org/contracts>

**Exhibit I**  
**Certification of No Conflict of Interest**

The Los Angeles County Code, Section 2.180.010, provides as follows:

**CONTRACTS PROHIBITED**

Notwithstanding any other section of this Code, the County shall not contract with, and shall reject any proposals submitted by, the persons or entities specified below, unless the Board of Supervisors finds that special circumstances exist which justify the approval of such contract:

1. Employees of the County or of public agencies for which the Board of Supervisors is the governing body;
2. Profit-making firms or businesses in which employees described in Number 1 serve as officers, principals, partners, or major shareholders;
3. Persons who, within the immediately preceding 12 months, came within the provisions of Number 1, and who:
  - a. Were employed in positions of substantial responsibility in the area of service to be performed by the contract; or
  - b. Participated in any way in developing the contract or its service specifications; and
4. Profit-making firms or businesses in which the former employees, described in Number 3, serve as officers, principals, partners, or major shareholders.

Contracts submitted to the Board of Supervisors for approval or ratification shall be accompanied by an assurance by the department submitting, district or agency that the provisions of this section have not been violated.

Dr. Lena Miller, CEO  
Authorized Official's Printed Name and Title

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Authorized Official's Signature

**Attachment 2**

**Certification and Disclosure Regarding Debarment, Suspension, Ineligibility and Voluntary  
Exclusion Lower Tier Covered Transactions**  
**(Contractor, please provide)**

Form is located at the following internet hyperlink:

<https://www.lahsa.org/contracts>

**Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion  
Lower Tier Covered Transactions**

**Instructions for Certification**

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 24 CFR Part 24 Section 24.510, Participants' Responsibilities.

1. By signing and submitting this document, the prospective recipient of federal assistance funds is providing the certification as set out below.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective recipient of assistance funds knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective recipient of federal assistance funds shall provide immediate written notice to the person with whom this Agreement is entered into, if at any time the prospective recipient of federal assistance funds learns that its certification was erroneous, when submitted or has become erroneous by reason of changed circumstances.
4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "Proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549.
5. The prospective recipient of federal assistance funds agrees by submitting this Proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective recipient of federal assistance funds further agrees by submitting this Proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Procurement or Non-Procurement Programs.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

**(continued)**  
**Certification Regarding Debarment, Suspension, Ineligibility and**  
**Voluntary Exclusion Lower Tier Covered Transactions**

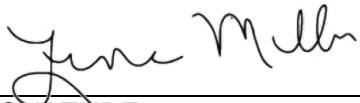
9. Except for transactions authorized under Paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntary excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

The prospective recipient of federal assistance funds certifies that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.

Where the prospective recipient of federal assistance funds is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this Proposal.

**Contractor:**

**Name and Title of Authorized Representative**



---

SIGNATURE

---

Dr. Lena Miller, CEO

---

NAME & TITLE

---

April 16, 2021

---

DATE

**Attachment 3**  
**Certification of Compliance with Equal Benefits Ordinance**  
**(Contractor, please provide)**  
Form is located at the following internet hyperlink:  
<https://www.lahsa.org/contracts>

**CITY OF LOS ANGELES**  
 Department of Public Works  
 Bureau of Contract Administration  
 Office of Contract Compliance  
 1149 S. Broadway, 3<sup>rd</sup> Floor, Los Angeles, CA 90015  
 Phone: (213) 847-1922 - Fax: (213) 847-2777

**EQUAL BENEFITS ORDINANCE COMPLIANCE FORM**

Your company must be certified as complying with Los Angeles Administrative Code Section 10.8.2.1, Equal Benefits Ordinance, prior to the execution of a City agreement. This form must be returned to the City department awarding the agreement. If responding to a request for bid/proposal, submit this form with the bid/proposal.

**City Dept. Awarding Contract:** LAHSA **Contact/Phone:** \_\_\_\_\_

**SECTION 1. CONTACT INFORMATION**

Company Name: Urban Alchemy

Company Address: 236 S. Los Angeles St., #422

City: Los Angeles State: CA Zip: 90012

Contact Person: Mike Anderer Phone: 415-286-3920 Fax: \_\_\_\_\_

I am a one-person contractor, and I have no employees.  Yes  No (if you answered "Yes," go to Section 3)

Approximate Number of Employees in the United States: 520

Are any of your employees covered by a collective bargaining agreement or union trust fund?  Yes  No

**SECTION 2. COMPLIANCE QUESTIONS**

Has your company previously submitted a Compliance Form and all supporting documentation?  Yes  No  
*If Yes, AND the benefits provided to your employees have not changed since that time, continue onto Section 3. If No, OR if the benefits provided to your employees have changed since that time, complete the rest of this form.*

**In the table below, check all benefits that your company currently provides to employees or to which your employees have access. Provide information for each benefits carrier if your employees have access to more than one carrier.** Note: some benefits are available or apply to employees because they have a spouse or domestic partner to whom the benefit applies, such as bereavement leave that allows an employee time off because of the death of a spouse or domestic partner; other benefits are provided directly to the spouse or domestic partner, such as medical insurance that covers the spouse or domestic partner as a dependent.

	BENEFIT(S) YOUR COMPANY CURRENTLY OFFERS	This Benefit is Not Offered to Employees	This Benefit is Available to Employees	Available/Applies to Spouses of Employees	Available/Applies to Domestic Partners of Employees
1	<b>Health Insurance (List Name of Carrier(s))</b>				
	Health Carrier 1: Kaiser	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Health Carrier 2:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> additional carriers on attachment.				
2	<b>Dental Insurance (List Name of Carrier(s))</b>				
	Dental Carrier 1: BEAM	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Dental Carrier 2:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> additional carriers on attachment.				
3	<b>Vision Plan (List Name of Carrier(s))</b>				
	Vision Carrier 1: VSP	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Vision Carrier 2:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Pension/401(k) Plans One America	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Bereavement Leave	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Family Leave	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Parental Leave	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Employee Assistance Program	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Relocation & Travel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Company Discount, Facilities & Events	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Credit Union	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Child Care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Other: Life Insurance/Accidental Death	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**YOU MUST SUBMIT SUPPORTING DOCUMENTATION TO VERIFY EACH BENEFIT MARKED.** Without proper documentation for **each carrier and each benefit marked**, your company cannot be certified as complying with the EBO. If documentation for a particular benefit does not exist, attach an explanation. Refer to the "Documentation to Verify Compliance with the Equal Benefits Ordinance" fact sheet for more information on the type of documentation that must be submitted to verify compliance with the EBO.

If in the Table in Section 2 you indicated that your company does not provide all benefits equally throughout its entire operations to all your employees with spouses and employees with domestic partners of the same and different sex, you may:

- a. Request additional time to comply with the EBO.** Provisional Compliance may be granted to Contractors who agree to fully comply with the EBO but need more time to incorporate the requirements of the EBO into their operations. Submit the Application for Provisional Compliance (OCC/EBO-3) and supporting documentation with this Compliance Form.
- b. Request to be allowed to comply with the EBO by providing affected employees with the cash equivalent.** Your company must agree to provide employees with a cash equivalent. In most cases, the cash equivalent is the amount of money equivalent to what your company pays for spousal benefits that are unavailable for domestic partners, or vice versa. Submit a completed Application for Reasonable Measures Determination (OCC/EBO-2) and supporting documentation with this Compliance Form.
- c. Comply on a Contract-by-Contract Basis.** Compliance may be granted on a contract-by-contract basis for those Contractors who have multiple locations in the U.S. but cannot comply with the EBO throughout the Contractor's operations. Indicate below the compliance category you are requesting:
  - Contractor has multiple operations located both within and outside City limits. Contractor will comply with the EBO only for the operation(s) located within City limits and for employee(s) located elsewhere in the United States who perform work relating to the City agreement. Supporting documentation for the affected operation(s)/employees must be submitted.
  - Contractor has no offices within City limits but does have (an) employee(s) working on the City agreement located elsewhere in the United States. Contractor will comply with the EBO only for employee(s) located elsewhere in the United States who perform work relating to the City agreement. Supporting documentation for the affected employee(s) must be submitted.

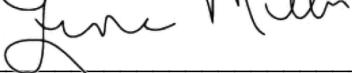
### **SECTION 3. EXECUTE THE DECLARATION AND SUBMIT THE FORM TO THE AWARDING DEPARTMENT**

This form must be returned to the City department awarding the agreement. If responding to a request for bid/proposal, submit this form with the bid/proposal to the awarding department. The awarding department will forward the form to the Department of Public Works, Bureau of Contract Administration, Office of Contract Compliance for review.

#### **DECLARATION UNDER PENALTY OF PERJURY**

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct, and that I am authorized to bind this entity contractually.

Executed this 16 day of July, in the year 2021, at Los Angeles, CA

  
Signature

Dr. Lena Miller

Name of Signatory (please print)

CEO

Title

236 S. Los Angeles St., #422

Mailing Address

Los Angeles, CA 90012

City, State, Zip Code

82-5408579

Federal ID Number

**CITY OF LOS ANGELES**  
Department of Public Works  
Bureau of Contract Administration  
Office of Contract Compliance  
1149 S. Broadway Street, 3<sup>rd</sup> Floor, Los Angeles, CA 90015  
Phone: (213) 847-1922 - Fax: (213) 847-2777

**DOCUMENTATION TO VERIFY COMPLIANCE WITH THE EQUAL BENEFITS ORDINANCE**

Section 2 of the Equal Benefits Ordinance Compliance Form (Form OCC/EBO-1) requires that you submit supporting documentation to the Office of Contract Compliance to verify that all benefits marked in your response(s) are offered in a nondiscriminatory manner. This list is intended to be used only as a guide for the type of documentation needed.

**Health, Dental, Vision Insurance:** A statement from your insurance provider that spouses and domestic partners receive equal coverage in your medical plan. This may be in a letter from your insurance provider or reflected in the eligibility section of your official insurance plan document. Note that “domestic partner” includes same-sex as well as different-sex partners so that the definition of “domestic partner” contained in the plan document must include different-sex partners.

**Pension/401(k) Plans:** Documentation should indicate that participating employees may designate a beneficiary to receive the amount payable upon the death of the employee. Submit a blank beneficiary designation form.

**Bereavement Leave:** Your bereavement leave or funeral leave policy indicating the benefit is offered equally. If your policy allows employees time off from work because of the death of a spouse, it should also allow for time off because of the death of a domestic partner. If the policy allows time off for the death of a parent in-law or other relative of a spouse, it must include time off for the death of a domestic partner's equivalent relative.

**Family Leave:** Your company's Family and Medical Leave Act policy. All companies with 50 or more employees must offer this benefit. Your policy should indicate that employees may take leave because of the serious medical condition of their spouse or domestic partner.

**Parental Leave:** Your company's policy indicating that employees may take leave for the birth or adoption of a child. If leave is available for step-children (the spouse's child) then leave should also be made available for the child of a domestic partner.

**Employee Assistance Program (EAP):** The benefit typically refers to programs that allow employees and their family members access to counselors who provide short-term counseling and referrals to assist in dealing with issues such as family problems, addiction, and financial and legal difficulties. Your company's EAP policy must confirm that spouses, domestic partners and their parents and children are equally eligible (or ineligible) for such benefits. If provided through a third party, a statement from the third party provider regarding eligibility is required.

**Relocation & Travel:** Your company's policy confirming that expenses for travel or relocation will be paid on the same basis for spouses and domestic partners of employees.

**Company Discounts, Facilities & Events:** Your company's policy confirming that to the extent discounts, facilities (such as a gym) and events (such as a company holiday party) are equally available to spouses and domestic partners of employees.

**Credit Union:** Documentation from the credit union indicating that spouses and domestic partners have equal access to credit union services.

**Child Care:** Documentation that the children of spouses (step-children) and children of domestic partners have equal access to child care services.

**Other Benefits:** Documentation of any other benefits listed to indicate that they are offered equally.

**Attachment 4**

**LAHSA's Authorization to Execute Agreements  
(Contractor, please provide)**

Form is located at the following internet hyperlink:

<https://www.lahsa.org/contracts>



# Los Angeles Homeless Services Authority

a joint powers authority of the city & county of los angeles

## Authorization to Execute Agreements

### Name and Address of Contractor

Urban Alchemy

SF Operations Office: 72 6th Street, San Francisco, CA 94103

LA Operations Office: 236 S. Los Angeles St, #422, Los Angeles, CA 90012

At a Board Meeting held on March 24, 2021, the Board of Urban Alchemy duly adopted a resolution authorizing the following persons to execute contracts, amendments, addendums, and change notices\* on behalf of Contractor.

**Contractor agrees to notify LAHSA in writing within ten (10) days of any changes in the authority granted herein.**

NAME

TITLE

SIGNATURE

1. Lena Miller

CEO

A handwritten signature in black ink that appears to read 'Lena Miller'.

2.

3.

4.

5.

6.

CHAIRPERSON

SIGNATURE

DATE

Lola Whittle

A handwritten signature in black ink that appears to read 'Lola Whittle'.

April 16, 2021

\* If neither is applicable, strike out

**Attachment 5**  
**LAHSA's Authorization to Sign Invoices**  
**(Contractor, please provide)**  
Form is located at the following internet hyperlink:  
<https://www.lahsa.org/contracts>



# Los Angeles Homeless Services Authority

a joint powers authority of the city & county of los angeles

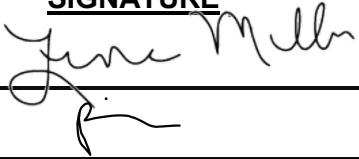
## Authorization to Sign Invoices

### Name and Address of Contractor

Urban Alchemy  
SF Operations Office: 72 6th Street, San Francisco, CA 94103  
LA Operations Office: 236 S. Los Angeles St, #422, Los Angeles, CA 90012

Contractor authorizes the following persons to sign invoices for advances and / or reimbursements on behalf of Urban Alchemy

**Contractor agrees to notify LAHSA in writing within ten (10) days of any changes in the authority granted herein.**

<u>NAME</u>	<u>TITLE</u>	<u>SIGNATURE</u>
1. Lena Miller	CEO	
2. Bayron Wilson	COO	
3.		
4.		
5.		
6.		

<u>CHAIRPERSON</u>	<u>SIGNATURE</u>	<u>DATE</u>
Lola Whittle		April 16, 2021

\* If neither is applicable, strike out

**Please provide names and signatures of not less than 2 signatories.**

**Attachment 6**

**Certification Regarding Compliance with the Service Contract Worker Retention  
Ordinance and the Living Wage Ordinance  
(Contractor, please provide)**

Form is located at the following internet hyperlink:

<https://www.lahsa.org/contracts>

## LWO – EMPLOYEE INFORMATION FORM

REQUIRED DOCUMENTATION FOR ALL CONTRACTS SUBJECT TO LWO

**This form must be submitted to the AWARDING DEPARTMENT within 30 DAYS of contract execution. INCOMPLETE SUBMISSIONS WILL BE RETURNED.**

**THE LIVING WAGE ORDINANCE (LWO) REQUIRES THAT SUBJECT EMPLOYERS PROVIDE TO EMPLOYEES:**

- As of July 1, 2018, a wage of at least **\$11.80 per hour with health benefits** of \$1.25 per hour, or **\$13.05 per hour without health benefits** (to be adjusted annually on July 1);
- At least **96 compensated hours off per year** for sick leave, vacation or personal necessity at the employee's request (pro-rated for part-time employees); and
- At least **80 additional hours off per year of uncompensated time off** for personal or immediate family illness (pro-rated for part-time employees). Refer to the LWO Rules and Regulations, available on the Bureau of Contract Administration website at <http://bca.lacity.org/living-wages-ordinance-lwo>, for details regarding the wage and benefit requirements of the Ordinance; and
- Information of their possible **right to the federal Earned Income Tax Credit (EITC)** and make available the forms required to secure advance EITC payments from the employer.

**THE LIVING WAGE ORDINANCE (LWO) ALSO REQUIRES EMPLOYERS:**

- **Not to retaliate against any employee claiming non-compliance with the provisions of this Ordinance and to comply with federal law** prohibiting retaliation for union organizing.

**TO BE FILLED OUT BY THE CONTRACTOR:**

1. Company Name: Urban Alchemy Email Address: information@urban-alchemy.us

2. STATE the number of employees working ON THIS CITY CONTRACT: 25

3. **ATTACH** a copy of your company's <sup>st</sup> PAYROLL under THIS CITY CONTRACT.

4. Do you provide health benefits (such as medical, dental, vision, mental health, and disability insurance) to your employees?  Yes  No

If YES, provide the employer's monthly contribution amount(s) toward the health benefits premium(s) for each employee working on THIS CITY CONTRACT. ER's monthly contribution is approx. \$430 for enrolled EEs.

**FAILURE TO COMPLY WITH THESE REQUIREMENTS WILL RESULT IN WITHHOLDING OF PAYMENTS BY THE CITY CONTROLLER, OR A RECOMMENDATION TO THE AWARDING AUTHORITY FOR CONTRACT TERMINATION. ALL INFORMATION SUBMITTED IS SUBJECT TO VERIFICATION, AND FALSE INFORMATION MAY RESULT IN CONTRACT TERMINATION.**

I understand that the employee information provided herein will be used by the City of Los Angeles, Office of Contract Compliance for the purpose of monitoring the Living Wage Ordinance.

Michael Anderer

Print Name of Person Completing this Form

*Michael Anderer*

Signature of Person Completing this Form

Director of Partnerships, Contracts, & Sp. Projects

415-286-3920

April 16, 2021

Title

Phone #

Date

**AWARDING DEPARTMENT USE ONLY:**

Dept: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_ Contract #: \_\_\_\_\_

**LWO – EMPLOYEE INFORMATION FORM**REQUIRED DOCUMENTATION FOR ALL CONTRACTS SUBJECT TO LWO

**This form must be submitted to the AWARDING DEPARTMENT within 30 DAYS of contract execution. INCOMPLETE SUBMISSIONS WILL BE RETURNED.**

**THE LIVING WAGE ORDINANCE (LWO) REQUIRES THAT SUBJECT EMPLOYERS PROVIDE TO EMPLOYEES:**

- As of July 1, 2018 a wage of at least **\$11.80 per hour with health benefits** of \$1.25 per hour, or **\$13.05 per hour without health benefits** (to be adjusted annually on July 1);
- At least **96 compensated hours off per year** for sick leave, vacation or personal necessity at the employee's request(pro-rated for part-time employees); and
- At least **80 additional hours off per year of uncompensated time off** for personal or immediate family illness (pro-rated for part-time employees). Refer to the LWO Rules and Regulations, on the Bureau of Contract Administration website at <http://bca.lacity.org/living-wages-ordinance-lwo>, for details regarding the wage and benefit requirements of the Ordinance; and
- Information of their possible **right to the federal Earned Income Tax Credit (EITC)** and make available the forms required to secure advance EITC payments from the employer.

**THE LIVING WAGE ORDINANCE (LWO) ALSO REQUIRES EMPLOYERS:**

- **Not to retaliate** against any employee claiming non-compliance with the provisions of this Ordinance and to **comply with federal law** prohibiting retaliation for union organizing.

**TO BE FILLED OUT BY THE CONTRACTOR:**1. Company Name: Urban Alchemy Email Address: information@urban-alchemy.us2. **STATE** the number of employees working **ON THIS CITY CONTRACT:** 253. **ATTACH** a copy of your company's 1<sup>st</sup> PAYROLL under **THIS CITY CONTRACT**.4. Do you provide health benefits (such as medical, dental, vision, mental health, and disability insurance) to your employees?  Yes  No

If YES, provide the employer's monthly contribution amount(s) toward the health benefits premium(s) for each employee working on **THIS CITY CONTRACT**. ER's monthly contribution is approx. \$430 for enrolled EEs.

**\*\*NOTE:** Payroll information need not be submitted if ALL employees working on this City agreement earn an hourly wage of at least \$15 per hour. If so, check the box below.

I certify under penalty of perjury that I do not have any employees earning less than \$15 per hour working on this City contract.

**FAILURE TO COMPLY WITH THESE REQUIREMENTS WILL RESULT IN WITHHOLDING OF PAYMENTS BY THE CITY CONTROLLER, OR A RECOMMENDATION TO THE AWARDING AUTHORITY FOR CONTRACT TERMINATION. ALL INFORMATION SUBMITTED IS SUBJECT TO VERIFICATION, AND FALSE INFORMATION MAY RESULT IN CONTRACT TERMINATION.**

I understand that the employee information provided herein will be used by the City of Los Angeles, Office of Contract Compliance for the purpose of monitoring the Living Wage Ordinance.

Michael Anderer

*Michael Anderer*

Print Name of Person Completing This Form

Signature of Person Completing This Form

Director of Partnerships, Contracts, &amp; Sp. Projects

415-286-3920

April 16, 2021

Title

Phone #

Date

**AWARDING DEPARTMENT USE ONLY:**

Dept: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_ Contract #: \_\_\_\_\_

**Attachment 7**  
**Contractor's Articles of Incorporation**  
**(Contractor, please provide)**

4140116



**Secretary of State**  
**Articles of Incorporation of a**  
**Nonprofit Public Benefit Corporation**

**ARTS-PB-**  
**501(c)(3)**

**FILED** *AP*

**Secretary of State**  
**State of California**

**APR 11 2018** *DP*

**| PC** This Space For Office Use Only

**IMPORTANT — Read Instructions before completing this form.**

**Filing Fee** — **\$30.00**

**Copy Fees** — First page \$1.00; each attachment page \$0.50;  
 Certification Fee - \$5.00

**Note:** A separate California Franchise Tax Board application is required to obtain tax exempt status. For more information, go to <https://www.ftb.ca.gov>.

**1. Corporate Name** (Go to [www.sos.ca.gov/business/be/name-availability](http://www.sos.ca.gov/business/be/name-availability) for general corporate name requirements and restrictions.)

The name of the corporation is **Urban Alchemy**

**2. Business Addresses** (Enter the complete business addresses. Item 2a cannot be a P.O.Box or "in care of" an individual or entity.)

a. Initial Street Address of Corporation - Do not enter a P.O. Box 750 Dartmouth Street	City (no abbreviations) San Francisco	State CA	Zip Code 94134
b. Initial Mailing Address of Corporation, if different than item 2a	City (no abbreviations)	State	Zip Code

**3. Service of Process** (Must provide either Individual **OR** Corporation.)

**INDIVIDUAL** — Complete Items 3a and 3b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation) Lena	Middle Name	Last Name Miller	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box 750 Dartmouth Street	City (no abbreviations) San Francisco	State CA	Zip Code 94134

**CORPORATION** — Complete Item 3c. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) — Do not complete Item 3a or 3b

**Item 4a:** One or both boxes **must** be checked.

**4. Purpose Statement** **Item 4b:** If "public" purposes is checked in Item 4a, or if you intend to apply for tax-exempt status in California, you **must** enter the specific purpose in Item 4b.)

a. This corporation is a nonprofit **Public Benefit** Corporation and is not organized for private gain of any person. It is organized under the Nonprofit Public Benefit Corporation Law for:  **public** purposes.  **charitable** purposes.

b. The specific purpose of this corporation is to Improve the quality of life in urban centers through improving the well being and life outcomes of the most vulnerable and underserved population.

**5. Additional Statements** (See Instructions and Filing Tips.)

- This corporation is organized and operated exclusively for the purposes set forth in **Article 4** hereof within the meaning of Internal Revenue Code section 501(c)(3).
- No substantial part of the activities of this corporation shall consist of carrying on propaganda, or otherwise attempting to influence legislation, and this corporation shall not participate or intervene in any political campaign (including the publishing or distribution of statements) on behalf of any candidate for public office.
- The property of this corporation is irrevocably dedicated to the purposes in **Article 4** hereof and no part of the net income or assets of this corporation shall ever inure to the benefit of any director, officer or member thereof or to the benefit of any private person.
- Upon the dissolution or winding up of this corporation, its assets remaining after payment, or provision for payment, of all debts and liabilities of this corporation shall be distributed to a nonprofit fund, foundation or corporation which is organized and operated exclusively for **charitable, educational and/or religious** purposes and which has established its tax-exempt status under Internal Revenue Code section 501(c)(3).

**6. Read and Sign Below** (This form must be signed by each incorporator. See Instructions. Do not include a title.)

Signature

Type or Print Name

4/08/2018

**Attachment 8**  
**Grounds for Rejection**  
**(Contractor, please provide)**  
Form is located at the following internet hyperlink:  
<https://www.lahsa.org/contracts>

### **Grounds For Rejection**

Los Angeles County Code Chapter 2.180.010, "Certain Contracts Prohibited" sets forth, among other things, the following:

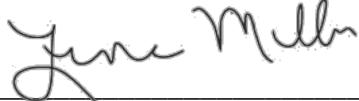
Notwithstanding any other section of this *Code*, the County shall not Contract with, and shall reject any bid or proposal submitted by the persons or entities specified below, unless the Board of Supervisors finds that special circumstances exist which justify the approval of such Contract:

- (a) Employees of the County or of public agencies for which the Board of Supervisors is the governing body;
- (b) Profit making firms or businesses in which employees described in subsection (a) serve as officers, principals, partners or major shareholders;
- (c) Persons who, within the immediately preceding twelve (12) months, came within the provisions of subsection (a), and who (1) were employed in positions of substantial responsibility in the area of service to be performed by the Contractor, or (2) participated in any way in developing the Contract or its service specification; and
- (d) Profit making firms or businesses in which the former employees described in subsection (c) serve as officers, principals, partners or major shareholders.

Contractor hereby certifies that personnel who developed and/or participated in the preparation of the Contract do not fall within scope of *Code Section 2.180.010* as outlined above.

Dr. Lena Miller, CEO

Authorized Official's Name and Title



Authorized Official's Signature

August 11, 2021

Date

**Attachment 9**  
**Contractor Acknowledgement and Confidentiality Agreement**  
**(For Contractor's files)**  
Form is located at the following internet hyperlink:  
<https://www.lahsa.org/contracts>

## **CONTRACTOR EMPLOYEE ACKNOWLEDGEMENT AND CONFIDENTIALITY AGREEMENT**

(Note: Contractor is to retain in Employee Personnel records)

CONTRACTOR NAME: Urban Alchemy

Contract No.

Employee Name Michael Anderer

### **GENERAL INFORMATION:**

Your employer referenced above has entered into a contract with the Los Angeles Homeless Services Authority ("LAHSA") funded by the County of Los Angeles to provide certain services to the County. LAHSA and the County require your signature on this Contractor Employee Acknowledgement and Confidentiality Agreement.

### **EMPLOYEE ACKNOWLEDGEMENT:**

I understand and agree that the Contractor referenced above is my sole employer for purposes of the above-referenced contract. I understand and agree that I must rely exclusively upon my employer for payment of salary and any and all other benefits payable to me or on my behalf by virtue of my performance of work under the above-referenced contract.

I understand and agree that I am not an employee of LAHSA or the County of Los Angeles for any purpose whatsoever and that I do not have and will not acquire any rights or benefits of any kind from LAHSA or the County of Los Angeles by virtue of my performance of work under the above-referenced contract. I understand and agree that I do not have and will not acquire any rights or benefits from LAHSA or the County of Los Angeles pursuant to any agreement between any person or entity and LAHSA or the County of Los Angeles.

I understand and agree that I may be required to undergo a background and security investigation(s). I understand and agree that my continued performance of work under the above-referenced contract is contingent upon my passing, to the satisfaction of LAHSA and the County, any and all such investigations. I understand and agree that my failure to pass, to the satisfaction of LAHSA and the County, any such investigation shall result in my immediate release from performance under this and/or any future contract.

### **CONFIDENTIALITY AGREEMENT:**

I may be involved with work pertaining to services provided by LAHSA and/or the County of Los Angeles and, if so, I may have access to confidential data and information pertaining to persons and/or entities receiving services from LAHSA and/or the County. In addition, I may also have access to proprietary information supplied by other vendors doing business with LAHSA and/or the County of Los Angeles. LAHSA and the County have a legal obligation to protect all such confidential data and information in their possession, especially data and information concerning health, criminal, and welfare recipient records. I understand that if I am involved in LAHSA and/or County work, LAHSA and the County must ensure that I, too, will protect the confidentiality of such data and information. Consequently, I understand that I must sign this agreement as a condition of my work to be provided by my employer for LAHSA and the County. I have read this agreement and have taken due time to consider it prior to signing.

I hereby agree that I will not divulge to any unauthorized person any data or information obtained while performing work pursuant to the above-referenced contract between my employer and LAHSA and the County of Los Angeles. I agree to forward all requests for the release of any data or information received by me to my immediate supervisor.

I agree to keep confidential all health, criminal, and welfare recipient records and all data and information pertaining to person and/or entities receiving services from LAHSA or the County, design concepts, algorithms, programs, formats, documentation, Contractor proprietary information and all other original materials produced, created, or provided to or by me under the above-referenced contract. I agree to protect these confidential materials against disclosure to other than my employer or LAHSA or County employees who have a need to know the information. I agree that if proprietary information supplied by other LAHSA and County vendors is provided to me during this employment, I shall keep such information confidential.

I agree to report to my immediate supervisor any and all violations of this agreement by myself and/or by any other person of whom I become aware. I agree to return all confidential materials to my immediate supervisor upon completion of this contract or termination of my employment with my employer, whichever occurs first.

SIGNATURE: Mike Anderer DATE: 6 / 29 / 2021

PRINTED NAME: Michael Anderer

POSITION: Director of Partnerships & Contracts (AOR)

**Attachment 10**

**Contractor Non-Employee Acknowledgement and Confidentiality Agreement\***

**(Contractor, please provide if applicable)**

Form is located at the following internet hyperlink:

<https://www.lahsa.org/contracts>

**Attachment 11**

**Employee Jury Service Program and Certification  
(Contractor, please provide)**

Form is located at the following internet hyperlink:

<https://www.lahsa.org/contracts>

## **Contractor Employee Jury Service Program and Certification and Applicable Sections of the Los Angeles County Code**

### **Los Angeles County Code, Title 2 ADMINISTRATION**

#### **2.203.010 Findings.**

The board of supervisors makes the following findings. The county of Los Angeles allows its permanent, full-time employees unlimited jury service at their regular pay.

Unfortunately, many businesses do not offer or are reducing or even eliminating compensation to employees who serve on juries. This creates a potential financial hardship for employees who do not receive their pay when called to jury service, and those employees often seek to be excused from having to serve. Although changes in the court rules make it more difficult to excuse a potential juror on grounds of financial hardship, potential jurors continue to be excused on this basis, especially from longer trials. This reduces the number of potential jurors and increases the burden on those employers, such as the county of Los Angeles, who pay their permanent, full-time employees while on juror duty. For these reasons, the county of Los Angeles has determined that it is appropriate to require that the businesses with which the county contracts possess reasonable jury service policies. (Ord. 2002-0015 § 1 (part), 2002)

#### **2.203.020 Definitions.**

The following definitions shall be applicable to this chapter:

- A. "Contractor" means a person, partnership, corporation or other entity which has a contract with the county or a subcontract with a county contractor and has received or will receive an aggregate sum of \$50,000 or more in any 12-month period under one or more such contracts or subcontracts.
- B. "Employee" means any California resident who is a full-time employee of a contractor under the laws of California.
- C. "Contract" means any agreement to provide goods to, or perform services for or on behalf of, the county but does not include:
  - 1. A contract where the board finds that special circumstances exist that justify a waiver of the requirements of this chapter; or
  - 2. A contract where federal or state law or a condition of a federal or state program mandates the use of a particular contractor; or
  - 3. A purchase made through a state or federal contract; or
  - 4. A monopoly purchase that is exclusive and proprietary to a specific manufacturer, distributor, or reseller, and must match and inter-member with existing supplies, equipment or systems maintained by the county pursuant to the Los Angeles County Purchasing Policy and Procedures Manual, Section P-3700 or a successor provision; or
  - 5. A revolving fund (petty cash) purchase pursuant to the Los Angeles County Fiscal Manual, Section 4.4.0 or a successor provision; or
  - 6. A purchase card purchase pursuant to the Los Angeles County Purchasing Policy and Procedures Manual, Section P-2810 or a successor provision; or
  - 7. A non-agreement purchase with a value of less than \$5,000 pursuant to the Los Angeles County Purchasing Policy and Procedures Manual, Section A-0300 or a successor provision; or
  - 8. A bona fide emergency purchase pursuant to the Los Angeles County Purchasing Policy and Procedures Manual, Section PP-1100 or a successor provision.

9. "Full time" means 40 hours or more worked per week, or a lesser number of hours if:
  - i) The lesser number is a recognized industry standard as determined by the chief administrative officer, or
  - ii) The contractor has a long-standing practice that defines the lesser number of hours as full time.
10. "County" means the county of Los Angeles or any public entities for which the board of supervisors is the governing body. (Ord. 2002-0040 § 1, 2002: Ord. 2002-0015 § 1 (part), 2002)

### **2.203.030 Applicability.**

This chapter shall apply to contractors who enter into contracts that commence after July 11, 2002. This chapter shall also apply to contractors with existing contracts which are extended into option years that commence after July 11, 2002. Contracts that commence after May 28, 2002, but before July 11, 2002, shall be subject to the provisions of this chapter only if the solicitations for such contracts stated that the chapter would be applicable. (Ord. 2002-0040 § 2, 2002: Ord. 2002-0015 § 1 (part), 2002)

### **2.203.040 Contractor Jury Service Policy.**

A contractor shall have and adhere to a written policy that provides that its employees shall receive from the contractor, on an annual basis, no less than five days of regular pay for actual jury service. The policy may provide that employees deposit any fees received for such jury service with the contractor or that the contractor deduct from the employees' regular pay the fees received for jury service. (Ord. 2002-0015 § 1 (part), 2002)

### **2.203.050 Other Provisions.**

- A. Administration. The chief administrative officer shall be responsible for the administration of this chapter. The chief administrative officer may, with the advice of county counsel, issue interpretations of the provisions of this chapter and shall issue written instructions on the implementation and ongoing administration of this chapter. Such instructions may provide for the delegation of functions to other county departments.
- B. Compliance Certification. At the time of seeking a contract, a contractor shall certify to the county that it has and adheres to a policy consistent with this chapter or will have and adhere to such a policy prior to award of the contract. (Ord. 2002-0015 § 1 (part), 2002)

### **2.203.060 Enforcement and Remedies.**

For a contractor's violation of any provision of this chapter, the county department head responsible for administering the contract may do one or more of the following:

- A. Recommend to the board of supervisors the termination of the contract; and/or,
- B. Pursuant to chapter 2.202, seek the debarment of the contractor. (Ord. 2002-0015 § 1 (part), 2002)

### **2.203.070. Exceptions.**

- A. Other Laws. This chapter shall not be interpreted or applied to any contractor or to any employee in a manner inconsistent with the laws of the United States or California.
- B. Collective Bargaining Agreements. This chapter shall be superseded by a collective bargaining agreement that expressly so provides.
- C. Small Business. This chapter shall not be applied to any contractor that meets all of the following:
  1. Has ten or fewer employees during the contract period; and,

2. Has annual gross revenues in the preceding twelve months which, if added to the annual amount of the contract awarded, are less than \$500,000; and,
3. Is not an affiliate or subsidiary of a business dominant in its field of operation.

D. "Dominant in its field of operation" means having more than ten employees and annual gross revenues in the preceding twelve months which, if added to the annual amount of the contract awarded, exceed \$500,000.

E. "Affiliate or subsidiary of a business dominant in its field of operation" means a business which is at least 20 percent owned by a business dominant in its field of operation, or by partners, officers, directors, majority stockholders, or their equivalent, of a business dominant in that field of operation. (Ord. 2002-0015 § 1 (part), 2002)

**2.203.090. Severability.**

If any provision of this chapter is found invalid by a court of competent jurisdiction, the remaining provisions shall remain in full force and effect. (Ord. 2002-0015 § 1 (part), 200

(continued)

**COUNTY OF LOS ANGELES CONTRACTOR EMPLOYEE JURY SERVICE PROGRAM  
APPLICATION FOR EXCEPTION AND CERTIFICATION FORM**

**The County's solicitation for this contract/purchase order (Request for Proposal or Invitation for Bid) is subject to the County of Los Angeles Contractor Employee Jury Service Program (Program) (Los Angeles County Code, Chapter 2.203). All bidders or proposers, whether a contractor or subcontractor, must complete this form to either 1) request an exception from the Program requirements or 2) certify compliance. Upon review of the submitted form, the County department will determine, in its sole discretion, whether the bidder or proposer is excepted from the Program.**

Company Name:	Urban Alchemy
Company Address:	72 6th Street, San Francisco, CA 94103
Telephone Number:	415-286-3920
Solicitation For (Type of Goods or Services):	

*If you believe the Jury Service Program does not apply to your business, check the appropriate box in Part I (attach documentation to support your claim); or, complete Part II to certify compliance with the Program. Whether you complete Part I or Part II, please sign and date this form below.*

**Part I: Jury Service Program Is Not Applicable to My Business**

- My business does not meet the definition of "contractor," as defined in the Program as it has not received an aggregate sum of \$50,000 or more in any 12-month period under one or more County contracts or subcontracts (this exception is not available if the contract/purchase order itself will exceed \$50,000). I understand that the exception will be lost and I must comply with the Program if my revenues from the County exceed an aggregate sum of \$50,000 in any 12-month period.
- My business is a small business as defined in the Program. It 1) has ten or fewer employees; and, 2) has annual gross revenues in the preceding twelve months which, if added to the annual amount of this contract, are \$500,000 or less; and, 3) is not an affiliate or subsidiary of a business dominant in its field of operation, as defined below. I understand that the exemption will be lost and I must comply with the Program if the number of employees in my business and my gross annual revenues exceed the above limits.

**"Dominant in its field of operation"** means having more than ten employees, including full-time and part-time employees, and annual gross revenues in the preceding twelve months, which, if added to the annual amount of the contract awarded, exceed \$500,000.

**"Affiliate or subsidiary of a business dominant in its field of operation"** means a business which is at least 20 percent owned by a business dominant in its field of operation, or by partners, officers, directors, majority stockholders, or their equivalent, of a business dominant in that field of operation.

- My business is subject to a Collective Bargaining Agreement (attach agreement) that expressly provides that it supersedes all provisions of the Program.

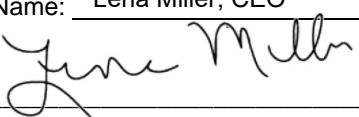
OR

**Part II - Certification of Compliance**

My business has and adheres to a written policy that provides, on an annual basis, no less than five days of regular pay for actual jury service for full-time employees of the business who are also California residents, or my company will have and adhere to such a policy prior to award of the contract.

*I declare under penalty of perjury under the laws of the State of California that the information stated above is true and correct.*

Print Name: Lena Miller, CEO



June 29, 2021

Signature:

Date:

**Attachment 12**  
**Charitable Contributions Certification**  
**(Contractor, please provide)**  
Form is located at the following internet hyperlink:  
<https://www.lahsa.org/contracts>

### Charitable Contributions Certification

Urban Alchemy

Company Name:

72 6th Street, San Francisco, CA 94103

Address:

Internal Revenue Service Employer Identification Number: 82-5408579

California Registry of Charitable Trusts "CT" number (if applicable): CT0272413

The Nonprofit Integrity Act (SB 1262, Chapter 919) added requirements to California's Supervision of Trustees and Fundraisers for Charitable Purposes Act which regulates those receiving and raising charitable contributions.

**Check the Certification below that is applicable to your company.**

Proposer or Contractor has examined its activities and determined that it does not now receive or raise charitable contributions regulated under California's Supervision of Trustees and Fundraisers for Charitable Purposes Act. If Proposer engages in activities subjecting it to those laws during the term of a County Contract, it will timely comply with them and provide County a copy of its initial registration with the California State Attorney General's Registry of Charitable Trusts when filed.

**OR**

Proposer or Contractor is registered with the California Registry of Charitable Trusts under the CT number listed above and is in compliance with its registration and reporting requirements under California law. Attached is a copy of its most recent filing with the Registry of Charitable Trusts as required by Title 11 California Code of Regulations, sections 300-301 and Government Code sections 12585-12586.

  
\_\_\_\_\_  
Signature

June 29, 2021

\_\_\_\_\_  
Date

Lena Miller, CEO  
Name and Title of Signer

**Attachment 13**  
**Standardized Tuberculosis (“TB”) Guidelines**  
**(Contractor, please provide)**  
Form is located at the following internet hyperlink:  
<https://www.lahsa.org/contracts>

## **STANDARDIZED TUBERCULOSIS (“TB”) GUIDELINES**

Contractor acknowledges and certifies that it will implement the following procedures as recommended by the County of Los Angeles Department of Public Health Tuberculosis Control Program:

1. Screen all employees and all volunteers in direct contact with Clients
2. Appoint a shelter TB Liaison
3. Screen Clients for Infectious TB symptoms at Intake
4. In addition to screening Clients for TB symptoms at Intake, asymptomatic Clients seeking admission to the shelter must show evidence of TB clearance by a healthcare provider within seven (7) days after initial admission to the shelter
5. Establish a Cough Alert Protocol (“CAP”)
6. Refer any employee, volunteer or Clients with Infectious TB symptoms for immediate medical evaluation.

Contractor additionally acknowledges and certifies that, pursuant to this Agreement’s HMIS Compliance Certification, it will report each and any event as defined in that Certification.

---

### **1. Screen All Employees and Volunteers In Direct Contact with Clients**

Contractor shall ensure that within 7 days after staff/ volunteer start date:

- A. All staff can be referred to their private healthcare provider or a community-based clinic in order to get tested for latent TB infection. A community based clinic may be found at <http://publichealth.lacounty.gov/tb/index.htm>
- B. New employees who report a prior test showing latent TB infection (baseline) must have a chest x-ray or provide written documentation that a chest x-ray was performed within the previous six months. Such individuals must also receive a medical evaluation by a healthcare provider to determine the need for further evaluation or treatment.
- C. All employees and volunteers should receive annual TB clearance

---

### **2. Appoint A Shelter TB Liaison\***

Contractor shall appoint a TB Liaison whose primary responsibilities shall be:

- A. Ensure that TB symptoms review is performed and documented for all new Clients following SAMPLE FORM C, as well as annually for all Clients. Individuals with symptoms of active TB disease should be referred to a medical provider using a **Referral for Tuberculosis Evaluation** form. A sample of a form is attached hereto as **SAMPLE FORM A**; and

- B. Ensure that all new Clients without symptoms of active TB disease receive TB clearance within 7 days of intake using a **Referral for Tuberculosis Screening** Form (attached as **SAMPLE FORM D**)
- C. Maintain a **Cough Alert Log** on a daily basis for the purpose of keeping count of coughing reflexes as perceived by other shelter staff using the Cough Alert Log form as indicated in Section 4 below. A draft sample of a form is attached hereto as **SAMPLE FORM B**; and
- D. Coordinate Client referrals to healthcare providers for TB evaluation if symptomatic; and
- E. Fax or hand deliver a Referral for Tuberculosis Evaluation to the referring healthcare provider on the same day a Cough Alert Log is created. A sample form is attached herein as **SAMPLE FORM A**; and
- F. Maintain a filing system for these forms (and a computer database, if possible)
- G. Coordinate Client transportation to a nearby healthcare provider for TB evaluation
- H. Attend TB prevention training and other health protection workshops
- I. Develop a reminder system for Client follow up

\* **The TB Liaison does not need to be a health care provider if your shelter does not have onsite medical staff.**

Contractor must assign a TB Liaison who shall serve as the Contractor's main point of contact for any related issues in connection with these TB Prevention Guidelines and also agrees to notify LAHSA in writing within five (5) days in the event that the TB Liaison changes for any reason.

TB Liaison:	James Winfrey (staff)      Mark Lewis (clients)
Printed Name	
323-798-6340/323-439-2941	<a href="mailto:jamesw@urban-alchemy.us">jamesw@urban-alchemy.us</a> / <a href="mailto:markl@urban-alchemy.us">markl@urban-alchemy.us</a>
Telephone Number	E-mail Address

---

### 3. Screen Program Clients for Infectious TB symptoms at Intake

- A. Contractor shall ensure that all Clients (overnight, or drop-in care) be evaluated for the presence of TB symptoms upon Intake. Initial screening during intake will involve asking the Client the following question: "Have you had a cough that has lasted more than three weeks?" If the Client responds "yes" to this initial question, then this question should be followed by an Early Detection of TB Questionnaire on a form similar to SAMPLE FORM C. This questionnaire will help the TB Liaison identify Clients who may have infectious TB so that appropriate precautions can be taken. In addition, the TB Liaison and shelter staff in direct contact with Clients must be alert for Clients who exhibit symptoms consistent with infectious TB.

Note: The TB Liaison or shelter staff are not being asked to judge whether or not a Client has TB, but rather, asks to be alert to potential symptoms of TB present in the Clients before, during, and after Intake and to assist symptomatic Clients to obtain appropriate healthcare.

B. Contractor shall ensure that if a Client is cleared for TB at intake, this clearance should expire one year from the date of the healthcare provider evaluation on the **Referral for Tuberculosis Screening**. **Even before the date of expiration, if the Client has symptoms suggestive of active TB disease (as outlined below) they should be referred to a medical provider for further evaluation.**

**Note:** When assessing the likelihood a Client with TB-related symptoms or risk factors might have TB, specific questions to ask the Client privately include:

- Do you have a cough that has lasted longer than 3 weeks?
- Have you recently lost weight without explanation during the past month?
- Have you had frequent night sweats during the past month, soaking your sheets or clothing?
- Have you coughed up blood in the past month?
- Have you been feeling much more tired than usual over the past month?
- Have you had fevers almost daily for more than one week?

C. Contractor shall ensure that a Client who has prolonged cough (> 3 weeks) plus any other TB symptoms shall be promptly referred to an appropriate health care provider for evaluation.

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#### 4. Screen Clients For Latent TB Infection at Intake

A. Contractor shall ensure that in addition to screening Clients for TB symptoms at Intake, asymptomatic Clients seeking admission to the shelter must show evidence of TB clearance by a healthcare provider within seven (7) days after initial admission to the shelter. A comprehensive TB evaluation by a licensed healthcare provider should include:

- i. A review of symptoms
- ii. Test for latent TB infection: tuberculin skin test ("TST") or I blood test
- iii. Chest radiograph or additional tests as necessary

B. Contractor shall use a form similar to **SAMPLE FORM D** for this purpose. If onsite healthcare services are available, this evaluation can occur at the shelter, otherwise, the Client must be referred to a healthcare provider.

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#### 5. Establish a Cough Alert Protocol (CAP)

Contractor shall ensure that after Intake, shelter staff working closely with Clients during the day or monitoring the sleeping rooms at night should be continually alert for any Clients persistently coughing. When a coughing Client is identified, shelter staff must:

- A. Complete a CAP and provide it to the TB Liaison immediately after the Client has been identified.
- B. Upon receiving the CAP, the TB Liaison will fax the **Referral for Tuberculosis Evaluation** form to the healthcare provider to which the Client is referred to.

Clients with active TB disease can return to the shelter only upon providing written documentation by a licensed healthcare provider that they are no longer contagious.

## ANNUAL SCREENING FOR EMPLOYEES AND VOLUNTEERS

California law requires annual screening for employees and volunteers who have direct Client exposure. Below is a summary of recommendations from the Los Angeles County Department of Public Health for shelters:

- A. All persons (employees or volunteers) with a new positive skin or blood test must also have a chest x-ray.
- B. Staff who have a documented previous positive skin or blood test and are coughing (possible active TB disease) must be excluded from work until medically evaluated.
- C. The medical evaluation will include an examination by a healthcare provider, a test for latent TB, a chest x-ray and possibly other diagnostic tests.
- D. Clearance to return to work must be obtained from an appropriately licensed healthcare provider.
- E. Results of TB screening for employees and volunteers are considered protected health information and must be kept confidential.
- F. Homeless shelters must maintain employee TB screening documentation in the employee's medical file. Documentation regarding compliance with required medical screening may be kept in the employees personnel file, however screening results may never be kept in the employee personnel file.
- G. Shelter employees and volunteers should receive TB prevention training annually, with a curriculum that has been developed by the Los Angeles County, Department of Public Health – Tuberculosis Control Program, and documentation of this training should be placed in the employee's personnel file.

Contractor agrees that LAHSA may update this Exhibit from time to time as necessary to reflect any updates or changes to this TB Guidelines, Contractor shall accept renewals of this Exhibit through written confirmation without requiring a formal Amendment to this Agreement.



Dr. Lena Miller, CEO

August 11, 2021

**Attachment 14**  
**Contractor's Termination Policies and Procedures**  
**(Contractor, please provide)**



## Employee Handbook Excerpts<sup>1</sup>

### *Grievance Procedure*

#### **COMPLAINT PROCEDURE**

UA subscribes to the open-door policy. Employees may bring a particular complaint to their supervisor or manager for resolution. When matters cannot be handled on an informal basis, UA has established a formal procedure for a fair review of any work-related controversy, dispute or misunderstanding. A complaint may be brought by one or more employees concerning any work-related problem where the complaint has not been satisfactorily resolved in an informal manner. Employees may skip to Step 2 if the complaint is related to their supervisor or manager or if the employee feels they would not provide an impartial resolution to the problem.

#### *Step 1*

The complaint should be submitted in writing to a supervisor, manager or designee within three working days of the incident. A written request for a meeting must be submitted simultaneously. Generally, a meeting will be held within three working days of the employee's request depending upon scheduling availability. Witnesses will be allowed as necessary. If the problem is not resolved during this meeting the supervisor, manager or designee will give the employee a written resolution within three working days. If the employee is not satisfied, the employee may proceed to Step 2.

#### *Step 2*

If the employee is not satisfied after Step 1, the employee may submit a written request for review of the complaint and Step 1 solution to the Director of Operations or their designee. Such a request should be made within three working days following the receipt of the Step 1 resolution. The Director of Operations or appointed representative will review the complaint and proposed solution and may call a further meeting to explore the problem. This meeting is to be attended by the employee concerned, the employee's supervisor or manager (if appropriate), and any other employee of UA whom the aggrieved employee chooses. The Director of Operations or appointed representative will render the final decision within 10 working days after receiving the Step 2 request, assuming scheduling availability. The decision will be given to the employee in writing and will become part of the employee's personnel file.

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<sup>1</sup> Employee Handbooks available to all employees through Urban Alchemy instance of Paycom, an comprehensive HR and Payroll technology solution.



## *Termination Policy*

### **EMPLOYMENT SEPARATION**

#### **RESIGNATION**

Employees are requested to provide a minimum of two weeks' written notice of their intent to resign. An employee's notice of resignation to voluntarily terminate employment with UA should be submitted to their supervisor or manager. An exit interview may be requested.

#### **TERMINATION**

All employment with UA is "at will" employment. This means that the employee has not been hired for a specified duration, but that they can terminate their employment with UA or UA can terminate the employment relationship at any time, with or without cause, and with or without prior notice. An employee's at-will employment status cannot be changed by any oral modifications.

#### **PERSONAL POSSESSIONS & RETURN OF ORGANIZATION PROPERTY**

Any Organization property issued to employees, such as computer equipment, keys, tools, parking passes or Organization credit cards must be returned to UA at the time of employment separation. Employees may be responsible for any lost or damaged items. Upon separation of employment employees are to remove their personal possessions from all Organization property.

Prepared by: Mike Anderer, Director of Partnerships, Contracts, and Special Projects

**Attachment 15**  
**Contractor's Grievance Policies and Procedures**  
**(Contractor, please provide)**

**Attachment 16**  
**Federal Certification and Disclosure Regarding Lobbying**  
**(Contractor, please provide)**  
Form is located at the following internet hyperlink:  
<https://www.lahsa.org/contracts>

**Certification Regarding Lobbying  
Certification for Contracts, Grants, Loans  
and Cooperative Agreements**

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan or cooperative agreement.
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL "Disclosure Form to Report Lobbying" in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.
4. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352 Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

**Contractor:** Urban Alchemy

Dr. Lena Miller, CEO



**Name and Title**

August 11, 2021

**DATE**

**Attachment 17**

**Certification Regarding Compliance with the Americans with Disabilities Act  
(Contractor, please provide based on Funding Source)**

Form is located at the following internet hyperlink:

<https://www.lahsa.org/contracts>

## **Certification Regarding Compliance With Americans With Disabilities Act**

The undersigned certifies, that to the best of his/her knowledge and belief:

Contractor is in compliance with and will continue to comply with the Americans with Disabilities Act 42 U.S.C. 12101 et seq., and its implementing regulations ("ADA") and the American with Disabilities Act Amendments Act of 2008 ("ADAAA"), Pub. L. 110-325 and all subsequent amendments.

Contractor will ensure that persons with disabilities have equal access to participate in programs and services. Contractor will provide reasonable accommodations to allow individuals with disabilities to have access to and participate in its programs, services and activities in accordance with the provisions of the ADA and the ADAAA.

Contractor will not discriminate against persons with disabilities or against persons who have a relationship with or association with a person with a disability.

Contractor will adopt and implement LAHSA's policies and procedures addressing disabled individuals who use service animals.

Contractor will designate staff to participate in periodic mandatory training sessions on ADA compliance; including training regarding addressing disabled individuals who use service animals.

Contractor will require that the ADA and ADAAA compliance language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and other agreements under grants, loans and cooperative agreements) and that all subgrantees shall certify accordingly.

This certification is a material representation of fact upon which reliance was placed when the parties entered into this transaction

**Contractor:**

Urban Alchemy

August 11, 2021

**Name and Title**

**DATE**

**NAME & TITLE OF AUTHORIZED ADA COMPLIANCE REPRESENTATIVE:**

Michael Anderer

Director of Partnerships, Contracts, & Special Projects

**NAME**

**TITLE**

**Attachment 18**  
**Contractor's Match Documentation**  
**(Contractor, please provide if applicable based on Funding Source)**

**Attachment 19**  
**Contractor's Affirmative Action Plan**  
**(Contractor, please provide if applicable based on Funding Source)**

**Attachment 20**  
**Contractor's Bylaws**  
**(Contractor, please provide if applicable based on Funding Source)**

**Attachment 21**  
**Contractor Responsibility Ordinance**  
**(Contractor, please provide if applicable based on Funding Source and if applicable to your**  
**Agreement)**

**Pledge**

[\(https://bca.lacity.org/Uploads/cro/CRO\\_Pledge%20of%20Compliance\\_Fillable%20%281%29.PDF\)](https://bca.lacity.org/Uploads/cro/CRO_Pledge%20of%20Compliance_Fillable%20%281%29.PDF)

**Questionnaire for Service**

[https://bca.lacity.org/Uploads/cro/CRO%20Personal%20Services%20Questionnaire%20FINAL%2001.23.2020.pdf;](https://bca.lacity.org/Uploads/cro/CRO%20Personal%20Services%20Questionnaire%20FINAL%2001.23.2020.pdf)

**Questionnaire for construction**

<https://bca.lacity.org/Uploads/cro/CRO%20Construction%20Questionnaire%20FINAL%2001.23.2020.pdf>

**Attachment 22**  
**Certification Regarding Notice of Prohibition Against Retaliation**  
**(Contractor, please provide if applicable based on Funding Source)**  
Form is located at the following internet hyperlink:  
<https://www.lahsa.org/contracts>

**Attachment 23**

**Certification of Compliance With First Source Hiring Ordinance/Reasonable Measures  
Application for First Source Hiring Ordinance  
(Contractor, please provide if applicable based on Funding Source)**

Form is located at the following internet hyperlink:

<https://www.lahsa.org/contracts>

**Attachment 24**

**Certification of Compliance with the Slavery Disclosure Ordinance  
(Contractor, please provide if applicable based on Funding Source)**

Form is located at the following internet hyperlink:

<https://www.lahsa.org/contracts>

**Attachment 25**  
**COVID-19 Vaccination Certification of Compliance**  
**(Contractor, please provide if applicable based on Funding Source)**  
Form is located at the following internet hyperlink:  
<https://www.lahsa.org/contracts>

**Exhibit C-1  
Program Budget and Services  
(Fiscal Year 2022 – 2023)  
(On next page)**

**Appendix 1 – Subrecipient Advance, Administration Rate, Indirect Cost Rate Table, is located at <https://www.lahsa.org/contracts>, and as may be updated from time to time in EGMS, and is incorporated herein by reference.**

**Agreement Number:** 2021BHRTV06

**EGMS ID Number:** AD-SS-SS-001-02

**Contractor Name:** Urban Alchemy

# Subaward - 2021-2022: Urban Alchemy - Safe Sleep (Lincoln) - Adults - 6

EGMS ID	Status	Grant ID	Budget Period
AD-SS-SS-001-02	Pending Activation	GT-SS-SS-001	7/1/2022 - 6/30/2023

## Overview

### Subaward Information

Subaward Title 2021-2022: Urban Alchemy - Safe Sleep (Lincoln) - Adults - 6	Subaward Type Continuation	Version 1
Grant Period Start Date 07/01/2021	Grant Period End Date 06/30/2023	Grant Abbreviation SS-SS
Budget Period Start Date 07/01/2022	Budget Period End Date 06/30/2023	Program Code 306
Operational Term Start Date 07/01/2022	Operational Term End Date 06/30/2023	Program Name Safe Sleep
Population Adult - Men & Women	Service Planning Area (SPA) SPA 6	Allocation/Reference ID

### Subrecipient Information

Subrecipient Organization URBAN ALCHEMY	Unique Entity ID (UEI) ENRECZD3KMX7	EIN 825408579
SAM Expiration Date		

03/05/2023

### Sites

Site Name	Address	City	State	Zip Code	Service Planning Area	State Assembly District	Supervisoral District	US Congressional District	LA City Council District	Census Tract
Lincoln Safe Sleeping Vilalge	2320 S. Central Avenue	Los Angeles	CA	90011	SPA 6	59th Assembly District	Second	40th Congressional District	Council District 9	2270.10

### Contacts

Authority/Role	Name	Email	Authorized Organization Representative?
Fiscal Officer; Program Officer;	Michael Anderer	mikea@urban-alchemy.us	true
Authorized Signatory; Executive Director; Chief Finance Officer;	Lena Miller	lenam@urban-alchemy.us	false
Chief Program Officer;	Bayron Wilson	bayronw@urban-alchemy.us	false
Chief Finance Officer;	Kate Hultin-Schott	kate.hultin@amllp.com	false
Chief Finance Officer; Fiscal Officer;	Sean Armijo	sean.armijo@armaninollp.com	false
Fiscal Officer;	Emily Trujillo	emily.trujillo@armaninollp.com	false
Data (e.g. HMIS); Program Officer;	Kenon Joseph	kenonj@urban-alchemy.us	false
Data (e.g. HMIS); Program Officer;	Wanda Williams	wandaw@urban-alchemy.us	false

Chief Finance Officer;	Jeff Kositsky	jeffk@urban-alchemy.us	false
Fiscal Officer; Program Officer;	Ian Clark-Johnson	ianc@urban-alchemy.us	false
Fiscal Officer;	Kristin Hergert	kristin.hergert@armaninollp.com	false
Chief Finance Officer;	Kristen Gowney	kristengowney@urban-alchemy.us	false

### Special Issues, Conditions, and Waivers

**EGMS ID:** TC-11435

**Title:** Allocation and Site Info w correct rate

**Source:** Amendment

**Type:** Program - Special Issue and Condition

**Created Date:** 09/28/2022 7:21 AM

**Effective From:** 07/01/2022

**Effective To:** 06/30/2023

### Budget

#### Budget Period Details

Awarded Amount \$3,056,875.00	Budgeted Amount \$3,056,875.00	Plan to bill indirect costs to LAHSA? Yes
Negotiated Indirect Cost Rate	Budget Redirection Threshold	Estimated Program Income

10.00%

\$0.00

### Funding Accounts

**EGMS ID:** FA-NGO-193

**Title:** City Roadmap County FY22-23 Operations for Safe Sleep Village (2300 S. Central Ave.)+FFE FA

**Grantor:** HCID

**Funding Source:** County SCF

**Strategy:**

**Program:** Safe Sleep

**SPA:**

**Population:**

**CFDA Number:**

**FAIN:**

**Subrecipient Admin Rate %:** 10

**Subrecipient Indirect Cost Rate %:** 0

**Start Date:** 07/01/2022

**End Date:** 06/30/2023

**Allowable Advance %:** 17.00

**Available Balance:** \$0

**Subaward Allocation:** \$3,056,875.00

**Change in Funding:** \$0.00

**Total Budgeted Amount:** \$3,056,875.00

**Status:** Funded

### Subaward Budget

Budget Category	Budget Category	Funding Account EGMS ID	Direct Costs
: -- HCID/ County SCF/ / Exp.6/30/2023	33 : Supportive Services/Financial Services (Non-Personnel)	FA-NGO-193	\$0.00
: -- HCID/ County SCF/ / Exp.6/30/2023	34 : Supportive Services/Financial Services (Personnel)	FA-NGO-193	\$24,351.00
: -- HCID/ County SCF/ / Exp.6/30/2023	35 : Financial Assistance	FA-NGO-193	\$0.00
: -- HCID/ County SCF/ / Exp.6/30/2023	37 : Operating Costs (Non-Personnel)	FA-NGO-193	\$508,154.00
: -- HCID/ County SCF/ / Exp.6/30/2023	38 : Operating Costs (Personnel)	FA-NGO-193	\$2,246,812.00
: -- HCID/ County SCF/ / Exp.6/30/2023	40 : Admin	FA-NGO-193	\$277,558.00
Grand Total			\$3,056,875.00

### Performance

#### Related Key Performance Indicators (KPIs)

EGMS ID	Title	Measure	Unit of Measurement	Target	Actual
KPI-0094	Contracted to Serve	Minimum number of people to be served Refer to HMIS Report: [GNRL-220] Program Details Report, Look at Exits spreadsheet.	Number (#)	125	0
KPI-0045	Average Nightly Bed Utilization Rate	Refer HMIS Report: [HSNG-104] Monthly Housing Report; [HSNG-108] Housing Census	Percentage (%)	95	0

KPI-0096	Exits to Successful Housing Destination Safe Sleep	"Successful Housing Destination" includes: o Exits to any Permanent Housing Destination o Exit to temporary stays with family or friends "Successful Housing Destination" for purposes of Safe Sleep program this also includes: o Exits to any Interim Housing Destination Refer HMIS Report: [GNRL-220] Program Details Report` Look at the Exits spreadsheet to see the destinations	Percentage (%)	15	0
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## Attachments

### Forms: Complete Forms using the Edit icon

Form Name	Required	Applies To
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### Supporting Documents Checklist

Description	Required	Applies To	Status	Template Link	Subrecipient Document Link
Advance Certification Form	Mandatory	Advance Request	Active	<a href="#">View</a>	Not Applicable
Certificate of Occupancy	Optional	Award	Active	<a href="#">Not Applicable</a>	Not Applicable
Scope of Required Services - SRS (for reference)	Optional	Award	Active	<a href="#">View</a>	Not Applicable
Scope of Required Services - SRS (for reference)	Optional	Reimbursement Request	Active	<a href="#">View</a>	Not Applicable
Evidence of Required Insurance, including Form CG 20 26, naming LAHSA and Funders as additional insured	Mandatory	Award	Active	<a href="#">Not Applicable</a>	Not Applicable
Evidence of Workers Compensation	Mandatory	Award	Active	<a href="#">Not Applicable</a>	Not Applicable

Insurance Requirements (for reference)	Optional	Award	Active	View	Not Applicable
Program Income Report (required if program generated income)	Optional	Budget Period Closeout	Active	Not Applicable	Not Applicable
Cost Verification Forms (required if funded by ESG)	Optional	Reimbursement Request	Active	View	Not Applicable
Supporting Financial Documentation (e.g. Trial Balance, P&L, GL, etc.)	Mandatory	Reimbursement Request	Active	Not Applicable	Not Applicable
Asset Purchase Authorization Form	Optional	Reimbursement Request	Active	View	Not Applicable
Reimbursement Certification Form	Optional	Reimbursement Request	Active	View	Not Applicable

**Files: Add additional files at your discretion**

Title	Classification	File Extension	Description	Created Date

## Subrecipient Advance, Indirect, Administration Rate Exhibit

Funding Source	Funding Agency	Funding Type	Eligible Advance (based on 12-month contract)	Indirect Cost Rate (%)	Administrative Rate (%)
Federal	Housing and Urban Development (HUD)	Continuum of Care Program (CoC)	N/A	Up to 10% of Total Direct Costs upon approval	Up to 10% of Total Direct Costs
State	The Business, Consumer Services and Housing Agency (BCSH)	CoC Homeless Housing Assistance Programs (HHAP)	17%		Up to 12% of Total Direct Costs
	California Department of Housing and	California Emergency Solutions and Housing (CESH)	17%		Up to 12% of Total Direct Costs
	County of Los Angeles - CEO	Measure H- Homeless Initiative (HI) Strategies	25%		Up to 12% of awarded
County	Supervisorial District Funds (SD Funds)	General Funds (GF) (i.e., YRP, HSF, CES, WSP)	17%		Up to 10% of awarded
	Department of Public Social Services (DPSS)	As dictated by Supervisorial District	As dictated by Supervisorial District		Up to 10% of awarded
	Housing Support Program (HSP) Non-WtW		17%	Up to 10% of Modified Total Direct Costs	
	CalWORKs Single Allocation (SA) WtW		17%	Up to 10% of Modified Total Direct Costs	
	Department of Children and Family Services (DCFS)	Independent Living Program (ILP)	N/A	Up to 10% of Modified Total Direct Costs	
	Department of Workforce Development, Aging and Community Services (WDACS)	Adult Protective Services-Home Safe Program	N/A	Up to 12% of Modified Total Direct Costs	
	Los Angeles County Development Authority (LACDA)	Emergency Solutions Grant (ESG) Federal and State	Actual cash need upon approval	Up to 10% of Modified Total Direct Costs	
	Los Angeles Housing + Community Investment Department (HCID)	General Funds (GF)	17%		Up to 10% of awarded
	Homeless Housing Assistance Program (HHAP)		17%	Up to 10% of Modified Total Direct Costs	
	Community Development Block Grant (CDBG)		17%	Up to 10% of Modified Total Direct Costs	
	Emergency Solutions Grant (ESG)		17%	Up to 10% of Modified Total Direct Costs	
City					

### Subrecipient Advance, Distribution, Recapture and Repayment Policy

It is the policy of LAHSA to provide advances to LAHSA Subrecipients only when essential to meet the needs of providing services outlined in their contract and during an established emergency.

Advance appropriations become available for obligation upon the signing of the contract between LAHSA and the subrecipient. Subrecipients may secure advance payment for all eligible contracts, unless directed by the funder. Each funder has specific guidelines that dictate the eligible amount available to LAHSA. As the Joint Power Authority, LAHSA has the power to distribute the max eligible advance amount as deemed necessary to subrecipient as long as it is in accordance with the funder guidelines.

Advance payments to subrecipients must be limited to the minimum amounts needed and be timed to be in accordance with the actual, immediate cash requirements of the subrecipients to perform the work of the approved program. This maximum eligible advance amount is detailed in the Exhibit B of all LAHSA contracts with subrecipients. All advances can be recouped across the full contract term and or be repaid in full by the end of the contract term unless otherwise stated by the funder. A refund check for any balance of advanced unexpended funds must be returned with 60 days of the contract expiration.

### General Rules

1. LAHSA subrecipients can only request an advance within 60-days of the execution of a new or periodic renewal amended LAHSA contact with the exception of County LACDA ESG funding.
2. Advance requests in excess of 60-days, with the exception of County LACDA ESG funding, will be considered upon request, on a case-by-case basis, and upon LAHSA determination that funding is urgently needed. Repeated advance requests may affect a grantee's risk status assessment.
3. LAHSA reserves the right to suspend, deny, or limit advance payments to high-risk subrecipients that are not in compliance with reporting requirements.
4. In no case will LAHSA pass-through funds be commingled with the personal funds of, or be used for personal purposes by, any officer, employee, or agent of the grantee; nor will any of these funds be deposited in personal bank accounts for disbursement by personnel.

### Subrecipient Requirements

1. The LAHSA Subrecipient has established or demonstrated to LAHSA the willingness and ability to establish written procedures that will minimize the time elapsing between the transfer of funds from LAHSA and their disbursement of the funds for services outlined in their contract.
2. The LAHSA subrecipient's financial management system meets the standards for fund control and accountability prescribed in Section .21 of OMB Circular A-110. (2 CFR §215.21).
3. Advance payments must be deposited and maintained in FDIC insured accounts. Furthermore, interest earned on advance payments deposited in interest bearing accounts must be remitted annually to the Funder in the manner prescribed by LAHSA. However, if this presents an undue hardship to the agency, they may submit a written request to LAHSA's Director of Grants Management & Compliance requesting a waiver of this requirement.

**Exhibit F-1**  
**Funder Terms and Conditions**  
**County of Los Angeles**  
**(On next page)**

**Agreement Number:** **2021BHRTV06**

**EGMS ID Number:** **AD-SS-SS-001-02**

**Contractor Name:** **Urban Alchemy**

**FY 2022-2023**

**COUNTY OF LOS ANGELES  
TERMS AND CONDITIONS**

**WHEREAS**, LAHSA has received and entered into an Operating Agreement with the County of Los Angeles, funded with General Funds and Measure H Funds for the provision of shelter and services to address homelessness in the County of Los Angeles as specified in Exhibit C, Program Budget and Services;

**WHEREAS**, LAHSA wishes to grant Contractor funds with funding from the County of Los Angeles as specified in Exhibit C, Program Budget and Services;

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Attachment 1 - Internal Revenue Service No. 1015

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**1. Compliance with the County's Jury Service Program**

- A. This Agreement is subject to the provisions of the County's ordinance entitled Contractor Employee Jury Service ("Jury Service Program") as codified in Sections 2.203.010 through 2.203.090 of the Los Angeles County Code. See Exhibit B, Conditions Precedent, Attachment 11.
- B. Unless Contractor has demonstrated to the County's satisfaction either that Contractor is not a "Contractor" as defined under the Jury Service Program (Section 2.203.020 of the County Code) or that Contractor qualifies for an exception to the Jury Service Program (Section 2.203.070 of the County Code), Contractor shall have and adhere to a written policy that provides that its employees shall receive from Contractor, on an annual basis, no less than five (5) days of regular pay for actual jury service. The policy may provide that employees deposit any fees received for such jury service with Contractor or that Contractor deduct from the employee's regular pay the fees received for jury service.
- C. For purposes of this Section, "Contractor" means a person, partnership, corporation or other entity which has a contract with LAHSA or a subcontract with a LAHSA contractor, and has received or will receive an aggregate sum of \$50,000 or more in any 12-month period under one or more LAHSA contracts or subcontracts. "Employee" means any California resident who is a full-time employee of Contractor. "Full-time" means 40 hours or more worked per week, or a lesser number of hours if the lesser number is a recognized industry standard and is approved as such by the LAHSA. If Contractor uses any subcontractor to perform services for LAHSA under the Agreement, the subcontractor shall also be subject to the provisions of this Section. The provisions of this Section shall be inserted into any such subcontract agreement and a copy of the Jury Service Program shall be attached to the Agreement.

- D. If Contractor is not required to comply with the Jury Service Program when the Agreement commences, Contractor shall have a continuing obligation to review the applicability of its "exception status" from the Jury Service Program, and Contractor shall immediately notify LAHSA if Contractor at any time either comes within the Jury Service Program's definition of "Contractor" or if Contractor no longer qualifies for an exception to the Program. In either event, Contractor shall immediately implement a written policy consistent with the Jury Service Program. LAHSA may also require, at any time during the Agreement and at its sole discretion, that Contractor demonstrate to LAHSA's satisfaction that Contractor either continues to remain outside of the Jury Service Program's definition of "Contractor" and/or that Contractor continues to qualify for an exception to the Program.
- E. Contractor's violation of this Section may constitute a material breach of the Agreement. In the event of a material breach, LAHSA may, in its sole discretion, terminate the Agreement and/or bar Contractor from the award of future LAHSA contracts for a period of time consistent with the seriousness of the breach.

## **2. Consideration of Hiring County Employees Targeted for Layoffs or are on a County Re-Employment List**

If Contractor requires additional or replacement personnel after the effective date of this Agreement to perform the services set forth herein, Contractor shall give first consideration for such employment openings to qualified, permanent County employees who are targeted for layoff or qualified, former County employees who are on a re-employment list during the life of this Agreement.

## **3. Consideration of Hiring GAIN-GROW Participants**

Should the Contractor require additional or replacement personnel after the effective date of this Agreement, Contractor shall give consideration for any such employment openings to participants in the County's Department of Public Social Services Greater Avenues for Independence (GAIN) Program or General Relief Opportunity for Work ("GROW") Program who meet the Contractor's minimum qualifications for the open position. For this purpose, consideration shall mean that the Contractor will interview qualified candidates. County, through LAHSA, will refer GAIN/GROW participants by job category to the Contractor. The County will refer GAIN-GROW participants by job category to the contractor. Contractors shall report all job openings with job requirements to: [GAINGROW@DPSS.LACOUNTY.GOV](mailto:GAINGROW@DPSS.LACOUNTY.GOV) and [BSERVICES@WDACS.LACOUNTY.GOV](mailto:BSERVICES@WDACS.LACOUNTY.GOV) and DPSS will refer qualified GAIN/GROW job candidates.

In the event that both laid-off County employees and GAIN/GROW participants are available for hiring, County employees shall be given first priority.

## **4. Contractor Responsibility and Debarment**

### **A. Responsible Contractor**

A responsible contractor is a contractor who has demonstrated the attribute of trustworthiness, as well as quality, fitness, capacity and experience to satisfactorily perform the contract. It is the County's policy to conduct business only with responsible contractors.

### **B. Chapter 2.202 of the County Code**

The Contractor is hereby notified that, in accordance with Chapter 2.202 of the County Code, if the County acquires information concerning the performance of the contractor on this or other contracts which indicates that the contractor is not responsible, the County may, in addition to other remedies provided in the Contract, debar the contractor from bidding or proposing on, or being awarded, and/or performing work on County contracts for a specified period of time, which generally will not exceed five (5) years but may exceed five (5) years or be permanent if warranted by the circumstances, and terminate any or all existing contracts the contractor may have with the County.

### C. Non-Responsible Contractor

The County may debar a Contractor if the Board of Supervisors finds, in its discretion, that the contractor has done any of the following: 1) violated a term of a contract with the County or a nonprofit corporation created by the County, 2) committed an act or omission which negatively reflects on the contractor's quality, fitness or capacity to perform a contract with the County, any other public entity, or a nonprofit corporation created by the County, or engaged in a pattern or practice which negatively reflects on same, 3) committed an act or offense which indicates a lack of business integrity or business honesty, or 4) made or submitted a false claim against the County or any other public entity.

### D. Contractor Hearing Board

If there is evidence that the Contractor may be subject to debarment, the County will notify the Contractor in writing of the evidence which is the basis for the proposed debarment and will advise the contractor of the scheduled date for a debarment hearing before the Contractor Hearing Board.

The Contractor Hearing Board will conduct a hearing where evidence on the proposed debarment is presented. The Contractor and/or the Contractor's representative shall be given an opportunity to submit evidence at that hearing. After the hearing, the Contractor Hearing Board shall prepare a tentative proposed decision, which shall contain a recommendation regarding whether the contractor should be debarred, and, if so, the appropriate length of time of the debarment. The Contractor and the County shall be provided an opportunity to object to the tentative proposed decision prior to its presentation to the Board of Supervisors.

After consideration of any objections, or if no objections are submitted, a record of the hearing, the proposed decision, and any other recommendation of the Contractor Hearing Board shall be presented to the Board of Supervisors. The Board of Supervisors shall have the right to modify, deny, or adopt the proposed decision and recommendation of the Contractor Hearing Board.

If a Contractor has been debarred for a period longer than five (5) years, that Contractor may after the debarment has been in effect for at least five (5) years, submit a written request for review of the debarment determination to reduce the period of debarment or terminate the debarment. The County may, in its discretion, reduce the period of debarment or terminate the debarment if it finds that the contractor has adequately demonstrated one or more of the following: 1) elimination of the grounds for which the debarment was imposed; 2) a bona fide change in ownership or management; 3) material evidence discovered after debarment was imposed; or 4) any other reason that is in the best interests of the County.

The Contractor Hearing Board will consider a request for review of a debarment determination only where 1) the contractor has been debarred for a period longer than five (5) years; 2) the debarment has been in effect for at least five (5) years; and 3) the request is in writing, states one or more of the grounds for reduction of the debarment period or termination of the debarment, and includes supporting documentation. Upon receiving an appropriate request, the Contractor Hearing Board will provide notice of the hearing on the request. At the hearing, the Contractor Hearing Board shall conduct a hearing where evidence on the proposed reduction of debarment period or termination of debarment is presented. This hearing shall be conducted and the request for review decided by the Contractor Hearing Board pursuant to the same procedures as for a debarment hearing.

The Contractor Hearing Board's proposed decision shall contain a recommendation on the request to reduce the period of debarment or terminate the debarment. The Contractor Hearing Board shall present its proposed decision and recommendation to the Board of Supervisors. The Board of Supervisors shall have the right to modify, deny, or adopt the proposed decision and recommendation of the Contractor Hearing Board.

**E. Subcontractors of Contractor**

These terms shall also apply to subcontractors of County Contractors.

**5. Notice to Employees Regarding the Federal Earned Income Credit**

Contractor shall notify its employees, and shall require each subcontractor to notify its employees that they may be eligible for the Federal Earned Income Credit under the federal income tax laws. Such notice shall be provided in accordance with the requirements set forth in Internal Revenue Service Notice No. 1015, located at the following internet hyperlink, <https://documents.lahsa.org/programs/contracts/2015/ExhibitV-Notice.pdf> and attached hereto and incorporated herein by reference as Exhibit F-1, Attachment 2.

**6. Recycled Bond Paper**

Consistent with the Los Angeles County Board of Supervisors policy to reduce the amount of solid waste deposited at County landfills, Contractor agrees to use recycled-content paper to the maximum extent possible on the Program.

**7. Warranty of Compliance with County's Defaulted Property Tax Reduction Program**

- A. Contractor acknowledges that County has established a goal of ensuring that all individuals and businesses that benefit financially from County through contract are current in paying their property tax obligations (secured and unsecured roll) in order to mitigate the economic burden otherwise imposed upon County and its taxpayers.
- B. Unless Contractor qualifies for an exemption or exclusion, Contractor warrants and certifies that to the best of its knowledge it is now in compliance, and during the term of this contract will maintain compliance with Los Angeles County Code Chapter 2.206.

**8. Termination for Breach of Warranty to Maintain Compliance with County's Defaulted Property Tax Reduction Program**

Contractor's failure to maintain compliance with the requirements set forth in "Warranty of Compliance with County's Defaulted Property Tax Reduction Program" subsection 9 above, shall constitute default under this Agreement. Without limiting the rights and remedies available to LAHSA under any other provision of this Agreement, Contractor's failure to cure such default within ten (10) calendar days of notice shall be grounds upon which LAHSA may terminate this Agreement and/or report Contractor to County to pursue debarment pursuant to County Code Chapter 2.206.

**9. Compliance with County's Zero Tolerance Policy on Human Trafficking**

Contractor acknowledges that the County has established a Zero Tolerance Policy on Human Trafficking prohibiting contractors from engaging in human trafficking. If a Contractor or member of Contractor's staff is convicted of a human trafficking offense, LAHSA shall require that the Contractor or member of Contractor's staff be removed immediately from performing services under the Agreement. LAHSA will not be under any obligation to disclose confidential information regarding the offenses other than those required by law. Disqualification of any member of Contractor's staff pursuant to this paragraph shall not relieve Contractor of its obligation to complete all work in accordance with the terms and conditions of this Agreement.

## **10. Data Destruction**

Contractors and subcontractors that have maintained, processed, or stored County data and/or information, implied or expressed, have the sole responsibility to certify that the data and information have been appropriately destroyed consistent with the National Institute of Standards and Technology (NIST) Special Publication SP 800-88 titled Guidelines for Media Sanitization. Available at: <http://csrc.nist.gov/publications/PubsDrafts.html#SP-800-88> Rev.%201 The data and/or information may be stored on purchased, leased, or rented electronic storage equipment (e.g., printers, hard drives) and electronic devices (e.g., servers, workstations) that are geographically located within the County, or external to the County's boundaries. LAHSA must receive within ten (10) business days, a signed document from Contractor(s) and subcontractors that certifies and validates the data and information were placed in one or more of the following stored states: unusable, unreadable, and indecipherable. Contractor and subcontractors shall certify that any County data stored on purchased, leased, or rented electronic storage equipment and electronic devices, including, but not limited to printers, hard drives, servers, and/or workstations are destroyed consistent with the current National Institute of Standard and Technology (NIST) Special Publication SP-800-88, Guidelines for Media Sanitization. Contractor and subcontractors shall provide LAHSA with written certification, within ten (10) business days of removal of any electronic storage equipment and devices that validates that any and all County data was destroyed and is unusable, unreadable, and/or undecipherable.

## **11. Compliance with COVID-19 Vaccinations of County Contractor Personnel**

Contractors and Subcontractors receiving County funding must be in compliance with the requirements of the Urgency Ordinance contained in Chapter 2.212, COVID-19 Vaccinations of County Contractor Personnel of County Code Title 2 – Administration, Division 4 (“Ordinance”), requiring all Contractor Personnel who (1) interact in person with County employees, interns, volunteers, and commissioners, (2) work on County owned or controlled property while performing services under a County contract, and/or (3) come into contact with the public while performing services under a contract with the County, must first:

1. Provide one-time verification that they are fully vaccinated, OR
2. If the Contractor Personnel is granted a valid medical or sincerely held religious belief exemption by its employer, provide a weekly certification through the Contractor of a negative polymerase chain reaction (“PCR”) or antigen test as evidence that they are in compliance with the mandate.

Contractors and Subcontractors must demonstrate compliance with the requirements of Chapter 2.212, COVID-19 Vaccinations of County Contractor Personnel of County Code Title 2 – Administration, Division 4 (“Ordinance”) by completing and signing the County’s COVID-19 Vaccination Certification of Compliance Form found in Exhibit B – Conditions Precedent - Attachment 25 and submitting it to LAHSA.

## **12. Internal Revenue Service No. 1015**

Contractor shall comply with the terms of Internal Revenue Service No. 1015, set forth in Attachment 1 to these County of Los Angeles Terms & Conditions, Exhibit F

**Exhibit F, County of Los Angeles Terms & Conditions**  
**Attachment 1**  
**Internal Revenue Service No. 1015**

<https://www.irs.gov/pub/irs-pdf/n1015.pdf>



**Notice 1015**

(Rev. December 2020)

**Have You Told Your Employees About the  
Earned Income Credit (EIC)?**

**What Is the EIC?**

The EIC is a refundable tax credit for certain workers.

**Which Employees Must I Notify About the EIC?**

You must notify each employee who worked for you at any time during the year and from whose wages you did not withhold income tax. However, you do not have to notify any employee who claimed exemption from withholding on Form W-4, Employee's Withholding Certificate.

**Note:** You are encouraged to notify each employee whose wages for 2020 are less than \$56,844 that he or she may be eligible for the EIC.

**How and When Must I Notify My Employees?**

You must give the employee one of the following.

- The IRS Form W-2, Wage and Tax Statement, which has the required information about the EIC on the back of Copy B.
- A substitute Form W-2 with the same EIC information on the back of the employee's copy that is on Copy B of the IRS Form W-2.
- Notice 797, Possible Federal Tax Refund Due to the Earned Income Credit (EIC).
- Your written statement with the same wording as Notice 797.

If you give an employee a Form W-2 on time, no further notice is necessary if the Form W-2 has the required information about the EIC on the back of the employee's copy. If you give an employee a substitute Form W-2, but it does not have the required information, you

must notify the employee within 1 week of the date the substitute Form W-2 is given. If Form W-2 is required but is not given on time, you must give the employee Notice 797 or your written statement by the date Form W-2 is required to be given. If Form W-2 is not required, you must notify the employee by February 8, 2021.

You must hand the notice directly to the employee or send it by first-class mail to the employee's last known address. You will not meet the notification requirements by posting Notice 797 on an employee bulletin board or sending it through office mail. However, you may want to post the notice to help inform all employees of the EIC. You can download copies of the notice at [www.irs.gov/FormsPub](https://www.irs.gov/FormsPub). Or you can go to [www.irs.gov/OrderForms](https://www.irs.gov/OrderForms) to order it.

**How Will My Employees Know if They Can  
Claim the EIC?**

The basic requirements are covered in Notice 797. For more detailed information, the employee needs to see Pub. 596, Earned Income Credit (EIC), or the Instructions for Forms 1040 and 1040-SR.

**How Do My Employees Claim the EIC?**

An eligible employee claims the EIC on his or her 2020 tax return. Even an employee who has no tax withheld from wages and owes no tax may claim the EIC and ask for a refund, but he or she must file a tax return to do so. For example, if an employee has no tax withheld in 2020 and owes no tax but is eligible for a credit of \$800, he or she must file a 2020 tax return to get the \$800 refund.

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Notice 1015 (Rev. 12-2020)

Cat. No. 20599I

# REVIEW 1: AD-SS-SS-001-02 - Urban Alchemy - 2021SSLP02 - Amendment One

Final Audit Report

2022-11-17

Created:	2022-11-17
By:	Laud Ankrah (lankrah@lahsa.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAAD9Y6vtqcr_mWiuaqNMOg8qWrwbZqSpEr

## "REVIEW 1: AD-SS-SS-001-02 - Urban Alchemy - 2021SSLP02 - Amendment One" History

-  Document created by Laud Ankrah (lankrah@lahsa.org)  
2022-11-17 - 4:27:39 PM GMT- IP address: 142.129.136.251
-  Document emailed to Tyler Douglas (tdouglas@lahsa.org) for signature  
2022-11-17 - 4:29:52 PM GMT
-  Email viewed by Tyler Douglas (tdouglas@lahsa.org)  
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-  Document e-signed by Tyler Douglas (tdouglas@lahsa.org)  
Signature Date: 2022-11-17 - 5:45:25 PM GMT - Time Source: server- IP address: 97.93.141.213
-  Agreement completed.  
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# PRESENTING LAHSA AGREEMENT: AD-SS-SS-001-02 - Urban Alchemy - 2021SSLP02 - Amendment One - signed

Final Audit Report

2022-11-24

Created:	2022-11-17
By:	Laud Ankrah (lankrah@lahsa.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAAzgXDwatz2jf6FzgGsvdVnwuKRm0P0Mni

## "PRESENTING LAHSA AGREEMENT: AD-SS-SS-001-02 - Urban Alchemy - 2021SSLP02 - Amendment One - signed" History

- 📄 Document created by Laud Ankrah (lankrah@lahsa.org)  
2022-11-17 - 6:02:39 PM GMT- IP address: 142.129.136.251
- ✉️ Document emailed to mikea@urban-alchemy.us for approval  
2022-11-17 - 6:06:05 PM GMT
- 📄 Email viewed by mikea@urban-alchemy.us  
2022-11-19 - 1:52:47 AM GMT- IP address: 174.194.141.54
- ✍️ Signer mikea@urban-alchemy.us entered name at signing as Michael Anderer  
2022-11-19 - 6:00:07 PM GMT- IP address: 23.93.79.202
- ✉️ Document approved by Michael Anderer (mikea@urban-alchemy.us)  
Approval Date: 2022-11-19 - 6:00:09 PM GMT - Time Source: server- IP address: 23.93.79.202
- ✉️ Document emailed to Lena Miller (lenam@urban-alchemy.us) for signature  
2022-11-19 - 6:00:12 PM GMT
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2022-11-19 - 6:41:34 PM GMT- IP address: 66.249.84.211
- 📄 Email viewed by Lena Miller (lenam@urban-alchemy.us)  
2022-11-22 - 9:51:50 PM GMT- IP address: 172.226.36.27
- ✍️ Document e-signed by Lena Miller (lenam@urban-alchemy.us)  
Signature Date: 2022-11-22 - 9:54:52 PM GMT - Time Source: server- IP address: 50.208.34.185

-  Document emailed to Laud Ankrah (lankrah@lahsa.org) for signature  
2022-11-22 - 9:54:55 PM GMT
-  Email viewed by Laud Ankrah (lankrah@lahsa.org)  
2022-11-22 - 9:56:22 PM GMT- IP address: 142.129.136.251
-  Document e-signed by Laud Ankrah (lankrah@lahsa.org)  
Signature Date: 2022-11-22 - 9:58:12 PM GMT - Time Source: server- IP address: 142.129.136.251
-  Document emailed to Kristina Dixon (kdixon@lahsa.org) for signature  
2022-11-22 - 9:58:14 PM GMT
-  Document e-signed by Kristina Dixon (kdixon@lahsa.org)  
Signature Date: 2022-11-22 - 10:34:58 PM GMT - Time Source: server- IP address: 108.185.42.177
-  Document emailed to Stephen David Simon (sdsimon@lahsa.org) for signature  
2022-11-22 - 10:35:00 PM GMT
-  Document e-signed by Stephen David Simon (sdsimon@lahsa.org)  
Signature Date: 2022-11-24 - 1:39:28 AM GMT - Time Source: server- IP address: 216.86.220.194
-  **Agreement completed.**  
2022-11-24 - 1:39:28 AM GMT



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**LOS ANGELES HOMELESS SERVICES AUTHORITY**  
**FISCAL YEAR 2023 – 2024 AMENDMENT AGREEMENT**  
**SAFE SLEEP PROGRAM AGREEMENT**  
**AMENDMENT NUMBER THREE**

**Contractor:** **Urban Alchemy**

**Original Contract Number:** **N/A**

**Allocation Reference Number:** **2021SSLP02**

**Amendment Number:** **Amendment Number Three to 2021SSLP02**

**Original EGMS ID Number:** **AD-SS-SS-001-01**

**Previous EGMS ID Number:** **AD-SS-SS-001-03**

**Current EGMS ID Number:** **AD-SS-SS-001-04**

**EGMS Amendment Request Number:** **CR-AD-SS-SS-001-03-00**

**Grant ID Number (EGMS):** **GT-SS-SS-001**

**Program Name:** **Lincoln Theatre Safe Sleep Village**

**This Amendment Term:** **July 1, 2023 to June 30, 2024**

**Total Contract Term:** **July 1, 2021 to June 30, 2024**

**CFDA:** **N/A**

**EGMS UNIQUE ENTITY ID (UEI):** **EV1QETCX1Q51**

**AMENDMENT NUMBER THREE  
TO CONTRACT NUMBER 2021SSLP02  
BETWEEN  
LOS ANGELES HOMELESS SERVICES AUTHORITY  
AND  
URBAN ALCHEMY  
RELATING TO THE  
FISCAL YEAR 2023 – 2024 SAFE SLEEP PROGRAM AGREEMENT**

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**THIS AMENDMENT NUMBER THREE** ("Amendment Number Three") to Agreement Number 2021SSLP02 for EGMS ID Number AD-SS-SS-001-04 (collectively referred to as the "Agreement"), pursuant to EGMS Amendment Request Number CR-AD-SS-SS-001-03-00, is made and entered into by and between the Los Angeles Homeless Services Authority ("LAHSA"), a joint powers authority of the City of Los Angeles and County of Los Angeles, and **Urban Alchemy** ("Contractor"), a California non-profit corporation, collectively the ("Parties").

**NOW, THEREFORE**, in consideration of the mutual covenants herein set forth and the mutual benefits to be derived therefrom, the Parties agree as follows:

**FISCAL YEAR 2023 – 2024 AMENDMENT AGREEMENT**

Effective on the date of LAHSA's Chief Executive Officer's signature, the Agreement is amended.

1. **RECITALS** is hereby amended and restated hereunder as follows:

Add the following:

**"WHEREAS**, LAHSA has implemented the Enterprise Grants Management System (EGMS) to manage and administer funding to subrecipients, including to Contractor;

**WHEREAS**, LAHSA is authorized by the City and the County under a Joint Powers Agreement to enter into contracts to allocate funding for programs for individuals and families experiencing homelessness in the City and County of Los Angeles;

**WHEREAS**, LAHSA has been designated by the City and County to provide for the proper planning, coordination, direction and management of various community development activities;

**WHEREAS**, LAHSA cooperates with private organizations and agencies of other governmental jurisdictions to carry out certain functions and programs which are its responsibility;

**WHEREAS**, the LAHSA Board of Commissioners has authorized the Chief Executive Officer of LAHSA to enter into agreements for up to five hundred thousand dollars and no cents (\$500,000.00) without the Commission's approval;

**WHEREAS**, on May 23, 2023, the LAHSA Board of Commissioners voted to award this Agreement to Contractor;

**WHEREAS**, due to the ongoing declarations of state of emergency by the City of Los Angeles, County of Los Angeles, and State of California, LAHSA temporarily suspended procurement for ongoing homeless service programs currently under contract due to the extreme hardship that having to respond to a Request for Proposal would place upon our nonprofit partners during this difficult time;

**WHEREAS**, pursuant to the Procurement Plan as approved by the LAHSA Board of Commissioners on February 24, 2023, LAHSA will extend this contract for homeless services for the 2023-2024 Fiscal Year to ensure the continuity of services in the community and to avoid the hardship that requiring LAHSA partners to respond to RFPs would impose on them;

**WHEREAS**, prior to execution of this Agreement, Contractor has met the Conditions Precedent that are attached as Exhibit B and B-1;

**WHEREAS**, the Program which is the subject of this Agreement has been funded with Funds as specified

in Exhibit C, Program Budget and Services;

**WHEREAS**, Funder-specific requirements are included in the Funder Terms and Conditions that are attached as Exhibit F, Funder Terms and Conditions and are incorporated by reference herein;

**WHEREAS**, Agreement Number 2021SSLP02 has been originally entered into the EGMS as EGMS ID Number AD-SS-SS-001-01;

**WHEREAS**, on December 6, 2021, Contractor and LAHSA executed Agreement Number **2021SSLP02** for EGMS ID Number AD-SS-SS-001-01 with **Exhibit C, Program Budget and Services**, for Fiscal Year 2021 – 2022 (**July 1, 2021 to June 30, 2022**), such being subsequently amended;

**WHEREAS**, on November 23, 2022, Contractor and LAHSA executed Amendment Number One for Agreement Number 2021SSLP02 under EGMS ID Number AD-SS-SS-001-02, with **Exhibit C-1, Program Budget and Services** (Fiscal Year 2022 – 2023, July 1, 2022 to June 30, 2023);

**WHEREAS**, on March 17, 2023, Contractor and LAHSA executed Amendment Number Two for Agreement Number 2021SSLP02 under EGMS ID Number AD-SS-SS-001-03, with **Exhibit C-2, Program Budget and Services** (Fiscal Year 2022 – 2023, July 1, 2022 to June 30, 2023);

**WHEREAS**, for administrative purposes, for Fiscal Year 2023 – 2024 (**July 1, 2023 to June 30, 2024**), EGMS ID Number AD-SS-SS-001-03 is amended to AD-SS-SS-001-04, pursuant to EGMS Amendment Request Number CR-AD-SS-SS-001-03-00;

**WHEREAS**, LAHSA and Contractor now desire to amend the Agreement for the purposes of: (a) extending the term through June 30, 2024, such that the total amended Agreement term hereunder for Fiscal Years 2021 to 2024, is **July 1, 2021** to June 30, 2024; (b) updating **Exhibit C, Program Budget and Services**, and (c) making such other changes as are required in connection with all of the foregoing, as detailed elsewhere in this Amendment Number **Three**;

**WHEREAS, Section 7., Time of Performance, provides for modifications and/or extensions;**

**WHEREAS, Section 72., Changes and Amendments to Terms and Conditions, provides for said amendments;**

2. **Section 7. Time of Performance**, solely with respect to **paragraph A.**, is hereby amended and replaced with the following:

“A. The term of this Agreement shall be from July 1, **2021** to June 30, 2024 unless otherwise terminated or extended, in whole or in part, as provided in this Agreement.”

3. **Section 9. Compensation**, is amended and restated as follows, and includes the 2023 – 2024 Fiscal Year:

A. LAHSA shall pay Contractor an amount not to exceed the Maximum Contract Amount identified in Exhibit C, Program Budget and Services, attached hereto and incorporated herein by reference, for the complete and satisfactory performance of the terms of this Agreement, as solely determined by LAHSA. Program Budget amount may be less than Maximum Contract Amount pending funding to LAHSA and additional budget amount may be added by budget modification(s) but to the Maximum Contract Amount.

LAHSA shall prepare Exhibit C, Program Budget and Services, which shall be executed by the LAHSA Chief Executive Officer or his/her designee and Contractor's Executive Director or his/her designee.

Agreement funds shall be allocated from Funding Entity(ies) as identified in Exhibit C, Program Budget and Services and shall be expended in accordance with Exhibit C, Program Budget and Services. Contractor's authority to expend such funds shall be for specific time periods as set forth in this Agreement. Contractor's right to receive compensation is conditioned upon compliance with LAHSA's indemnification and insurance requirements, satisfactory performance, and compliance with this Agreement, as solely determined by LAHSA.

B. Funding as set forth by the foregoing subsection A is subject to change in accordance with the availability of funds provided to LAHSA by the Funding Entity(ies). If LAHSA does not receive the adequate funding for its performance under this Agreement, then LAHSA shall be relieved of obligations under this Agreement or this Agreement shall be amended to conform to the changes in funding allocations as elected by LAHSA.

C. LAHSA reserves the right to modify the Program Budget or funding (e.g., increase, decrease, reallocate) during the term of this Agreement. To implement a Program Budget or funding modification, a revised replacement Exhibit C, Program Budget and Services to the Agreement shall be prepared by LAHSA and then executed by the LAHSA Chief Executive Officer or his/her designee and Contractor's Executive Director or his/her designee.

D. Contractor may submit a request to modify the Program Budget or funding, during the term of this Agreement, in the manner specified by LAHSA, including via LAHSA Enterprise Grants Management System (EGMS) or LAHSA Sub-Recipient Contract Amendment, Modification or Waiver policy, attached hereto as Exhibit Y, and attached hereto and incorporated herein by reference. Once approved, the modification will be implemented via a revised replacement Exhibit C, Program Budget and Services to the Agreement, which shall be prepared by LAHSA and then executed by the LAHSA Chief Executive Officer or his/her designee and Contractor's Executive Director or his/her designee.

E. Notwithstanding the above paragraphs, LAHSA may, in its sole discretion, unilaterally reduce the Program Budget or funding of this Agreement, as a whole, in part, or as to a cost category; may limit the rate of Contractor's authority to commit and spend funds; or may restrict Contractor's use of both its uncommitted and its unspent funds, in the event that:

- 1) The Funding Entity(ies) decrease(s) or rescind(s) funding available for this Program;
- 2) Contractor will have unexpended funds at the end of the Agreement's term based on the Contractor's spending pattern and invoices submitted to LAHSA for payment;
- 3) LAHSA determines that reallocating the funds, or a portion thereof, from this Agreement to another LAHSA-funded agreement would better serve the Los Angeles Continuum of Care;
- 4) Contractor is not meeting its contracted performance measures;
- 5) as permitted by any other terms of this Agreement; and/or
- 6) any legally justifiable reason.

To implement such a reduction, the parties agree that a revised replacement Exhibit C, Program Budget and Services to the Agreement shall be prepared by LAHSA and executed by the LAHSA's Chief Executive Officer or his/her designee and provided **via written notice** to Contractor's Executive Director or his/her designee.

In no event, however, shall any modification made by LAHSA affect expenditures and legally binding commitments made by Contractor before it received written notice of such modification, provided that such amounts have been committed in good faith and are otherwise allowable, and that such commitments are consistent with Funding Entity(ies)' cash withdrawal guidelines.

F. Contractor shall not expend funds provided under this Agreement prior to the commencement date of this Agreement, or subsequent to suspension or its termination. Further, expenditures shall be in direct support of the Program which is the subject of this Agreement. If Contractor is operating another program simultaneously with the Program herein, Contractor shall notify LAHSA in writing of any expenditures for items jointly used for any other program(s) and the expenditures shall be apportioned according to the percentage of direct use for the Program funded herein.

G. LAHSA assumes no responsibility to pay for expenses not specifically enumerated in this Agreement. Further, Contractor understands that LAHSA makes no commitment to fund this Program beyond the initial Program Term of this Agreement.

H. Contractor shall not be entitled to payment or reimbursement for any tasks or services performed, nor for any incidental or administrative expenses whatsoever incurred in or incidental to performance hereunder, except as specified herein. Assumption or takeover of any of Contractor's duties, responsibilities, or obligations, or performance of same by any entity other than Contractor, whether through assignment, subcontract, delegation, merger, buyout, or any other mechanism, with or without consideration for any reason whatsoever, shall occur only with LAHSA's express prior written approval.

I. Contractor shall have no claim against LAHSA for payment of any money or reimbursement, of any kind whatsoever, for any service provided by Contractor after the expiration or other termination of this Agreement. Should Contractor receive any such payment it shall immediately notify LAHSA and shall immediately repay all such funds to LAHSA. Payment by LAHSA for services rendered after expiration or termination of this Agreement shall not constitute a waiver of LAHSA's right to recover such payment from Contractor. This provision shall survive the expiration or other termination of this Agreement.

J. Funds provided by LAHSA shall not be used for costs associated with activities in violation of any law or for any activities not consistent with the intent of the Program and the eligible uses identified in applicable funder(s) Terms and Conditions. Use of funds to pay for ineligible activities will result in the repayment of these funds to LAHSA.

K. Applicable Discounts: Contractor warrants that any applicable discounts have been included in the costs billed to LAHSA.

L. Concurrent Enrollment: If Contractor is serving customers, concurrently utilizing more than one funding stream, Contractor is responsible for tracking the services delivered and the expenditures reported to ensure that services and expenditures are not duplicated.

M. Match Requirements: Contractor shall report in its invoices the required match of non-federal funds, if applicable. If required to provide a match of funds, as set forth above in this compensation section of this Agreement, Contractor shall report in each invoice the funds being matched. Documentation shall be maintained and made available for review.

N. Overtime Work: Unless specifically stated herein or authorized by LAHSA in writing, Contractor shall not incur overtime work expenditures.

O. Travel: Travel must be approved in advance by LAHSA and included in the Budget. Contractor shall be compensated for its reasonable travel expenses incurred in the performance of the Statement of Work and in compliance with 2 C.F.R §200.474.

P. Profit: Contractor shall comply with any LAHSA directives regarding profit or return on investment.

Q. Contractor shall submit to LAHSA its cost allocation plan along with a complete budget, as requested by LAHSA.

4. **Exhibit A, Statement of Work**, is hereby amended as follows:

(1) Add **Exhibit A-2, Statement of Work, Part 1: Scope of Required Services (SRS)** for Fiscal Year 2023 – 2024 (July 1, 2023 to June 30, 2024), *attached hereto and incorporated herein by such reference*. Any and all references to Exhibit A, Statement of Work in the Agreement and its Table of Contents, and/or Exhibits, and any related amendments shall hereby incorporate and include **Exhibit A-2, Statement of Work, Part 1: Scope of Required Services (SRS)** for Fiscal Year 2023 to 2024 (July 1, 2023 to June 30, 2024).

(2) Add **Exhibit A-2 Statement of Work, Part 2: Performance Targets** for Fiscal Year 2023 – 2024 (July 1, 2023 to June 30, 2024), *attached hereto and incorporated herein by such reference*. Any and all references to Exhibit A, Statement of Work in the Agreement and its Table of Contents, and/or Exhibits, and any related amendments shall hereby incorporate and include **Exhibit A-2, Statement of Work, Part 2: Performance Targets** for Fiscal Year 2023 to 2024 (July 1, 2023 to June 30, 2024).

5. **Exhibit C, Program Budget and Services**, is hereby amended to add **Exhibit C-3, Program Budget and Services** for Fiscal Year 2023 – 2024 (July 1, 2023 to June 30, 2024) as follows: and incorporated herein by such reference.

**Exhibit C-3, Program Budget and Services**, is added to the Agreement for EGMS ID Number AD-SS-SS-001-5, Fiscal Year 2023 to 2024 (budget period of **July 1, 2023** to June 30, 2024), and is *attached hereto and incorporated herein by such reference*, including Appendix 1 – Subrecipient Advance, Administration Rate, Indirect Cost Rate Table, *attached and incorporated herein by such reference*. Any and all references to Exhibit C, Program Budget and Services, in the Agreement and its Table of Contents, and/or Exhibits and any related amendments shall hereby incorporate **Exhibit C-3, Program Budget and Services** for EGMS ID Number AD-SS-SS-001-04, for Fiscal Year 2023 – 2024 (budget period of **July 1, 2023** to June 30, 2024), including the Appendix 1 – Subrecipient Advance, Administration Rate, Indirect Cost Rate Table.

6. Except as herein amended, all other terms and conditions of the Agreement remain in full force and effect.

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7. This Amendment Number Three may be executed in counterparts, each of which shall be deemed to be an original, but all of which, taken together, shall constitute one and the same Amendment Number Three, which, together with the Agreement, and all Exhibits and Attachments constitute the entire understanding and agreement of the Parties.

**IN WITNESS WHEREOF**, the Los Angeles Homeless Services Authority and Contractor have caused this Amendment Number Three to be executed by their duly authorized representatives.

**APPROVED AS TO FORM FOR LAHSA on May 4, 2023:**

Dan Kim  
**Deputy County Counsel**

**APPROVED AS TO FORM FOR LAHSA on May 4, 2023:**

Catrina M. Archuleta-Silva  
**Deputy City Attorney**

**For: Los Angeles Homeless Services Authority**

By: Va Lecia Adams Kellum  
Name: Dr. Va Lecia Adams Kellum  
Title: Chief Executive Officer

Executed this day 06/28/2023

**For: Urban Alchemy**

Internal Revenue Service ID Number:  
**82-5408579**

By: Lena Miller  
Name: Lena Miller  
Title: Chief Executive Officer

Executed this day 06/28/2023

Said Agreement shall be referenced as **Amendment Number Three to 2021SSLP02** of LAHSA Contracts and shall further be referred to under **EGMS ID Number AD-SS-SS-001-05**

**Exhibit A-2**  
**Statement of Work**  
**Part 1: Scope of Required Services (SRS)**  
**(Fiscal Year 2023 – 2024)**  
**(On next page)**

**Agreement Number:** 2021SSLP02

**EGMS ID Number:** AD-SS-SS-001-04

**Contractor Name:** Urban Alchemy

The Scope of Required Services (SRS) for the Safe Sleep Village Program contains a written summary of, and links to, detailed information regarding the services that must be provided to eligible participants experiencing homelessness receiving safe sleep services. This SRS and the documents that are linked hereto, in combination with LAHSA Program Standards, LAHSA Facility Standards, LAHSA Exit and Termination Standards, and Key Performance Indicators (KPIs) comprise the entire Statement of Work for Safe Sleep Village Programs. LAHSA reserves the right to make any necessary changes related to prioritization, matching, and other aspects of the implementation of the complete Coordinated Entry System (CES). Contractors will be notified through policies, interim guidance, and other forms of communication as it deems necessary.

## BACKGROUND AND OVERVIEW

The City of Los Angeles' Homelessness Roadmap is comprised of several interventions that are meant to provide emergency housing and/or supportive services to individuals and families experiencing homelessness. The Safe Sleep Village associated with the Homelessness Roadmap provides a safe place for people experiencing homelessness to sleep, have meals, and receive case management, on a 24-hour basis.

Safe Sleep Village Programs provide a safe, Low-barrier, Housing First, and supportive twenty-four (24) hour residence to persons experiencing homelessness, while they are assessed and connected to a broad range of housing resources and in an effort to resolve their homelessness situation as quickly as possible.

## GLOSSARY

**Safe Village Programs:** Safe Sleep Village Programs are 24-hour programs that consist of outdoor tent spaces for individuals to sleep in their tents safely with their personal belongings, so long as their belongings can fit in a designated area. This program aims to mitigate the risks of living in an encampment by providing on-site security, case management, laundry services, showers, bathrooms, and meals.

**Coordinated Entry System (CES):** The Los Angeles Coordinated Entry System facilitates the coordination and management of a crisis response system's resources that allows service providers, participants, and policy makers to make data-informed decisions from available information to connect people efficiently and effectively to interventions that will rapidly end their homelessness. CES ensures that the highest need, most vulnerable households in the community are prioritized for services and that the housing and supportive services in the system are used as efficiently and effectively as possible. LAHSA funded System Components are connected and coordinated through the CES in response to end homelessness.

**Homeless Management Information System (HMIS):** HMIS is a U.S. Department of Housing and Urban Development (HUD) mandated information technology system that is designed to capture participant-level information over time, on the characteristics and service needs of homeless persons. Participant data is maintained on a central server, which will contain all participant information in an encrypted state. HMIS integrates data from all homeless service providers and organizations in the community and captures basic descriptive information on every person/household served. Participation in the Los Angeles Continuum of Care (LA CoC) HMIS allows organizations to share information with other participating organizations to create a more coordinated and effective delivery system.

**Housing Navigation:** Housing Navigation bridges a critical gap in services in the Los Angeles Continuum of Care (LA

CoC). Housing Navigation provides housing-focused supportive services for people experiencing homelessness referred from various LAHSA programs with the immediate goal of helping individuals identify, apply for, secure, and move into permanent housing within 120 days of Housing Navigation program enrollment.

**Program Standards:** Program Standards are contractual requirements which all LAHSA funded programs providing supportive services must adhere to. This document is not a standalone document and is meant to work in conjunction with the Component's Scope of Required Services, which may add to, clarify, or supersede any contractual requirements set forth in the Program Standards document. Full link to the Program Standards document:

<https://www.lahsa.org/documents?id=2280-lahsa-program-standards.pdf>

**Time Limited Subsidy Program:** is a combination of the programs formerly classified as permanent housing subsidy programs such as: Rapid Re-Housing, Recovery Re-Housing and Shallow Subsidy. Time Limited Subsidy Programs are Housing First, Low Barrier, Harm Reduction, Crisis Response programs focused on quickly resolving the crisis of homelessness for eligible participants and assisting them in moving into a permanent housing situation. Time Limited Subsidy Programs provide case management and financial assistance including rental subsidies for a period of time up to twenty-four (24) months. Case managers use Progressive Assistance to help program participants rapidly obtain and stabilize in permanent housing in either the private rental market or affordable housing market as available. Time Limited Subsidy Programs should design service provision based on the core components of Rapid Re-Housing: Housing Identification, Rent & Move-in Assistance, and Case Management & Supportive Services. Time Limited Subsidy programs are expected to be aligned with the 2019 LA City and County Rapid Re-Housing Minimum Service and Operation Practice Standards [j1] approved by all RRH funders in Los Angeles and by the CES Policy Council in 2019.

## ELIBILITY FOR SAFE SLEEP VILLAGE

1. **Eligible Population:** Detailed eligibility requirements for the Safe Sleep Village Program, as well as Contractor responsibilities to verify eligibility, may be found in **Appendix I**.

1.1. Homeless Status. Participants must be determined to be homeless (Category 1) per HUD's Final Rule on "defining Homeless" (24 CFR parts 91, 576 and 578) or (Category 4) per The McKinney-Vento Homeless Assistance Act (42 U.S.C. 11301 et seq.).

1.1.1. Contractor will be responsible for documenting the determination of the participant's homeless status utilizing LAHSA Approved Homeless Certification Forms. Contractor must upload the LA CoC Homeless Certification Form utilized into HMIS. LA CoC Homeless Certification Forms, ranked in order of preference, include:

1.1.1.1. LA COC Homeless Verification (Form 6053)

1.1.2. All documentation is required to be placed inside the participant's master file and uploaded into the participant's profile in the Homeless Management Information System (HMIS).

1.1.3. In the case where homelessness is being documented with an HMIS Participant Summary Report, the provider must enter a case note in HMIS indicating the HMIS Participant Summary Report shows the participant was homeless within 7 days of program entry. If hard copy files are maintained, the documentation must be placed inside the participant's master file. This includes the HMIS Participant Summary. Please see the following video on how to upload documents to HMIS: <https://www.wevideo.com/view/1324198999>.

1.2. Participants must be Adults or Transition Age Youth, ages eighteen (18) and older.

- 1.2.1. Unaccompanied Minors are not eligible for enrollment or services: an exemption exists for unaccompanied minors who are legally emancipated.
- 1.3. If participants are unable to manage Activities of Daily Living (i.e., ability to transfer in and out of a bed, bathe, dress, and address hygiene needs independently), participants may need to be provided a reasonable accommodation on a case-by-case basis.
  - 1.3.1. Participants in need of hospitalization or skilled nursing care must be referred to and served by a hospital or specialized programs equipped to offer appropriate levels of care.
2. Contractors must NOT require additional eligibility criteria other than what is outlined in the “Eligibility for Services” section of this SRS. There is no additional application or screening process.
3. Contractors must identify new participants through participation in the Coordinated Entry System (CES), outreach, general community referrals, and the Centralized Referral System (CRS).
  - 3.1. Contractors are to coordinate and/or conduct outreach with existing outreach teams to build lot occupancy should lot census be below contract threshold.
  - 3.2. Contractors are to conduct outreach with local homeless service programs, including Access Centers and Access Points to build awareness of the program and ensure community providers are clear on how to provide referrals.
  - 3.3. Contractors must prioritize referrals from Outreach Coordinators/Outreach Teams, CES Housing Navigators, CES Regional Coordinators/Matchers, or other partners, as directed by LAHSA. LAHSA reserves the right to require Contractors to reserve a portion of parking spaces for certain partners as needed.
  - 3.4. Other referrals may be generated from:
    - 3.4.1. Non-County funded outreach workers and service providers
    - 3.4.2. Domestic Violence Providers
    - 3.4.3. First Responders
    - 3.4.4. Faith-Based Service Providers
    - 3.4.5. County Health and Social Service Departments
    - 3.4.6. Health care providers
    - 3.4.7. 211
    - 3.4.8. Constituent referrals from local and regional governments
4. Contractor must NOT screen out participants or deny referrals based on any of the following criteria:
  - 4.1. Past program participation or previous stay at Contractor facilities
    - 4.1.1. Lack of COVID-19 vaccination or test documentation
    - 4.1.2. Lack of tuberculosis (TB) documentation
    - 4.1.3. Lack of Service Animal/Emotional Support Animal (ESA) documentation
    - 4.1.4. Lack of sobriety

- 4.1.5. Lack of income or employment status
- 4.1.6. Lack of identification documentation
- 4.1.7. The presence of mental health issues, disabilities, or other psychological challenges
- 4.1.8. Lack of a commitment to participate in treatment
- 4.1.9. Justice system involvement
- 4.1.10. Presence of or number of evictions
- 4.1.11. Any other criteria thought to predict challenges/barriers to long-term housing stability

5. Contractor must NOT permanently ban participants from re-entering the Safe Sleep Village Programs, regardless of reason for participant's exit or termination from previous enrollments in Contractor's programs.

5.1. Contractor must have a policy about how to manage the return of participants who were previously exited due to behaviors that has impacted or threatened to impact the safety of other participants or staff. Policies should incorporate principles of trauma-informed care, be applied equitably, and may include standardized lengths of time for responses to similar situations (e.g., temporary separation before participants are allowed to re-enroll in the Safe Sleep Village Program).

## **COORDINATED ENTRY SYSTEM (CES) PARTICIPATION**

6. Safe Sleep Village Programs are an integral part of the Coordinated Entry System (CES), which was created to ensure consistent approaches for access to, and delivery of, services in Los Angeles County. Therefore, Safe Sleep Village programs must work in collaboration with the CES. Please see LAHSA Program Standards for further detail.

7. Contractors must establish and maintain relationships with public and community-based service agencies to collaborate and make services available to participants.

- 7.1. The contractor must ensure appropriate releases of information sharing (consents) are in place before case conference meetings.
- 7.2. Contractors must participate in LAHSA-hosted cross-agency coordination, training, and case conferencing sessions with public and community-based service agencies.

8. **CES Initial Assessment:** LAHSA no longer requires completion of a CES Survey Tool (i.e., VI-SPDAT for Adults, Next Step Tool for Transition Age Youth, or Family-SPDAT for Families with Children) upon intake.

- 8.1. The CES Survey Tool may only be administered by staff who have completed LAHSA required trainings. Upon LAHSA's adoption of a new or updated CES Survey Tool, Contractor will be required to complete all necessary training to administer the new or updated CES Survey Tool(s) at the designated stage of engagement.
- 8.2. Contractor must comply with any forthcoming guidance regarding updating or replacing existing CES Survey Tools.
- 8.3. The new or updated CES Survey Tool must be administered in a place that allows the participant needed privacy for answering the questions.

8.4. A CES Survey Tool may still be required to determine eligibility for certain types of permanent supportive housing (PSH) resources. If one is needed, Contractor should use the existing CES Survey Tool if a new or updated CES Survey Tool has not been released yet.

## **SUPPORTIVE SERVICES AND ACTIVITIES**

9. Contractors must provide the required Supportive Services and activities directly or through subcontracted services arrangements. Each participant must be individually assessed for the types of services needed, and Contractor must provide services specifically needed by, and requested by, each participant.

10. **Program Intake:** Contractor must allow for intake of new participants at least five (5) days a week during regular business hours and as long as beds are available.

10.1. Contractor must allow for intake of new participants during extended hours such as weekends and evenings within each Contractor's capacity to allow for intakes during extended hours.

11. **Direct Support Services:** Contractors providing Safe Sleep Village Programs are funded for and must offer the following services directly to participants in the program:

- 11.1. Twenty-four (24) hour bed availability
- 11.2. Case Management
- 11.3. Document Collection
- 11.4. Resource Coordination Meetings
- 11.5. Problem-Solving
- 11.6. Connection to LA County's Mainstream Benefits/Services
- 11.7. Connection to Employment Development/Placement Programs
- 11.8. Harm Reduction Services (e.g., sharps containers, overdose prevention resources, amnesty lockers)
- 11.9. Residential Supervision
- 11.10. Intervention & Conflict De-escalation
- 11.11. Restroom & Showers

12. **Problem-Solving (Diversion):** The first conversation upon entry will be to assess the possibility of assisting the household to quickly self-resolve their housing crisis through connection/ reconnection with their social support network, connection to community resources, or limited Problem-Solving Assistance Funds (PSAF) provision. For additional information, please see Problem-Solving: A Guide for Implementation and Best Practices which can be accessed here: <https://www.lahsa.org/documents?id=3899-problem-solving-a-guide-for-implementation-and-best-practices-3899.pdf>.

12.1. Problem-Solving Housing Outcomes include (1) maintaining permanent housing, (2) moving in temporarily with family/ friends, (3) moving in permanently with family/ friends, (4) relocation out of town, and (5) identifying new permanent housing.

12.2. If it is determined through Problem-Solving (Diversion) conversations that one-time financial assistance is needed to resolve the participant's housing crisis and successfully divert entry into or quickly exit from the program, the Contractor must review household eligibility and utilize eligible funding to conduct the identified outcome. If needed, the contractor may submit a request for PSAF (<https://www.lahsa.org/documents?id=3898-form-3898-problem-solving-assistance-request.pdf>).

Contractors can contact Problem-Solving@lahsa.org for frequent questions and case conferencing or PSAAssistanceFunds@lahsa.org for PSAF questions or following up on requests for funds.

- 12.3. If Problem Solving is not initially successful at program entry, Contractor should continue to have ongoing Problem-Solving conversations on a weekly basis until a housing outcome is identified while the participant is enrolled in the Safe Sleep Village Program.
13. **Meal Distribution:** All participants must be provided with three (3) daily nutritional meals (Breakfast, Lunch, Dinner) provided by the Contractor or a subcontracts vendor. Contractor must make accommodations for participants with dietary restrictions or who miss the designated mealtime to ensure that they still receive meals.
14. **Security:** Contractor is required to oversee and promote the safety of Safe Sleep Village Program participants, staff, and invited guests. The contractor must take a trauma-informed approach to providing security at the site and have standard operating procedures to ensure the safety of all residents.
15. **Emergency Naloxone Administration:** All interim housing provider staff must be trained to administer Narcan to participants experiencing an opioid overdose emergency and responsible for maintaining an inventory of Narcan.
16. **Communicable Disease Prevention and Response Practices:** Contractor is required to abide by all screening prevention, and response practices designated by the LA County Department of Public Health (DPH). Contractor will ensure that staff and participants adhere to any Orders issued by the State or County's Health Officer when in effect. Please see LAHSA Program Standards for additional guidance.
17. **Case Management Services:** Safe Sleep Village Program staff provides Case Management Services to assist participants in moving forward in accessing permanent housing. The primary objective of Case Management/Support Services for Safe Sleep Village Programs is to support participants with obtaining any documents needed to become "Document Ready." Additionally, case management shall also include an organized approach to tracking and managing participant progress including referrals and connections to Housing Navigation and permanent housing programs.
  - 17.1. Contractor must provide Case Management that is offered in accordance with Housing First and trauma informed care principles to assist participants to self-resolve their housing crisis and/or be connected to a permanent housing provider.
  - 17.2. Contractor must document the content and outcome of case management meetings with participants as case notes under the designated program in HMIS. Please see LAHSA's Program Level Case Note video on how to do this: [https://www.youtube.com/watch?v=Hg39kR6ms\\_s](https://www.youtube.com/watch?v=Hg39kR6ms_s).
  - 17.3. To maintain the momentum of participants' progress towards obtaining permanent housing, the Contractor must offer case management services to each participant at least one (1) time per month. The frequency of how often case management services is offered to each participant can be increased depending on need and availability.
  - 17.4. Contractors must support participants with obtaining documents needed for permanent housing placements including but not limited to: Government Issued Identification Card, Social Security Card, and other necessary documents to move swiftly into permanent housing.

- 17.4.1. Support with document collection includes assisting participants with completing applications and accompanying them to appointments. Additional support with document collection may be necessary.
- 17.5. All efforts on behalf of the Contractor to engage a participant in case management services should be documented in HMIS, including the response from the participant.
- 17.6. Case notes in HMIS should be documented in a manner that is succinct, objective, and factual.

18. Case Management Ratio: Contractors are recommended to maintain a ratio of approximately one (1) staff to every twenty-five (25) participants for optimal service delivery.

- 18.1. The specific ratio of staff members to participants for case management services should be determined through consultation with Supervising or Managing level staff, taking into consideration the frequency of services needed for participants based on individual need.

19. **Resource Coordination Meetings:** Interim Housing contractors are required to coordinate and support oversight of program placements between service providers for participants to move swiftly into permanent housing. Contractors will hold regular meetings with Housing Navigation and Time Limited Subsidy service providers to coordinate care and movement into permanent housing and will have access to overall planning for participants.

- 19.1. Contractor is responsible for submitting referrals to Housing Navigation in HMIS for eligible participants when Housing Navigation slots are available to them.
- 19.2. Contractor is expected to follow any prioritization guidance for HN referrals approved by the CES Policy Council.
- 19.3. Contractor should refer to this Interim Housing to Housing Navigation Implementation Training for additional guidance: <https://www.lahsa.org/documents?id=6975-lahsa-ih-to-hn-implementation-training>.
- 19.4. Contractor must comply with any forthcoming guidance regarding Resource Coordination Meetings and the referral process linking participants to Housing Navigation services.

20. **Mainstream Benefits:** Contractor must establish procedures for referring eligible and interested participants to mainstream benefit services (e.g., services available through Department of Social Services, Department of Health Services – Countywide Benefits Entitlement Service Team (CBEST), Department of Mental Health, Department of Public Health - Substance Abuse Prevention and Control (SAPC)).

21. **Employment Development/Placement Programs:** Contractor must establish and maintain effective working relationships with employment programs, such as local Work Source Centers to assist participants in engaging in services to prepare for and obtain employment. The goal of these services is to improve the participant's financial situation to increase the participant's ability to live independently.

## **PROGRAM PARTICIPATION GUIDELINES**

22. Contractor must incorporate as part of their program, a set of program participation guidelines that serve as protocols for ensuring the safety and security of program participants, as well as program staff. These guidelines must be presented to LAHSA staff prior to the start of operations for review and approval by LAHSA.

23. Contractor must submit copies of all Policies and Procedures to LAHSA for approval within ten (10) business days of a site opening OR when new policies/procedures are created OR when changes are made to existing policies and procedures.

23.1. Policies and Procedures that must be submitted to LAHSA include but are not limited to policies and procedures that address the following:

- 23.1.1. Participant guidelines
- 23.1.2. Mental health crises and psychiatric emergencies
- 23.1.3. Substance use, including on-site use, sale, and substance use-related emergencies
- 23.1.4. Conflict response and de-escalation
- 23.1.5. Threats, physical altercations, and incidents of violence
- 23.1.6. Participant exits (voluntary and involuntary)
- 23.1.7. Re-enrollment of previously exited participants
- 23.1.8. Storage, training, and distribution of Narcan
- 23.1.9. ADA Accessibility

24. Participant guidelines must abide by the following Criteria:

24.1. Rules must ensure the safety and security of program participants, volunteers, and staff.

24.1.1. Rules must reflect a Housing First, Low Barrier, Trauma-Informed, and Harm Reduction approach.

24.1.2. Contractor must review all program rules with participants as part of the intake process, and have participants sign and date the form. The completed form must be uploaded to HMIS and placed in the participant master file.

## **HOUSING NAVIGATION**

25. Contractor will collaborate with participants and staff to facilitate appointments with Housing Navigators and Housing Matchers for those participants who have been prioritized by CES for matching to permanent Housing.

25.1. Housing Navigation Resource Coordination Meetings (for Adult Population ONLY): Safe Sleep Village contractors are required to coordinate and support oversight of program placements between service providers for participants to move swiftly into permanent housing. Contractors will hold regular meetings with Housing Navigation service providers to coordinate care and movement into permanent housing and will have access to overall planning for participants.

26. Contractor must collaborate with and allow Housing Navigators from outside agencies to provide case management services to program participants.

27. Case management services will be carefully coordinated between the Safe Sleep Village Program and Housing Navigators to ensure coordinated and useful provision of services and should be entered into HMIS via case notes and referral features.

27.1. The primary objective of Case Management/Support Services is to support participants with obtaining any documents needed to become “Document Ready.” Additionally, case management shall also include an organized approach to tracking and managing participant progress including referrals and connections to Housing Navigation and permanent housing programs.

## LENGTH OF ENROLLMENT

28. Contractors must strive to assist participants in moving out of Safe Sleep Village and into a permanent housing unit as quickly as possible. The total length of stay can and should be individually determined based on the participants need. Progress and engagement towards housing goals must be documented and reviewed when a participant is approaching an initial 90-day length of stay and, so long as participant stays in the program, every 90 days after. See Appendix I for details regarding reasons for extension and required documentation.

## PROGRAM PARTICIPATION GUIDELINES

29. Contractor must incorporate as part of their program, a set of program participation guidelines that serve as protocols for ensuring the safety and security of program participants, as well as program staff. These guidelines must be presented to LAHSA staff prior to the start of operations for review and approval by LAHSA.

29.1. Program participation guidelines must incorporate language to support a Low-Barrier, Harm Reduction, and Housing First approach required of all programs.

29.2. Program participation guidelines must be participant-centered to minimize barriers to accessing a Safe Sleep Village Program bed and prevent/minimize exits from program due to Rule violations.

30. Contractor must create a Program Participation Guideline Agreement form. Contractor must review the form with the participant upon program enrollment. The form must include a participant consent section that is signed and dated by the participant with a witness signature and dated to be signed by the contractor. Upon signature of the Program Participation Guideline Agreement, the participant is consenting to participate in the program and is certifying that they have read (or have been read) the program guidelines, and that they understand and consent to the expectations regarding abiding by the program guidelines.

## EXITING PARTICIPANTS

31. Contractor must abide by the **LAHSA Interim Housing Exit and Termination Standards** document and develop and document clear Termination Policies and related procedures that align with these expectations.

## HMIS DATA COLLECTION AND PARTICIPATION REQUIREMENTS

32. Contractor shall refer to **LAHSA Program Standards** for details regarding Contractor requirements for utilization of HMIS.

33. Providers are required to enter nightly bed services for all participants who are occupying a bed at their site. A bed service must be entered for any participant who is physically occupying their bed at any point in the 24-hour day. Flexibility should be granted to participants who keep a non-traditional sleep or work schedule when entering bed services.

33.1. A bed service is not applicable to any other service that a participant may be receiving from the Safe

Sleep Village Program.

34. Program enrollments, program exits, and bed services must be entered in HMIS within one (1) business day following the provision of services or change to a participant's program status.
35. When exiting a participant from the program, the Contractor will use either a) the date of the last service provided, or b) the date following the last bed service – whichever was last provided under the program enrollment.
36. With any participant, the Contractor must complete a Status Change Assessment when there are changes in regular income (as defined in the HUD Data Standards), Employment Status, and/or Disabling Conditions and Barriers as Status Update Assessments throughout their program enrollment.

#### **PARTICIPANT FILE**

37. Contractor must maintain a file for each participant.
38. Collection of identification and income verification documents is recommended but not required for enrollment into the program. If participant does not have these documents at the time of program entry, Contractor must assist participant with obtaining them. Once obtained, copies of these documents must be kept in the participant's file.
39. Core document for Safe Sleep Village Program Participant Files include the following, but are not limited to:

<b>Document</b>	<b>Guidance</b>
Participant Identification	Required - See Appendix I for details.
Program Participation Guideline Agreement	Agency created form. Must be dated and signed by the participant and Contractor and must indicate that the program site does not establish tenancy.
Grievance Procedure Acknowledgement	Agency created form. Must be dated and signed by the participant and Contractor. <u>See LAHSA Program Standards for additional guidance.</u>
CES Initial Assessment	Complete in alignment with procedures developed by LAHSA.
Verification of Homelessness	Required – Use the LA COC Homeless Verification Form (Form 6053) located here: <a href="https://www.lahsa.org/documents?id=6053-la-coc-homelessness-verification-form-6053-.pdf">https://www.lahsa.org/documents?id=6053-la-coc-homelessness-verification-form-6053-.pdf</a> .
Income Documents	Current proof of income must be uploaded to HMIS if it has not already been uploaded. If proof of income is outdated or not currently available, the participant should complete Form 1087 - Self Declaration of Income/ No Income Form and the form should be uploaded to HMIS.
Housing and Service Plan	Optional - Use LAHSA-approved form and track the date the Housing and Services Plan was completed in HMIS. Form is located here: <a href="https://www.lahsa.org/documents?id=1186-form-1186-housing-services-plan-english-.pdf">https://www.lahsa.org/documents?id=1186-form-1186-housing-services-plan-english-.pdf</a> .
Budget Tool	Optional, use as needed
Case Notes	Required – Enter into HMIS
Exit Summary Form or Agency-Specific Exit Form	Required – Use the LAHSA-approved Exit Summary Form located here: <a href="https://www.lahsa.org/documents?id=1081-form-1081-exit-summary.pdf">https://www.lahsa.org/documents?id=1081-form-1081-exit-summary.pdf</a> . Contractor can also use their agency-specific exit form.
Notice(s) of Noncompliance and/or Termination Notice	Required (as applicable) - Documents must also be uploaded to HMIS. Refer to LAHSA Interim Housing Exit and Termination Standards document for further guidance.

## FACILITIES AND OPERATIONS

40. **Harm Reduction and Trauma Informed Program Design:** These principles shall be incorporated into all aspects of the program's facility. Core design components are listed below.

- 40.1. Creating trauma-informed programs requires continual review of policies to see what works and what may be re-traumatizing to trauma survivors. Contractor must have a regular review of policies to update practices and guidelines to make them as relevant as possible to the participants being served.
- 40.2. Contractor must utilize the Trauma-Informed Organizational Toolkit to self-asses its program and facility for fidelity to the trauma-informed model and to develop aligned policies and procedures. (Trauma-Informed Organizational Toolkit – <https://www.lahsa.org/documents?id=1691-trauma-informed-organizational-toolkit.pdf>)
- 40.3. Contractors are permitted to prohibit the possession and/or use of weapons, alcohol, and/or illegal drugs on the site.
- 40.3.1. Contractors must, however, establish Harm Reduction policies, practices, and procedures designed to minimize negative consequences resulting from participants use or possession of contraband items as referenced above.
- 40.4. Sharps Container – Contractor must ensure that a sharps container is available on-site and is accessible to participants. Sharps must be disposed of in an appropriate manner.
- 40.5. Amnesty Lockers – Contractors shall provide amnesty lockers for participants to discreetly lock and store personal property before entering the shelter. Contractor is expected to develop Policies and Procedures regarding the use of amnesty lockers.
  - 40.5.1. Items stored in amnesty lockers may not be accessible to program participants while within the grounds of the Interim Housing program.
  - 40.5.2. Contractors must return participants items upon participant request, and upon exiting the grounds of the Safe Sleep Village Program.
- 40.6. Harm Reduction is not intended to prevent the termination of a participant whose actions or behavior constitute a threat to the safety of participants and/or staff.

41. Contractor must operate a clean, safe, and well-maintained Safe Sleep Village program for participants experiencing homelessness which includes providing the following:

- 41.1. Tent
- 41.2. Tent Space
- 41.3. Cot
- 41.4. Bedding (i.e., blanket and pillow)
- 41.5. Two (2) storage bins for belongings
- 41.6. 24-hour site availability
- 41.7. 24-Hour onsite-security
- 41.8. Janitorial and maintenance services

- 41.9. Showers units
- 41.10. Laundry services
- 41.11. Wi-Fi
- 41.12. Phone charging stations
- 41.13. On-site office space for consistent provision of housing-focused case management

**Please refer to LAHSA Facility Standards for more information**

- 42. **Pets:** As pets often provide important companionship for participants, Contractors are encouraged to accommodate incoming participants with pets within their capacity to do so. The term “pet” refers to a participant’s animal(s) that is not otherwise identified as a Service Animal or Emotional Support Animal. Contractors are encouraged to develop policies and procedures for collaborating with participants with pets.
  - 42.1. The recommendation in Section 43 is specific to pets not classified as Service Animals or Emotional Support Animals. Contractors are still required to adhere to state and federal laws regarding providing reasonable accommodation to participants with service animals or emotional support animals. Please see LAHSA Program Standards for further guidance on Service Animals and Emotional Support Animals.
- 43. Contractor must allow for twenty-four (24) hour access to the Safe Sleep Village Program for participants. Contractor may implement quiet hours when needed, such as to address the following:
  - 43.1. Community agreements
  - 43.2. A desire not to create sleep disturbances if in communal areas
  - 43.3. Good neighbor policies
- 44. Contractor must have, or provide access to, a phone which participants can use within reasonable limits.
- 45. Contractor must return funds and/or possessions held on behalf of a participant within twenty-four (24) hours of the participant’s request.
- 46. On-site storage: Contractor must provide each participant with access to storage for personal possessions which they should have access to during their time in the Safe Sleep Village Program. Minimum storage must be the equivalent of a standard 12” x 12” x 12” locker. Additional storage must be made available as facility capacity allows.
- 47. Types of Sites: Programs can be located at privately owned (e.g., churches or businesses), or publicly owned, lots.
- 48. Hygiene Trailers: If trailers are used, the trailers must include a shower, toilet, and sink combination. Trailers must also include feminine hygiene supplies, soap, towels, toilet paper, toilet seat covers, soap dispensers, shower hooks, and mirrors. Trailers must be air-conditioned. An appropriate number of hygiene trailers must be provided to accommodate participant needs in accordance with the size of the Safe Sleep Village site. At least one shower and toilet in each hygiene trailer must be ADA compliant. **Please refer to LAHSA Facility Standards for more information.**
- 49. Wellness Checks: Contractor is required to conduct wellness checks to ensure that participants who may be medically vulnerable are safe and do not need any assistance. Wellness checks must occur if there are signs of an emergency, staff concerns, or if a person has not been seen within the last 12 hours. When doing a wellness check, the persons must knock various times and announce themselves prior to entry. Ideally, two staff should go together when doing a wellness check and take Narcan with them when doing it.

## **PERSONNEL**

50. Contractors operating 15 or more Safe Sleep Village Program beds must have at least one Master level staff (MSW/MFTI, or similar) to: assist with crisis intervention; oversee case coordination; provide regular clinical supervision to all case management staff; and regular trainings with other operations staff, e.g., security guards. Staff will need to be available 1 day per week and on call as needed. Please refer to LAHSA Program Standards for additional requirements related to program personnel.

## **STAFF TRAININGS**

51. Contractor must abide by the list of required staff trainings outlined in the LAHSA Program Standards and in Appendix II of this document.

52. Contractor must comply with any additional required trainings as directed by LAHSA including but not limited to trainings on working with participants from the American Indian and Alaskan Native (AIAN) community.

<b>APPENDIX I: Safe Sleep Village Program Eligibility</b>
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Population	Individuals	Families						
<b>Population Defined</b>	<p>Adults: Individuals over the age of eighteen (18)</p> <p>Youth: Individuals who are between the age of 18-24, or if under the age of eighteen (18) must be legally emancipated.</p> <ul style="list-style-type: none"> <li>If a member of the household requesting access to the Safe Sleep Program is between the ages of eighteen (18) and twenty-one (21), as a part of the assessment process, Contractor shall complete and submit an Independent Living Program (ILP) Eligibility Verification Form to the Department of Children and Family Services (DCFS) to determine if the youth is eligible for ILP. Participants screened as eligible for ILP shall be encouraged to use ILP housing and resources.</li> </ul>	<ul style="list-style-type: none"> <li>Families are households consisting of one or more minor children (17 or under) in the legal custody of one or two adults who are living together and working cooperatively to care for the children.</li> <li>This includes both 2-parent and 1-parent families, including those with same sex partners, families with intergenerational or extended family members, unmarried couples with children, families that contain adults who are not the biological parents of the children, and other family configurations.</li> </ul>						
<b>Geography</b>	<p>Participants must be current residents of the County of Los Angeles. If the person reports that they slept within the County of Los Angeles, the night before assessment they would be considered a current resident of Los Angeles.</p>							
<b>Participant Identification</b>	<p>Participants are required to have a form of identification on file. If a participant does not have an identification card at the time of the program screening, Contractor must not deny the participant entry to the program and assist the participant in obtaining an identification card.</p> <p><b>Category [A]</b> are acceptable forms of government issued photo identification cards. If the participant does not have any of the acceptable identification cards listed in <b>Category [A]</b> they may provide one acceptable form of alternative photo identification in <b>Category [B]</b> along with one acceptable non-photo form of identification in <b>Category [C]</b> to meet the government issue identification requirement. A copy of a social security card is <b>NOT</b> required for the program.</p> <table border="1" data-bbox="349 1537 1512 1943"> <tr> <td data-bbox="349 1537 675 1676"><b>[Category A]</b> Government issued photo Identification Card (ID)</td><td data-bbox="675 1537 1002 1676"><b>[Category B]</b> Alternative Forms of acceptable photo identification Card (ID)</td><td data-bbox="1002 1537 1512 1676"><b>[Category C]</b> Alternative Forms of acceptable non-photo identification</td></tr> <tr> <td data-bbox="349 1676 675 1943"> <ul style="list-style-type: none"> <li>State-issued DMV ID</li> <li>State-issued DMV Driver's license</li> <li>Passport/ Passport Card</li> <li>US Military ID</li> <li>Immigration Services (USCIS) ID</li> </ul> </td><td data-bbox="675 1676 1002 1943"> <ul style="list-style-type: none"> <li>Student ID</li> <li>Shelter ID</li> <li>Employment ID</li> <li>Bank/ Debit/ Credit Card</li> <li>Transportation Card (METRO)</li> <li>Library Card</li> <li>Gym Membership Card</li> </ul> </td><td data-bbox="1002 1676 1512 1943"> <ul style="list-style-type: none"> <li>Birth certificate</li> <li>Utility Bill</li> <li>Lease/ rental contract</li> <li>School Records</li> <li>Medical / Dental insurance card</li> <li>Debit/ bank card</li> <li>Credit card</li> <li>Legal records/court documentation</li> </ul> </td></tr> </table>		<b>[Category A]</b> Government issued photo Identification Card (ID)	<b>[Category B]</b> Alternative Forms of acceptable photo identification Card (ID)	<b>[Category C]</b> Alternative Forms of acceptable non-photo identification	<ul style="list-style-type: none"> <li>State-issued DMV ID</li> <li>State-issued DMV Driver's license</li> <li>Passport/ Passport Card</li> <li>US Military ID</li> <li>Immigration Services (USCIS) ID</li> </ul>	<ul style="list-style-type: none"> <li>Student ID</li> <li>Shelter ID</li> <li>Employment ID</li> <li>Bank/ Debit/ Credit Card</li> <li>Transportation Card (METRO)</li> <li>Library Card</li> <li>Gym Membership Card</li> </ul>	<ul style="list-style-type: none"> <li>Birth certificate</li> <li>Utility Bill</li> <li>Lease/ rental contract</li> <li>School Records</li> <li>Medical / Dental insurance card</li> <li>Debit/ bank card</li> <li>Credit card</li> <li>Legal records/court documentation</li> </ul>
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<ul style="list-style-type: none"> <li>State-issued DMV ID</li> <li>State-issued DMV Driver's license</li> <li>Passport/ Passport Card</li> <li>US Military ID</li> <li>Immigration Services (USCIS) ID</li> </ul>	<ul style="list-style-type: none"> <li>Student ID</li> <li>Shelter ID</li> <li>Employment ID</li> <li>Bank/ Debit/ Credit Card</li> <li>Transportation Card (METRO)</li> <li>Library Card</li> <li>Gym Membership Card</li> </ul>	<ul style="list-style-type: none"> <li>Birth certificate</li> <li>Utility Bill</li> <li>Lease/ rental contract</li> <li>School Records</li> <li>Medical / Dental insurance card</li> <li>Debit/ bank card</li> <li>Credit card</li> <li>Legal records/court documentation</li> </ul>						

	<ul style="list-style-type: none"> <li>Visa issued by department of state</li> <li>Government issued ID</li> </ul>	<ul style="list-style-type: none"> <li>Warehouse Membership Card</li> </ul>	<ul style="list-style-type: none"> <li>Tax Identification Number/Paperwork (TIN)</li> <li>Social Security card</li> <li>American Automobile Association (AAA) card</li> <li>American Association of Retired Persons (AARP)</li> </ul>	
<b>Homeless Status</b>	<p><b>Eligible Participants:</b> Participants must be determined to be homeless (Category 1) per HUD's Final Rule on "defining Homeless" (24 CFR parts 91, 576 and 578) and (Category 4) per The McKinney-Vento Homeless Assistance Act (42 U.S.C. 11301 et seq.).</p> <p><b>Category 1:</b> Literal Homeless - An individual or family who lacks a fixed, regular, and adequate nighttime residence, which includes one of the following:</p> <ol style="list-style-type: none"> <li>Has primary nighttime residence that is a public or private place not meant for human habitation. Examples include street, park, vehicle, abandoned building, bus/train station, airport, camping ground); or</li> <li>Is living in a publicly or privately-operated shelter designated to provide temporary living arrangements (Emergency shelter, transitional housing, motel/motel paid by government or charitable organization); or</li> <li>Exiting an institution where (s)he has resided for 90 days or less AND were residing in an emergency shelter or place not meant for human habitation immediately before entering institution. Examples of Institutions include a medical hospital, psychiatric hospital, jail, prison, substance abuse treatment facility, and dependent care facility.</li> </ol> <p><b>Category 4:</b> Individuals/families experiencing trauma, or a lack of safety related to, or fleeing or attempting to flee, domestic violence, dating violence, sexual assault, stalking, human trafficking, or other dangerous, traumatic, or life-threatening conditions related to the violence against the individual or a family member in the individual's or family's current housing situation, including where the health and safety of children are jeopardized; and includes all of the following:</p> <ol style="list-style-type: none"> <li>Have no identified residence, resources, or support networks; AND</li> <li>Lack the resources and support networks needed to obtain other permanent housing.</li> </ol> <p><b>Acceptable Verification:</b></p> <ul style="list-style-type: none"> <li>For individuals determined to be homeless (Category 1 or 4), homelessness status must be verified and documented using either a HMIS Client Summary Report or the LA CoC Homeless Certification Form or the LA CoC Imminent Risk of Homelessness Form (Category 2).</li> <li><b>HMIS Client Summary Report:</b> Providers seeking to document a client's homelessness (Category 1 or Category 4) should first run the participant's Client Summary report on HMIS. If the Client Summary Report verifies the individual is actively in a homeless program within seven (7) days, the provider may print the HMIS Client Summary Report and place in the participant's file. If the Client Summary does not show the client met/meets the Category 1 or Category 4 definition within the last seven (7) days, the provider will need to use one of the LAHSA-approved forms to document a client's homelessness at program entry.</li> <li><b>LA CoC Homeless Verification Form (Form 6053)</b> – Use this form to verify homelessness for Categories 1 &amp; 4. <a href="https://www.lahsa.org/documents?id=6053-la-coc-homelessness-verification-form-6053-.pdf">https://www.lahsa.org/documents?id=6053-la-coc-homelessness-verification-form-6053-.pdf</a>.</li> </ul>			

<b>The LA CoC Homeless Certification Forms</b>	<p>Participants who meet HUD Category 1 OR 4 must have their Homeless status documented using the LA CoC Homeless Certification forms and follow prescribed LAHSA Homeless Status documentation standards. Upon being presented with a request for services, Safe Sleep Programs must run the participant's HMISCLNT- 125 Client Summary Report. They must use the information in the report to identify the appropriate LA CoC Homeless Certification Form needed to document the participant's current homelessness and use the information to make necessary referrals.</p> <p>The LA CoC Homeless Certification forms include the following:</p> <ul style="list-style-type: none"> <li>• HMIS Client Summary Report</li> <li>• Observation of Homeless Status Form- Form 2199</li> <li>• Third Party Verification of Homeless Status Form-Form 1444</li> <li>• Self-Certification of Homeless Status Form- Form1448</li> </ul> <p>The LA CoC Homeless Certification Form that should be used will depend on the participant's housing situation the night prior to Program Entry. Participants should not be turned away because they are unable to provide third-party documentation of homelessness. If Safe Sleep Programs with Light Touch Case Management is unable to establish a participant's current homelessness using the LA CoC Homeless Certification Forms at Program Entry, they may complete an Observation of Homeless Status Form- Form 2199 to enroll the participant in the Safe Sleep Program.</p> <p>The LA CoC Homeless Certification form must be uploaded to HMIS in the file upload tab in the program profile.</p>
<b>Population Appropriate CES Triage Tool</b>	<p>The Safe Sleep Village population specific site will determine what appropriate CES Triage Tool to use:</p> <ul style="list-style-type: none"> <li>• CES Survey Packet for Youth (Formerly called Next Step Tool for Youth)</li> <li>• CES Survey Packet for Adults</li> <li>• VI-FSPDAT for Families with Children</li> </ul> <p>Note: Must be completed and entered into HMIS within ten (10) days of program enrollment, if not previously administered.</p>
<b>Ongoing Need</b>	<p>Participant continues to demonstrate they are in need of Safe Sleep Program on a monthly basis. Information on participant's needs must be documented in HMIS via case notes.</p>
<b>Unaccompanied Minors</b>	<p>Unaccompanied Minors are not eligible for enrollment or services in programs that serve adults. An exemption exists for unaccompanied minors who are legally emancipated.</p>
<b>Length of Stay</b>	<p>Safe Sleep Village Programs has no time limit: the total length of stay can and should be individually determined, based on the participant's need. Progress and engagement towards housing goals must be documented and reviewed when a participant is approaching an initial 90-day length of stay and, so long as participant stays in the program, every 90 days after.</p> <p>Contractors must complete LAHSA-approved Interim Housing Extension Form(s) (<a href="https://www.lahsa.org/documents?id=1072-form-1072-bridge-housing-program-90-day-">https://www.lahsa.org/documents?id=1072-form-1072-bridge-housing-program-90-day-</a></p>

	<p>extension-form.pdf) at each of these designated intervals for the participant to maintain eligibility. Ongoing eligibility shall be extended for the following reasons:</p> <ul style="list-style-type: none"> <li>• Participant has been matched to housing but has not been able to identify a suitable unit or is still going through the application process with a permanent housing provider.</li> <li>• Participant meets prioritization criteria established through the LA CoC CES but has not yet been matched to a housing resource.</li> <li>• Participant is currently working towards one or more goals established in the Housing and Services Plan but not yet connected to a housing resource. Contractors are expected to apply a low barrier approach when considering a participant's progress towards their goal(s).</li> </ul> <p>The Interim Housing Extension Form(s) must be stored in the participant's file and documentation must be maintained in case notes within HMIS.</p>
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APPENDIX II: Participant Master File	
Document	Guidance
<b>Participant Identification</b>	<p>Required</p> <p>See <a href="#">Form 4452</a> on the LAHSA Document Library</p>

	See Appendix I for details.
<b>Program Guidelines</b>	Completed upon program intake.  Must be dated and signed by the participant and contractor.
<b>Grievance Procedure Acknowledgement Form</b>	Must be dated and signed by the participant and contractor.  The document should be uploaded to HMIS
<b>LA CoC Homelessness Certification Form</b>	See Appendix I for details.  If HMIS indicates that the participant was staying in a shelter or was engaged by a street outreach worker within the past 7 days Homelessness is verified in HMIS, print the “Client Summary Report” from HMIS
<b>Consent to Share PPI</b>	Upload in HMIS  Use LAHSA-approved form ( <a href="#">Form 1119- Consent to Share Protected Personal Information</a> )
<b>HMIS Intake &amp; Enrollment</b>	Complete in HMIS within twenty-four (24) hours of enrollment  Use LAHSA-approved form ( <a href="#">Form 1125- HMIS Intake and Enrollment</a> )
<b>Income Documents</b>	Current proof of income must be uploaded to HMIS if it has not already been uploaded.  If proof of income is outdated or not currently available, the participant should <a href="#">complete Form 1087 - Self Declaration Of Income/ No Income Form</a> and the form should be uploaded to HMIS.  Income is not required for program entry and participants must not be screened out due to lack of income or employment.
<b>CES Survey Result</b>	Complete in HMIS within fourteen (14) days of program enrollment if there is no record in of a CES Survey in HMIS.  If there is a record that is accurate and does not need to be updated print the “Client Summary Report” from HMIS
<b>Housing and Services Plan</b>	Use LAHSA approved form ( <a href="#">Form 1186- Housing &amp; Services Plan</a> ) and track the date the HSP was completed in HMIS  If a Housing and Services Plan has not been created, the Contractor will work with the participant to develop one and upload to HMIS.
<b>Monthly Update Form</b>	Use LAHSA-approved form ( <a href="#">Form 1082- Monthly Update</a> ) or document using HMIS case notes.  Track service in HMIS
<b>Budget Tool</b>	Optional - use as needed ( <a href="#">Form 1090 - Org Code Honest Budget Template</a> )
<b>Case Notes and Service Notes</b>	All services and referrals provided must be documented in HMIS. Program-level case notes must be entered in HMIS within 24hours of

	<p>each participant engagement. Please see LAHSA's <a href="#">Program Level Case Note video</a> on how to do this.</p> <p>HMIS Report [CLNT-106] Client Service Notes (<i>updated monthly</i>)</p> <p>HMIS Report [CLNT-101] Case Notes (<i>updated monthly</i>)</p> <p>Documentation of the referrals made and the outcome of the warm hand-offs (if applicable)</p>
<b>Housing Documents</b>	<p>Copies of rental applications or other documents showing the effort that was done to get the person into housing (if applicable)</p> <p>Financial Assistance receipts and documentation (if applicable)</p>
<b>Incident Reports, Notice of Noncompliance</b>	<p>If applicable</p> <p>Use LAHSA-approved form (<a href="#">Form 1174 - LAHSA Incident Report</a>)</p>
<b>HMIS Update and Annual Assessment</b>	<p>If applicable</p> <p>See <a href="#">Form 1156</a> on the LAHSA Document Library</p>
<b>Termination Letter</b>	<p>Please see Termination Policy and Procedures outlined below</p>
<b>Exit Summary Form</b>	<p>Use the LAHSA-approved form (<a href="#">Form 1126 - HMIS Exit Form</a> and <a href="#">Form 1081 – Exit Summary</a>) and complete in HMIS when exiting participants from the program.</p> <p>Include the <a href="#">1095 - Reunification Form</a> as appropriate.</p>

#### APPENDIX III: Financial Assistance For all Populations

Financial Assistance	Guidance	Participant's File

<b>Emergency Transportation Assistance</b>	<p>A contractor may provide transportation assistance if it will enhance housing stability. For example, a participant may require assistance with transportation to a job interview or a medical appointment. Because the use of public transportation is less expensive than the use of private vehicles and may be more sustainable in the long-term, grantees should consider providing public transportation tokens or vouchers before offering financial assistance for personal vehicles.</p> <p><b>Public Transportation:</b></p> <p>Public transportation is an eligible cost if it will enhance housing stability.</p> <p>Maximum assistance of four (4) total, one (1) month LA County Metro (or transit agency in Los Angeles County) passes in a two (2) year period. Providers must encourage the use of public transportation as required by the client, including using tokens or replenishing TAP cards with limited funds as needed.</p> <p>Public transportation cards/tokens must be given to the Head of Household only.</p> <p><b>Gas Cards:</b></p> <p>The issuance of Gas Vouchers may be allowable under the conditions listed below:</p> <ol style="list-style-type: none"> <li>1. A gas voucher is allowable as transportation cost only towards needs related to housing stability and is incorporated in the participant's Housing Plan.</li> <li>2. The contractor must make payment directly to a third party.</li> </ol> <p>For example, the contractor may plan with a local gas station by pre-paying for gasoline only, require gas station to view identification of participant prior to approval of any gasoline purchase, and provide grantee with receipts for all gasoline purchases.</p> <p>A maximum of six gas card(s) may be assigned to each head of household every fiscal year based on the amount required to reach their destinations. The maximum allowable amount per gas card is \$50. Activities are not covered or allowed under any other program(s).</p>	<p><b>Public Transportation:</b></p> <ul style="list-style-type: none"> <li>• Receipt of any transportation passes/tokens purchased</li> <li>• Receipt/Proof of vehicle repair</li> <li>• <a href="#">Gift Card Verification Form 3896</a> (form can be found on LAHSA website)</li> <li>• Document service in HMIS</li> </ul> <p><b>Gas Cards:</b></p> <ul style="list-style-type: none"> <li>• <a href="#">Gift Card Verification Form 3896</a> (form may be found on LAHSA's website)</li> <li>• Receipts for Gas Cards.</li> <li>• HMIS- "Provided Services"</li> <li>• HMIS- Must record the date and amount paid</li> <li>• Gas Cards must be given to the Head of Household only</li> <li>• Verification of activity/appointment required</li> </ul>
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<b>General Housing Stability Assistance</b>	<p>There are two classes of Housing Stability Assistance expenses, outlined below, that can be authorized up to a maximum of \$1,500 per participant household.</p> <p>(1) Expenses associated with gaining or keeping employment: Eligible items include but are not limited to uniforms, tools, driver's license fees, license/certification costs required for employment, documentation acquisition fees such as for Social Security Number or birth certificate, document court filing fees, and short-term training leading to employment, where other funding is not available.</p> <p>(2) Expenses necessary for securing appropriate permanent housing: Eligible items include but are not limited to fees for rental applications, background checks, housing inspections, credit score checks, credit counseling, criminal background check, tenancy screening reports, financial literacy class, document court filing fees, and documentation acquisition such as for Social Security Number or birth certificates</p> <p>Payment must be made by the grantee directly to a third party.</p> <p><b>Assistance Limit:</b></p> <p>Items in the two classes add up to a maximum total of \$1,500 per participant household. Items for life and safety add up to a maximum of \$500 within the overall \$1,500 limit.</p>	<ul style="list-style-type: none"> <li>• Receipt</li> <li>• Proof of payment</li> <li>• Document service in HMIS</li> </ul>
<b>IRS Compliance</b>	<p>Contractor must comply with IRS rules reporting payments to independent contractors. <b>See IRS guidance.</b></p> <p><a href="https://www.irs.gov/businesses/small-businesses-self-employed/reporting-payments-to-independent-contractors">https://www.irs.gov/businesses/small-businesses-self-employed/reporting-payments-to-independent-contractors</a></p>	<ul style="list-style-type: none"> <li>• No documentation needed in participant's file, but the agency must be able to show they are complying with IRS requirements.</li> </ul>

**APPENDIX IV: Required Staff Trainings - All trainings can be located on LAHSA's Centralized Training Academy website (<https://lahsa.configio.com/>).**

Required Training	Applicable Staff	Priority Level
HMIS	Case Managers	Immediate
Case Management and Systems Navigation I	All Staff (Entry level)	Immediate
Case Management and Systems Navigation II	Direct service staff (with minimum of 6 months homeless services experience)	Immediate
Case Management and Systems Navigation III	Supervisors Only	Immediate
Problem Solving	Case Managers	Moderate
Boundaries and Ethics	All Staff	Moderate
De-escalation	All Staff	Immediate
Harm Reduction	All Staff	Immediate
Trauma Informed Care 101 & 102	All Staff	Immediate
Motivational Interviewing	Case Managers	Moderate
Quality Standards	Supervisors	Moderate
Mandated Reporter Training	Direct Service Staff	Immediate
Overdose Education and Naloxone Distribution	Direct Service Staff	Immediate
Document Acquisition	Case Managers	Immediate

**Exhibit A-2 (continued)**  
**Statement of Work**  
**Part 2: Performance Targets**  
**(Fiscal Year 2023 – 2024)**  
**(On next page)**

**Agreement Number:** 2021SSLP02

**EGMS ID Number:** AD-SS-SS-001-04

**Contractor Name:** Urban Alchemy

Key Performance Indicator (KPI)						
Department	Component	Population (System)	KPI 1	KPI 2	KPI 3	KPI 4
Safe Sleep	Single Adults	Maintain Occupancy of 85% or higher	15% Exits to PH	95% data accuracy in HMIS		

**Exhibit C-3**  
**Program Budget and Services**  
**(Fiscal Year 2023 – 2024)**  
**(On next page)**

Appendix 1 – Subrecipient Advance, Administration Rate, Indirect Cost Rate Table, is located at <https://www.lahsa.org/documents?id=7131-subrecipient-advance-indirect-administration-rate-exhibit-fy-23-24>, and as may be updated from time to time in EGMS, and is incorporated herein by reference.

**Agreement Number:** 2021SSLP02

**EGMS ID Number:** AD-SS-SS-001-04

**Contractor Name:** Urban Alchemy

# Subaward - 2021-2022: Urban Alchemy - Safe Sleep (Lincoln) - Adults - 6

EGMS ID	Status	Grant ID	Budget Period
AD-SS-SS-001-04	Pending Activation	GT-SS-SS-001	7/1/2023 - 6/30/2024

## Overview

### Subaward Information

Subaward Title 2021-2022: Urban Alchemy - Safe Sleep (Lincoln) - Adults - 6	Subaward Type Continuation	Version 1
Grant Period Start Date 07/01/2021	Grant Period End Date 06/30/2024	Grant Abbreviation SS-SS
Budget Period Start Date 07/01/2023	Budget Period End Date 06/30/2024	Program Code 306
Operational Term Start Date 07/01/2023	Operational Term End Date 06/30/2024	Program Name Safe Sleep
Population Adult - Men & Women	Service Planning Area (SPA) SPA 6	Allocation/Reference ID

### Subrecipient Information

Subrecipient Organization URBAN ALCHEMY	Unique Entity ID (UEI) ENRECZD3KMX7	EIN 825408579
SAM Expiration Date		

02/03/2024

### Sites

Site Name	Address	City	State	Zip Code	Service Planning Area	State Assembly District	Supervisoral District	US Congressional District	LA City Council District	Census Tract
Lincoln Safe Sleeping Vilalge	2320 S. Central Avenue	Los Angeles	CA	90011	SPA 6	59th Assembly District	Second	40th Congressional District	Council District 9	2270.10

### Contacts

Authority/Role	Name	Email	Authorized Organization Representative?
Fiscal Officer; Program Officer;	Michael Anderer	mikea@urban-alchemy.us	true
Authorized Signatory; Executive Director; Chief Finance Officer;	Lena Miller	lenam@urban-alchemy.us	false
Chief Program Officer;	Bayron Wilson	bayronw@urban-alchemy.us	false
Chief Finance Officer;	Kate Hultin-Schott	kate.hultin@amllp.com	false
Fiscal Officer;	Emily Trujillo	emily.trujillo@armaninollp.com	false
Data (e.g. HMIS); Program Officer;	Kenon Joseph	kenonj@urban-alchemy.us	false
Fiscal Officer; Program Officer;	Ian Clark-Johnson	ianc@urban-alchemy.us	false

Fiscal Officer;	Kristin Hergert	kristin.hergert@armaninolp.com	false
Chief Finance Officer;	Kristen Grownay	kristengrownay@urban-alchemy.us	false

### Special Issues, Conditions, and Waivers

**EGMS ID:** TC-16083

**Title:** FY 23-24 Allocation Methodology

**Source:** Amendment

**Type:** Program - Special Issue and Condition

**Created Date:** 06/24/2023 12:20 AM

**Effective From:** 07/01/2023

**Effective To:** 06/30/2024

### Budget

#### Budget Period Details

Awarded Amount \$3,065,250.00	Budgeted Amount \$3,065,250.00	Subaward Budget \$3,065,250.00
Plan to bill indirect costs to LAHSA? Yes	Negotiated Indirect Cost Rate	Budget Redirection Threshold 10.00%
Estimated Program Income \$0.00		

## Funding Accounts

**EGMS ID:** FA-NGO-351

**Title:** City Roadmap County FY23-24 Operations for Safe Sleep Village

**Grantor:** HCID

**Funding Source:** County SCF

**Strategy:**

**Program:** Safe Sleep

**SPA:**

**Population:**

**CFDA Number:**

**FAIN:**

**Subrecipient Admin Rate %:** 10

**Subrecipient Indirect Cost Rate %:** 0

**Start Date:** 07/01/2023

**End Date:** 06/30/2024

**Allowable Advance %:** 17.00

**Subaward Allocation:** \$3,065,250.00

**Change in Funding:** \$0.00

**Total Budgeted Amount:** \$3,065,250.00

**Status:** Funded

## Subaward Budget

Budget Category	Budget Category	Funding Account EGMS ID	Direct Costs
: -- HCID/ County SCF/ / Exp.6/30/2024	33 : Supportive Services/Financial Services (Non-Personnel)	FA-NGO-351	\$0.00
: -- HCID/ County SCF/ / Exp.6/30/2024	34 : Supportive Services/Financial Services (Personnel)	FA-NGO-351	\$0.00
: -- HCID/ County SCF/ / Exp.6/30/2024	35 : Financial Assistance	FA-NGO-351	\$0.00
: -- HCID/ County SCF/ / Exp.6/30/2024	37 : Operating Costs (Non-Personnel)	FA-NGO-351	\$787,578.00
: -- HCID/ County SCF/ / Exp.6/30/2024	38 : Operating Costs (Personnel)	FA-NGO-351	\$1,999,084.00
: -- HCID/ County SCF/ / Exp.6/30/2024	40 : Admin	FA-NGO-351	\$278,588.00
Grand Total			\$3,065,250.00

## Performance

### Related Key Performance Indicators (KPIs)

EGMS ID	Title	Measure	Unit of Measurement	Target	Actual
KPI-0094	Contracted to Serve	Minimum number of people to be served Refer to HMIS Report: [GNRL-220] Program Details Report, Look at Exits spreadsheet.	Number (#)	125	0
KPI-0045	Average Nightly Bed Utilization Rate	Refer HMIS Report: [HSNG-104] Monthly Housing Report; [HSNG-108] Housing Census	Percentage (%)	85	0
KPI-0096	Exits to Successful Housing	"Successful Housing Destination" includes: o Exits to any Permanent Housing Destination o Exit to temporary stays with family or friends "Successful Housing Destination" for purposes of Safe	Percentage	15	0

	Destination Safe Sleep	Sleep program this also includes: o Exits to any Interim Housing Destination Refer HMIS Report: [GNRL-220] Program Details Report` Look at the Exits spreadsheet to see the destinations	(%)		
KPI-0087	Ensure HMIS Data Accuracy	HMIS Report: [HUDX-225] - HMIS Data Quality Report	Percentage (%)	95	0

## Attachments

### Forms: Complete Forms using the Edit icon

Form Name	Required	Applies To
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### Supporting Documents Checklist

Description	Required	Applies To	Status	Template Link	Subrecipient Document Link
Advance Certification Form	Mandatory	Advance Request	Active	<a href="#">View</a>	Not Applicable
Certificate of Occupancy	Optional	Award	Active	<a href="#">Not Applicable</a>	<a href="#">Not Applicable</a>
Scope of Required Services - SRS (for reference)	Optional	Award	Active	<a href="#">View</a>	Not Applicable
Scope of Required Services - SRS (for reference)	Optional	Reimbursement Request	Active	<a href="#">View</a>	Not Applicable
Evidence of Required Insurance, including Form CG 20 26, naming LAHSA and Funders as additional insured	Mandatory	Award	Active	<a href="#">Not Applicable</a>	<a href="#">Not Applicable</a>
Evidence of Workers Compensation	Mandatory	Award	Active	<a href="#">Not Applicable</a>	<a href="#">Not Applicable</a>

Insurance Requirements (for reference)	Optional	Award	Active	View	Not Applicable
Program Income Report (required if program generated income)	Optional	Budget Period Closeout	Active	Not Applicable	Not Applicable
Cost Verification Forms (required if funded by ESG)	Optional	Reimbursement Request	Active	View	Not Applicable
Supporting Financial Documentation (e.g. Trial Balance, P&L, GL, etc.)	Mandatory	Reimbursement Request	Active	Not Applicable	Not Applicable
Asset Purchase Authorization Form	Optional	Reimbursement Request	Active	View	Not Applicable
Reimbursement Certification Form	Optional	Reimbursement Request	Active	View	Not Applicable

**Files: Add additional files at your discretion**

Title	Classification	File Extension	Description	Created Date

## **Subrecipient Advance, Indirect, Administration Rate Exhibit**

Funding Source	Funding Agency	Funding Type	Eligible Advance % (based on 12-month grant term)	Indirect Cost Rate (%)	Administrative Rate (%)
<b>Federal</b>	Housing and Urban Development (HUD)	Continuum of Care Program (CoC)	N/A	Up to 10% of Total Direct Costs upon approval	Up to 10% of Total Direct Costs
<b>State</b>	The Business, Consumer Services and Housing Agency (BCSH)	CoC Homeless Housing Assistance Programs (HHAP)	17%		Up to 12% of Total Direct Costs
	California Department of Housing and Community Development (HCD)	California Emergency Solutions and Housing (CESH)	17%		Up to 12% of Total Direct Costs
<b>County</b>	County of Los Angeles - CEO	Measure H Homeless Initiative (HI) Strategies	25%		Up to 12% of awarded
		General Funds (GF) (i.e., YRP, HSF, CES, WSP)	17%		Up to 10% of awarded
	Supervisory District Funds (SD Funds)	As dictated by Supervisory District	As dictated by Supervisory District		Up to 10% of awarded
	Department of Public Social Services (DPSS)	Housing Support Program (HSP) Non-WtW	17%	Up to 10% of Modified Total Direct Costs	
		CalWORKs Single Allocation (SA) WtW	17%	Up to 10% of Modified Total Direct Costs	
	Department of Workforce Development, Aging and Community Services (WDACS)	Adult Protective Services-Home Safe Program	N/A	Up to 12% of Modified Total Direct Costs	
<b>City</b>	Los Angeles Housing Department (LAHD)	Emergency Solutions Grant (ESG) Federal and State	Actual cash need upon approval	Up to 10% of Modified Total Direct Costs	
		CARES Act Emergency Solutions Grant (ESG-CV) Federal and State	17%	Up to 10% of Modified Total Direct Costs	
		County Service Commitment Funds (County SCF)	17%		Up to 10% of awarded
		General Funds (GF)	17%		Up to 10% of awarded
		Homeless Housing Assistance Program (HHAP)	17%		Up to 10% of awarded
		Community Development Block Grant (CDBG)	17%	Up to 10% of Modified Total Direct Costs	
		Emergency Solutions Grant (ESG)	17%	Up to 10% of Modified Total Direct Costs	
		CARES Act Emergency Solutions Grant (ESG-CV)	17%	Up to 10% of Modified Total Direct Costs	

### **Objective**

It is the policy of the Los Angeles Homeless Services Authority (LAHSA) to provide advances to LAHSA subrecipients only when essential to meet the needs of service provision outlined in their contract or during an established emergency.

Advance appropriations become available for obligation upon the signing of the contract between LAHSA and the subrecipient, otherwise known as contract execution. Subrecipients may secure advance payment for all eligible contracts, unless directed by the funder. To be eligible for an advance, the subrecipient must be in program and fiscal compliance as outlined in the contract. The advance payment can only be used for costs associated with the contract receiving the advance.

Each funder has specific guidelines that dictate the eligible amount available to LAHSA. As a Joint Power Authority, LAHSA has the power to distribute the maximum eligible advance amount as deemed necessary to the subrecipient in accordance with the funder guidelines.

Advance payments to subrecipients must be limited to the minimum amounts needed in accordance with the actual and immediate cash requirements of the subrecipient to perform the approved work of the program. The maximum eligible advance amount is detailed in Exhibit C of all LAHSA subrecipient contracts.

### **How to Request an Advance**

The subrecipient may submit an advance payment request via the subaward budget tab of the Enterprise Grants Management System (EGMS). Supporting documents must be submitted to demonstrate the subrecipient's net worth, operating income, available cash, and current assets compared to current liabilities to be approved.

### **Recoup Schedule and Process**

All advances shall be recouped in six equal payments between January and June of the active Fiscal Year unless otherwise stated by the funder. Advance payments must be repaid in full prior to the close of the Fiscal Year in which the advance payment is received.

**Methodology:** outstanding advance amount / 6 = monthly recoup amount.

If the subrecipient does not include the appropriate recoup amount in any of the applicable monthly reimbursement requests, the assigned Grant Specialist will manually adjust or add the recoup amount in the monthly reimbursement request within the EGMS. If the assigned Grant Specialist does not recoup for any month and reason, that amount will rollover and be divided equally between the remaining months within the recoup period.

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Final Audit Report

2023-06-25

Created:	2023-06-24
By:	Laud Ankrah (lankrah@lahsa.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAAlyLBflVsAR_aG1ef-kasr5laJXg3vK2C

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