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**CITY OF SPOKANE  
COVID-19 Emergency Housing and Utility Assistance Request for Proposals**

**Project Application**

**Description:** The purpose of these funds is to assist households unable to pay rent and rental arrears due to the COVID-19 pandemic.

**PROPOSAL SUBMITTED BY:**

**ORGANIZATION Better Health Together**

**POINT OF CONTACT Hadley Morrow**

**PHONE 5099540831**

**E-MAIL hadley@betterhealthtogether.org**

**SIGNATURE** \_\_\_\_\_\_\_\_

***Signature here will confirm compliance with all instructions, terms, and conditions of Funding Notice.***

Applicants that wish to be considered for funding under this opportunity must respond to the following questions in writing and meet all conditions and requirements as stated in the City of Spokane Notice of Funding Availability (NOFA). Submission of this application does not guarantee that a proposal will be approved.

**General Instructions**

Please complete a single narrative application for the proposal. If a proposal represents a partnership between multiple agencies, please list the name of the lead agency in the Proposal Summary boxes and detail additional partners below. If you are partnering with another agency on this project, be sure to include this information in the Proposal Summary.

Please be concise but complete in your responses. Applications must be no greater than 3 pages in length (beginning from the Narrative Questions section), with minimum margins of ½ inch and font size no smaller than 11 point. Question text may be removed to meet page limits, however applicants must include section headings and question numbers.

**Proposal Summary**

**Organization** **Leadership Contact Information**

Contact Person: Alison Poulsen

Mailing Address: 1209 W 1st Ave Spokane

Telephone: 509.499.0482

E-mail:alison@betterhealthtogether.org

**Organization Project Contact Information**

Contact Person: hadley morrow

Mailing Address: 1209 W 1st Ave Spokane WA 99201

Telephone: 509.954.0831

E-mail:hadley@betterhealthtogether.org

Submission Date: April 22, 2021

Project Title: [COVID-19 Housing Assistance for Impacted Communities]

Applicant Organization / Lead Agency Name: [Better Health Together]

Dollar Amount Requested from City of Spokane: [$2,000,000]

Partner Agency Name(s) (If Applicable): [Click or tap here to enter text.]

Dollar Amount Requested from City of Spokane: [Click or tap here to enter text.]

**Narrative Questions**

1. Better Health Together (BHT) is applying to serve as fiscal sponsor for $2 million of Covid rental and utility assistance funding in partnership with community-based organizations led by and serving Black, Indigenous and people of color (BIPOC). Using participatory budgeting to design guiding principles and fund allocation, BHT will subcontract with up to 15 community based organizations who are currently coordinating COVID services by and for BIPOC communities to staff outreach and engagement and submit applications for direct assistance. Drawing on experience from our Pathways Hub and Covid Care Connect work, BHT will serve as the receiver, quality control, and approver of the requests for assistance, payout, and requesting reimbursement from the city. This project will reduce the risk of BIPOC becoming homeless due to COVID-19 and increase access for BIPOC to housing assistance and brings organizations closest to the need more voice and control in the solution making.
2. Since Jan 2021 BHT has been offering housing and utility assistance to people in isolation due to a positive COVID test as part of a [Department of Health Covid Care Connect grant](http://www.betterhealthtogether.org/bold-solutions-content/bht-serving-as-regional-hub-for-care-connect-washington). Through this program, BHT has processed 125 bills that include rent, mortgage, and utilities. BHT has paid out more $54,570.46 in housing assistance to date. This process is managed through the Care Coordination Systems platform to log and process requests.
3. BHT has been awarded and administered numerous public grants since our inception in 2013. These are detailed in the Pre-Award Risk Assessment. Most relevant to this opportunity is our administration of the 1115 Medicaid waiver with WA Health Care Authority. We serve as backbone to the Accountable Community of Health (ACH) for a six County region, including Spokane, and are charged by to administer up to $60 million across six years to support radical transformation in the Medicaid delivery system. As a demonstration project, we are required to document and share progress in submit semi-annual reports and are subject to external evaluation. A recent study of BHT’s work published in the American Journal of Public Health “The ACH model is a promising approach to aligning health and social service systems for population health improvement. Evidence shows that ACH organizations can serve as trusted conveners able to facilitate interorganizational relationships across sectors.”[[1]](#footnote-2)
4. To demonstrate and document that people requesting need are eligible, we will require the following documentation from care coordinators in the application for assistance:

* Housing Assistance Request Form with basic personal, demographic information, type and amount of assistance requested, and reason.
* Income Verification and/or Proof of unemployment/change in income or expenses (in alignment with WA State Employment Security Department guidance on Pandemic Unemployment)
* One of the following as proof of need:
  + Rental agreement or housing verification form that the landlord attests that the amount the tenant pays monthly that shows name and address of client, with W-9 from landlord
  + Statements from mortgage companies if applying for mortgage assistance, with W9 from lender
  + Utility bill from Avista, City, or other company that shows amount due, account number and address

BHT will provide a standard training and template to all partner agencies on application pieces required. Partner orgs will be responsible for completing application with clients and submitting to BHT. BHT will review for quality and ensure eligibility is met. If incomplete, we will return it to the organization with clear feedback on what is required to complete application. If approved, staff will submit finalized request to BHT finance team to issue payment.

1. BHT is currently partnering with BIPOC lead and serving organizations in response to the increased and disproportionate pressure the COVID-19 crisis has put on communities already impacted by systemic racism in two projects:

**Community Resiliency Fund Anti-Racism RFP:** The BHT Board allocated $1.5 million to an RFP prioritizing applications from BIPOC lead and serving organizations addressing or preventing the impacts of racism as a public health crisis. BHT is actively funding and partnering with [23 organizations](http://www.betterhealthtogether.org/bold-solutions-content/crf-anti-racism-rfp-decisions?rq=racism) through this effort including. BHT intentionally designed the RFP process to be primarily based on panel interviews and face to face discussion rather than all written application to build relationship and deeper understanding of the needs and work happening in community.

**Covid-19 Vaccine Education Trusted Messenger Project:** Released April 2021, BHT is offering funding and in-kind communications support to BIPOC lead organizations who are supporting vaccine education and outreach in BIPOC communities. This project is supporting upcoming vaccine clinics and outreach events hosted by MLK Center, Raiz of Planned Parenthood, and Spectrum Center of Spokane which all provide an opportunity to staff these organizations to assess housing needs while engaging community members.

These organizations are already leading in COVID response and outreach. They are trusted leaders within the BIPOC community. Our BIPOC communities are facing the greatest level of barriers to accessing supportive services. If awarded, BHT will convene this network of BIPOC lead organizations (with invitations extended to City of Spokane staff) in a [participatory budgeting](https://www.participatorybudgeting.org/) session so that BIPOC organizations who are closest to the problems will have voice to set the guiding principles and priorities for the fund. At this point, partners will determine the amount of dollars set aside for direct assistance, and what funding will go to partners to offset staff, engagement, and outreach. Partner organizations will be required to submit a budget to BHT detailing their request for dollars to support their staffing, engagement, and equipment costs to allocate staff to source applications. We will collaborate to design a transparent process for receiving applications and administering dollars that meets the minimum quality standards of documentation needed to process requests.

As an organization dedicated to radically improving health, BHT holds the position that systemic racism is a public health crisis. ([*read our full position statement here*](file:////Users/hadleymorrow/Downloads/BHT%20is%20committed%20to%20building%20an%20anti-racist%20community%20and%20opposing%20oppression%20in%20all%20forms%20–%20not%20only%20to%20stand%20against%20systemic%20oppression,%20but%20to%20invest%20in%20radical%20change%20and%20steward%20the%20process%20today%20that%20will%20lead%20us%20to%20a%20better%20future.)*,* and attached.) BHT is committed to building an anti-racist community and opposing oppression in all forms – not only to stand against systemic oppression, but to invest in radical change and steward the process today that will lead us to a better future. We humbly recognize that if awarded these funds, we participate in replicating a pattern of a white-lead organization gatekeeping funds most needed by communities of color. We will disrupt this pattern by not taking any admin fee and donating fiscal sponsorship and associated staff time in kind, seeing this as a vital opportunity to support an urgent community need and demonstrate an opportunity to address an equity gap created by the current limitations of large public funding opportunities in their accessibility to BIPOC communities.

1. This project addresses impediments 3, 6, and 10 by specifically prioritizes funding organizations who are trusted amongst communities of color to conduct outreach and engagement to resource assistance. This will reduce the risk of homelessness for BIPOC due to COVID-19 housing instability, and recognizes that intentional strategy, not one size fits all approach, is needed to reach people facing greater factors of instability. The language impediment was identified as a barrier by stakeholders, especially Spanish and Marshallese. Many of the BIPOC organization employ multi-lingual staff, and we expect partners will allocate funding during participatory budgeting session to pay for partners to translate application and outreach materials and offer translation services as needed.
2. Better Health Together uses the technology platform Care Coordination Systems, to assess and maintain documentation related to care coordination programs. We have used this system both in our Pathways Hub Jail Transitions care coordination work in partnership with Spokane County, and with our Covid Care Connect work with DOH. The system allows for HIPPA compliant tracking, maintenance, and QI/QA reporting of client records for application submitted by partners.
3. BHT will invite City of Spokane staff to be active participants and collaborators throughout the design process to ensure program development meets requirements. We see an exciting opportunity to learn from each other and build relationship through this collaborative process.

Using the above described process, BHT would package all approved assistance requests and required documentation received from partners and send to City of Spokane with request for reimbursement on a monthly basis. City of Spokane staff will be invited to attend the participatory budgeting session to give input on process and requirements. We would expect the City of Spokane to be active partner in co-designing a regular reporting structure between BHT and City of Spokane to ensure transparency and needs are met.

**Budget Narrative**

1. **Admin:** $0 – BHT will cover our administration costs via an allocation from our Medicaid 1115 Waiver funds.

**Indirect Costs:** N/A

**Salaries and Benefits:** N/A

**Supplies:** N/A

**Equipment:** N/A

**Direct Client Assistance:** N/A

**Other: $2,000,000**

We believe BHT adds the most value as a neutral fiscal sponsor and convener, and that partnering BIPOC lead organizations will best be able to determine how to allocate funds to adequately staff and support their efforts and maximize amount of dollars going to direct assistance. We would like to work collaboratively with partners and include City of Spokane in the discussions about funding breakdown. As described above, a deliverable of the Participatory Budgeting session will be to determine how much money is held for direct client assistance in the form of payout for assistance, and what amount is needed for capacity costs for coordinating agencies. Once decided collaboratively, partners will submit a more detailed budget highlighting their asks for staffing and capacity cost, which will generate expectations for finalized MOU. A more detailed budget breakdown would be shared with the City of Spokane at this time.

1. N/A

1. Bultema S, Morrow H, Wenzl S. Accountable Communities of Health, Health and Social Service Systems Alignment, and Population Health: Eastern Washington State, 2017-2019. Am J Public Health. 2020 Jul;110(S2):S235-S241. doi: 10.2105/AJPH.2020.305773. PMID: 32663087; PMCID: PMC7362704. [↑](#footnote-ref-2)