Set forth below is an overview of the Permanent Supportive Housing program ("PSH"). Capitalized terms used but not defined in this Schedule 1 shall have the meaning set forth in Schedule 2 (Project Evaluation) and Appendix A to the Agreement. The following two sections entitled "Overview of Intervention Model" and "Components of the Intervention Model" are being provided for background and informational purposes only.

Overview of Intervention Model

According to the 2018 Point-in-Time count in Austin/Travis County, there were 2,147 individuals experiencing homelessness in Austin/Travis County on a given night in January. Of those experiencing homelessness, 1,014 individuals were sleeping outdoors (unsheltered) and 498 met the definition of chronic homelessness.

It is well documented that permanent supportive housing – which offers affordable housing and linkages to support services for physical and mental health, substance use and other issues – can reduce long-term spending on emergency services such as shelter, emergency hospital services, police, court and jail services, while improving outcomes for chronically homeless individuals. However, despite mounting evidence of effectiveness, local governments often have trouble securing the necessary investments for permanent supportive housing.

This program aims to address the challenges that individuals experiencing chronic homelessness experience in obtaining and sustaining stable housing, including mental health and substance use issues, while also reducing avoidable criminal justice and emergency health systems utilization.

ECHO, a nonprofit organization that plans, develops, and implements systemic, community-wide strategies to end homelessness in Austin and Travis County, Texas will facilitate implementation of the PSH program to provide up to 250 permanent supportive housing units and wrap-around support services for individuals experiencing chronic homelessness. ECHO will enter into agreements with local service providers to provide outreach, navigation, and Modified Assertive Community Treatment ("Modified ACT") to individuals enrolled in the PSH program.

Components of the Intervention Model

What follows is a general description of the PSH program, and how it is intended to be implemented pursuant to this Project.

All housing must meet the definition of "Supportive Housing" which means:

1. Housing that is affordable, meaning the tenant household ideally pays no more than 30% of their income toward rent, such housing can be located in a single site or scattered in multiple locations in the community
2. Housing that provides tenant households with a lease or sublease identical to non-supportive housing — with no limits on length of tenancy, as long as lease terms and conditions are met
3. Housing that proactively engages residents in a flexible and comprehensive array of supportive services, without requiring participation in services as a condition of ongoing tenancy. This includes onsite services and/or community-based, intensive, team-based case management models
4. Informed property or landlord management; property management maintains a balance between ensuring the effective operation and management of the physical facility and fostering tenants' housing stability and independence
5. Housing that supports tenants in connecting with community-based resources and activities, interacting with diverse individuals including those without disabilities, and building strong social support networks

Additionally, the PSH program will encompass the following four supporting elements:

1. *Housing First* -- The goal of "Housing First" is to immediately house people who are homeless, regardless of other factors or conditions that may need to be addressed for any individual, Such housing is flexible and independent so that people can be housed easily and stay housed. Housing First can be contrasted with a continuum of housing "readiness," which typically subordinates access to permanent housing to other requirements. Housing First is a low-barrier entrance process that supports moving persons quickly into housing of their choice from settings such as the streets or shelters, without preconditions of treatment acceptance or compliance.
2. *Harm Reduction* -- A model of substance-use intervention that focuses on helping people better manage substance use and reduce the harmful consequences to themselves and others, including actively working to prevent evictions. In conjunction with Housing First and supportive housing, using the "harm reduction" philosophy means that individuals do not have to be sober to be eligible to enter housing and are not evicted solely for a failure to maintain sobriety.
3. *Person-Centered Care* -- An approach in which engagement in services is voluntary, customized and comprehensive, reflecting the individual needs of tenants, and tenants have meaningful opportunities to engage in the community.
4. *Assertive outreach and engagement* -- Programs conduct assertive outreach to engage and recruit members of the target population. Programs will engage target population members and offer them the opportunity to obtain affordable housing along with health and social services.

Application of PSH for the AT Home Project

The Project anticipates providing Modified ACT to individuals housed in up to 250 PSH units in Austin and Travis County. Individuals will be served via two Project Teams with a maximum client-to-staff ratio of 1:15.

ECHO will facilitate the delivery of the PSH program and will enter into agreements with local Service Providers to deliver the outreach, navigation, and Modified ACT services. ECHO will be responsible for generating the list of PFS Eligible individuals, prioritizing those eligible based on their historical utilization, and allocating PFS Eligible individuals to each of the local service providers.

Service Provider(s) will provide individuals with a variety of services as required by each individual, designed to help (i) address barriers to housing stability, (ii) manage mental illness and other disabling conditions, (iii) reduce interaction with the criminal justice system, and (iv) improve health outcomes. At the outset of each individual's engagement in the Project, Service Provider(s) will work with the individual to develop a Treatment Plan.

Such services will include, as appropriate for each individual as determined by Service Provider(s), intensive case management, crisis intervention, substance use counseling, mental health treatment, peer support, skills building, connection to primary care, and various other services identified as necessary in each individual's Treatment Plan.

All services will be voluntary and driven by individual choice. The delivery of all services will be guided by the principles of cultural competence, recovery, and resiliency with an emphasis on building Program Participant strengths and resources in the community, with family, and with their peer/social network.

1. **Eligibility Criteria**

    Individuals that meet all of the following criteria ("Eligibility Criteria") will be identified as PFS Eligible.

    Inclusionary criteria (at time of referral):

    (a)   Minimum of one (1) Jail Day OR Jail Booking in the last year; AND,

    (b)   Minimum of two (2) Jail Bookings in the last three years; AND,

    (c)   Minimum of one (1) Inpatient Day OR 4 Emergency Department Visits in the past 18 months; AND,

    (d)   Demonstrate a Pattern of Homelessness; AND,

    (e)   A completed housing screen to determine that the individual is still in need of supportive housing.

Up to twenty-four (24) Pilot Program Participants will also be considered PFS Eligible, regardless of whether they meet all of the PFS Eligibility Criteria (see Schedule 2 (Project Evaluation) for evaluation detail).

2. **Identification of PFS Eligible Program Participants and Introduction to PSH Services**

(a) ECHO will be responsible for generating a list of PFS Eligible individuals based on the Eligibility Criteria according to the following procedures:

(i) On an annual basis, at minimum, ECHO will leverage data extracts from the Integrated Care Collaboration ("ICC") and Travis County Sherriff Office ("TSCO") to identify those homeless individuals who meet the Eligibility Criteria. Specifically, ECHO will:

(A) Generate a list of potentially eligible individuals from the Homelessness Management Information System (HMIS);

(B) Submit the names of all potentially eligible individuals to the ICC with a data request for historical healthcare utilization;

(C) Submit the names of all potentially eligible individuals to TCSO with a data request for historical criminal justice utilization;

(D) Consolidate historical healthcare utilization and historical criminal justice utilization data at the individual level;

(E) Segment historical healthcare utilization and historical criminal justice utilization data by timing (e.g., within the last 6 mos., 12 mos., etc.);

(F) Match and merge data sets and apply aforementioned Eligibility Criteria.

(ii) ECHO will then be responsible for prioritizing the list of PFS Eligible individuals based on their historical utilization of healthcare and criminal justice systems. The top [100] individuals on the prioritized list of PFS Eligible individuals will then be allocated to Service Providers for outreach.

(iii) Prior to the Service Commencement Date, the Evaluator will be responsible for reviewing and validating the calculations used to generate the list of PFS Eligible individuals.

(b) Upon receipt of a list of PFS Eligible individuals from ECHO, Service Provider(s) will engage the PFS Eligible individual to participate in the Project as a Program Participant.

(c) Individuals who are determined not to be PFS Eligible and who are not Pilot Program Participants will be excluded from the Project.

3.   **Enrollment of Program Participants**

(a)   Service Provider(s) will engage referred PFS Eligible individuals for a minimum of ninety (90) consecutive days before stopping engagement and requesting a new referral.

(b)   PFS Eligible individuals will be considered enrolled ("Enrolled") in the Project on the start date of their first PSH lease ("PSH Entry Date"), and will thereafter be considered a "Program Participant".

(c)   PFS Pilot Program Participants will be considered a Program Participant effective as of the Service Commencement Date.

(d)   Enrollment will be rolling between [Month 1] up to and including [Month 42] of the Project (the "Enrollment Period").

4.   **Service Delivery Period; Ramp-Up Period; Measurement Period**

The service delivery period referenced below ("Service Delivery Period") will include a ramp-up period ("Ramp-Up Period") for hiring and training of personnel and a rolling 18-month measurement period ("Measurement Period") for all Program Participants Enrolled up to and including [Month 36]. Program Participants Enrolled from [Month 37] to and including [Month 42] will be considered part of a ("Late Enrollment Cohort") and will not be subject to the 18-month measurement period (see Schedule 2 (Project Evaluation) for evaluation detail).

(a)   The Service Delivery Period will begin on [Month 1] and end on [Month 60] for all Program Participants.

(b)   The Ramp-Up Period will begin on [Month 1] and end on [Month 3].

(c)   The Measurement Period for a Program Participant will begin on the date that a Program Participant is Enrolled in the Project and end 18 months from such date, unless the Program Participant is in the Late Enrollment Cohort.

5.   **Ramp-Up Schedule and Aggregate Enrollment**

Aggregate Enrollment across the Project is expected to be as follows:

Project Year / Quarter	Cumulative Aggregate Enrollment
Year 1 (May 2019-April 2020)	
Q1	32 (includes 24 pilot participants)
Q2	50

Q3	72
Q4	96
Year 2 (May 2020-April 2021)	
Q1	120
Q2	144
Q3	163
Q4	184
Year 3 (May 2021-April 2022)	
Q1	208
Q2	230
Q3	239
Q4	250

(a)   Aggregate Enrollment is expected to be at least [80%] of Month 12. If aggregate Enrollment is less than [80%] by Month 12 ECHO must elevate the issue for attention by the Management Committee.

(b)   Aggregate Enrollment across the Project is expected to be at least [85%] of target by Month 18. If aggregate Enrollment is less than [85%] by Month 18, ECHO must elevate the issue for attention by the Management Committee and the Management Committee shall propose corrective action up to and including termination of the Agreement as set forth in Section 8.1(k) of the Agreement. For the purposes of this Section 5(b), aggregate Enrollment shall include all Program Participants Enrolled to date, whether or not such Program Participant is currently being served as part of a Project Team's active caseload.

6.   **Cohorts**

Program Participants will be divided into three (3) cohorts ("Cohorts") for the purposes of measuring Outcomes.

(a)   Cohort 1 is defined as all Program Participants Enrolled from [Month 1] up to and including [Month 12].

(b)   Cohort 2 is defined as all Program Participants Enrolled from [Month 13] up to and including [Month 24].

(c)   Cohort 3 is defined as all Program Participants Enrolled from [Month 25] up to and including [Month 36].

7.   **Discharge**

It is possible that there will be Program Participants who, after Enrollment, decide to disengage from PSH, and therefore the Project. Service Provider(s) will attempt to re-engage Program Participants for up to ninety (90) calendar days before they are formally discharged from the Project. Program Participants who are discharged from the Project after Enrollment will be included in the Outcome calculations as outlined in Schedule 3 (Calculation of Outcome Payments). Program Participants who are discharged from the Project prior to completing Enrollment, and who do not re-engage in the Project, will not be included in the calculation of Outcomes.

8.   Ongoing data collection

ECHO is responsible for furnishing the following:

Report Name	Frequency	Distribution
Validated List of PFS Eligible Individuals *(de-identified)*	Annually, beginning in Month 1 of the Project	Management Committee
Baseline Healthcare and Criminal Justice Utilization for each Program Participant *(de-identified)*	Quarterly, on or before the fifth Business Day after quarter end.	Management Committee
Enrollment and Housing Placement Data *(de-identified)*	Monthly, on or before the fifth Business Day after each month.	Management Committee
Housing Stability rate for each Program Participant *(de-identified)*	Quarterly, on or before the fifth Business Day after quarter end.	Management Committee
Post-Enrollment Healthcare and Criminal Justice Utilization Data for each Program Participant *(de-identified)*	Semi-annually, on or before the fifth Business Day after each six-month period.	Management Committee