

County of Orange, California

American Rescue Plan Act Recovery Plan

State and Local Fiscal Recovery Funds

2021 Report





County of Orange, California

2021 Recovery Plan

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GENERAL OVERVIEW

Executive Summary

The County of Orange (County) is dedicated to long-term strategic financial planning to ensure its ability to respond to economic changes and unanticipated events in a way that allows the County to preserve the range and quality of services provided to the community.

The County was allocated approximately \$617 million in Coronavirus State and Local Fiscal Recovery Fund (SLFRF). The funds will be distributed in two equal tranches, the first tranche of \$308.4 million was received on May 21, 2021. The second tranche of \$308.4 million is anticipated to be received no sooner than 12 months from the first payment, or no earlier than May 21, 2022.

The primary focus of the County is to strategically allocate the use of the SLFRF funds and to reflect on the need for prudent and sustainable planning in the use of these funds, while promoting a response to the pandemic and economic recovery. With the 2021 Strategic Financial Plan (SFP), the County plans to identify its intended use of the SLFRF.

The SFP is a financial component of the County's five-year strategic planning process that provides short and long-term operational linkage between the planning process and the annual budget process. The County uses the SFP to forecast and assess future financial conditions and to identify areas that may require special consideration or action over the next five years, such as the County's recovery from the COVID-19 pandemic. The SFP accomplishes this by facilitating an intensive review of operational and SLFRF financial resources designed to recognize and target areas requiring short- and long-term attention in the County's recovery plans. The SFP is a tool that the Orange County Board of Supervisors, County departments, and the County Executive Office use to make strategic decisions regarding SLFRF resource allocations with a focus on the optimal use of those resources consistent with the County's overall mission and goals that support the County's recovery from COVID-19 pandemic.

In its recovery plans, the County is committed to continue promoting the safety, welfare, and health of all constituents, including its employees and families. The County plans to recover its revenue losses due to the COVID-19 pandemic in order to stabilize the County's budget and continue providing high quality services, continue sustaining countywide operations and initiatives, strengthening support for vital public services, restoring staff resources impacted by the pandemic, and addressing public health and other economic challenges.

Furthermore, the County recognizes the need for continued vaccination efforts, continued community testing and contact tracing and most importantly pandemic preparedness to



combat future public health emergencies. As such, the County is exploring options for using the SLFRF funds for public health facility expansion costs.

Other projects currently being explored for individuals involved in the criminal justice system will target those that are recently released from jail or a juvenile correctional facility, are unemployed, and have limited means of support. The focus will be to continue to stabilize the health and mental health of the individuals to be able to reintegrate into the community and obtain self-sufficiency and not further impact the County's systems of care.

As of July 31, 2021, approximately \$13 million in SLFRF funds were spent on County departments' general COVID-19 public health response. In addition, the Orange County Board of Supervisors approved two projects to address negative economic impacts in the community; however, these projects are still in the planning and inception phase:

- 1. Meal Gap Programming Project: Provides meal programs for seniors, persons with disabilities and other individuals experiencing food insecurity due to the COVID-19 pandemic.
- 2. Economic Support to Arts-Related Small Business and Non-profits Project: Allocates grants designed to foster economic recovery.

Planned allocation of SLFRF funds will be revisited with each SFP and funds reallocated as priorities change.

Uses of Funds

Under the Revenue Replacement category, for the provision of Government Services, County departments' immediate and future general COVID-19 public health response includes, but is not limited to, expenditures such as payroll costs for staff supporting the County's COVID-19 public health response; testing and tracing; personal protective equipment (PPE); sanitation supplies; disinfection and sanitation of public areas and offices; maintaining and improving telework capabilities for employees; and public employees paid sick and paid family and medical leave to enable compliance with COVID-19 public health precautions; public health facility costs; extension of the nutrition gap program; and providing administrative support for the Affordable Housing, HomeKey and Emergency Housing Voucher programs.

In addition, the County is committed to making further investments in health and mental health services for individuals in-custody or reintegrating into the community. It is estimated that approximately 1 in 3 individuals have some form of a mental illness. During COVID-19, with the public health restrictions in place, linking individuals to post-custody services became a challenge due to the reduced capacity limits or availability of services. Projects are being explored that would allow for individuals released from jail to have



assistance reintegrating into the community with a focus on addressing underlying health and mental health issues and a residential component to allow for self-isolation, if needed. Similar projects are also being explored to address the transitional aged youth (TAY) population released from juvenile correctional facilities.

Other federal recovery funds received by the County are for the Emergency Rental Assistance (ERA) and the Emergency Housing Vouchers (EHV) programs. These funds are especially important for post-pandemic recovery and the County is focused on quickly reviewing ERA program applications to confirm eligibility and provide households with financial assistance to ensure housing stability amidst the COVID-19 pandemic and support adherence to public health guidance. For households that experienced a financial hardship related to COVID-19, the ERA program provides financial assistance for rental arrears and/or overdue utility bills to promote economic recovery and household stability. Additionally, the ERA program provides financial assistance for small landlords and independent property owners who have not received their monthly rental payments as tenants have experienced financial hardships due to COVID-19.

The County's ERA program supports households that have an Orange County Area Median Income (AMI)¹ of 50% or less and/or households that have one or more individuals within the household that are unemployed as of the date of the application for assistance and have not been employed for the 90-day period proceeding such date. The County's ERA program was designed to assist communities disproportionately impacted by COVID-19. This has resulted in approximately 90% of ERA financial assistance being provided to households that have an AMI of 50% or less.

Number of Per	sons in Household:	1	2	3	4	5	6	7	8
	Extremely Low	26950	30800	34650	38450	41550	44650	47700	50800
Orange County Area Median Income: \$103,000	Very Low Income	44850	51250	57650	64050	69200	74300	79450	84550
	Low Income	71750	82000	92250	102450	110650	118850	127050	135250
	Median Income	72100	82400	92700	103000	111250	119500	127700	135950
	Moderate Income	86500	98900	111250	123600	133500	143400	153250	163150

¹ The chart below details the Orange County Area Median Income (AMI). Very Low Income: an AMI of 50% or less

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In addition, the issuance of EHV will support 557 households in securing long-term stable housing that would provide shelter and space to better follow the public health guidance related to COVID-19. The EHV funding and related supportive services will expedite the housing search process, which will assist households in transitioning from the streets, congregate shelter or overcrowded housing situations, thus reducing the risk of exposure to COVID-19. The EHV will provide a rental subsidy for households unable to afford market rate housing and will ensure that their income can be utilized for other essential needs. The EHV will alleviate financial hardship for many households that are experiencing homelessness or at risk of homelessness. These EHV will also provide landlords and property owners a steady revenue for rental units that they may not receive otherwise.



Overall, the EHV program provides an opportunity for housing stability through the provision of financial assistance. Individuals and families that are experiencing homelessness or at risk of homelessness have been the most challenged in following and adhering to COVID-19 public health guidance. The lack of housing and the housing instability has limited these households' ability to follow safer at home guidelines, practice recommended precautions, quarantine and/or isolate as appropriate when sick or symptomatic with COVID-19. The EHV and related supportive services will better equip these individuals and families with following COVID-19 guidance and adopt other health and wellness practices to improve their overall wellbeing.

Promoting Equitable Outcomes

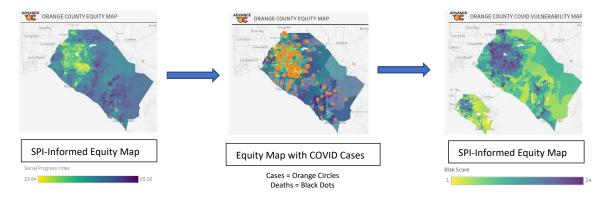
The Orange County Health Care Agency (HCA) collaborated with Advance OC, a nonprofit organization dedicated to using innovation and strategic philanthropy to address inequities in Orange County communities, to develop the Orange County Equity Map (OCEM) using Coronavirus Aid, Relief, and Economic Security (CARES) Act funding. The map provides detailed insight into which Orange County neighborhoods and communities are experiencing health and wellness disparity. The map comprises composite scores for each neighborhood called the Social Progress Index (SPI), a worldwide metric which captures population outcome data in three broad dimensions: Basic Human Needs, Foundations of Well-being, and Opportunity. The index relies on over 50 social indicators that reflect a wide range of environment variables contributing to a neighborhood's social progress, such as supermarket access, broadband internet subscribers, eviction rates, diabetes prevalence and voter turnout.

The OCEM platform can be used by anyone in Orange County at no cost to measure, track and map inequities in the community with neighborhood precision, including identifying the root causes of inequities, understanding socioeconomic determinants, and informing strategies to advance the health and wellbeing of county residents.

To test and explore this new analytic capability, HCA has been utilizing the OCEM platform to inform its COVID-19 responses, including testing, vaccine allocation and distribution, and other mitigation strategies. HCA has thus been able to identify disproportionately impacted communities at the zip code and census tract level and, in turn, promote COVID-19 responses at the neighborhood level, as can be seen in the mobile vaccination clinics and targeted outreach efforts throughout the county. With use of the map, the County can enhance understanding of an individual and the community so that it can serve both, and research a patient's neighborhood to have better knowledge of challenges in that community.

The OCEM platform will also provide a roadmap for private and public partnerships to fund initiatives that seek collaborative approaches to addressing complex social

circumstances at the root of inequities in health and wellbeing. It is a tool that brings HCA one step closer to achieving its mission: in partnership with the community, deliver sustainable and responsive services that promote population health and equity.



¹ The <u>Social Progress Index (SPI)</u> is an innovative way to define the success of our community. This SPI measures the health and wellness of our community using 50+ social indicators across 12 different components. Some of the components the County is measuring are elements that have not been traditionally captured. For example, Health Care Agency is cataloging environmental data, public safety data, measures of inclusiveness, among others. <u>https://www.advanceoc.com/making-change#social-index</u>

The COVID-19 pandemic has revealed communities in Orange County who are more vulnerable to infection, hospitalization, and mortality due to pre-existing disparities. These circumstances have compounded during the pandemic among racial and ethnic minority groups as well as other underserved populations. To address these disparities and achieve an equitable community response to COVID-19, HCA has been using and will continue to use several approaches to ensure equity in communities experiencing the greatest COVID-19 impacts:

- Data to support distribution and allocation of COVID-19 responses and resources.
- Access to COVID-19 support services.
- Community outreach and communication and partnering with community-based organizations.
- Strengthen the County's foundation for reducing disparities and building equity.

The County, in partnership with several mutual aid agencies, launched Operation Independence. This partnership fostered the establishment of large regional vaccination point-of-dispensing sites (PODs) to efficiently administer vaccines and reach the County's most vulnerable populations. On July 6, 2021, the County achieved a major milestone with 70% of residents 18 and older having received at least one dose of the COVID-19 vaccine. Additionally, HCA continues to deploy mobile vaccination clinics with regional public and private partnerships to expand access across the County.

Vaccination efforts remain ongoing as of July 31, 2021. Approximately 73% of the eligible population of Orange County has been fully vaccinated, with over 2 million residents having received at least one dose of the vaccine. Although vaccination activities at Super POD sites were concluded in June, county-wide vaccination activities continue to occur



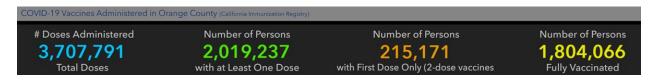
at mobile clinics, small travel teams for homebound individuals, and pop-up clinics to strategically reach equity identified areas and vulnerable populations. Multiple locations are staffed and advertised daily. Priority is given to locations that are in: four identified equity zip codes, areas with high test COVID-19 positivity rate, areas with low vaccination rates, as well as employer sites requesting access for their employees.

The County recently added a tool to the program, which now includes free ride requests for bringing patients to locations where they can be vaccinated. Scheduling and dispatching of rides are accomplished through a website tool and is also available through a widely published County call center number.

The County has a robust outreach and engagement program, including marketing and communication, to ensure all residents have access to vaccinations. The outreach is executed through collaboration with multiple community-based organizations (CBOs) focused on equity strategies. The County continuously coordinates these efforts with CBOs representative and aligned with the mission of serving specific demographics.

Finally, the County has contracted with third party providers to administer vaccines at various pop-up and mobile clinics overseen and arranged by the County. The County will serve as the Payor of Last Resort and expenses are supported with various funding sources.

Vaccine Dashboard (arcgis.com)



https://covid19.ca.gov/vaccination-progress-data/



County	Los Angeles	11,653,791
(All)	 San Diego 	4.085,719
	Orange	3,782,166
	Santa Clara	2,754,066
	Riverside	2,290,097
	Alameda	2,197,940
	San Bernardino	1,905,695
127-	Sacramento	1,640,032
YERD	Contra Costa	1,535,860
(ARE)	San Francisco	1,254,226
HAX2	San Mateo	1,073,862
Her-	A Ventura	995,268
Ki	Fresno	919,340
th	San Joaquin	719,364
- 101	Kern	692,426
	Sonoma	644,585
	Stanislaus	503,129
	Santa Barbara	503,062
	Monterey	490,991

Doses Administered by County of Residence

The ERA program is currently focused on reaching universal levels of services and ensuring tenants with rental arrears and/or overdue utility bills are provided financial assistance to support economic recovery and housing stability.

The County's EHV program intends to serve individuals and families experiencing homelessness who are prioritized through the Coordinated Entry System (CES). The CES prioritization schema includes length of homelessness, vulnerability, and service needs. Through the CES, the County is working with access points and homeless service providers to identify eligible households who have not been provided a housing resource that meets their needs. Additionally, the CES serves a number of subpopulations to ensure equitable access, including individuals, families, veterans, transitional aged youth, survivors of domestic violence, reentry subpopulation, and also those who are currently in homeless service programs and would benefit from EHVs.

The Orange County Housing Authority (OCHA) has worked to issue a notice to all households on the current housing choice voucher waiting list to provide awareness on



the EHV program and include information on access, if eligible. To support outreach efforts, the County worked with 2-1-1 Orange County to ensure the latest information is shared with households seeking housing resources and/or are unstably housed and would benefit from the program. Additionally, the County, acting as the Collaborative Applicant for the Orange County Continuum of Care, has been including regular updates and information regarding the EHV program and related available supportive services. Information has been provided through written communication via listservs, an application that distributes messages to subscribers on an electronic mailing list, as well as presentations at regularly scheduled meetings and subsequent information sessions.

The OCHA has implemented all appropriate waivers and flexibilities related to the EHVs to ensure that administrative requirements do not impact access across groups. At this time, there is not enough available data or information to determine if there are differences in levels of access.

Furthermore, California's Governor released the Master Plan for Aging (MPA), which includes five goals to prepare California for a projected increase in the number of residents aged 60 years and older. An intergovernmental team consisting of Orange County Community Resources, Social Services Agency, HCA, and County Executive Office are engaging in a joint effort to improve the quality-of-service delivery to this population. This effort will begin with an engagement strategy focused on hearing from the County's aging population regarding services most important to them, and the best form of access. The MPA, coupled with the overwhelming impact of the pandemic on this vulnerable population, creates a unique opportunity to design an equitable and inclusive countywide plan informed by county residents. In addition, goals of the MPA were designed to be responsive to shifting social and economic realities including developing strategies that are responsive to underserved demographics and disproportionate impacts that many have experienced.

Community Engagement

Toward the end of August/beginning of September, the County will issue a press release announcing the method for public input regarding the use of SLFRF funds. The press release will provide the public with information on the website for submitting feedback to the County and will announce the date of a public workshop for members of the community to be educated on the County's SFP process and to ask questions and provide feedback on use of the ARPA funds. In addition, the public has the opportunity of providing input during the public comments segment of the Board of Supervisors meetings that occur every other week.

The County recognizes that groups in which English is not the primary language often are underserved and not adequately outreached to receive the available resources. As such, the County worked with its Director of Population Health and Equity and CBOs, including



those in underserved communities and those that provide specialized services in various languages, for various outreach efforts.

In collaboration with CBOs, the County conducted targeted outreach in underserved communities and provided ERA communication and materials in all threshold languages (English, Spanish, Vietnamese, Farsi, Korean and simplified Chinese). Furthermore, the County partnered with 2-1-1 Orange County to operate an information and referral line to support interested applicants in completing the ERA application in the language of their choice over the phone and/or through an online portal.

Additionally, the County issued a press release and participated in several interviews to provide information on the ERA program. ERA program materials are distributed widely through various listservs, including all city managers in Orange County, California. The County also worked with CBOs to provide ERA program information to renter households and landlords. 2-1-1 Orange County provided ERA program information to organizations listed within its helpline database as part of the outreach effort.

The ERA program was designed in partnership with three-contracted providers who are leaders in the provision of homelessness prevention services. The County developed a simple ERA application, collecting only needed information to pre-screen and allow for quick follow-up with the applicant, when needed. Providers worked with the applicant over email, telephone or in-person appointments which were conducted in the applicant's preferred language to further review eligibility requirements and related documentation. The County aimed to collect only the minimum documentation requirements that would support proper fiscal management practices and confirm there was no duplication of assistance.

The EHV program was designed in coordination and collaboration with the Orange County Continuum of Care, its boards and interested stakeholders. The EHV program receives referrals of eligible individuals and families from CES. The CES is comprised of approximately 40 access points and homeless service provides that regularly engage and serve individuals and families experiencing homelessness or those at-risk of homelessness. The County, including the OCHA, held numerous information sessions and public meetings regarding the EHV program implementation providing an opportunity for questions and feedback around the intended program. The County has worked with 2-1-1 Orange County to ensure they have up to date information that can be shared with households seeking housing resources and/or are unstably housed and would benefit from the EHV program.



Labor Practices

This section is not applicable for the County; however, the County complies with all Federal and State wage requirements and is committed to equal employment opportunity in the workplace.

Use of Evidence

As of July 31, 2021, there are no SLFRF funds being used for evidence-based interventions; however, the County consistently measures outcomes for programs and services. Per a Board Directive issued on May 23, 2017, performance metrics are required in all Agenda Staff Reports pertaining to service contracts. Beginning with the July 11, 2017 Board date, all service contract renewals will include performance metrics. As such, for new service contracts, if there are performance requirements tied to the funding source (i.e., federal or state grants), performance will be measured according to those metrics.

Furthermore, the County is currently working to evaluate available ERA and EHV data to determine if there are differences in levels of access to benefits and services across groups. The County designed the ERA and EHV programs to be as accessible as possible and limited the administrative requirements.

Table of Expenses by Expenditure Category

Categ	jory	Cumulative expenditures to date (\$)	Amount spent since last Recovery Plan
1	Expenditure Category: Public Health		
1.1	COVID-19 Vaccination		
1.2	COVID-19 Testing		
1.3	COVID-19 Contact Tracing		
1.4	Prevention in Congregate Settings (Nursing Homes, Prisons/Jails, Dense Work Sites, Schools, etc.)		
1.5	Personal Protective Equipment		
1.6	Medical Expenses (including Alternative Care Facilities)		
1.7	Capital Investments or Physical Plant Changes to Public Facilities that respond to the COVID-19 public health emergency		



Categ	jory	Cumulative expenditures to date (\$)	Amount spent since last Recovery Plan	
1.8	Other COVID-19 Public Health Expenses (including Communications, Enforcement, Isolation/Quarantine)			
1.9	Payroll Costs for Public Health, Safety, and Other Public Sector Staff Responding to COVID- 19			
1.10	Mental Health Services			
1.11	Substance Use Services			
1.12	Other Public Health Services			
2	Expenditure Category: Negative Economic Impacts			
2.1	Household Assistance: Food Programs	247,573	247,573	
2.2	Household Assistance: Rent, Mortgage, and Utility Aid			
2.3	Household Assistance: Cash Transfers			
2.4	Household Assistance: Internet Access Programs			
2.5	Household Assistance: Eviction Prevention			
2.6	Unemployment Benefits or Cash Assistance to Unemployed Workers			
2.7	Job Training Assistance (e.g., Sectoral job- training, Subsidized Employment, Employment Supports or Incentives)			
2.8	Contributions to UI Trust Funds*			
2.9	Small Business Economic Assistance (General)	0	0	
2.10	Aid to nonprofit organizations			
2.11	Aid to Tourism, Travel, or Hospitality			
2.12	Aid to Other Impacted Industries			
2.13	Other Economic Support			
2.14	Rehiring Public Sector Staff			
3	Expenditure Category: Services to Disproportionately Impacted Communities			
3.1	Education Assistance: Early Learning			
3.2	Education Assistance: Aid to High-Poverty Districts			
3.3	Education Assistance: Academic Services			
3.4	Education Assistance: Social, Emotional, and Mental Health Services			
3.5	Education Assistance: Other			
3.6	Healthy Childhood Environments: Child Care			
3.7	Healthy Childhood Environments: Home Visiting			



2021 Recovery Plan Performance Report

Categ	jory	Cumulative expenditures to date (\$)	Amount spent since last Recovery Plan	
3.8	Healthy Childhood Environments: Services to Foster Youth or Families Involved in Child Welfare System			
3.9.	Healthy Childhood Environments: Other			
3.10	Housing Support: Affordable Housing			
3.11	Housing Support: Services for Unhoused persons			
3.12	Housing Support: Other Housing Assistance			
3.13	Social Determinants of Health: Other			
3.14	Social Determinants of Health: Community Health Workers or Benefits Navigators			
3.15	Social Determinants of Health: Lead Remediation			
3.16	Social Determinants of Health: Community Violence Interventions			
4	Expenditure Category: Premium Pay			
4.1	Public Sector Employees			
4.2	Private Sector: Grants to other employers			
5	Expenditure Category: Infrastructure			
5.1	Clean Water: Centralized wastewater treatment			
5.2	Clean Water: Centralized wastewater collection and conveyance			
5.3	Clean Water: Decentralized wastewater			
5.4	Clean Water: Combined sewer overflows			
5.5	Clean Water: Other sewer infrastructure			
5.6	Clean Water: Stormwater			
5.7	Clean Water: Energy conservation			
5.8	Clean Water: Water conservation			
5.9	Clean Water: Nonpoint source			
5.10	Drinking water: Treatment			
5.11	Drinking water: Transmission & distribution			
5.12	Drinking water: Transmission & distribution: lead remediation			
5.13	Drinking water: Source			
5.14	Drinking water: Storage			
5.15	Drinking water: Other water infrastructure			
5.16	Broadband: "Last Mile" projects			
5.17	Broadband: Other projects			
6	Expenditure Category: Revenue Replacement			
6.1	Provision of Government Services	13,048,615	13,048,615	



Categ	jory	Cumulative expenditures to date (\$)	Amount spent since last Recovery Plan
7	Administrative and Other		
7.1	Administrative Expenses		
7.2	Evaluation and data analysis		
7.3	Transfers to Other Units of Government		
7.4	Transfers to Nonentitlement Units (States and Territories only)		

Project Inventory

Project [001]: Meal Gap Programming

Funding amount: \$10,000,000

<u>Project Expenditure Category</u>: Category number 2.1, Household Assistance: Food Programs

<u>Project overview:</u> Meal gap programming for seniors, persons with disabilities and other individuals experiencing food insecurity as a result of COVID-19 pandemic. Seniors, disabled residents and other at-risk individuals are discouraged from or fearful of leaving their homes and consequently suffer from food insecurity as a result of COVID-19. Establishing this meal program will protect the health and well-being of these vulnerable populations. The approximate timeline of this project is from SLFRF award through June 30, 2022; however, it may change depending on the County's needs.

<u>Use of Evidence</u>: The goals of this project are establishing meal programming for seniors, persons with disabilities and other individuals experiencing food insecurity as a result of COVID-19 pandemic to protect the health and well-being of these vulnerable populations. Currently, for this project, the County has not allocated any funds specifically toward evidence-based interventions. The meal gap programing project is approximately 2% complete, therefore there are no performance indicators and programmatic data available as of July 31, 2021. Data will be included in the next report.

Project [002]: Economic Support to Arts-Related Small Businesses and Non-Profits

Funding amount: \$5,000,000

<u>Project Expenditure Category</u>: Category number 2.9, Small Business Economic Assistance (General)



<u>Project overview</u>: Economic support to arts-related small businesses and non-profits within Orange County. The economic support initiatives include but are not limited to arts-related small business and non-profits recovery programs, arts-related small business and non-profits grants, which may be distributed through a third-party administrator. This project is based on equal distribution of the \$5 million to each of the five supervisorial districts within Orange County, which may direct the application of the economic recovery funding using all or a portion of the funding for arts-related small businesses or non-profits, as allowable under SLFRF. To reflect the specific needs in each supervisorial district, application and eligibility criteria may vary by district. The approximate timeline of this project is from SLFRF award through June 30, 2022; however, it may change depending on the County's needs.

<u>Use of Evidence</u>: The goals of this project are to assist arts-related small businesses and non-profits in their recovery plans, mitigate the financial hardship due to COVID-19 pandemic and to help stimulate economic growth across the county. Currently, for this project, the County has not allocated any funds specifically toward evidence-based interventions. The economic support project is in the planning phase, therefore there are no performance indicators and programmatic data available as of July 31, 2021. Data will be included in the next report.

Performance Report

The meal gap programming and economic support projects listed above do not have performance reports available as these are still in the planning and inception phase.

As of July 31, 2021, the County received a total of 13,022 ERA applications and approximately 72% have been processed. Of those, a total of 4,259 applications have resulted in financial assistance being approved for payment. The remaining 5,161 applications were determined ineligible or participants are no longer interested in receiving assistance. As of this date, a total of \$27,627,409.50 in ERA financial assistance for rental arrears and overdue utility bills and home energy bills had been paid to Orange County households.

The County, acting as the Collaborative Applicant for the Orange County Continuum of Care, worked with the four Public Housing Authorities (PHA) in Orange County to establish Memorandums of Understanding (MOUs) for the EHV program. All four MOUs were signed and executed prior to the July 31, 2021 deadline provided by the U.S. Department of Housing and Urban Development (HUD). The MOUs detail EHV program milestones to be met by the PHA and the CES. These milestones are detailed below:

- CES will identify 50% of referrals within 7 weeks of the effective date of the MOU.
- CES will identify 100% of referrals within 14 weeks of the effective date of the MOU.
- CES will identify replacement referrals within 14 days for any returned matches.



- PHA will complete EHV processing within 45 days of initial contact with the participant as referred by CES.
- PHA will return ineligible referrals to CES within 3 business days of determining ineligibility.

HCA established EHV Supportive Service and Housing Search Assistance Contracts with five non-profit organizations to support 557 households receiving EHV from the OCHA. These contracts include performance objectives aimed at quickly securing rental housing and leasing up the voucher as well as promoting long-term housing stability. The performance objectives are detailed below:

- At minimum, 50% of the total number of expected participants will secure permanent rental housing within 90 days of EHV issuance.
- At minimum, 95% of the total number of expected participants will secure permanent rental housing within 120 days of EHV issuance.
- At minimum, 95% of the total number of expected participants will receive housing support assistance and housing stabilization services.
- At minimum, 95% of the total number of expected participants will remain in permanent housing at program exit.
- Of participants exiting to a permanent housing destination, 95% will maintain housing for more than six months from the date of their program exit.

Ineligible Activities: Tax Offset Provision (States and territories only)

This section is not applicable for the County of Orange.