

WEST VIRGINIA RECOVERY HOUSING PROGRAM
FY2020 ACTION PLAN
SUBSTANTIAL AMENDMENT #4 - **DRAFT**



WEST VIRGINIA DEPARTMENT OF ECONOMIC DEVELOPMENT

Recovery Housing Program 2024 Funding Annual Action Plan

Program Summary:

The West Virginia Department of Economic Development (WVDED) is acting as the lead agency along with West Virginia Alliance of Recovery Residences (WVARR), and our network of community providers in the Continuum of Care across the State. The Department of Economic Development proposes the creation of the West Virginia Recovery Housing Program (WVRHP) in response to the Department of Housing and Urban Development (HUD) Federal Register Notice Number FR-6225-N-01. The Recovery Housing Program (RHP) supports individuals in recovery on their path to self-sufficiency. By providing stable housing to support recovery, RHP aims to support efforts for independent living. More specifically, RHP provides the funds to develop housing or maintain housing for individuals. Assistance per individual is limited to no longer than 24 months or until permanent housing is secured, whichever is first. WVRHP would utilize two waivers which include the expanded limited clientele criteria to meet the low to moderate benefit National Objective and the addition of rehabilitation as a housing activity.

For many individuals, achieving and maintaining recovery from a substance use disorder (SUD) is hindered by a lack of safe, affordable housing that is supportive of recovery. The National Alliance of Recovery Residence (NARR) was formed in response to a call for recovery housing providers across the service spectrum to create a uniform language, standards, and ethical guidelines for all types of recovery residences. The NARR Standards promote the delivery of quality recovery support services in community-based, residential recovery settings. Through the will of the legislature, the West Virginia Alliance of Recovery Residences (WVARR) was created on September 18, 2018, becoming the 29th state affiliate of NARR, to develop and maintain a recovery residence certification process. The West Virginia Alliance of Recovery Residences (WVARR) is a non-profit entity that has been contracted by the state of West Virginia's Office of Drug Control Policy to develop, implement, and maintain a certification process for the state's non-treatment recovery residences based on nationally recognized best-practice standards and ethical principles established by the National Alliance of Recovery Residence (NARR). WVARR certification includes a four-step process, beginning with an administrative review, a structured interview, an onsite inspection of each residence, and on-going compliance management. Compliance management is facilitated through both a grievance process for current residents and community members and unannounced drop-by inspections. The certification also includes technical support and training for each residence or applicant during and after the process. In addition to certification, WVARR provides training and technical support to residence operators; hosts monthly open calls for recovery residence operators and staff; educates the public and other stakeholders about the recovery residence community and recovery residence certification; conducted the first-ever statewide assessment of recovery residences; developed processes to collect, monitor, and assess data from and about the recovery residence community, including resident surveys and outcomes; provides guidance and funding recommendations to state agencies; supports the recovery and recovery housing community through advocacy and outreach; and collaborates across diverse sectors and professions to ensure that people with substance use disorders are treated with dignity and respect and are able to access the highest quality care and support possible to achieve and maintain long-term recovery. This process ensures that individuals with SUD have access to safe, affordable, and supportive housing.

The Need:

When WVARR was founded, there had never been any assessment of recovery housing in the state of West Virginia. Resource lists varied by county, region, and agency. The WVARR director compiled all

the various resources identified to form a comprehensive list of all potential recovery housing programs in the state. The information collected revealed significant discrepancies in the information available for the recovery residences identified. Many did not have websites or descriptive information available; some only provided phone numbers or email addresses. Approximately 128 recovery residences were identified across the state, not including the 34 Oxford Houses. It is important to note that Oxford Houses will not be WVARR certified.

In November of 2018, WVARR was approved for Substance Abuse and Mental Health Services Administration (SAMSHA)-funded technical assistance (STR-TA) to develop a plan for conducting a statewide recovery housing capacity scan. The project was assigned to SAMHSA's Center for Social Innovation, who assisted WVARR staff in identifying goals and objectives for implementation. WVARR staff developed the 52-question survey with support and feedback from NARR, the WV Office of Drug Control Policy, and the WV Bureau of Behavioral Health. WVARR staff conducted the survey. The primary purpose of the survey was to get a comprehensive view of the number, type, and scope of recovery housing services provided in West Virginia. Information from the survey was intended to guide the operations and goals of state agencies (including WVARR), aid funding decisions related to capacity improvement and expansion in the state, educate and inform consumers and providers, and to serve as a foundation for forming a collaborative recovery housing network. Between December 2019 and February 2020, WVARR's Director and Assistant Director contacted each residence individually explaining the survey and asking them to complete one survey per residence their program operates. Out of the 128 identified non-Oxford residences, 99 individual responses were received before February 2020. An additional 19 responses were received between February 2020 and June of 2020 as new residences opened and existing programs expanded.

WVARR staff used the survey results as the foundation of a composite recovery residence guide, which now includes 195 recovery residences across the state. In their 2020-2022 Substance Use Response Plan, the WV Governor's Council of Substance Use Disorders Community Engagement Subcommittee identified the need for a follow-up survey as one of their key priorities. WVARR's director has worked with the Subcommittee to develop a second assessment based on the original survey. That survey was disseminated to approximately 106 recovery residences operators, representing the 195 identified existing recovery residences, on December 2, 2021.

The housing scan found:

Geographic Distribution

The highest percentage of recovery residences are in Cabell County with 43%, followed by Kanawha with 22% and Wood with 6%. In terms of service areas, 80% of residences are open to all West Virginia residents and 13% serve residents out of state. In terms of specific counties served, the highest percentages were Fayette and Jackson with 11%, Cabell and Kanawha with 10%, and Clay, Greenbrier, Tyler, and Wetzel with 7%.

Property Description

WVARR's recovery residence guide now includes 76 providers with 195 residences, and a total capacity of 2,237 beds. The current bed capacity includes: 111 coed beds, 1,015 men's beds, 754 women's beds, and 129 beds for pregnant women and women with children. The gender or target population served for the remaining beds is unknown. Residences are operated in single family homes, multi-family homes, apartment complexes, and dormitory style housing. The average number of residents served per residence in West Virginia is 29 and the average fee per resident is \$477 per

month. Of these identified residences, 56 are currently certified with WVARR, representing 995 beds. WVARR certified beds include 33 coed beds, 627 beds for men, 290 beds for women, and 45 beds for pregnant women and women with children. Of the 56 WVARR-certified residences, 22 have been issued a provisional certification for a period of one year from date of issue, which acknowledges that the residence meets all NARR and WVARR requirements for certification except the requirements for the physical property. No residence is eligible for the provisional certification if the property violations include anything relevant to resident health or safety.

Populations Served

All residents in recovery must have a diagnosed substance use disorder. Approximately 53% of surveyed residences serve men, 43% serve women, and 4% have no gender requirements. Forty-one percent of residences reported the average length of resident stay was 7-9 months. Over one-third said the maximum length of stay was 18-24 months, while 28% said they do not implement a maximum length of stay. Eighty-four percent of residences require residents to actively seek or maintain employment or be enrolled in school. It is important to note that with the WV RHP program funding, there is a maximum of 24 months in which assistance can be used per individual, or until permanent housing is secured, whichever comes first.

Funding Sources

Eighty-six percent of surveyed residences require residents to pay fees to cover the costs of housing, food, staff, and/or programmatic services, averaging \$477 per month resident. Ninety-one percent of residences do not accept third-party reimbursement (insurance) for services, although 9% reportedly bill Medicaid for peer support services delivered in the residence. Approximately 55% of residences receive funding from the West Virginia Bureau of Behavioral Health, and 21% receive federal funding from agencies like the Substance Abuse and Mental Health Services Administration (SAMHSA) or the United States Department of Housing and Urban Development (HUD).

Important Findings and Recommendations:

- The first month's payment (charged to incoming residents) for residences ranges from \$150 to \$1,500. The average first month's fee is \$477, which the resident is required to pay out of pocket
- The survey provided a comprehensive view of the number, type, and scope of recovery housing services provided in West Virginia. Information from the survey has been used to guide the operations and goals of state agencies (including WVARR, the WV ODCP, and the WV BBH), aid funding decisions related to capacity improvement and expansion in the state, educate and inform consumers and providers, and served as a foundation for forming a collaborative recovery housing network.
- Leadership at the WVDHHR, the State Opioid Response team, and the WV Alliance of Recovery Residences have identified the need for both recovery housing rehabilitation and housing vouchers for potential indigent recovery housing residents.
- The need for housing vouchers for indigent residents was identified in the finding that many people coming from treatment, the state's jails, or those that have experienced homelessness cannot afford to enter self-pay recovery residences independently.
- Twenty-two residences with 471 residents have been issued a provisional certification by WVARR based on the need for repairs and renovations on their physical properties. Funding

support for recovery housing rehabilitation will assist those residences in becoming fully compliant with NARR and WVARR standards.

Resources:

- WVDED actively participates in the four CoCs across the state.
- WVDED and WVARR websites
- Ryan Brown Addiction Prevention and Recovery Fund - State funds totaling \$750,000 were made available from the Ryan Brown Fund via competitive grant application process for recovery housing upgrades, repairs, and renovations to assist in the compliance with WVARR standards.
- Substance Abuse and Mental Health Services Administration State Opioid Response (SOR) Grant - Federal funds totaling \$1,175,605 were made available from the SOR grant for support of recovery housing boarding costs for individuals unable to meet recovery housing costs.
- The WV Alliance of Recovery Residences is currently funded by the WV Office of Drug Control Policy in the amount of \$520,803 for the two-year period from January 1st, 2020- December 31, 2022 (approximately \$260,402/year).
 - Most recovery residences in West Virginia are fully sustained by program fees charged to the residents, which vary depending on the program, level of care, and services provided. Approximately 30% of West Virginia's recovery residences receive funding from the state, via grants from the WV Bureau of Behavioral Health or the WV Department of Homeland Security Justice & Community Services. Less than 10% receive funding from federal agencies, like the Substance Use Mental Health Services Administration (SAMHSA). Two programs (that I know of) received funding from HUD, including the Rea of Hope and Recovery Point WV. Many receive grants from foundations and donations from private donors.
 - Recovery Point WV is the only program in the state that provides recovery housing services to residents at their five Level 3 facilities at no cost, except for using their EBT/SNAP benefits towards food costs. Their step-down housing (Level 2 and Level 1) does require payment. Additionally, two of our state's programs allow residents to stay free for the first 30 days. Those two programs include 10 residences. (Important to note is that one of those 2 providers, representing 9 residences, was denied WVARR certification and is therefore ineligible for referrals.)

Recovery Housing Program Funds (HUD)

Total: \$6,753,763

FY2020 Allocation:

Total Award \$1,585,000
Administrative (5%) \$79,250
Technical Assistance (3%) \$47,550
Recovery Housing Vouchers \$500,000
Recovery Housing Rehabilitation \$958,200

FY2021 Allocation

Total Award: \$1,452,510
Administrative (5%) \$72,625
Technical Assistance (3%) \$43,575
Recovery Housing Vouchers \$500,000
Recovery Housing Rehabilitation \$836,310

FY2022 Allocation

Total Award \$1,524,782
Administrative (5%) \$76,239.10
Technical Assistance (3%) \$45,743.46
Recovery Housing Voucher \$500,000
Recovery Housing Rehabilitation \$902,799.44

FY2023 Allocation

Total Award: \$2,191,471
Administrative: \$109,573.55
Technical Assistance: \$65,744.13
Recovery Housing Voucher: \$500,000
Recovery Housing Rehabilitation: \$1,516,153.32

The WV RHP Program will not be expecting program income.

Administration Summary:

The West Virginia Department of Economic Development (WVDED) manages the Community Development Block Grant (CDBG), Emergency Shelter Grant (ESG), and Housing for Persons with AIDS (HOPWA) programs to address one of the three primary objectives of providing decent affordable housing, creating economic opportunities, and/or creating suitable living environments, which will provide an outcome of availability/accessibility, affordability, and/or sustainability.

The Recovery Housing Voucher Program activities and outcomes will be delivered and/or monitored by the project manager, Emily Birckhead, MSW with WVARR. Ms. Birckhead is the Executive Director of the West Virginia Alliance of Recovery Residences. She graduated from West Virginia University with her BS in Political Science and received her Master of Social Work Degree (MSW) from Marshall University. She is a person in recovery and is certified as both a CCAR Peer Recovery Coach and 200-RYT (Registered Yoga Teacher). Emily has previously worked as a Recovery Coach with the Partnership of African American Churches and as an AmeriCorps VISTA with Try This WV. She has supported the development of organizations including West Virginia's first Collegiate Recovery Program (WVU CRP) and WV Recovers, an integrated, statewide peer recovery network for people with mental health and substance use disorders and served on the Board of Directors for the WV Association of Alcoholism and Drug Abuse Counselors from 2017-2020. Emily currently serves on the Board of Directors for the Kanawha Pastoral Counseling Center (KPCC), is a member of the National Alliance of Recovery Residences' Advocacy Committee and is a member of the Community Engagement Subcommittee of the WV Governor's Advisory Council for Substance Use Disorders.

Emily Birckhead, MSW

Executive Director

West Virginia Alliance of Recovery Residences

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A. Awards to Communities by Method of Distribution

The State of West Virginia Community Advancement and Development (WVCAD), a division of the West Virginia Department of Economic Development (WVDED), will allocate funds in a series of concurrent stages:

- Phase 1 is a Housing Voucher program which entails partnering with West Virginia Alliance of Recovery Residences, Inc. (WVARR) to offer income-based housing and utility support (as needed) to qualified program beneficiaries for their accommodation in recovery housing facilities.
- Phase 2 will include a rolling application process. The State of West Virginia may be open to funding the eligible use of funds listed below. Please note, priority will be provided to recovery residences seeking construction rehabilitation that currently hold provisional WVARR certification, ensuring they can provide services to potential residents once all necessary repairs are complete.
 - Public Facility Improvements - Acquisition, construction, reconstruction, rehabilitation or installation of public facilities and improvements for the purpose of providing stable, temporary housing for individuals in recovery from a substance use disorder.
 - Acquisition of Real Property - For the purpose of providing stable, temporary housing to persons in recovery from a substance use disorder.
 - Lease, Rent & Utilities - associated costs on behalf of an individual in recovery from a substance use disorder for the purpose of providing stable, temporary housing. Payments must be made to the provider, such as the landlord or utility provider. Payments must NOT be made directly to individuals.
 - RHP cannot supplant funds that previously covered for an individual.
 - New or Expanded Services that have been above and beyond the last 12 months.
 - Assistance can be provided for up to 2 years or until the individual secures permanent housing, whichever is earlier.
 - Rehabilitation and Reconstruction
 - Single Unit – publicly or privately owned residential building(s)
 - Multi-Unit – publicly or privately owned residential building(s)
 - Public Housing – owned or operated by a public housing authority.
 - Disposition of Real Property Acquisition - Disposition through sale, lease, or donation of otherwise of real property acquired with RHP funds for the purpose of providing stable, temporary housing for individuals in recovery from a substance use disorder.
 - Clearance and Demolition - Clearance, demolition, and removal of buildings and improvements, including movement of structures to other sites for the purpose of providing stable, temporary housing for individuals in recovery from a substance use disorder. Eligibility is limited to projects where RHP funds are used only for the clearance and demolition.
 - New Construction - Expansion of existing eligible activities to allow CDBG-RHP funds to be used for new construction of housing. New construction of housing is subject to the same requirements that apply to rehabilitation activities.

B. Activities Carried out Directly

All activities will be carried out directly by the State of West Virginia through the West Virginia Community Advancement and Development, a division of the West Virginia Department of Economic Development, or by an eligible entity selected through an application process such as, but not limited to, a non-profit, County Commission, or Municipality.

C. Eligible Subrecipients

WVDED will execute an interagency agreement with WVARR for the Housing Voucher Program and with eligible entities selected during the application process. As noted above, eligible entities may include, but are not limited to the following: County Commissions, Municipalities, and Non-profits.

D. Criteria for Evaluation of Applications and Applicants

i. Housing Voucher Criteria

Eligible applicants for a housing voucher must have a substance use disorder and (meet low-and-moderate income guidelines in which service is received or qualify as LMC) to meet the low to moderate income national objective. Applicants must be seeking housing and can apply at a WVARR-certified residence. Payments will be paid directly to the housing program which must be WVARR-certified or provisionally certified with access to support services and best practices provided by a contract with WVARR. RHP funds will assist the individual for not more than two years or until permanent housing is secured, whichever is first. The location and special population being served will determine the priority of applicants.

ii. Criteria for Applications

Eligible applicants must qualify based on the total project cost does not exceed the \$500,000.00, is cost reasonable, at completion the facility must meet local and state building codes, HUD Quality Housing Standards (HQS), and be brought up to the WVARR adopted facilities standards. Individuals can stay at the facility no longer than two years, until permanent housing is secured or the facilities residency occupation limit, whichever is first. Substance Use Disorder Housing Facilities applicants can apply with WVDED. Applicants must distinguish their status of a WVAAR certification. Proper documentation is required within the application process to support the WVARR certification status. Prioritization for rehabilitation will be given based on the location need and the special population being served.

E. Entities with the Greatest Need

Prioritization for all activities will be given based on the location need and the special population being served. Recovery residences are not evenly distributed across the state. The highest percentage of recovery residences are in Cabell County with 43%, followed by Kanawha with 22% and Wood with 6%. In terms of service areas, 80% of residences are open to all West Virginia residents and 13% serve residents out of state. In terms of specific counties served, the highest percentages were Fayette and Jackson with 11%, Cabell and Kanawha with 10%, and Clay, Greenbrier, Tyler, and Wetzel with 7%. Sixty percent of residences reported that they are not capable of accommodating residents with physical handicaps or disabilities. Eighty-eight percent of residences accept residents with co-occurring mental disorders, including bipolar disorder and schizophrenia. Approximately 26% of residences will accept residents on any form of Medication Assisted Treatment (MAT), while 59% accept residents on some, but not all, forms of MAT, and 15% do not accept residents on MAT. Of those

residences that do accept residents on MAT, 100% accept residents prescribed Naltrexone (Vivitrol), while only 28% accept residents prescribed Buprenorphine (Suboxone/ Subutex) and 24% accept residents prescribed Methadone. Of those residences that do accept residents on MAT, 78% provide transportation for required MAT-related services. Approximately 98% of all surveyed residences utilize community-based clinical services, including therapy and psychiatric providers.

Definitions:

For this grant to ensure individuals with certain types of substance issues and co-occurring disabilities are not excluded and that the WV RHP Program does not exclusively target a specific type of substance use disorder, two definitions have been adopted as defined by Substance Abuse and Mental Health Services Administration (SAMHSA):

Individual in Recovery (SAMSHA):

A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential

Substance Use Disorder (SAMSHA):

Substance use disorders occur when the recurrent use of alcohol and/or drugs causes clinically significant impairment, including health problems, disability, and failure to meet major responsibilities at work, school, or home.

Anticipated Outcomes and Expenditure Plan:

Expenditures:

WVDED will comply with all RHP guidelines and expend at least 30% of the funds within year one as required. We anticipate spending 100% percent of the RHP funds before the end of the performance period September 1, 2027, and acknowledge that Section 8071(d)(2) provides that no matching funds are required. The need for appropriate recovery housing to fill the gaps is substantial and based on our current work in this arena we do not anticipate any barriers to spending down the funds expediently and effectively. WVDED will consider prior performance and prior federal funding when choosing applicants to ensure these guidelines will be met. Administrative activities will be limited to no more than 5% of the total allocated funds. Administrative expenses will be monitored quarterly to ensure compliance with the 5% cap. Administrative activities will consist of supporting grant projects and services through WVDED, WVAAR, and other subrecipients if necessary. Activities include but are not limited to documentation and record keeping, financial and program administration, general compliance, and reporting. There is no program income anticipated to be received.

Outcomes:

WVDED anticipates increasing access to safe, high quality recovery housing services for people with substance use disorders by:

- Increased fidelity of recovery housing by allowing more programs to fully meet national standards by becoming WVAAR certified.
- Increase access to recovery housing for those who may not have the resources to otherwise seek recovery support services by promoting the program with our partners.
- Increase the number of individuals in recovery who improve their health and wellness, live a self-directed life, and strive to reach their full potential.

Deliverables:

Increase number of recovery housing in under-represented areas and populations (projected numbers are per each year of RHP Funds received by the state).

- Increase capacity of certified recovery housing by 168 beds
- Increase capacity of certified recovery housing serving under-represented areas and populations by 60 beds
- Increase access to safe, high quality recovery housing with SUD for 320 people
- Number expected to transition to permanent housing through RHP-assisted temporary housing is 30 people
- Increase connections to community support services for 320 people
- Increase number of individuals/families gaining competitive employment by 200
- WVDED projects that 50% of individuals/families assisted with RHP funds will transition into permanent housing

WVDED will meet performance data reporting requirements and report performance measures in the DRGR system. WVARR and all other subrecipients will be required to report quarterly to WVDED by the 1st working day of April, July, October, and January. On or before October 30, WVDED will submit a Quarterly Performance Report (QPR) to HUD via the DRGR system. This report will include but is not limited to financial expenditures, project progress, the number of individuals assisted in RHP activities, and the number of individuals able to transition into permanent housing through RHP-assisted temporary housing.

Citizen Participation Plan:

The newspaper advertisement public comment period began on Monday, July 29, 2024, and ended on Monday, August 12, 2024, in accordance with the guidelines as set forth by the West Virginia Department of Economic Development Citizen Participation Plan. Comments were to be submitted either via mail, or email to 1900 Kanawha Blvd, East, Building 3, Suite 700, Charleston, WV 25305, or to the Contact Person, or designee, at the advertised email. No comments were received during the 15-day comment period. The Annual Action Plan as well as the Annual QPR is always available to the public at the WV CAD website, <https://wvcad.org/>. Numerous meetings during the summer and fall of 2024 were held with WVARR and data gathering from WVARR was conducted during the development of the RHP AP.

Partner Coordination:

WVDED conducted two consultations with the four Continuum of Cares and VASH/PHAs in the State most of which have membership which includes Emergency Shelter Grant (ESG), Housing Opportunities for Persons with AIDS (HOPWA), Public Housing Authorities (PHAs) and HUD VASH program service delivery agencies.

Other key partners for reducing fatal overdoses in WV include the WV State Police who are critical for programs that divert people from incarceration to treatment and recovery; the WV Supreme Court of Appeals makes treatment courts in WV a reality; treatment courts which serve adults, juveniles, and families; WV Behavioral Health Providers Association; and the WV Certification for Addiction and Prevention professionals who ensure the SUD workforce including Peer Recovery Support workers, counselors, and therapists, are properly trained and credentialed.

Funding will allow the program to further collaborate and expand to ensure resources from all housing and substance use providers are leveraged and no duplication occurs. Future collaborative partners may include but is not limited to:

- Private, faith-based, and public nonprofit recovery housing providers
- Help 4 WV, the state's 24-hour referral & crisis line
- WV Re-entry Council
- WV Peer Recovery Support Specialists (PRSS) that provide linkage & referrals (SOR funded)
- WV Housing Development Fund's Mountaineer Rental Assistance Program

Subrecipient Management and Monitoring:

The WVDED has the capacity and ability to manage all the HUD program administrative management and monitoring requirements. There will be an interagency agreement between WVDED and all subrecipients for the operational day to day program delivery. Once projects are at a completion percentage of 75%, WVDED will administer an on-site monitoring to ensure compliance to meet the federal requirements. If a project does not pass the monitoring, a quality improvement plan will be constructed and put into effect with specifics to the project. An annual subrecipient desk monitoring will be carried out by WVDED for all subrecipients to ensure compliance of the federal requirements for the RHP funds.

Pre-Award/ Pre-Agreement Costs:

Pre-Award/ Pre-Agreement Costs may be considered for reimbursement. This amount will not exceed more than 5% of the total project award and is limited to actions related to application preparation, and preliminary engineer reports.

Certifications:

Each grantee must make the following certifications with its RHP Action Plan:

- (1) The grantee certifies that it has in effect and is following a residential anti displacement and relocation assistance plan in connection with any activity assisted with funding under the RHP program. The grantee certifies that it will comply with the residential anti-displacement and relocation assistance plan, relocation assistance, and one-for-one replacement housing requirements of section 104(d) of the Housing and Community Development Act of 1974, as amended (42 USC § 5304(d)) and 11 implementing regulations at 24 CFR part 42, as applicable, except where waivers or alternative requirements are provided.
- (2) The grantee certifies its compliance with restrictions on lobbying required by 24 CFR part 87, together with disclosure forms, if required by part 87.
- (3) The grantee certifies that the RHP Action Plan is authorized under state and local law (as applicable) and that the grantee, and any entity or entities designated by the grantee, and any contractor, subrecipient, or designated public agency carrying out an activity with RHP funds, possess(es) the legal authority to carry out the program for which it is seeking funding, in accordance with applicable HUD regulations and the grant requirements. The grantee certifies that activities to be undertaken with RHP funds are consistent with its RHP Action Plan.
- (4) The grantee certifies that it will comply with the acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended (42

U.S.C. 4601 et seq.), and implementing regulations at 49 CFR part 24, except where waivers or alternative requirements are provided.

(5) The grantee certifies that it will comply with section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) and implementing regulations at 24 CFR part 135.

(6) The grantee certifies that it is following a citizen participation plan adopted pursuant to 24 CFR 91.115 or 91.105 (as imposed in notices for its RHP grant). Also, each unit of general local government receiving RHP assistance from a state must comply with the citizen participation requirements of 24 CFR 570.486(a)(1) through (a)(7) for proposed and actual uses of RHP funding (except as provided in Federal Register notices providing waivers and alternative requirements for the use of RHP funds).

(7) The grantee certifies that it is complying with each of the following criteria: (1) funds will be used solely for allowable activities to provide individuals in recovery from a substance use disorder stable, temporary housing for a period of not more than 2 years or until the individual secures permanent housing, whichever is earlier; (2) with respect to activities expected to be assisted with RHP funds, the RHP Action Plan has been developed so as to give the maximum feasible priority to activities that will benefit low and moderate-income individuals and families; (3) the aggregate use of RHP funds shall principally benefit low- and moderate-income families in a manner that ensures the grant amount is expended for activities that benefit such persons; and (4) the grantee will not attempt to recover any capital costs of public improvements assisted with RHP grant funds, by assessing any amount against properties owned and occupied by persons of low- and moderate-income, including any fee charged or assessment made as a condition of obtaining access to such public improvements, unless: (a) RHP grant funds are used to pay the proportion of such fee or assessment that relates to the capital costs of such public improvements that are financed from revenue sources other than RHP; or (b) for purposes of assessing any amount against properties owned and occupied by persons of moderate income, the grantee certifies to the Secretary that it lacks sufficient RHP funds (in any form, including program income) to comply with the requirements of clause (a).

(8) The grantee certifies that the grant will be conducted and administered in conformity with title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d), the Fair Housing Act (42 U.S.C. 3601-3619), and implementing regulations, and that it will affirmatively further fair housing.

(9) The grantee certifies that it has adopted and is enforcing the following policies, and, in addition, must certify that it will require local governments that receive grant funds to certify that they have adopted and are enforcing: (1) a policy prohibiting the use of excessive force by law enforcement agencies within its jurisdiction against any individuals engaged in nonviolent civil rights demonstrations; and (2) a policy of enforcing applicable state and local laws against physically barring entrance to or exit from a facility or location that is the subject of such nonviolent civil rights demonstrations within its jurisdiction.

(10) The grantee certifies that the grant will be conducted and administered in conformity with the requirements of the Religious Freedom Restoration Act (42 U.S.C. 2000bb) and 24 CFR 5.109, allowing the full and fair participation of faith-based entities.

(11) The grantee certifies that it (and any subrecipient or administering entity) currently has or will develop and maintain the capacity to carry out RHP eligible activities in a timely manner and that the grantee has reviewed the requirements of the grant.

(12) The grantee certifies that its activities concerning lead-based paint will comply with the requirements of HUD's lead-based paint rules (Lead Disclosure; and Lead Safe 13 Housing (24 CFR

part 35)), and EPA's lead-based paint rules (e.g., Repair, Renovation and Painting; Pre-Renovation Education; and Lead Training and Certification (40 CFR part 745)).

(13) The grantee certifies that it will comply with environmental review procedures and requirements at 24 CFR part 58.

(14) The grantee certifies that it will comply with applicable laws.