



February 11, 2021

To: Dana Matthews, Health and Human Services Director

From: Sharon Paskewitz, Housing Director

Subject: **Summary of Indian Housing Plan Annual Performance Report for 2020**

Program/Service	Planned Number of Households/ Units to Served	Outcome	Challenges/Comments
Tenant Based Rental Assistance (TBRA)	50	67	10 Households successfully completed their housing program goals. <i>Numbers reported are unduplicated.</i> Budget: \$707,405.82 Spent: \$604,049.98
Housing Management Services	75	97	67 – Tenant Based Rental Assistance: 30 - Homelessness Prevention/Rapid Rehousing <i>Numbers reported are unduplicated.</i> Budget: \$183,046.60 Spent: \$179,890.20
Housing and Support Services	75	97	67 Tenant Based Rental Assistance 30 – Homelessness Prevention/Rapid Rehousing <i>Numbers reported are unduplicated.</i> Budget: \$222,015.44 Spent: \$168,142.68

Construction of Rental Housing	10	0	<p>Samish Indian Nation was not able to accomplish this goal of completing affordable housing in 2020 due to delays in permitting our housing development through the City of Anacortes. However, we did submit a complete application and completed multiple rounds of revisions to address the City's comments. We also found a creative solution to the problem of managing stormwater in an on-site detention pond that would have consumed nearly a quarter of our property. We are position to receive City approval in the first quarter of 2021.</p> <p>Budget: \$2,285,796.58</p> <p>Spent: \$ 129,763.38</p>
Community Center	Report on \$ Amount	0.00	<p>Samish Indian Nation was not able to accomplish this goal of completing affordable housing in 2020 due to delays in permitting our housing development through the City of Anacortes. However, we did submit a complete application and completed multiple rounds of revisions to address the City's comments. We also found a creative solution to the problem of managing stormwater in an on-site detention pond that would have consumed nearly a quarter of our property. We are position to receive City approval in the first quarter of 2021.</p> <p>Budget: \$150,000.00</p> <p>Spent: \$0.00</p>
Administration and Planning	Report on \$ Amount	\$156,417.74	<p>Budget: \$ 201,921.37</p> <p>Spent: \$ 156,417.74</p>

Indian Housing Plan Self-Monitoring Report

2020 – OVERVIEW SELF-MONITORING RESULTS

This year Samish has continued using the self-monitoring plans for recipients, as provided by HUD on their website one the Grant Oversight and Monitoring page, to complete our required annual self-monitoring. During this year we completed the following monitoring plans as applicable to current Samish NAHASDA programs and any areas of non- compliance or improvements needed are noted:

A. APR & IHP Compliance

Issue: No areas of non-compliance or improvement noted.

Corrective Action Plan/Taken: N/A

B. Draft Lead-Based Paint

Issue: No areas of non-compliance or improvement noted.

Corrective Action Plan/Taken: N/A

Comment: The program has had difficulty finding one procedure or technique to verify age of the property due to our multiple county service; As an improvement to ensure that we have correctly identified the age of a home for lead-based paint determination, the Housing Director or the Lead Housing Support Specialist will be verifying the client file has a verification of the age of the home before they and as part of their approval of client inspections.

C. Environmental Review Compliance

Issue: No areas of non-compliance or improvement noted.

Corrective Action Plan/Taken: N/A

D. Organization & Structure

Issue: No areas of non-compliance or improvement noted.

Corrective Action Plan/Taken: N/A

Comment: Several program policy revisions are in draft form under review to strength program procedures.

E. Procurement & Contract Administration

Issue: We found that the current language in the Appeals Board Ordinance does not allow for outside vendor complaints, procurement disputes, or Indian Preference complaints to be addressed by the appeals board. As a result, we found the Tribe did not have the required policy in place to properly address disputes resolution in these instances.

Corrective Action Plan/Taken: Dispute Resolution policy clauses are now under review for inclusion in our procurement section under the Finance Policy and are expected to be reviewed by Tribal Council in the first quarter of 2021 for inclusion.

F. Section 504 Accessibility

Issue: No areas of non-compliance or improvement noted.

Corrective Action Plan/Taken: N/A

G. IHBG Self-Monitoring

Issue: No areas of non-compliance or improvement noted.

Corrective Action Plan/Taken: N/A

H. Admissions & Occupancy

Issue:

We identified a failure in both the publication of disclosure and the notification to area ONAP offices regarding a conflict of interest for two Rental Assistance clients in 2020. In both these occurrences, the client's intake and conflict identification took place at the onset of COVID19 and our transition to remote working from home operations.

Corrective Action Plan/Taken:

The program has now completed both the public disclosure of conflict and the notification to the NW ONAP office of the conflict as required. Although we are confident that this failure was due to the transition to remote operations due to the COVID19 pandemic and is not representative of our program operations, the program still chose to further strengthen our conflict-of-interest procedures. Going forward, conflict of interest will now be identified and processed as needed at client intake. The Admissions and Occupancy Coordinator will post the Public Notification and email a copy of such notice to our HUD Grants Manager at NW ONAP, and to Housing Director. The program will also be printing the evidence of the public disclosure posting and the email to ONAP and including it in the client file for documentation.

Comments:

The program was also advised that further policy work to include how conflicts will be managed, for both procurement and program activity, is advisable as a best practice in maintaining proper internal controls.

I. Financial & Fiscal Management (including Appendixes 1-8)

Issue: No areas of non-compliance or improvement noted.

Corrective Action Plan/Taken: N/A