

Transition Aged Youth

Subject Matter Expert Recommendation Letter Submission Form & Requirements

Process & Deadline:

The Subject Matter Expert Panel (the “Panel”) will review all proposals seeking to be considered for the 2018 Transition Aged Youth set-aside in the Permanent Supportive Housing Pool. The Panel will issue a primary and secondary recommendation letter for developments that best serve the needs of the target population, further state policy objectives to support transition aged youth, and evidence strong experience and capacity in serving special populations.

Applications seeking a priority letter must submit the following form to QAP@ohiohome.org no later than 5:00 p.m. EST on November 15, 2017. The Panel reserves the right to seek more information from any applicant. The Panel may condition receipt of a priority letter on modifications to the development plan including revisions to the building design, service provision, or reserve minimums. Recipients of the recommendation letters will be notified by December 15, 2017.

Submit the following documents:

- a) Conditional commitment of rental subsidy or other preliminary proof of rental subsidy
- b) Development Team page of the AHFA
- c) Supportive Services Plan (see the QAP for requirements)
- d) Conditional service provider commitments
- e) Up to five additional pages of narrative responses may be submitted (*optional*)

Answer the following questions:

Target Population and Services

Provide a detailed description of the anticipated target population.

Describe how you will receive resident referrals, including what interaction you will have with the Coordinated Entry System.

Describe the services and supports that will be provided. Describe any on-site educational or life-skills programming.

Will the residents have access to 24-hour case management services? If yes, describe.

Describe the role of the Youth Board/Tenant Association or other ways in which resident youth will be involved in the development and operation of the residence.

How will the development incorporate or use trained peer supporters?

How will the development incorporate or use the principals of trauma informed care?

Experience

Describe the **developer's** experience serving the above target population.

Describe the **owner's** experience serving the above target population.

Describe the **management company's** experience serving the above target population. How will the management company interact with service providers?

Describe the **service provider(s)**' experience serving the above target population. In similar developments, what percentage of residents utilize this provider's services?

Describe the service provider's knowledge of and relationship to other services that are appropriate for the population served. How will appropriate referrals be identified and coordinated?

Design and Location

Will residents have 24-hour access to a free, working telephone? _____

Where will case management office-hours be publically posted? _____

Will the facility have a paging system? _____

Will the facility have a community kitchen? _____

Describe what design elements will be utilized to reduce or eliminate institutional qualities.

Describe the safety precautions that will be implemented. Include detailed information on use of security cameras, door security (ex. “strickers”), check-in desks and guest protocols, number of residential access points/entry ways.

What cooking and kitchen appliances will be available? What fire prevention tools will be used (ex. “FireStop”)? What bedbug and pest prevention techniques will be used?

Describe the community room(s). Include descriptions of any educational spaces and/or counseling spaces to be offered.

What unit furnishings will be provided? What storage space will be available to residents?

Where and how will carpeting be utilized in the development?

Describe the building's location including any nearby amenities like transit access, educational opportunities, job access, and parks and recreation areas.

Describe any exercise room, recreational, or gym space that will be on-site.

Describe parking options, including the number of parking spaces and handicapped parking spaces.

Financing

Complete the following chart describing the unit configuration and affordability. Enter more cells on a separate sheet if necessary.

#Units	# Bed-Rooms	# Bath	SQFT	Affordable to What % AMGI	Occupied by What % AMGI	Tenant-Paid Rent and Utilities	Rental Subsidy Amount	Subsidy Source

Amount of Replacement Reserves: _____
 Replacement Reserves Per Unit per Year: _____

Amount of Operating Reserves: _____
 Operating Reserves Per Unit per Year: _____

Annual Amount of Service Budget: _____
 Service Budget Per Unit per Year: _____

Did the developer, operator, or owner provide an operating deficit guarantee? Explain why or why not.

Describe any ongoing operating assistance the development will receive other than rental subsidies.

Provide any other information you believe will assist the Panel in making an informed decision.