



# APPLICATION (RFA)

2025

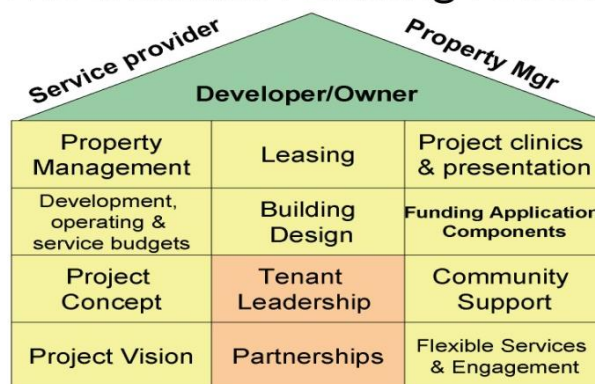
## Washington Supportive Housing Institute

Washington Health Care Authority (WA HCA) and the Corporation for Supportive Housing (CSH) are excited to announce the first Washington Supportive Housing Institute (Institute). The 2025 Washington Supportive Housing Institute will help supportive housing partners learn how to navigate the complex process of developing housing with support services and reduce the time it takes to obtain funding for supportive housing by improving the planning, development, and initial project implementation process. The Institute will focus on building the capacity of new and experienced housing developers and service providers to serve populations experiencing chronic homelessness throughout Washington.

CSH Supportive Housing Institutes have a strong record of accomplishment across the country, with graduates experiencing an over 80% success rate in bringing projects into operation. The Institute will provide training and technical assistance to both new and experienced development teams. Teams receive intensive training over 5-months including individualized technical assistance and support to assist in planning quality projects. CSH subject matter experts from across the State and the country, in partnership with local expertise, will provide insight on coordinating services and property management, building a race equity culture, financing, funding and trauma-informed design.

**The Washington Supportive Housing Institute is made possible by WA HCA. Thanks to the support of WA HCA and their commitment to supportive housing, the Institute is offered free of charge to participants.**

### The Institute Building Blocks



## About CSH

CSH has been the national leader in supportive housing for 30 years. We have worked in 47 states to help create stable, permanent homes for individuals and families. This housing has transformed the lives of over 200,000 people who once lived in abject poverty, on our streets, and/or in institutional settings. A nonprofit Community Development Financial Institution (CDFI), CSH has earned a reputation as a highly effective, financially stable organization with strong partnerships across government, community organizations, foundations, and financial institutions. Our loans and grants totaling over \$600 million have been instrumental in developing supportive housing in every corner of the country. Through our resources and knowledge, CSH is advancing innovative solutions that use housing as a platform for services to improve lives, maximize public resources, build healthy communities and break the cycle of intergenerational poverty. Visit us at [csh.org](http://csh.org) to learn more.

## About Housing First

Supportive housing combines affordable housing with supportive services that help people who face the most complex challenges live with stability, autonomy, and dignity. Supportive housing is a specific intervention designed for individuals and/or families who are homeless, at risk of being homeless or institutionalized, and experiencing multiple barriers to independent housing. These vulnerable individuals would likely not succeed in housing without access to critical support services and would not partake in services without a stable living environment.

- The housing in supportive housing is affordable, permanent, and independent. The services are comprehensive, flexible, tenant-driven, voluntary, and housing-based.
- This “Housing First” approach aims to quickly and successfully connect individuals and families experiencing homelessness to permanent housing without preconditions or barriers to entry, such as sobriety, treatment or service participation requirements.
- Diverse system partnerships (e.g. health, housing, justice) are key to delivering the comprehensive services in supportive housing.

## About WA HCA and Permanent Supportive Housing (PSH)

- The Washington Health Care Authority (HCA) is committed to providing equitable, high-quality health care through innovative health policies and purchasing strategies. HCA’s Division of Behavioral Health and Recovery (DBHR) joined HCA in July 2018, following legislation to integrate physical and behavioral health staff and authority at HCA to better serve Washington Apple Health (Medicaid) clients. Programs within this division include recovery support services, mental health and substance use disorder treatment, substance use disorder prevention, medication-assisted treatment, behavioral health crisis services, and more.
- HCA has been a leader in promoting health equity through the Medicaid Transformation Waiver (1115). This waiver includes a variety of programs involved with supportive housing, targeting many populations including individuals with a history of justice involvement, transitional age youth, individuals with a substance use disorder (SUD) and physical or behavioral health concerns, and more. One of these programs is Foundational Community Supports. The 1115 waiver mandates that evidence-based practices are used. These evidence-based practices are Individual Placements and Supports (IPS) and SAMHSA’s Principles of Permanent Supportive Housing (PSH). HCA’s FCS team provides training and technical assistance and programmatic oversight to Washington’s provider network on these evidence-based practices and all other areas relating to supportive housing and supported employment in an effort to ensure that all current, future and prospective FCS enrollees receive high quality services and supports.

## Institute Benefits

Upon completion, participants in the Institute will have:

- A detailed, individualized supportive housing plan that can be used to apply for funding from multiple sources.
- Improved skills to create and operate existing supportive housing and develop new projects serving people who experience multiple barriers to housing;
- New and improved skills to operate 100% and integrated supportive housing;
- A strong, effective development, property management, and service team that leverages the strengths of each team member;
- A powerful network of peers and experts to assist in project development and to trouble-shoot problems; and,
- Post Institute technical assistance from CSH.

## Institute Supportive Practices

In the course of the Institute, teams will work to develop individual supportive housing project plans. CSH supports teams to complete the following during their time in the Institute:

- [Quality Supportive Housing Standards](#);
- [Supportive Housing Quality Toolkit](#);
- Community support plan;
- Detailed services plan for focus populations and service delivery for populations experiencing chronic homelessness;
- Management plan;
- Memorandum of Understanding among members of the supportive housing development team, outlining the roles and responsibilities of each partner;
- Operating policies and protocols between services provider and property manager;
- Preliminary project proposal and budgets; and
- Outreach, engagement and Tenant selection plans.

## Focus Population

Different highly impacted populations exist within the experience of chronic homelessness that benefit from supportive housing; including but not limited to:

- Aging Adults
- Child Welfare Involved Families
- Individuals with Physical Disabilities

- Individuals with Intellectual and Development Disabilities
- Individuals with Substance Use Disorder
- Justice Involved individuals
- Transition Age Youth (ages ~14-24)

## Eligible Teams

Teams will be composed of up to six members. Eligible teams must include the following roles: a housing development sponsor/owner partner, a supportive services provider and a property management partner. Teams must include a member with lived expertise, like a Peer Support Specialist. PSH projects that integrate lived expertise representation show a commitment to tenant-led Housing First. Each team must designate a team leader. Some or all of these team members may be employed by the same organization. If two different team members represent different team roles, both must participate (e.g. a Property Manager and a Service Provider may work for the same agency, but they both must participate to have required role representation). Each will bring their own perspective to an Institute team.

Additional team members may include but are not limited to: healthcare/CCO partner, Continuum of Care (CoC) representative, trauma-informed architect, or other local partners relevant to project planning and implementation. Organizations looking to become housing developers are welcomed and encouraged. Applicants may apply without identifying all their team members but must agree to work with the WA HCA and CSH to identify these partners by the start of the Institute.

To be eligible for the Institute, teams must be able to attend all required training sessions offered (see training timeline pg. 7); and, commit to taking the team's project concept from idea to completion with the goal of having operational, quality supportive housing units.

## Eligible Supportive Housing Projects

This Request for Applications (RFA) is the method in which PSH development and operational Teams will be selected to participate in the Institute. All PSH projects are eligible to apply. Culturally specific/culturally responsive project concepts will be prioritized (please see addendum on pg. 9 for definitions). Across Washington and the nation, homelessness disproportionately impacts communities of color, especially Native American, Black and other intersecting identities including gender marginalized individuals and people with disabilities. Projects that intentionally address racial, ethnic and other cultural disparities are essential to Housing First and Washington's investment in the expansion of quality supportive housing.

The Institute is designed specifically to support the creation of projects where:

- Housing is permanent and affordable where tenants hold leases and acceptance of services is not a condition of occupancy; and
- Comprehensive case management services are accessible by tenants where they live and are designed to maximize tenant stability and self-sufficiency.

## Reservation of Development Capital Resources

The WA HCA PSH Initiative aims to support the implementation of PSH within each category below. In order to do so, WA HCA intends to select projects proposed by Teams selected through this RFA that intend to serve those experiencing chronic homelessness using regional coordinated entry systems and fulfill at least one component of the categories below:

Rural Projects	Urban Projects
100% PSH units	100% PSH units
Integrated PSH units	Integrated PSH units
Tribal led projects	Tribal led projects

While participation in the Institute does not guarantee funding, Teams that participate in the Institute are eligible to apply for WA HCA' PSH development capital, rental assistance, and services funding. WA HCA will preference projects that have participated in the Institute and are intending to serve those experiencing chronic homelessness through coordinated entry.

## Selection

In order for CSH and its partners to provide an appropriate level of technical assistance, the 2025 Institute will be limited to up to 8 teams. Consideration will be given to demonstrated need, support from the local unit of government, financial stability of the primary sponsor, quality of the response to the application, and experience serving high need populations. Selection is based on a competitive process. Applicants should be mindful in responding to all requirements of the applications.

**To be eligible for the Institute, applicants must be able to commit to attending ALL training sessions offered.** It is critical to the success of each team that key senior management staff consistently participate in all sessions. The Institute will consist of 1 Institute session (consisting of 2 training days each) per month over five months; 2 sessions (4 training days) will be in-person - see 2024 Institute Schedule on pg. 7. Trainings highlight various external perspectives such as tenant voice, fair housing and trauma-informed building design. Most sessions will include dedicated group work time, with technical assistance available from CSH staff. The Institute will conclude with final presentations (hosted virtually) whereby Institute participants present their projects to a group of local and statewide stakeholders, including WA HCA.

## Scoring Criteria

Each question must be answered, or no score will be given to the Applicant for that question. Each answer must immediately follow the question to which it applies to receive a score. When answering a question, the full answer must be provided immediately below the question. Do not reference another document or the answer to another question in lieu of fully answering a particular question.

Points will be awarded by a CSH Evaluation review team, which will include WA HCA representation, based upon its judgment as to the degree to which Applicants clearly and completely demonstrate their ability with respect to the following categories:

Project Concept: 26 points	
5 points	Description of project concept, design and services;
5 points	Description of how the principles of Housing First relate to the project concept
5 points	Description of how the project includes culturally specific/responsive organizations or programs, or other deliberate equity measures

5 points	How project will partner with appropriate health and service providers, local government, local Public Housing Authority and other public systems (e.g., justice, health systems, homeless system, child welfare and/or others, including connection to Continuum of Care (CoC) Program).
5 points	How tenant voice is incorporated and/or represented in the project, including how teams integrate lived expertise in project and program design. Provide examples of measures that ensure the project/program best supports the focus population.
1 point	Project intentionally serves marginalized communities including BIPOC, LGBTQ2S+, Native, Rural, and other intersecting identities.
<b>Project Readiness &amp; Accessibility: 8 points</b>	
3 points	Evidence of Site Control <ul style="list-style-type: none"> <li>• 3 points: Applicant has secured site control (deed, long term lease, purchase and sales agreement, or option) that won't expire during the Institute</li> <li>• 2 points: Applicant's site control is expiring before the end of the Institute</li> <li>• 1 point: Applicant has identified site and is working towards site control</li> <li>• 0 points: No site identified</li> </ul>
5 points	Accessibility of location, and/or demonstrated planning to ensure service access for future residents. If no location is known at this time, project team prioritizes location accessibility in site selection.
<b>Need for Project and Equity: 10 points</b>	
5 points	Focus population and need for PSH units;
5 points	Corresponding analysis how project will serve needs of Black, Indigenous and People of Color (BIPOC), LGBTQIA2S+ and other marginalized identities overrepresented in homelessness and other systems.
<b>Team Experience &amp; Capacity: 6 points</b>	
5 points	Name each participating agency's PSH experience and how it relates to this project; if project team does not have direct experience with PSH, describe other relevant experience, and how a commitment to PSH supports the implementation of this housing project and supportive programming.
1 point	Project team includes at least one BIPOC-led, Native-led and/or Culturally Specific/Responsive organization.
<b>Total Eligible: 50 points</b>	

# 2025 Washington Supportive Housing Institute Curriculum

## Institute Curriculum and Timeline

The 2025 Institute will be held between January and June 2025, through 10 training sessions including one virtual project reveal/final presentations. Each month the cohort will meet virtually 2 days in a row, with each training day to be 3 hours each. The final schedule will be communicated to the cohort closer to Institute start.

2025 SCHEDULE	TRAINING TOPICS All sessions are designed and implemented embracing a diversity, equity, inclusion and belonging lens.
Day 1	<b>Introduction to the Institute and Housing First</b>
Day 2	<b>Quality Supportive Housing and Project Visioning</b>
Day 3	<b>Operations in the First Year and Building Community Support</b>
Day 4	<b>Partner Roles and Responsibilities: Support Services Planning and Property Management Delivery</b>
Day 5	<b>Trauma-Informed Design and Tenant Voice</b>
Day 6	<b>Coordinating Services and Property Management: Service Planning and Crisis Management</b>
Day 7	<b>Financing Part 1: Service Budgets</b>
Day 8	<b>Financing Part 2: Operating and Capital Budgets</b>
Day 9	<b>Fair Housing and Final Presentation Run-Through</b>
Day 10	<b>PROJECT REVEAL: Final Project Presentations to Local and Statewide Partners; hosted on Zoom</b>

**TRAINING TOPICS MAY CHANGE BASED ON FINAL TEAM SELECTION.**

## Application Instructions

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**Application Deadline: Wednesday November 13<sup>th</sup>, 2024 by 11:59 p.m. PST.**

The application must be completed in its entirety. Incomplete applications will not be considered. Submission of an application represents a commitment for the anticipated team (with development, service, property management and lived expertise representation) to attend all Institute sessions. Application Review Team will evaluate all proposals and notify applicants of their selection by mid-December 2025.

**Submission:** Submit an electronic copy of the application and the attachments in PDF form to CSH by email to: [rae.trotta@csh.org](mailto:rae.trotta@csh.org). You will receive a confirmation that your application has been received; if you do not receive confirmation of receipt *within 24-48 hours* from sending, please send an email to [rae.trotta@csh.org](mailto:rae.trotta@csh.org).

**Questions:** If you have questions about the Washington Supportive Housing Institute and this application, please contact: [rae.trotta@csh.org](mailto:rae.trotta@csh.org). If you have questions about funding please contact the Washington Health Care Authority [anessa.williams@hca.wa.gov](mailto:anessa.williams@hca.wa.gov) and [Jacklyn.velasco@hca.wa.gov](mailto:Jacklyn.velasco@hca.wa.gov).

**An informational webinar will be held on October 21<sup>st</sup>, 2 to 3 p.m. PST for prospective respondents to this application. Click [here](#) for the webinar appointment.**



## Addendum

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### Definition of Culturally Specific/Culturally Responsive Organizations

Source: Adapted from Curry-Stevens, Ann, Marie-Elena Reyes & Coalition of Communities of Color (2014). Protocol for Culturally Responsive Organizations

Culturally Responsive Organization: means an entity that comprehensively addresses power relationships throughout the organization, from the types of services it provides and how it maximizes language accessibility to its human resources practices-who it hires, how they are skilled, prepared and held accountable, to its cultural norms, its governance structures and policies, and its track record in addressing conflicts and dynamics of inclusion and exclusion, to its relationships with racial groups in the region, including its responsiveness to expectations. A Culturally Responsive Organization is one that is dynamic, on a committed path to improvement and one that is hardwired to be responsive to the interests of Communities of Color, service users of color and staff of color. Culturally responsive organizations hire and train culturally and linguistically diverse staff to meet the needs of the diverse communities they serve.

Culturally Specific Organization: an entity that provides services to a cultural community and the entity has the following characteristics:

- Majority of members and/or clients must be from a particular community of color;
- Organizational environment is culturally focused and the community being served recognizes it as a culturally-specific entity that provides culturally and linguistically responsive services;
- Majority of staff must be from the community being served, and the majority of the leadership (defined to collectively include board members and management positions) must be from the community being served;
- The entity has a track record of successful community engagement and involvement with the community being served; and
- The community being served recognizes the entity as advancing the best interests of the community and engaging in policy advocacy on behalf of the community being served.