



Agenda: Interagency Council on Homelessness

Meeting date, time, and place Date: **June 24, 2015**
 Time: **9:00 am – 11:00 am**
 Place: **Department of Behavioral Health Administration Building
 303 E. Vanderbilt Way, Conference Room 109A and 109B
 San Bernardino, California, 92415**

Note: Please remember to silence your cell phones.

		Time
Call to Order	Chair or Designee will call the meeting to order	
Invocation	Chair or Designee will lead the Invocation	9:00 – 9:05 am
Pledge of Allegiance	Chair or Designee will lead the Pledge of Allegiance	
Introductions	Chair or Designee will lead the Introductions of the ICH Members and Staff	9:05 – 9:10 am

Reports	<ol style="list-style-type: none"> 1. Homeless Provider Network – Sharon Green, Chair (5 min) 2. Office of Homeless Services – Tom Hernandez (5 min) 3. Subcommittee Reports – Chairs (5 min) Bylaws and Membership Committee – Chris Rymer Housing Committee – Kim Carter Homeless Youth Task Force- Supervisor Ramos 4. Legislative Report – Otis Greer (5 min) 5. Board Agenda Review Report – Kent Paxton (5 min) 6. Reentry Collaborative Report – Jose Marin (5 min) 7. Housing Authority of the County of San Bernardino – Dan Nackerman – (5 min) 	9:10 – 9:45 am
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Agenda Items: The following items are presented for informational, consent, and discussion purposes.

THE INTERAGENCY COUNCIL ON HOMELESSNESS MEETING FACILITY IS ACCESSIBLE TO PERSONS WITH DISABILITIES. IF ASSISTIVE LISTENING DEVICES OR OTHER AUXILIARY AIDS OR SERVICES ARE NEEDED IN ORDER TO PARTICIPATE IN THE PUBLIC MEETING, REQUESTS SHOULD BE MADE THROUGH THE OFFICE OF HOMELESS SERVICES AT LEAST THREE (3) BUSINESS DAYS PRIOR TO THE PARTNERSHIP MEETING. THE OFFICE OF HOMELESS SERVICES TELEPHONE NUMBER IS (909) 386-8297 AND THE OFFICE IS LOCATED AT 303 E. VANDERBILT WAY, SAN BERNARDINO, CA 92415. <http://www.sbcounty.gov/dbh/sbchp/>



Item No.	Consent Items	
1	Approve minutes of the May 27, 2015, ICH meeting	
2	Ratification of ICH Chair’s approval and execution of Letter of Support for Montclair Police Department	9:45 – 9:50 am
Discussion Items		
3	Adoption of the Continuum of Care (CoC) Written Standards	9:50 – 10:00 am
4	Review, Discuss and Accept Recommendations for the CoC Coordinated Entry System	10:00 – 10:10 am
Presentation		
5	Molina Healthcare Presenter: Ruthy Argumedo	10:10 – 10:20 am
6	Family Stabilization and Housing Support Program Presenter: Steven Couchot - Elaine Angely	10:20 – 10:50 am
Closing		
		10:50 – 11:00 am

Public Comment Open to the public for comments limited to three minutes

Council Roundtable Open to comments by the Council

Next ICH Meeting The next Interagency Council on Homelessness meeting will be held on:

August 26, 2015
9:00 am – 10:30 am
Department of Behavioral Health Administration
303 E. Vanderbilt Way, Conference Room 109A and 109B
San Bernardino, CA 92415

Mission Statement

The mission of the San Bernardino County Homeless Partnership is to provide a system of care that is inclusive, well planned, coordinated and evaluated and is accessible to all who are homeless and those at-risk of becoming homeless.

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Homeless Partnership Network

303 E. Vanderbilt Way • San Bernardino, CA 92415

Phone: (909) 386-8297 • Fax: (909) 890-0868

Email: homelessrfp@hss.sbcounty.gov • Website: <http://www.sbcounty.gov/dbh/sbchp>

Homeless Partnership Network Report Prepared for the Interagency Council on Homelessness

Report purpose The purpose of this document is to present the Homeless Partnership Network (HPN) report and to record action items from prior HPN meetings to the Interagency Council on Homelessness (ICH) meetings.

Date Wednesday, June 24, 2015

Presenter Sharon Green

Presentations The table below lists the presentations from Regional HPN's last meeting.

Announcements
<p><i>Updates on Regional HPN Meetings</i></p> <p><i>West Valley Region:</i></p> <ul style="list-style-type: none">• The West Valley Regional meeting on June 9th included a presentation and discussion with Ron Griffin and Gary Madden from United Way 211 regarding the development of a coordinated entry system. We will be continuing our discussion on the development of a coordinated entry system at our next West Valley Regional Meeting on July 14th.• The West Valley Region continues to work with regional partners to identify “housing access points” in the region. A “Pathways to Housing” spreadsheet listing identified regional access points by subpopulation is under development.• Participants also discussed strategies for engaging more landlords and other housing providers in the effort to create more access to housing and working with the Peer Driven Room and Board Coalition to identify more shared housing opportunities in the West Valley Region.• The HPN West Valley Regional Meetings are held on the second Tuesday of the month from 9-11am at the Inland Empire United Way in Rancho Cucamonga.



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East Valley Region:

- The Friday, June 19, 2015, the East Valley Region meeting included discussion and presentations on the Summer Feeding Program, 2015 National Alliance to End Homelessness, Valley Star: Crisis Walk-In Clinic, the Transitional Age Youth Center, the County of San Bernardino Community Crisis Response Team and the San Bernardino County Community Action Partnership.
- Morongo Basin (MB) will be hosting our own Project Connect through the MB Haven on Thursday, September 24, 2015 at the Joshua Tree Sportsman's Club from 10:00 am – 3:00 pm.
- MB Haven is applying for a grant through Morongo Basin Transit Authority for bus passes.
- Next month's presenters are David Rabindranath from Lighthouse Social Service Centers and Faisal Alserri from the County of San Bernardino Community Development and Housing.

Countywide HPN – Chair Sharon Green

- Our next meeting will be held Wednesday, September 16th, 2015 at the County of San Bernardino Health Services building (Auditorium entrance) located at 850 Foothill Blvd. Rialto, CA 92376.



**County of San Bernardino
Office of Homeless Services**

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**Office of Homeless Services Report
Prepared for the Interagency Council on Homelessness**

Report purpose The purpose of this document is to present the Office of Homeless Services (OHS) report and to record action items from prior Interagency Council on Homelessness (ICH) meetings.

Date June 24, 2015

Presenter Tom Hernandez, Homeless Services Manager

Announcements The table below lists the announcements for today’s meeting.

Announcements	
Homeless Management Information System (HMIS) Update	
<ul style="list-style-type: none"> The Office of Homeless Services (OHS), HMIS section routinely monitors agencies data quality to ensure accuracy and meet the United States Department of Housing and Urban Development (HUD) standards for data quality maintenance. Attached you will find a copy of the latest HMIS Data Quality Report for the month of May, 2015 (see attached, Report 2A). 	
Non-profit Stakeholder Session Summary	
<ul style="list-style-type: none"> On May 20, 2015, the Performance, Education and Resource Center (PERC) conducted the first stakeholder group of the ICH, consisting of homeless service providers and non-profit agencies. Twenty-two representatives attended the planning session and created an action plan based on the Permanent Supportive Housing Beds recommendation as noted in the 10-Year Strategy to End Homelessness and the Recalibrating for Results three year evaluation of the 10-Year Strategy (see attached, Report 2B). On June 25, 2015, PERC will be engaging County departments that deal directly or indirectly with homeless-related issues. The following departments have been invited: Aging and Adult Services, Arrowhead Regional Medical Center, Children and Family Services, Children’s Network, Community Development and Housing, County Administrative Office, Department of Behavioral Health, Department of Public Health, First 5 San Bernardino, Housing Authority of the County of San Bernardino, Human Services, Land Use Services Department, Preschool Services, Probation Department, Public Defender, Public Works, Regional Parks, Sheriff’s Department, Special Districts, Superintendent of County Schools, Transitional Assistance Department, Veterans Affairs, and Workforce Development Department. 	



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Coordinated Entry System (CES) Pilot Project Update

- According to HUD, A CES requires all programs within a Continuum of Care (CoC) to work together to assure that services are accessible and well targeted to the immediate needs of the client.
- HUD defines a CES as, "...a centralized or coordinated process designed to coordinate program participant intake, assessment, and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool."
- Under the new CoC final interim rule, there were a number of requirements placed upon local CoCs which include:
 - Establishing and maintaining a CES that provides an initial and comprehensive assessment of the needs of individuals and families for housing and homeless related services;
 - Requiring all HUD-funded programs (including Emergency Solutions Grant and Co awardees) to use the CES once, developed and approved by the local CoC;
 - Ensuring that the screening and assessment is consistent with the written standards established by the local CoC;
 - Comply with any requirements established by HUD in the final interim rule.
- In order to effectively and efficiently assess chronically homeless individuals and families and/or veterans and families for housing and homeless related services the CES Pilot Project will cover the following cities and unincorporated areas: Bloomington, Colton, Grand Terrace, Highland, Loma Linda, Mentone, Muscoy, Ontario, Redlands, Rialto, Yucaipa.
- Information will be easily accessible by the Sheriff's Homeless Outreach and Proactive Enforcement (HOPE) team and 2-1-1 San Bernardino County (2-1-1), which will include a comprehensive and standardized assessment tool, available through HMIS.
- The Pilot is scheduled to begin on June 29, 2015, with final training provided to the pilot project members after ICH today.
- The CES will be used for entrance into permanent supportive housing as well as prevention, diversion, and/or rapid rehousing. The CES will utilize a 2-1-1 based approach where HOPE team participants and 2-1-1 system operators will conduct an initial screening using the Vulnerability Index Service Prioritization Determination Assessment Tool (VI-SPDAT) imbedded into the HMIS, and will connect homeless individuals and families to an appropriate program based on identified needs that include rapid re-housing, permanent supportive housing, or other needed services. The Outreach Team will also consider the accommodation of special needs and consumer preferences if requested.
- The key target groups for the Pilot include:
 - Veterans and veteran families
 - Chronically homeless individuals and chronically homeless families



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Homeless and Policy Related News

- The United States Interagency Council on Homelessness has released a fact sheet to help guide local policy makers to engage chronic homelessness, entitled: Ending Chronic Homelessness in 2017: No one with a disability should have to experience long-term homelessness (see attached, Report 2C). A copy of the report can also be downloaded from the following website: http://usich.gov/resources/uploads/asset_library/Ending_Chronic_Homelessness_in_2017.pdf?utm_source=All+In+to+Ending+Homelessness+-+All+Populations+Newsletter&utm_campaign=All+In+to+Ending+Homelessness&utm_medium=email
- The National Low-Income Housing Coalition has issued information regarding rental affordability for each state, entitled “Out of Reach 2015”. According to the website, “In order to afford a modest, two-bedroom apartment in the U.S., renters need to earn a wage of \$19.35 per hour. In 13 states (including California) and the District of Columbia they need to earn more than \$20 per hour. The Housing Wage for a two-bedroom unit is more than two and a half times the federal minimum wage of \$7.25, and \$4 more than the estimated average wage of \$15.16 earned by renters nationwide” (see attached, Report 2D). Further information can be found at: <http://nlihc.org/oor>

Attachments

HMIS Data Quality Report – Report 2A-Attached
Ending Chronic Homelessness in 2017 – Report 2B-Attached
Stakeholder Action Planning Workshop Summary – Report 2C-Attached
Out of Reach 2015, California Fact Sheet – Report 2D-Attached

Org ID	Organization / Program	Total Enrollments	Total Applicable Records	# of Missing Data Elements	% of Missing	# of Don't Know	# of Refused	% of DK/Refused
CC1	Catholic Charities	0	0	0	0.00%	0	0	0.00%
CCL	Central City Lutheran Mission	59	1062	0	0.00%	3	1	0.09%
CAP	Community Action Partnership	21	275	0	0.00%	3	0	0.00%
DMM	Desert Manna Ministries	9	146	1	0.68%	0	0	0.00%
FSA	Family Services Association of Redlands	0	0	0	0.00%	0	0	0.00%
FA2	Family Assistance Program	0	0	0	0.00%	0	0	0.00%
FAI	Foothill AIDS Project	0	0	0	0.00%	0	0	0.00%
FFS	Foothill Family Shelter	0	0	0	0.00%	0	0	0.00%
FCC	Fraze Community Center	0	0	0	0.00%	0	0	0.00%
GDC	Global One Development Center	4	67	0	0.00%	0	0	0.00%
HDH	High Desert Homeless Services	11	143	0	0.00%	0	0	0.00%
HPG	House of Prayer Gospel Outreach Ministri	1	17	0	0.00%	0	0	0.00%
IBH	Inland Behavioral and Health Services	0	0	0	0.00%	0	0	0.00%
LTH	Inland Temporary Homes	0	0	0	0.00%	0	0	0.00%
IHP	Inland Valley Hope Partners	0	0	0	0.00%	0	0	0.00%
KEY	Knowledge & Education For Your Success	73	944	31	3.28%	17	0	0.00%
LCD	Life Community Development	8	109	0	0.00%	0	0	0.00%
LSS	Lighthouse Social Services	44	553	0	0.00%	1	0	0.00%
PL1	LMWS Pacific Lifeline	0	0	0	0.00%	0	0	0.00%
MMC	Mary's Mercy Center	2	25	0	0.00%	2	0	0.00%
MH1	Mercy House	19	286	14	4.90%	0	0	0.00%
NHV	New Hope Village, Inc.	0	0	0	0.00%	0	0	0.00%
OG1	Operation Grace	0	0	0	0.00%	0	0	0.00%
HOA	Restoration House of Angels	4	70	0	0.00%	0	0	0.00%

SA1	Salvation Army	31	387	0	0.00%	3	0	0.00%
DBA	SB DBH Adult & Older System of Care	0	0	0	0.00%	0	0	0.00%
DBH	SB DBH/HA	0	0	0	0.00%	0	0	0.00%
HA1	SB Housing Authority	0	0	0	0.00%	0	0	0.00%
TFC	Time For Change Foundation	29	375	0	0.00%	0	0	0.00%
USV	US Veterans Inc	12	158	0	0.00%	0	2	1.27%
VVF	Victor Valley Family Resource Center	14	242	0	0.00%	1	1	0.41%
WOL	Water Of Life Community Church	12	149	0	0.00%	0	0	0.00%
		353	5008	46	0.29%	30	4	0.06%

ICH Stakeholder Action Planning Workshop: Service Providers/Non-Profits

Overview

Introduction

On May 20, 2015 the first stakeholder group of the ICH, consisting of Services Providers and Non-Profit agencies, convened and twenty two (22) representatives participated in an action planning workshop.

This group was tasked with creating an action plan for the following recommendation: **Permanent Supportive Housing Beds.**

This recommendation was established by the **10 Year Strategy to End Homelessness in San Bernardino County**, the subsequent **Recalibrating for Results** three year evaluation of the 10 Year Strategy, as well as the **2015 Homeless Count and Subpopulation Survey: Final Report.**

This document provides the results of that workshop as decided by group consensus.

Contents

This document contains the following topics:

Topic	See Page
Context	2
Successful Implementation	3
Current Reality	5
Commitment	6
Key Actions	7
Coordination	11
Resolve	12

Context

Permanent Supportive Housing Beds

The Service Provider/Non-Profit Stakeholders focused on creating an action plan focused on the recommendation **Permanent Supportive Housing Beds**.

This recommendation is stated in the three year recalibration as follows:

“Develop more permanent supportive housing beds to serve the chronically homeless population. These beds will serve homeless individuals and families with mental disabilities, chronic substance abuse, and/or infected with HIV/AIDS with long-term affordable rental housing and a broad range of on-site and/or off-site supportive services.

The goal is also to increase independent living skills of residents who pay no more than 30% of their monthly income for rent and the balance of their actual cost of rent is subsidized by HUD.”

Adopt and Implement a Housing First Model

The Stakeholders also reviewed the overarching/umbrella recommendation to **Adopt and Implement a Housing First Model**. All other recommendations, including **Permanent Supportive Housing Beds**, focus on implementing and supporting a Housing first Model.

This recommendation is stated in the three year recalibration as follows:

“A Housing First Model will be implemented that will address the needs of individuals and families who are a)chronically homeless; b) temporarily homeless; and c) at risk of becoming homeless.”

Successful Implementation

Stakeholders were asked to imagine what successful implementation of the recommendation **Permanent Supportive Housing Beds (PSH)** would look like and to identify measures that would indicate success.

The measures they identified are listed and have been grouped as either quantitative or qualitative.

Quantitative	Qualitative
Increase in Number of PSH beds	Fully trained staff
Reduce number of homeless on next Point in Time Count	Reduction of barriers
Reduce recurrent homelessness rates	Education in place
Increase in available Bridge Housing	Community education in place
Reduce police activity involving homeless	Clients feel valued
Reduce client medical concerns/number of ER visits	Client engagement
Increase in number of high school graduates	Successful bridge housing program
Increase variety of housing options available	Control over beds
	Safer/healthier neighborhoods
	Cities accountable
	No one left behind
	Clients leave PSH as functional and self-supportive members of the community
	Community understanding and buy-in
	Landlord engagement and participation
	Quality PSH
	Successful partnerships with supportive service providers
	No homeless living in parks
	Meeting needs of individuals

Continued on next page

Successful Implementation, Continued

Quantitative (continued)	Qualitative (continued)
	Community feels more empowered
	End of homelessness
	Agile plan
	Sympathetic providers
	Happier business owners
	Transparency
	People know they have a safe place to live
	Emergence of hope from desperation
	No wrong door
	Sustained stability through accountability

Current Reality

Stakeholders participated in a Strengths, Weaknesses, Benefits and Dangers analysis to help identify the current realities for addressing the Permanent Supportive Housing needs in San Bernardino County.

<p style="text-align: center;">Strengths</p> <ul style="list-style-type: none"> • Partnership • Resources • ICH, HPN (Unity) • Desire • Faith • Political Will • Leadership • Support • Plan 	<p style="text-align: center;">Benefits</p> <ul style="list-style-type: none"> • Cost reduction • Safe community • Healthy community • Stronger community and economy • Reduction of crime • Reduction of tax dollars spent on emergency services • Healthier/stronger families • Skilled workforce • Increased self sufficiency
<p style="text-align: center;">Weaknesses</p> <ul style="list-style-type: none"> • Resources/funding • Lack of housing units • Strength of partnership • Cities in denial of homelessness • Cross training • Participation • Weak links with city managers • Landlord participation • Out of touch with faith based organizations • Landlord advocacy • Infrastructure • Policy/law impediments • Size of County • Transportation • Communication 	<p style="text-align: center;">Dangers</p> <ul style="list-style-type: none"> • Financial burden • Complacency • Depletion/loss of funding • Unknown • New homeless • Technological advances (could reduce jobs available to successful clients)

Commitment

Following the identification of measures of successful implementation and current reality analysis, participants composed the following commitment in moving forward and creating the action plan.

Commitment

We are committed to collaborate to provide the total solution to end homelessness by:

- Developing the sufficient number of Permanent Supportive Housing beds
 - Seeking and obtaining adequate funding
 - Comply with local, state and federal laws
 - Participating in a Coordinated Entry System
 - Education and communication
 - Advocating when appropriate
-

Key Actions

Six [6] key actions were identified and participants documented tasks required to accomplish each action. Tasks were calendared by implementation/initiation date

Key Actions

- 1.0 Clarify
- 2.0 Document PSH inventory
- 3.0 Analyze assets and needs and make recommendations
- 4.0 Create/implement HPN New Funding Task Force
- 5.0 Educate
- 6.0 Advocate

1.0 Clarify

1.1	Clarify PSH definition for proper eligibility	July 2015
1.2	Provide input on recalibration updates	August 2015
1.3	Come to consensus on definition of PSH “For the purpose of...”	August 2015

2.0 Document PSH Inventory

2.1	Call Christy for an accurate count of current PSH beds	June 2015
2.2	Contact 211 for number of shelter beds or shelters	June 2015
2.3	Calculate chronic homeless population based on 2015 Point In Time count	June 2015
2.4	Document and distribute data collected from tasks 2.1, 2.2 and 2.3	June 2015

Continued on next page

Key Actions, Continued

3.0 Analyze assets and needs and make recommend- ations

3.1	Survey service providers for missing assets	June-August 2015
3.2	Identify Data Sources	July-August 2015
3.3	Identify Analyst(s)	July-August 2015
3.4	Map Assets with multiple 'views'	September 2015- March 2016
3.5	Use multiple data to identify and measure needs	March 2016
3.6	Overlay data <ul style="list-style-type: none"> - Geographically - Culturally - Vulnerability 	March-June 2016
3.7	Create mapping tool to clearly display results	February 2017

4.0 Create/ Implement H.P.N. New Funding Task Force

4.1	Define objective	July- September 2015
4.2	Kick-off conference	October 2015
4.3	Analyze conference results and recruit T.F.	October 2015- February 2016
4.4	Draft concept paper	March- May 2016
4.5	Review and finalize paper	June- September 2016
4.6	Submit to potential funding agencies	October- December 2016
4.7	Positive responses from funding agencies	Short term goal
4.8	Full funding of proposal	Long term goal

Continued on next page

Key Actions, Continued

5.0 Educate

5.1	Contact cities/County planning via letter	June 2015
5.2	Plan a meeting with city/county planning department	August 2015
5.3	Conduct a Service Provider Forum to assess/document the need and assets and to educate re: needs and assets	October 2015
5.4	Engage schools through presentations and information	November 2015
5.5	Host provider training regarding <ul style="list-style-type: none">- Fair Housing- Housing First- Updated PSH criteria	November 2015
5.6	Educate Service Providers to understand and support Coordinated Entry System	2016
5.7	Educate Contract Holders about funding contract to ensure compliance	2016

Continued on next page

Key Actions, Continued

6.0 Advocate

6.1	Send outreach letter to City Managers/Planning Commission	June 2015
6.2	Follow up with City Managers/Planning Commission re: letter	July 2015
6.3	Begin to conduct presentations to city councils	August 2015 (Ongoing)
6.4	Begin landlord outreach	September 2015 (Ongoing)
6.5	Begin provider outreach	October 2015 (Ongoing)
6.6	Conduct Consumer Satisfaction Survey/obtain client input	2016
6.7	Letters and follow up completed	Short term goal
6.8	Community buy-in	Long term goal

Coordination

At the conclusion of the planning session the group was asked to volunteer for various coordination positions.

Three participants were selected as plan coordinators to oversee the facilitation of the action plan as a whole, follow up with Key Action Participants and to report out to the ICH regarding progress related to each of the recommended key actions

Additional participants volunteered to coordinate/facilitate the implementation of the recommended key actions.

The plan coordinators and Key Action participants are as follows.

Plan Coordinators

- Connie Boring- CA State Department of Rehabilitation
 - Gary Madden- 211
 - Debra Watkins- NECON
-

Key Action Participants

1.0 Clarification	Jeff Little		
2.0 PSH Inventory	Jeff Little		
3.0 Analyze assets and needs and make recommendation	Debra Watkins		
4.0 Create/ Implement H.P.N. New Funding Task Force	Sharon Green	Debra Watkins	
5.0 Education	Debra Watkins	Connie Boring	Greg Coker
6.0 Advocate	Debra Watkins	Connie Boring	Sharon Green

Resolve

Next Steps

It is recommended that the Plan Coordinators establish a date to meet and discuss how facilitation of the action plan will occur.

Key points to consider may include:

- When each of the Key Actions will begin,
 - Who will spearhead each action
 - How follow up will occur to ensure that the actions are being initiated and completed according to the established timeline.
 - When/how progress will be reported to ICH and stakeholder group
-



Ending Chronic Homelessness in 2017

No one with a disability should have to experience long-term homelessness.

The Opportunity

The President’s FY 2016 Budget request includes an increase of \$265 million in HUD’s Homeless Assistance Grants. If funded by Congress, this would help to create the supportive housing necessary to achieve an end to chronic homelessness in 2017. Doing so will not only save and improve quality of lives, it will also save money. Ending chronic homelessness could reduce avoidable public costs such as avoidable emergency department visits, jail, and shelter costs.

The Need

On any given night, nearly 85,000 Americans with disabling health conditions who have been homeless for long periods of time—some for years or decades—can be found sleeping on our streets, in shelters, or other places not meant for human habitation. These men and women experiencing chronic homelessness commonly have a combination of mental health problems, substance use disorders, and medical conditions that worsen over time and too often lead to an early death.

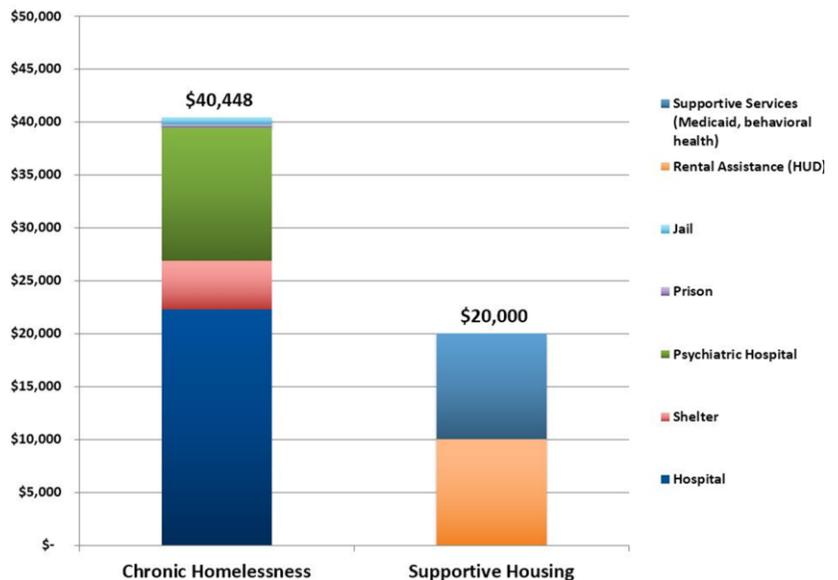
Without connections to the right types of care, they cycle in and out of hospital emergency departments and inpatient beds, detox programs, jails, prisons, and psychiatric institutions—all at high public expense. Some studies have found that leaving a person to remain chronically homeless costs taxpayers as much as \$30,000 to \$50,000 per year.



The Solution

There is a proven solution to chronic homelessness: **Supportive Housing**. Supportive housing has been shown to help people permanently stay out of homelessness, improve health conditions, and, by reducing their use of crisis services, lower public costs. Numerous studies have shown that it is cheaper to provide people experiencing chronic homelessness with supportive housing than to have them remain homeless.

Based on this overwhelming evidence, the Obama Administration has continued the effort begun by the prior Administration to achieve an end to chronic homelessness through the creation of supportive housing. In 2010, the Administration set a goal to end chronic homelessness, and has focused on increasing the supply of supportive housing and promoting the adoption of Housing First practices that help people obtain housing quickly and without barriers and preconditions.



Source: Culhane, Metraux, and Hadley (2002)

Progress to Date

Since 2010, the number of people experiencing chronic homelessness on any given night has declined by 22,892, or 21 percent. Since 2007, the number of sheltered individuals experiencing chronic homelessness declined by 25 percent, or 10,565 people, and the number of individuals experiencing chronic homelessness who are unsheltered declined by 33 percent, or 25,632 people. Communities—like the State of Utah—are announcing that they have achieved an end to chronic homelessness. Progress across the country is uneven, however, and in most communities today, there are not enough supportive housing units to end chronic homelessness. Shortfalls in the Federal budget, including through sequestration, have made it impossible to achieve the goal nationally by the original deadline of 2015.

The Strategy

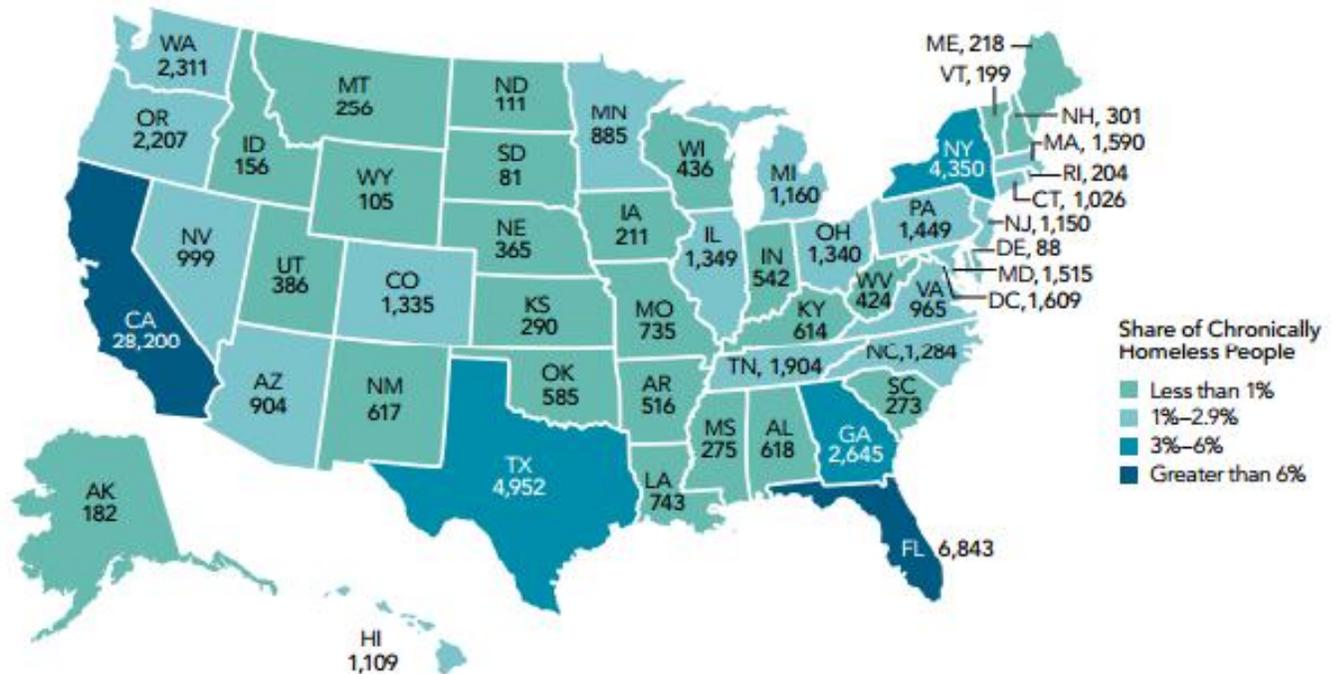
The Administration remains committed to this goal, and has reset the timeframe for achieving it from 2015 to 2017. To achieve this goal in this timeframe, Federal agencies are working with national partners and communities to:

- Create more supportive housing by redirecting existing housing resources
- Leverage Medicaid and behavioral health systems to provide supportive services
- Improve the targeting of supportive housing units to people experiencing chronic homelessness
- Implement best practices like Housing First and assertive outreach and engagement.

However, even the most aggressive use of existing resources still leaves a gap of 25,500 supportive housing units. The requested increase of \$265 million in HUD's budget will fill this gap and enable communities to achieve an end to chronic homelessness nationally.

The Data

Estimates of People Experiencing Chronic Homelessness By State, 2014



Contact



CALIFORNIA

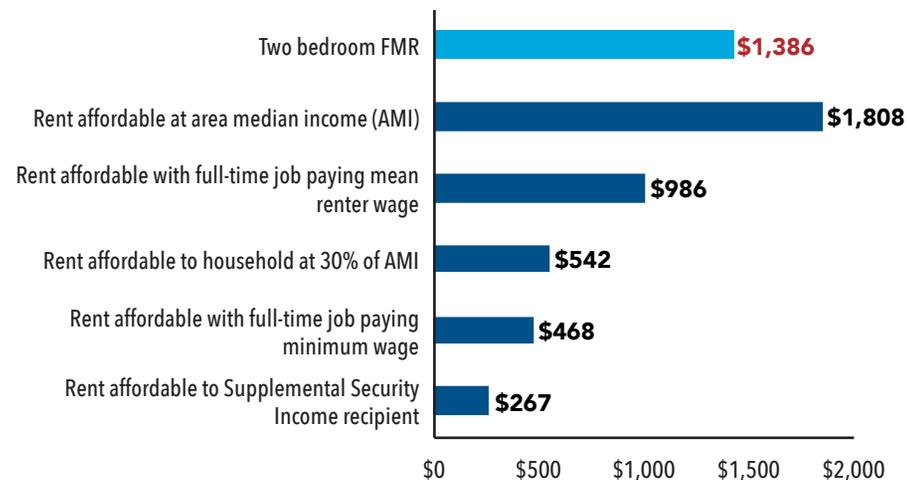


In California, the Fair Market Rent (FMR) for a two-bedroom apartment is **\$1,386**. In order to afford this level of rent and utilities — without paying more than 30% of income on housing — a household must earn **\$4,619** monthly or **\$55,433** annually. Assuming a 40-hour work week, 52 weeks per year, this level of income translates into an hourly Housing Wage of:

 **\$26.65** PER HOUR

STATE FACTS	
Minimum Wage	\$9.00
Average Renter Wage	\$18.96
2-Bedroom Housing Wage	\$26.65
Number of Renter Households	5,603,356
Percent Renters	45%

MOST EXPENSIVE COUNTIES	HOUSING WAGE*
Marin County	\$39.65
San Francisco County	\$39.65
San Mateo County	\$39.65
Santa Clara County	\$34.79
Santa Cruz County	\$33.77



118
Work Hours Per Week At Minimum Wage Needed To Afford a 2-Bedroom Unit (at FMR)

3
Number of Full-Time Jobs At Minimum Wage Needed To Afford a 2-Bedroom Unit (at FMR)

* Ranked from Highest to Lowest 2-Bedroom Housing Wage

CALIFORNIA

	FY15 HOUSING WAGE				HOUSING COSTS				AREA MEDIAN INCOME (AMI)				RENTER HOUSEHOLDS			
	Hourly wage necessary to afford 2 BR ¹ FMR ²	2 BR FMR	Annual income needed to afford 2 BR FMR	Full-time jobs at minimum wage needed to afford 2 BR FMR ³	Annual AMI ⁴	Monthly rent affordable at AMI ⁵	30% of AMI ⁶	Monthly rent affordable at 30% of AMI	Renter households (2009-2013)	% of total households (2009-2013)	Estimated hourly mean renter wage (2015)	Monthly rent affordable at mean renter wage	Full-time jobs at mean renter wage needed to afford 2 BR FMR			
California	\$26.65	\$1,386	\$55,433	3.0	\$72,330	\$1,808	\$21,699	\$542	5,603,356	45%	\$18.96	\$986	1.4			
Combined Nonmetro Areas	\$18.44	\$959	\$38,348	2.0	\$59,183	\$1,480	\$17,755	\$444	114,423	35%	\$10.83	\$563	1.7			
<u>Metropolitan Areas</u>																
Bakersfield MSA	\$16.00	\$832	\$33,280	1.8	\$52,000	\$1,300	\$15,600	\$390	107,108	42%	\$12.72	\$661	1.3			
Chico MSA	\$16.73	\$870	\$34,800	1.9	\$53,900	\$1,348	\$16,170	\$404	33,811	40%	\$11.55	\$600	1.4			
El Centro MSA	\$14.38	\$748	\$29,920	1.6	\$44,500	\$1,113	\$13,350	\$334	20,992	44%	\$7.90	\$411	1.8			
Fresno MSA	\$16.40	\$853	\$34,120	1.8	\$47,600	\$1,190	\$14,280	\$357	133,953	46%	\$11.27	\$586	1.5			
Hanford-Corcoran MSA	\$15.52	\$807	\$32,280	1.7	\$50,000	\$1,250	\$15,000	\$375	19,658	48%	\$12.19	\$634	1.3			
Los Angeles-Long Beach HMFA	\$27.38	\$1,424	\$56,960	3.0	\$63,000	\$1,575	\$18,900	\$473	1,715,285	53%	\$18.69	\$972	1.5			
Madera-Chowchilla MSA	\$16.94	\$881	\$35,240	1.9	\$45,800	\$1,145	\$13,740	\$344	16,678	39%	\$11.84	\$616	1.4			
Merced MSA	\$14.60	\$759	\$30,360	1.6	\$52,500	\$1,313	\$15,750	\$394	35,011	46%	\$11.25	\$585	1.3			
Modesto MSA	\$17.75	\$923	\$36,920	2.0	\$53,300	\$1,333	\$15,990	\$400	69,879	42%	\$12.50	\$650	1.4			
Napa MSA	\$29.10	\$1,513	\$60,520	3.2	\$84,200	\$2,105	\$25,260	\$632	19,462	39%	\$15.93	\$829	1.8			
Oakland-Fremont HMFA	\$30.48	\$1,585	\$63,400	3.4	\$92,900	\$2,323	\$27,870	\$697	383,123	42%	\$19.39	\$1,008	1.6			
Orange County HMFA	\$30.92	\$1,608	\$64,320	3.4	\$85,900	\$2,148	\$25,770	\$644	411,262	41%	\$18.47	\$960	1.7			
Oxnard-Thousand Oaks-Ventura MSA	\$29.90	\$1,555	\$62,200	3.3	\$85,300	\$2,133	\$25,590	\$640	93,736	35%	\$15.50	\$806	1.9			
Redding MSA	\$17.44	\$907	\$36,280	1.9	\$56,300	\$1,408	\$16,890	\$422	24,728	36%	\$11.81	\$614	1.5			
Riverside-San Bernardino-Ontario MSA *	\$22.17	\$1,153	\$46,120	2.5	\$60,500	\$1,513	\$18,150	\$454	458,755	36%	\$12.34	\$642	1.8			
Sacramento--Arden-Arcade--Roseville HMFA	\$19.46	\$1,012	\$40,480	2.2	\$71,500	\$1,788	\$21,450	\$536	280,121	39%	\$15.01	\$780	1.3			
Salinas MSA	\$23.92	\$1,244	\$49,760	2.7	\$65,000	\$1,625	\$19,500	\$488	63,030	50%	\$13.92	\$724	1.7			
San Benito County HMFA	\$24.60	\$1,279	\$51,160	2.7	\$72,800	\$1,820	\$21,840	\$546	6,530	38%	\$11.39	\$592	2.2			
San Diego-Carlsbad-San Marcos MSA	\$26.73	\$1,390	\$55,600	3.0	\$73,000	\$1,825	\$21,900	\$548	496,822	46%	\$18.51	\$963	1.4			
San Francisco HMFA	\$39.65	\$2,062	\$82,480	4.4	\$101,900	\$2,548	\$30,570	\$764	361,889	51%	\$32.88	\$1,710	1.2			
San Jose-Sunnyvale-Santa Clara HMFA	\$34.79	\$1,809	\$72,360	3.9	\$106,300	\$2,658	\$31,890	\$797	259,010	43%	\$34.16	\$1,776	1.0			

* 50th percentile FMR (See Appendix A).

1: BR = Bedroom 2; FMR = Fiscal Year 2015 Fair Market Rent (HUD, 2014).

3: This calculation uses the higher of the state or federal minimum wage. Local minimum wages are not used. See Appendix A.

4: AMI = Fiscal Year 2015 Area Median Income

5: "Affordable" rents represent the generally accepted standard of spending not more than 30% of gross income on gross housing costs.

6: The federal standard for extremely low income households. Does not include HUD-specific adjustments.

CALIFORNIA

	FY15 HOUSING WAGE		HOUSING COSTS		AREA MEDIAN INCOME (AMI)				RENTER HOUSEHOLDS				
	Hourly wage necessary to afford 2 BR ¹ FMR ²	2 BR FMR	Annual income needed to afford 2 BR FMR	Full-time jobs at minimum wage needed to afford 2 BR FMR ³	Annual AMI ⁴	Monthly rent affordable at AMI ⁵	30% of AMI ⁶	Monthly rent affordable at 30% of AMI	Renter households (2009-2013)	% of total households (2009-2013)	Estimated hourly mean renter wage (2015)	Monthly rent affordable at mean renter wage	Full-time jobs at mean renter wage needed to afford 2 BR FMR
San Luis Obispo-Paso Robles MSA	\$25.17	\$1,309	\$52,360	2.8	\$77,100	\$1,928	\$23,130	\$578	42,506	42%	\$12.51	\$651	2.0
Santa Barbara-Santa Maria-Goleta MSA	\$28.08	\$1,460	\$58,400	3.1	\$75,400	\$1,885	\$22,620	\$566	67,141	47%	\$15.43	\$802	1.8
Santa Cruz-Watsonville MSA	\$33.77	\$1,756	\$70,240	3.8	\$87,000	\$2,175	\$26,100	\$653	38,497	41%	\$13.58	\$706	2.5
Santa Rosa-Petaluma MSA	\$26.35	\$1,370	\$54,800	2.9	\$73,600	\$1,840	\$22,080	\$552	74,026	40%	\$15.29	\$795	1.7
Stockton MSA	\$18.19	\$946	\$37,840	2.0	\$59,600	\$1,490	\$17,880	\$447	89,883	42%	\$12.57	\$654	1.4
Vallejo-Fairfield MSA	\$23.21	\$1,207	\$48,280	2.6	\$74,500	\$1,863	\$22,350	\$559	54,197	38%	\$15.66	\$814	1.5
Visalia-Porterville MSA	\$14.83	\$771	\$30,840	1.6	\$44,000	\$1,100	\$13,200	\$330	55,954	43%	\$10.30	\$536	1.4
Yolo HMFA	\$21.25	\$1,105	\$44,200	2.4	\$72,200	\$1,805	\$21,660	\$542	33,115	47%	\$12.70	\$660	1.7
Yuba City MSA	\$16.35	\$850	\$34,000	1.8	\$56,500	\$1,413	\$16,950	\$424	22,771	41%	\$11.67	\$607	1.4
Counties													
Alameda County	\$30.48	\$1,585	\$63,400	3.4	\$92,900	\$2,323	\$27,870	\$697	255,111	47%	\$19.98	\$1,039	1.5
Alpine County	\$15.73	\$818	\$32,720	1.7	\$94,900	\$2,373	\$28,470	\$712	73	19%	\$13.76	\$716	1.1
Amador County	\$18.96	\$986	\$39,440	2.1	\$67,400	\$1,685	\$20,220	\$506	3,403	24%	\$10.82	\$562	1.8
Butte County	\$16.73	\$870	\$34,800	1.9	\$53,900	\$1,348	\$16,170	\$404	33,811	40%	\$11.55	\$600	1.4
Calaveras County	\$16.96	\$882	\$35,280	1.9	\$70,200	\$1,755	\$21,060	\$527	4,036	22%	\$10.30	\$535	1.6
Colusa County	\$14.90	\$775	\$31,000	1.7	\$58,700	\$1,468	\$17,610	\$440	2,518	37%	\$12.12	\$630	1.2
Contra Costa County	\$30.48	\$1,585	\$63,400	3.4	\$92,900	\$2,323	\$27,870	\$697	128,012	34%	\$18.20	\$946	1.7
Del Norte County	\$16.06	\$835	\$33,400	1.8	\$55,600	\$1,390	\$16,680	\$417	3,819	40%	\$10.33	\$537	1.6
El Dorado County	\$19.46	\$1,012	\$40,480	2.2	\$71,500	\$1,788	\$21,450	\$536	17,088	25%	\$11.39	\$592	1.7
Fresno County	\$16.40	\$853	\$34,120	1.8	\$47,600	\$1,190	\$14,280	\$357	133,953	46%	\$11.27	\$586	1.5
Glenn County	\$14.94	\$777	\$31,080	1.7	\$54,400	\$1,360	\$16,320	\$408	3,554	37%	\$9.68	\$504	1.5
Humboldt County	\$17.94	\$933	\$37,320	2.0	\$56,200	\$1,405	\$16,860	\$422	23,519	44%	\$10.87	\$565	1.7
Imperial County	\$14.38	\$748	\$29,920	1.6	\$44,500	\$1,113	\$13,350	\$334	20,992	44%	\$7.90	\$411	1.8
Inyo County	\$17.33	\$901	\$36,040	1.9	\$71,500	\$1,788	\$21,450	\$536	2,826	36%	\$10.33	\$537	1.7
Kern County	\$16.00	\$832	\$33,280	1.8	\$52,000	\$1,300	\$15,600	\$390	107,108	42%	\$12.72	\$661	1.3
Kings County	\$15.52	\$807	\$32,280	1.7	\$50,000	\$1,250	\$15,000	\$375	19,658	48%	\$12.19	\$634	1.3

* 50th percentile FMR (See Appendix A).

1: BR = Bedroom 2: FMR = Fiscal Year 2015 Fair Market Rent (HUD, 2014).

3: This calculation uses the higher of the state or federal minimum wage. Local minimum wages are not used. See Appendix A.

4: AMI = Fiscal Year 2015 Area Median Income

5: "Affordable" rents represent the generally accepted standard of spending not more than 30% of gross income on gross housing costs.

6: The federal standard for extremely low income households. Does not include HUD-specific adjustments.

CALIFORNIA

	FY15 HOUSING WAGE		HOUSING COSTS			AREA MEDIAN INCOME (AMI)				RENTER HOUSEHOLDS				
	Hourly wage necessary to afford 2 BR ¹ FMR ²		2 BR FMR	Annual income needed to afford 2 BR FMR	Full-time jobs at minimum wage needed to afford 2 BR FMR ³	Annual AMI ⁴	Monthly rent affordable at AMI ⁵	30% of AMI ⁶	Monthly rent affordable at 30% of AMI	Renter households (2009-2013)	% of total households (2009-2013)	Estimated hourly mean renter wage (2015)	Monthly rent affordable at mean renter wage	Full-time jobs at mean renter wage needed to afford 2 BR FMR
Lake County	\$16.40		\$853	\$34,120	1.8	\$48,000	\$1,200	\$14,400	\$360	9,889	37%	\$10.32	\$537	1.6
Lassen County	\$17.77		\$924	\$36,960	2.0	\$69,400	\$1,735	\$20,820	\$521	3,686	37%	\$9.76	\$508	1.8
Los Angeles County	\$27.38		\$1,424	\$56,960	3.0	\$63,000	\$1,575	\$18,900	\$473	1,715,285	53%	\$18.69	\$972	1.5
Madera County	\$16.94		\$881	\$35,240	1.9	\$45,800	\$1,145	\$13,740	\$344	16,678	39%	\$11.84	\$616	1.4
Marin County	\$39.65		\$2,062	\$82,480	4.4	\$101,900	\$2,548	\$30,570	\$764	38,316	37%	\$17.52	\$911	2.3
Mariposa County	\$16.15		\$840	\$33,600	1.8	\$61,900	\$1,548	\$18,570	\$464	2,053	28%	\$7.94	\$413	2.0
Mendocino County	\$22.06		\$1,147	\$45,880	2.5	\$58,900	\$1,473	\$17,670	\$442	14,151	42%	\$10.58	\$550	2.1
Merced County	\$14.60		\$759	\$30,360	1.6	\$52,500	\$1,313	\$15,750	\$394	35,011	46%	\$11.25	\$585	1.3
Modoc County	\$12.37		\$643	\$25,720	1.4	\$49,900	\$1,248	\$14,970	\$374	1,242	31%	\$8.65	\$450	1.4
Mono County	\$21.94		\$1,141	\$45,640	2.4	\$77,000	\$1,925	\$23,100	\$578	2,338	44%	\$11.35	\$590	1.9
Monterey County	\$23.92		\$1,244	\$49,760	2.7	\$65,000	\$1,625	\$19,500	\$488	63,030	50%	\$13.92	\$724	1.7
Napa County	\$29.10		\$1,513	\$60,520	3.2	\$84,200	\$2,105	\$25,260	\$632	19,462	39%	\$15.93	\$829	1.8
Nevada County	\$26.06		\$1,355	\$54,200	2.9	\$67,500	\$1,688	\$20,250	\$506	11,223	27%	\$11.62	\$604	2.2
Orange County	\$30.92		\$1,608	\$64,320	3.4	\$85,900	\$2,148	\$25,770	\$644	411,262	41%	\$18.47	\$960	1.7
Placer County	\$19.46		\$1,012	\$40,480	2.2	\$71,500	\$1,788	\$21,450	\$536	39,053	29%	\$14.36	\$747	1.4
Plumas County	\$16.56		\$861	\$34,440	1.8	\$54,400	\$1,360	\$16,320	\$408	2,722	30%	\$11.47	\$596	1.4
Riverside County *	\$22.17		\$1,153	\$46,120	2.5	\$60,500	\$1,513	\$18,150	\$454	228,689	33%	\$11.90	\$619	1.9
Sacramento County	\$19.46		\$1,012	\$40,480	2.2	\$71,500	\$1,788	\$21,450	\$536	223,980	43%	\$15.52	\$807	1.3
San Benito County	\$24.60		\$1,279	\$51,160	2.7	\$72,800	\$1,820	\$21,840	\$546	6,530	38%	\$11.39	\$592	2.2
San Bernardino County *	\$22.17		\$1,153	\$46,120	2.5	\$60,500	\$1,513	\$18,150	\$454	230,066	38%	\$12.74	\$663	1.7
San Diego County	\$26.73		\$1,390	\$55,600	3.0	\$73,000	\$1,825	\$21,900	\$548	496,822	46%	\$18.51	\$963	1.4
San Francisco County	\$39.65		\$2,062	\$82,480	4.4	\$101,900	\$2,548	\$30,570	\$764	218,950	63%	\$32.56	\$1,693	1.2
San Joaquin County	\$18.19		\$946	\$37,840	2.0	\$59,600	\$1,490	\$17,880	\$447	89,883	42%	\$12.57	\$654	1.4
San Luis Obispo County	\$25.17		\$1,309	\$52,360	2.8	\$77,100	\$1,928	\$23,130	\$578	42,506	42%	\$12.51	\$651	2.0
San Mateo County	\$39.65		\$2,062	\$82,480	4.4	\$101,900	\$2,548	\$30,570	\$764	104,623	41%	\$37.81	\$1,966	1.0
Santa Barbara County	\$28.08		\$1,460	\$58,400	3.1	\$75,400	\$1,885	\$22,620	\$566	67,141	47%	\$15.43	\$802	1.8
Santa Clara County	\$34.79		\$1,809	\$72,360	3.9	\$106,300	\$2,658	\$31,890	\$797	259,010	43%	\$34.16	\$1,776	1.0
Santa Cruz County	\$33.77		\$1,756	\$70,240	3.8	\$87,000	\$2,175	\$26,100	\$653	38,497	41%	\$13.58	\$706	2.5
Shasta County	\$17.44		\$907	\$36,280	1.9	\$56,300	\$1,408	\$16,890	\$422	24,728	36%	\$11.81	\$614	1.5

* 50th percentile FMR (See Appendix A).

1: BR = Bedroom 2; FMR = Fiscal Year 2015 Fair Market Rent (HUD, 2014).

3: This calculation uses the higher of the state or federal minimum wage. Local minimum wages are not used. See Appendix A.

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CALIFORNIA

	FY15 HOUSING WAGE		HOUSING COSTS		AREA MEDIAN INCOME (AMI)				RENTER HOUSEHOLDS					
	Hourly wage necessary to afford 2 BR ¹ FMR ²		2 BR FMR	Annual income needed to afford 2 BR FMR	Full-time jobs at minimum wage needed to afford 2 BR FMR ³	Annual AMI ⁴	Monthly rent affordable at AMI ⁵	30% of AMI ⁶	Monthly rent affordable at 30% of AMI	Renter households (2009-2013)	% of total households (2009-2013)	Estimated hourly mean renter wage (2015)	Monthly rent affordable at mean renter wage	Full-time jobs at mean renter wage needed to afford 2 BR FMR
Sierra County	\$20.00		\$1,040	\$41,600	2.2	\$59,800	\$1,495	\$17,940	\$449	278	22%	\$7.98	\$415	2.5
Siskiyou County	\$15.27		\$794	\$31,760	1.7	\$49,600	\$1,240	\$14,880	\$372	7,237	37%	\$9.77	\$508	1.6
Solano County	\$23.21		\$1,207	\$48,280	2.6	\$74,500	\$1,863	\$22,350	\$559	54,197	38%	\$15.66	\$814	1.5
Sonoma County	\$26.35		\$1,370	\$54,800	2.9	\$73,600	\$1,840	\$22,080	\$552	74,026	40%	\$15.29	\$795	1.7
Stanislaus County	\$17.75		\$923	\$36,920	2.0	\$53,300	\$1,333	\$15,990	\$400	69,879	42%	\$12.50	\$650	1.4
Sutter County	\$16.35		\$850	\$34,000	1.8	\$56,500	\$1,413	\$16,950	\$424	12,827	40%	\$11.10	\$577	1.5
Tehama County	\$15.10		\$785	\$31,400	1.7	\$50,000	\$1,250	\$15,000	\$375	7,599	33%	\$13.10	\$681	1.2
Trinity County	\$14.25		\$741	\$29,640	1.6	\$48,800	\$1,220	\$14,640	\$366	1,633	29%	\$8.48	\$441	1.7
Tulare County	\$14.83		\$771	\$30,840	1.6	\$44,000	\$1,100	\$13,200	\$330	55,954	43%	\$10.30	\$536	1.4
Tuolumne County	\$18.31		\$952	\$38,080	2.0	\$63,600	\$1,590	\$19,080	\$477	6,624	30%	\$10.37	\$539	1.8
Ventura County	\$29.90		\$1,555	\$62,200	3.3	\$85,300	\$2,133	\$25,590	\$640	93,736	35%	\$15.50	\$806	1.9
Yolo County	\$21.25		\$1,105	\$44,200	2.4	\$72,200	\$1,805	\$21,660	\$542	33,115	47%	\$12.70	\$660	1.7
Yuba County	\$16.35		\$850	\$34,000	1.8	\$56,500	\$1,413	\$16,950	\$424	9,944	41%	\$13.02	\$677	1.3

* 50th percentile FMR (See Appendix A).

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Interagency Council on Homelessness

Housing Committee Report

Members: Don Smith, Doug Fazekas, Kim Carter

Recommendations:

1. Host informational training for the local apartment owners associations to discuss opportunities to address the homeless issue
2. Coordinate with local Housing Opportunities Collaborative to pursue housing opportunities
3. Follow through with the Recalibrated Strategies implementation plan which should set direction and focus for committee members
4. HUD Announces Issuance of the ESG Notice for Additional Public Comment on the Interim Rule

https://www.hudexchange.info/resources/documents/ESG-Notice-Solicitation-of-Comment-on-Specific-Issues.pdf?utm_source=HUD+Exchange+Mailing+List&utm_campaign=3b04869213-3-HUD+Announces+the+ESG+Notice+for+Public+Comment&utm_medium=email&utm_term=0_f32b935a5f-3b04869213-19324261

5. Funding Opportunities

2015 Multifamily Housing NOFA

6. The \$47.5 million Multifamily Housing NOFA has been released. Applications are due August 6, 2015. Workshops are set for Sacramento (Wednesday, June 17) and Van Nuys (Tuesday, June 23). If you plan on attending one of the workshops, you will need to print the MHP PowerPoint; copies will not be available at the workshops. You may access the MHP PowerPoint and MHP NOFA by using the attached link below.

<http://www.hcd.ca.gov/financial-assistance/multifamily-housing-program/>



**County of San Bernardino
Office of Homeless Services**

303 E. Vanderbilt Way, First Floor • San Bernardino, CA 92415-0026

Phone: (909) 386-8297 • Fax: (909) 890-0868

Email: homelessrpf@hss.sbcounty.gov • Website: <http://www.sbcounty.gov/sbchp>

**Homeless Youth Taskforce Report
Prepared for the Interagency Council on Homelessness**

Date June 24, 2015

Presenter James Ramos, Chair and Brenda Dowdy, Co-Chair, Homeless Youth Task Force

Announcements The table below lists the announcements for today's meeting.

Announcements
Homeless Youth Survey <ul style="list-style-type: none">Members of the Taskforce are completing the report on the recent Unaccompanied Homeless Youth Survey. The report will be published by July 2015.
Homeless Youth Taskforce <ul style="list-style-type: none">Our next meeting will take place on Wednesday, July 29, 2015 from 3:00 pm to 4:30 pm, at the San Bernardino Transitional Age Youth Center (TAY), located at 780 E. Gilbert Street in San Bernardino.



Interagency Council on Homelessness Bills of Interest
June 24, 2015

Please find below bills of interest introduced for the 2015/16 Legislative Session. The status of the bills listed below reflects the report date of June 17, 2015.

[AB 35](#) ([Chiu](#) D) Income taxes: credits: low-income housing: allocation increase.
Current Analysis: 05/29/2015 [Assembly Floor Analysis \(text 5/20/2015\)](#)
Status: 6/4/2015-In Senate. Read first time. To Com. on RLS. for assignment.
Location: 6/4/2015-S. RLS.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would, for calendar years beginning 2016, increase the aggregate housing credit dollar amount that may be allocated among low-income housing projects by \$300,000,000, as specified. The bill, under the insurance taxation law, the Personal Income Tax Law, and the Corporation Tax Law, would modify the definition of applicable percentage relating to qualified low-income buildings that meet specified criteria. This bill contains other related provisions.

Vote Events:
06/04/2015 ASM. FLOOR (Y:78 N:0 A:2) (P)
05/28/2015 ASM. APPR. (Y:17 N:0 A:0) (P)
05/18/2015 ASM. REV. & TAX. (Y:9 N:0 A:0) (P)
04/15/2015 ASM. H. & C.D. (Y:7 N:0 A:0) (P)

[AB 59](#) ([Waldron](#) R) Mental health services: assisted outpatient treatment.
Current Analysis: 04/25/2015 [Assembly Judiciary \(text 4/20/2015\)](#)
Status: 5/1/2015-Failed Deadline pursuant to Rule 61(a)(2). (Last location was JUD. on 4/28/2015)
Location: 5/1/2015-A. 2 YEAR

Desk	2 year	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Under the Assisted Outpatient Treatment Demonstration Project Act of 2002, known as Laura's Law, participating counties are required to provide prescribed assisted outpatient services, including a service planning and delivery process, that are client-directed and employ psychosocial rehabilitation and recovery principles. Current law authorizes participating counties to pay for the services provided from moneys distributed to the counties from various continuously appropriated funds, including the Local Revenue Fund and the Mental Health Services Fund when included in a county plan, as specified. This bill would delete the January 1, 2017, repeal date of those provisions, thereby extending the program indefinitely, and would also delete the finding requirement described above.

Vote Events:
04/28/2015 ASM. JUD. (Y:3 N:4 A:3) (F)
04/14/2015 ASM. HEALTH (Y:16 N:0 A:3) (P)

[AB 90](#) ([Chau](#) D) Federal Housing Trust Fund.
Current Analysis: 05/29/2015 [Assembly Floor Analysis \(text 4/22/2015\)](#)
Status: 6/4/2015-In Senate. Read first time. To Com. on RLS. for assignment.
Location: 6/4/2015-S. RLS.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would designate the Department of Housing and Community Development as the state agency responsible for administering funds received by the state from the federal Housing Trust Fund. This bill would require the department to administer the funds through programs that produce, preserve,

rehabilitate, or support the operation of rental housing for extremely low income and very low income households, except that up to 10% of funding may be used to support homeownership for extremely low income and very low income households.

Vote Events:

- 06/04/2015 ASM. FLOOR (Y:80 N:0 A:0) (P)
- 05/28/2015 ASM. APPR. (Y:17 N:0 A:0) (P)
- 04/15/2015 ASM. H. & C.D. (Y:7 N:0 A:0) (P)

AB 379 ([Gordon](#) D) Foster youth: complaint of noncompliance.

Current Analysis: 06/01/2015 [Assembly Floor Analysis \(text 5/28/2015\)](#)

Status: 6/11/2015-Referred to Com. on ED.

Location: 6/11/2015-S. ED.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law authorizes certain foster children living in emergency shelters to receive educational services at the emergency shelter as necessary for short periods of time for specified reasons. Current law requires that all educational and school placement decisions be based on the best interests of the child. This bill would specify that the short period of time described above not exceed 5 schooldays, except as provided. The bill would authorize the filing of a complaint of noncompliance with these provisions to be filed with the local educational agency under the Uniform Complaint Procedures set forth in the California Code of Regulations.

Vote Events:

- 06/02/2015 ASM. FLOOR (Y:78 N:0 A:2) (P)
- 05/28/2015 ASM. APPR. (Y:17 N:0 A:0) (P)
- 03/25/2015 ASM. ED. (Y:6 N:0 A:1) (P)

AB 388 ([Chang](#) R) Housing: homeless veterans: reports.

Current Analysis: 05/21/2015 [Assembly Floor Analysis \(text 4/22/2015\)](#)

Status: 6/11/2015-Referred to Com. on T. & H.

Location: 6/11/2015-S. T. & H.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: The Department of Housing and Community Development is required to submit an annual report to the Governor and both houses of the Legislature on the operations and accomplishments during the previous fiscal year of the housing programs administered by the department and an evaluation, in collaboration with the Department of Veterans Affairs, of any program established by the department pursuant to the Veterans Housing and Homeless Prevention Act of 2014. This bill would additionally require the evaluation to include information relating to the effectiveness in helping homeless veterans of any organization that was issued funds pursuant to that act.

Vote Events:

- 05/28/2015 ASM. FLOOR (Y:76 N:0 A:4) (P)
- 05/20/2015 ASM. APPR. (Y:15 N:0 A:2) (P)
- 04/28/2015 ASM. V.A. (Y:9 N:0 A:0) (P)
- 04/15/2015 ASM. H. & C.D. (Y:7 N:0 A:0) (P)

AB 801 ([Bloom](#) D) Postsecondary education: Success for Homeless Youth in Higher Education Act.

Current Analysis: 06/02/2015 [Assembly Floor Analysis \(text 6/1/2015\)](#)

Status: 6/3/2015-In Senate. Read first time. To Com. on RLS. for assignment.

Location: 6/3/2015-S. RLS.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would enact the Success for Homeless Youth in Higher Education Act. The bill would extend a specified referenced priority requirement, with respect to the California State University and community college districts, and would extend the request for the granting of priority, with respect to the University of California, to include homeless youth and former homeless youth, as defined, and extend the operation of

this provision until January 1, 2020. To the extent that this provision would impose new duties on community college districts, it would constitute a state-mandated local program.

Vote Events:

06/03/2015 ASM. FLOOR (Y:61 N:13 A:6) (P)

05/28/2015 ASM. APPR. (Y:12 N:3 A:2) (P)

04/28/2015 ASM. HUM. S. (Y:5 N:0 A:2) (P)

04/21/2015 ASM. HIGHER ED. (Y:11 N:2 A:0) (P)

[AB 870](#) ([Cooley](#) D) Homelessness: rapid rehousing.

Current Analysis: 06/03/2015 [Assembly Floor Analysis \(text 6/2/2015\)](#)

Status: 6/4/2015-In Senate. Read first time. To Com. on RLS. for assignment.

Location: 6/4/2015-S. RLS.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would establish a 2-year pilot program within the Department of Housing and Community Development for awarding grants to counties that operate a rapid rehousing program. The bill would require the department to select 4 counties to receive these grant funds, giving priority to counties with existing programs that have demonstrated effectiveness in providing supporting housing for homeless individuals and veterans.

Vote Events:

06/04/2015 ASM. FLOOR (Y:66 N:12 A:2) (P)

05/28/2015 ASM. APPR. (Y:12 N:5 A:0) (P)

04/29/2015 ASM. H. & C.D. (Y:5 N:1 A:1) (P)

[AB 982](#) ([Eggman](#) D) Child care and development: eligibility: homeless children.

Current Analysis: 05/04/2015 [Assembly Appropriations \(text 4/21/2015\)](#)

Status: 6/9/2015-In committee: Set, first hearing. Hearing canceled at the request of author.

Location: 5/28/2015-S. ED.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law provides that it is the intent of the Legislature that in providing child development programs the Superintendent of Public Instruction give priority to children of families that qualify for public assistance and other low-income and disadvantaged families. This bill would also include homeless families as part of the intended priority for child development programs. This bill contains other related provisions and other current laws.

Vote Events:

05/14/2015 ASM. FLOOR (Y:78 N:0 A:2) (P)

05/06/2015 ASM. APPR. (Y:17 N:0 A:0) (P)

04/14/2015 ASM. HUM. S. (Y:7 N:0 A:0) (P)

[AB 1166](#) ([Bloom](#) D) Pupils in foster care: pupils who are homeless children or youth: school transfer: exemption from local graduation requirements.

Current Analysis: 06/09/2015 [Senate Education \(text 2/27/2015\)](#)

Status: 6/10/2015-From committee: Do pass and re-refer to Com. on APPR. with recommendation: To Consent Calendar. (Ayes 8. Noes 0.) (June 10). Re-referred to Com. on APPR.

Location: 6/10/2015-S. APPR.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law requires the school district to notify specified individuals, including a pupil in foster care or a pupil who is a homeless child or youth, within 30 calendar days of the date that a pupil who may qualify for the exemption from local graduation requirements transfers into a school, of the availability of the exemption and whether the pupil qualifies for an exemption. This bill would, if the school district fails to provide that notification, declare the effected pupil eligible for the exemption from local graduation requirements once notified, even if that notification is received after the termination of the court's jurisdiction over the pupil or after the pupil is no longer a homeless child or youth, as applicable.

Vote Events:

06/10/2015 SEN. ED. (Y:8 N:0 A:1) (P)
 04/30/2015 ASM. FLOOR (Y:77 N:0 A:3) (P)
 04/22/2015 ASM. APPR. (Y:17 N:0 A:0) (P)
 04/08/2015 ASM. ED. (Y:7 N:0 A:0) (P)

[AB 1225](#) ([Weber](#) D) Housing: former nonminor dependents: homeless youth.
 Status: 5/1/2015-Failed Deadline pursuant to Rule 61(a)(2). (Last location was HUM. S. on 3/23/2015)
 Location: 5/1/2015-A. 2 YEAR

Desk	2 year	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law makes transitional housing available to any foster child who is at least 16 years of age and not more than 18 years of age who is eligible for AFDC-FC benefits, any nonminor dependent who is eligible for AFDC-FC benefits, and any former foster youth who is at least 18 years of age and not more than 24 years of age who has exited from the foster care system and has elected to participate in the Transitional Housing Program-Plus, as defined, if he or she has not received services pursuant to these provisions for more than a total of 24 months. This bill would additionally make transitional housing available to any former nonminor dependent with special needs and any homeless youth.

[AB 1228](#) ([Gipson](#) D) Public postsecondary education: campus housing: priority for homeless youth.
 Current Analysis: 05/08/2015 [Assembly Floor Analysis \(text 2/27/2015\)](#)
 Status: 5/28/2015-Referred to Com. on ED.
 Location: 5/28/2015-S. ED.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law requests the Regents of the University of California and the Trustees of the California State University to explore methods of using the admissions-by-exemption category to assist the transition of students in foster care into 4-year public institutions of higher education. This bill would request the regents and the trustees to provide that assistance to students who are homeless youth.

Vote Events:

05/14/2015 ASM. FLOOR (Y:76 N:2 A:2) (P)
 05/06/2015 ASM. APPR. (Y:16 N:1 A:0) (P)
 04/21/2015 ASM. HIGHER ED. (Y:12 N:1 A:0) (P)

[AB 1335](#) ([Atkins](#) D) Building Homes and Jobs Act.
 Current Analysis: 06/03/2015 [Assembly Floor Analysis \(text 6/3/2015\)](#)
 Status: 6/4/2015-Assembly Rule 69(d) suspended. (Page 1903.)
 Location: 6/3/2015-A. THIRD READING

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would enact the Building Homes and Jobs Act. The bill would make legislative findings and declarations relating to the need for establishing permanent, ongoing sources of funding dedicated to affordable housing development. This bill contains other related provisions and other existing laws.

Vote Events:

06/03/2015 ASM. FLOOR (Y:48 N:26 A:6) (P)
 05/28/2015 ASM. APPR. (Y:12 N:4 A:1) (P)
 04/29/2015 ASM. H. & C.D. (Y:5 N:1 A:1) (P)

[AB 1403](#) ([Maienschein](#) R) Housing: joint powers agreement.
 Current Analysis: 06/11/2015 [Sen Comm Senate Committee On Transportation And Housing \(text \)](#)
 Status: 6/16/2015-Do pass, but re-refer to the Committee on Governance and Finance Recommend Consent.
 Location: 6/16/2015-S. GOV. & F.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf.	Enrolled	Vetoe	Chaptre
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1st House	2nd House	Conc.		d	d
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Summary: Would provide that, notwithstanding any other provision of the Joint Exercise of Powers Act, a private, nonprofit corporation that provides services to homeless persons or for the prevention of homelessness may form a joint powers agency or enter into a joint powers agreement with a public agency for the purpose of providing frequent user coordinated care housing services, defined by to mean housing combined with other supportive services, as defined, for homeless persons identified by a city or county as the most costly, frequent users of publicly funded emergency services.

Vote Events:

06/16/2015 SEN. T. & H. (Y:11 N:0 A:0) (P)

05/22/2015 ASM. FLOOR (Y:74 N:0 A:6) (P)

05/13/2015 ASM. L. GOV. (Y:9 N:0 A:0) (P)

04/29/2015 ASM. H. & C.D. (Y:6 N:0 A:1) (P)

[SB 7](#)

([Wolk](#) D) Housing: water meters: multiunit structures.

Current Analysis: 06/15/2015 [Assembly Housing And Community Development \(text 12/1/2014\)](#)

Status: 5/22/2015-Referred to Coms. on H. & C.D. and W., P., & W.

Location: 5/22/2015-A. H. & C.D.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would express the intent of the Legislature to encourage the conservation of water in multifamily residential rental buildings through means either within the landlord's or the tenant's control, and to ensure that the practices involving the submetering of dwelling units for water service are just and reasonable, and include appropriate safeguards for both tenants and landlords. This bill contains other related provisions and other existing laws.

Vote Events:

05/04/2015 SEN. FLOOR (Y:28 N:7 A:4) (P)

[SB 46](#)

([Roth](#) D) Veterans housing.

Status: 5/15/2015-Failed Deadline pursuant to Rule 61(a)(3). (Last location was RLS. on 1/15/2015)

Location: 5/15/2015-S. 2 YEAR

Desk	2 year	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law authorizes the Department of Veterans Affairs to establish a pilot project for the purpose of establishing a cooperative housing project for veterans and their families. This bill would make technical, nonsubstantive changes to those provisions.

[SB 130](#)

([Roth](#) D) Veterans: mental health.

Current Analysis: 04/27/2015 [Senate Veterans Affairs \(text 4/16/2015\)](#)

Status: 5/1/2015-Failed Deadline pursuant to Rule 61(a)(2). (Last location was V. A. on 4/22/2015)

Location: 5/1/2015-S. 2 YEAR

Desk	2 year	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require the California Housing Finance Agency, the Department of Housing and Community Development, and the Department of Veterans Affairs to establish a grant process to provide grants to entities that provide supportive services as part of housing programs established under the Veterans Housing and Homelessness Prevention Act of 2014. The bill would provide that implementation of this grant process would be subject to appropriation by the Legislature.

[SB 145](#)

([Pan](#) D) Health facilities: patient transporting.

Current Analysis: 05/21/2015 [Senate Floor Analyses \(text 5/5/2015\)](#)

Status: 6/4/2015-Referred to Coms. on HEALTH and JUD.

Location: 6/4/2015-A. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would prohibit a general acute care hospital, acute psychiatric hospital, or special hospital from causing a patient who, in the judgment of the attending physician or other licensed health care professional, acting within the scope of his or her practice, is at risk of serious injury or death as a result of clinical alcohol intoxication, to be transported to another location except when the patient is either medically stabilized or appropriately transferred to another health facility pursuant to another provision of law.

Vote Events:

05/26/2015 SEN. FLOOR (Y:21 N:15 A:3) (P)

04/28/2015 SEN. JUD. (Y:4 N:1 A:2) (P)

04/22/2015 SEN. HEALTH (Y:5 N:2 A:2) (P)

[SB 214](#) ([Berryhill](#) R) Foster care services.

Status: 5/15/2015-Failed Deadline pursuant to Rule 61(a)(3). (Last location was RLS. on 2/26/2015)

Location: 5/15/2015-S. 2 YEAR

Desk	2 year	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Current law declares the intent of the Legislature to preserve and strengthen a child's family ties whenever possible, removing the child from the custody of his or her parents only when necessary for his or her welfare or for the safety and protection of the public. Current law includes various provisions relating to appropriate placement and other services for children in foster care. This bill would make technical, nonsubstantive changes to provisions relating to foster children.

[SB 252](#) ([Leno](#) D) Pupils: diploma alternatives: fees.

Current Analysis: 06/02/2015 [Senate Floor Analyses \(text 6/2/2015\)](#)

Status: 6/15/2015-Referred to Com. on ED.

Location: 6/15/2015-A. ED.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would prohibit the State Department of Education from charging the fee for an examination application to a homeless child or youth who is under 25 years of age and can verify his or her status as a homeless youth. The bill would authorize a homeless services provider, as defined, that has knowledge of the examinee's housing status to verify the examinee's status for purposes of these provisions. This bill contains other related provisions and other existing laws.

Vote Events:

06/03/2015 SEN. FLOOR (Y:40 N:0 A:0) (P)

05/28/2015 SEN. APPR. (Y:6 N:0 A:1) (P)

05/04/2015 SEN. APPR. (Y:7 N:0 A:0) (P)

03/25/2015 SEN. ED. (Y:8 N:0 A:0) (P)

[SB 445](#) ([Liu](#) D) Pupil instruction and services: homeless children.

Current Analysis: 05/06/2015 [Senate Floor Analyses \(text 4/15/2015\)](#)

Status: 5/28/2015-Referred to Com. on ED.

Location: 5/28/2015-A. ED.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would require a local educational agency serving a homeless child, once a child becomes a homeless child, to allow the homeless child to continue his or her education in the school of origin through the duration of the homelessness, and would set forth related requirements governing the enrollment of homeless children. By imposing additional duties on local educational agencies, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

Vote Events:

05/18/2015 SEN. FLOOR (Y:36 N:0 A:3) (P)

05/04/2015 SEN. APPR. (Y:7 N:0 A:0) (P)
 04/08/2015 SEN. ED. (Y:8 N:0 A:0) (P)

[SB 608](#) (Liu D) Homelessness.

Current Analysis: 04/02/2015 [Senate Transportation And Housing \(text 2/27/2015\)](#)

Status: 5/1/2015-Failed Deadline pursuant to Rule 61(a)(2). (Last location was T. & H. on 3/12/2015)

Location: 5/1/2015-S. 2 YEAR

Desk	2 year	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would enact the Right to Rest Act, which would afford persons experiencing homelessness the right to use public space without discrimination based on their housing status. Because the bill would require local agencies to perform additional duties, it would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

[SB 636](#) (Liu D) Homeless youth: basic material needs assistance.

Current Analysis: 05/04/2015 [Senate Appropriations \(text 4/23/2015\)](#)

Status: 5/29/2015-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. on 5/28/2015)

Location: 5/29/2015-S. 2 YEAR

Desk	Policy	2 year	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Would create the Homeless Youth Basic Material Needs Assistance Program. This bill would require that moneys appropriated by the Legislature for the purposes of the program be allocated proportionally by the State Department of Social Services to each county program based on the number of homeless youth in the county. The bill would authorize a county to establish the program or request the department to administer the program, in which case the department would be required to retain the county's proportional share of funds and directly administer a program in that county.

Vote Events:

05/04/2015 SEN. APPR. (Y:7 N:0 A:0) (P)

04/21/2015 SEN. HUMAN S. (Y:5 N:0 A:0) (P)



ICH REPORT

DATE: June 24, 2015

PHONE: (909) 387-4565

PRESENTED BY: KENT PAXTON

Homeless Policy Advisor, Fifth District

SUBJECT: ICH Related Board Items

<http://cob-sire.sbcounty.gov/sirepub/>

Board Agenda Items

06/02/2015

21. Department of Behavioral Health-This item is a **GRANT APPLICATION TO THE CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES FOR THE FEDERAL MCKINNEY PROJECTS FOR ASSISTANCE IN TRANSITION FROM HOMELESSNESS PROGRAM 2015-16** for continued funding in the amount of \$501,327, for a period of July 1, 2015 through June 30, 2016.

Background: PATH is a formula grant program, which provides funding for the provision of services to individuals who are suffering from a severe mental illness or from a co-occurring severe mental illness and substance abuse disorder who are homeless or at imminent risk of becoming homeless. DBH will use PATH program funding to provide outreach and mental health services including medication support, job training, education services, and case management services to an estimated 400 unduplicated clients at an annual cost of \$1,671 per individual.

The federal government sponsors the PATH grant; DHCS is responsible for the administration of the entire program for California including the distribution of PATH funds. In California, only county mental health departments are eligible to receive PATH funds from DHCS. DBH received PATH funding since the inception of the PATH grant program in 1991-02.

Financial Impact: This item does not impact Discretionary General Funding (Net County Cost). The PATH program requires a match of \$1 for each \$3 of PATH program funding received. DBH will provide the \$167,109 match through in-kind services provided by staff whose positions are financed by MESA funds.

Presenter: CaSonya Thomas, Director

Report	The purpose of this document is to present the Office of Homeless Services on activities from the San Bernardino County Reentry Collaborative (SBCRC).
Date	June 24, 2015
Presenter	Jose Marin, Special Projects Coordinator, Department of Public Health
Announcements	The table below lists the announcements for today's meeting.

<p>May 2015 Reentry Meetings</p> <ul style="list-style-type: none"> • Meeting held on 5/27 from 1:30 pm – 3:00 pm. • Topics centered on: <ul style="list-style-type: none"> ○ Sheriff's HOPE team updates
<p>May 2015 Workgroup meeting</p> <ul style="list-style-type: none"> • Discussion based on what specific barriers to employment the formerly incarcerated encounter • Invited Workforce Development Dept. and Center for Employment Opportunities to continue discussion
<p>2014 Annual Report</p> <ul style="list-style-type: none"> • 2014 Reentry Collaborative Annual Report is out • It can be downloaded at: http://cms.sbcounty.gov/sbcrc/Resources.aspx under the column Data & Reports
<p>BRIDGES Update</p> <ul style="list-style-type: none"> • See attachment
<p>Attachments</p> <ul style="list-style-type: none"> • SBCRC 2015 Annual Calendar of meetings • BRIDGES Update

For more information, please contact Jose Marin at jose.marin@dph.sbcounty.gov.

Please visit our website at www.sbcounty.gov/sbcrc



BRIDGES ACTIVITIES UPDATE As of June 15, 2015

Services:

- Peers assisted in placing participants in housing at Salvation Army, Time for Change Foundation, Loving Hearts (High Desert)
- Peers assisted in obtaining Substance Abuse services
- Peers assisted in obtaining conservatorship to participants
- Peers assisted in obtaining important documents (Birth Certificates, Social Security Cards, Identification)
- Peers able to advocate on behalf of participants to Probation Department
 - Ex: Peer was able to accompany a participant who failed a drug test to Probation and was able to get her in a substance abuse program instead of re-incarceration
- Peers assisted in obtaining free cell phones to participants
- Peers able to accompany participants to court and probation meetings
- Peers assisted in reestablishing social security and disability benefits
- Peers able to obtain clothing for interviews to participants
- Peers assisted in family reunification activities

Overall Breakdown (As of 6/15)

89 Participants Consented

- 78 released from custody (87.6%)
 - 6.4% of those released have recidivated (5)
 - *New definition of conviction, not just arrest*
 - 49.7% of those released have been removed for 30 days no contact (38)
 - *5 were arrested for new felony or misdemeanor, but no court date yet*
 - 44.9% of those released are still in bi-weekly contact with their Advocate (40)
 - *5 were arrested for a new misdemeanor, but no court date yet*
- 11 removed from program prior to release (12.4%)
 - 3 facility transfers
 - 1 participant request
 - 3 discipline
 - 4 still in custody as of 4/1/2015



2015 SCHEDULE OF MEETINGS

Monthly Reentry Steering Committee Meetings		
1/28/2015 (Wednesday)	7/22/2015 (Wednesday)	<p>4th Wednesday of every other month (Beginning in January): Times: 1:30pm-3:00pm</p> <p>Location: Department of Behavior Health (DBH) 303 Vanderbilt Way 1st Floor (Behind TGI Friday's) San Bernardino, CA 92408</p> <p>4th Friday of every other month (Beginning in January): Times : 9:30am-11:00am</p> <p>Location: Workforce Development, WIB Room 215 North "D" Street, 2nd Floor San Bernardino, CA 92410</p> <p>The parking for this building is located at the public parking structure on the corner of 2nd street and "D" Street with access on both 2nd and D Streets.</p>
2/27/2015 (Friday)	8/28/2015 (Friday)	
3/25/2015 (Wednesday)	9/23/2015 (Wednesday)	
4/24/2015 (Friday)	10/23/2015 (Friday)	
5/27/2015 (Wednesday)	11/20/2015 (Friday)	
6/26/2015 (Friday)		

Monthly Reentry Workgroup Meetings		
Meeting Date (2 nd Friday of each Month)	Meeting Times	Meeting Location
1/9/2015	9:00am - 11:00am	<p>Public Health 172 W 3rd Street 6th Floor Conference Room San Bernardino, CA</p>
2/13/2015	9:00am - 11:00am	
3/13/2015	9:00am - 11:00am	
4/10/2015	9:00am - 11:00am	
5/8/2015	9:00am - 11:00am	
6/12/2015	9:00am - 11:00am	
7/10/2015	9:00am - 11:00am	
8/7/2015	9:00am - 11:00am	
9/11/2015	9:00am - 11:00am	
10/9/2015	9:00am - 11:00am	
11/13/2015	9:00am - 11:00am	

For more information, please contact: Department of Public Health
 909-387-6495 or jose.marin@dph.sbcounty.gov

Minutes for San Bernardino County Homeless Partnership Interagency Council on Homelessness (ICH)

May 27, 2015
9:00 am – 11:00 am
Department of Behavioral Health-Training Institute
303 E. Vanderbilt Way
San Bernardino, CA 92415

Minutes Recorded and Transcribed by Tammy Dickey, Secretary I, Office of Homeless Services

TOPIC	PRESENTER	ACTION/OUTCOME
Call to Order	Patricia Nickols-Butler	<ul style="list-style-type: none"> The meeting was called to order at 9:03 am.
Introductions	Patricia Nickols-Butler	<ul style="list-style-type: none"> Introductions were made by all ICH Members. Guests were also invited to introduce themselves.
REPORTS	PRESENTER	ACTION/OUTCOME
Homeless Provider Network (HPN)	Tom Hernandez on behalf of Sharon Green	<ul style="list-style-type: none"> The West Valley Regional meeting last met on Tuesday, May 12, 2015 from 9:00 am – 11:00 am and included presentations from U.S. Vets and Loma Linda VA and included the efforts to end homelessness among Veterans in SB County. Information was also shared regarding the Housing Authority of the County of San Bernardino, No Child Left Unsheltered initiative and a new rental assistance resource from Impact SoCal for households facing a housing crisis in the west valley region with funding being raised through social media and other private donors. The West Valley Regional Chair continues to work with regional participants to identify "Pathways to Housing in the West Valley Region." A "Pathways to Housing" spreadsheet listing identified "housing access points" by subpopulation is under development. The Desert/Mountain Regional meeting was cancelled and Central Valley Regional meeting was rescheduled to Tuesday, May 12, 2015 to give members the opportunity to attend the Nonprofit Stakeholder Session that was held on Wednesday, May 20, 2015 from 8:30 am – 3:30 pm. The East Valley Region met through the Morongo Basin (MB) Haven with a total of 19 attendees. Sharon Cisneros shared some information about the recent focus group that was taken place; the greatest need is finding providers, organizations etc. that are willing to run a shelter. The funds are available. Elizabeth was on a conference call with Ron Griffin, other HPN providers, and Gary Madden from 211. San Bernardino County has four different regions in which they are all in the same system. All regions are not only coming up with what works for their region but what also works for all Regions together. Ron Griffin will be a possible presenter at the July MB Haven meeting to be held on Friday, July 17, 2015. Wayne Hamilton provided an update on the Home Energy Assistance Program (HEAP). Changes have been made to the website for easier access. If anyone encounters any issues with the website please contact Wayne. HEAP will be using Reach Out Yucca Valley's office once a month to meet with clients who have appointments to receive services. The first week the location will be in Yucca Valley at the Lutheran Church, second week they will be in Joshua Tree at the Sportsman's Club and the third week will be in Yucca Valley at the Reach Out Yucca Valley office. Wayne introduced Kathy from Desert Hills Presbyterian Church; Kathy has been a longtime supporter for the homeless. She will be having an outreach homeless dinner and flyers will be passed out to the group. Kathy asked if her information can be added the Morongo Basin Haven website. Candy updated the group about the vouchers for showers. Sands Motel will not be able to provide showers, but Desert Sky said they can, as well as keep track of who and when. The vouchers cost \$10.00 a shower, MB Haven will provide toiletries along with the voucher. Elizabeth has hygiene kits available. Please call or come by Pacific Clinics if anyone needs some.

Homeless Provider Network (HPN) (cont.)	Tom Hernandez on behalf of Sharon Green	<ul style="list-style-type: none"> • Shelley and Elizabeth would like to re-address the group about the rules for bus passes. The bus passes are strictly for the homeless, please do not hand out bus passes to just anyone. An exception can be made if the person is in need. Elizabeth still has \$5.00 McDonalds gift cards, and Stater Bros gift cards that were donated as a gift, however the donor is unknown. Email Elizabeth if anyone needs some. • Our next Quarterly meeting will be held Wednesday, June 17, 2015 at the County of San Bernardino Health Services building (Auditorium entrance) located at 850 Foothill Blvd. Rialto, CA 92376.
Office of Homeless Services (OHS) Collaboration/Coordination Policy Development	Tom Hernandez	<ul style="list-style-type: none"> • The Continuum of Care (CoC) is increasingly being tied to a number of funding streams, whether state or federal. As such, many homeless and veterans related notices are required as part of the application process to receive CoC support through its governing board, ICH. In the last year, the CoC through ICH, has been charged with reviewing, approving or supporting applications for funding for various programs such as: <ul style="list-style-type: none"> ○ State Emergency Solutions Grant applications ○ Supportive Services for Veterans and Families (SSVF) (Priority 1 – Surge funding, and Priority 2 – Renewals) ○ Veterans Housing and Homelessness Prevention (VHHP) Program (threshold requirements included letter of priority from local CoC) ○ Potential for Emergency Food and Shelter Program funding to move under the United States Department of Housing and Urban Development (HUD) in 2016 President's Budget • On Tuesday, April 28, 2015, the United States Department of Housing and Urban Development (HUD) released a notice that CoC registration for the Fiscal Year (FY) 2015 process was open. The registration closed on Monday, May 18, 2015. • The registration notice is intended to provide collaborative applicants with the information necessary to register CoCs in preparation for the FY 2015 CoC Program Competition as well as provide HUD's homeless policies and priorities. • Highlighted Points of the FY 2015 CoC Registration Notice: <ul style="list-style-type: none"> ○ CoCs may use the reallocation process as stated in Section II.A.2.j. of this Notice to create: <ul style="list-style-type: none"> ▪ new permanent supportive housing projects that serve chronically homeless individuals and families, including unaccompanied youth; ▪ new rapid re-housing projects for homeless individuals and families, including unaccompanied youth, coming directly from the streets or emergency shelter or fleeing domestic violence; ▪ new projects for dedicated HMIS; ▪ or new Supportive Services Only (SSO) projects for centralized or coordinated assessment systems. ○ HUD will continue the Tier 1 and Tier 2 funding process in the FY 2015 CoC Program Competition to promote a more competitive process between CoCs (no other details were provided). ○ CoCs will also have the opportunity to apply for bonus projects (no other details were provided). ○ Collaborative Applicants may request CoC planning costs up to the full 3 percent or \$1,250,000, whichever is less, of the FY 2015 Final Pro Rata Need (FPRN). For San Bernardino County, this adds up to: \$305,672.
Continuum of Care (CoC) Registration Notice Update		<ul style="list-style-type: none"> • Transitional Housing: Recent research shows that transitional housing is generally more expensive than other housing models serving similar populations with similar outcomes. HUD also recognizes that transitional housing can be an effective tool for addressing certain needs—such as housing for homeless youth who are unable to sign a lease, safety for persons fleeing domestic violence, and assistance with recovery from addiction. HUD strongly encourages CoCs and recipients to carefully review the transitional housing projects within the CoC's geographic area for cost-effectiveness, performance, and for the number and type of eligibility criteria to determine if rapid re-housing might be a better model for the CoC's geographic area. <ul style="list-style-type: none"> ○ CoC Program-funded projects should, to the extent possible, prioritize veterans and their families who are ineligible for Department of Veterans Affairs (VA) services. When it is determined that a veteran, and their family, is ineligible for VA housing and services has the same level of need as a non-veteran as determined using a standardized assessment tool, the veteran should receive priority.

Continuum of Care (CoC) Registration Notice Update (cont.)	Tom Hernandez	<ul style="list-style-type: none"> ○ CoCs will be required to rank all projects submitted by project applicants in e-snaps—except project applications for CoC planning and UFA Costs—including: renewal and new projects created through reallocation, new bonus projects, and new homelessness prevention projects created by designated High Performing Communities HPC(s). ○ This year HUD is rolling out the HPC designation, which is required in the HEARTH Act but to date has not been implemented. The Registration Notice spells out what criteria's are required to be designated as an HPC. Criteria's include such things as having a mean length of homelessness of fewer than 20 days, 5% rate of return to homelessness, full expenditure of past grants, and other factors. Communities designated as HPCs are allowed to use CoC funds for prevention activities for people at-risk of homelessness.
Coordinated Entry System (CES) Update		<ul style="list-style-type: none"> ● The process for designating HPCs could impact the timing for release of the Notice of Funding Availability (NOFA), because there is a required public comment period. As per the Registration Notice, communities must submit their documentation in support of their request for HPC status by May 18, 2015. HUD will post these materials for public comment with comments due back to HUD by May 27, 2015. At the conclusion of the comment period, HUD will compile all of the timely comments received and email the comments to the Primary and Secondary Contacts designated for the Collaborative Applicant in the CoC Applicant Profile in e-snaps. Therefore, it is extremely important that Collaborative Applicants, and the CoC, ensure this contact information is accurate. The Collaborative Applicant will have 5 days to provide any information to HUD in response to the comments by June 3. HUD will make a final determination by an unspecified date. Although it is not spelled out in the Notice, it is not likely the NOFA can come out until after the HPC designation process is complete, since the HPC status impacts what types of funds applicants can apply for.
Homeless Management Information System Update		<ul style="list-style-type: none"> ● The Pilot Project is scheduled to be implemented in June 2015. Once the pilot has been completed, a report will be submitted to ICH detailing the successes, limitations and gaps of the proposed CES. The CES Planning Committee estimates a completed report to be submitted to ICH in September 2015.
ICH Ad Hoc Committee Policy Issue		<ul style="list-style-type: none"> ● The OHS, HMIS section routinely monitors agencies data quality to ensure accuracy and meet HUD standards for data quality maintenance. Attached you will find a copy of the latest HMIS Data Quality Report for the month of April, 2015 (see attached, Report 2A). Agency report cards are posted for review on individual agencies participating in HMIS at the following website: http://www.sbcounty.gov/dbh/sbchp/HMIS.aspx
CoC Governing Body Membership Recommendations		<ul style="list-style-type: none"> ● A recommendation was made regarding specific policies issues related to the ICH process when applying for funds, such as requirements, letters of support, etc. The recommendation was approved by ICH members. Volunteers to sit on this special committee include CaSonya Thomas, Kent Paxton and Anthony Brazier.
Victorville Project Connect		<ul style="list-style-type: none"> ● The CoC Program interim rule requires CoC Boards to include representatives from relevant organizations and projects serving homeless subpopulations, such as persons with substance use and/or mental health disorders; persons with HIV/AIDS; veterans; people who are chronically homeless; families with children; unaccompanied youth; and victims of domestic violence, dating violence, sexual assault, and stalking. The CoC governing board is intended to be a large, representative group. It is generally envisioned as a network or coalition of existing organizations, entities and individuals. Here are some recommended examples of the groups, entities and individuals who should participate in a CoC per HUD recommendation: <ul style="list-style-type: none"> ○ Community and Faith-Based homeless service providers, Governments, Businesses, Advocates, Public Housing Authorities, School Districts, Social service providers, Mental Health agencies, Hospitals*, Universities*, Affordable Housing Developers, Law Enforcement, Organizations that serve veterans. The board must also include at least one individual who is homeless or formerly homeless.
Victorville Project Connect		<ul style="list-style-type: none"> ● The San Bernardino County Homeless Partnership in conjunction with its collaborative partners will be hosting a Project Connect in Victorville on June 3, 2015, from 10:00 am to 2:00 pm at the St. Joan of Arc Catholic Church, 15512 Sixth Street, Victorville, CA.

<p>Victorville Project Connect (cont.)</p> <p>Letter of Interest for CoC Renewals Performance Chart Summary</p>	<p>Tom Hernandez</p>	<ul style="list-style-type: none"> • Project Connect outreach events are held periodically throughout San Bernardino County to provide centralized service delivery location where non-profit medical and social service providers can come together to best serve homeless and at-risk for homelessness individuals and families in need of services. The event will provide free dental and medical screenings, hygiene products, legal services, employment services, housing support services, child care information services, and more. • Additional information regarding County related services and resources will also be provided. • The San Bernardino County CoC has required that any agency interested in renewing a project for funding in the 2015 HUD CoC NOFA submit a Letter of Interest (LOI) to the OHS. A LOI is required for all projects to be considered for submission in the 2015 CoC application to HUD but is not a guarantee of funding or inclusion in the application submitted by the local CoC. Renewal applicants are required to complete a LOI by answering questions related to performance and providing the required documentation in order to be considered for inclusion in the application process (see attached, Report 2B). One of the primary responsibilities of the CoC is to review and rank projects that demonstrate decisions based on pre-established selection criteria that were logical and fair. Criteria may include capacity to implement and manage the proposed project, experience working with the target population, cost effectiveness, etc. Communities should emphasize and rank projects based on the project's ability to articulate achievable outcome measures against which the project can be evaluated in future years. This is especially important as projects come up for renewal funding and communities must assess project performance. HUD also notes that it is important that renewal projects meet minimum project eligibility, capacity, timeliness, and performance standards identified in the 2015 NOFA or they will be rejected from consideration for funding. When considering renewal projects for award, HUD will review information in the Line of Credit Control System (LOCCS); Annual Performance Reports (APRs); and information provided from the local HUD/Community Planning and Development (CPD) Field Office, including monitoring reports and A-133 audit reports as applicable, as well as performance standards on prior grants.
<p>Homeless and Policy Related News</p>		<ul style="list-style-type: none"> • On April 15, 2015, the U.S. Secretary of Labor, Thomas Perez, announced that Matthew Doherty has been named Executive Director of the U.S. Interagency Council on Homelessness (USICH). As the Executive Director of USICH, Mr. Doherty is responsible for the implementation of <i>Opening Doors: Federal Strategic Plan to Prevent and End Homelessness</i>, an effort that includes the coordination of Federal homelessness policies and strategies among 19 Federal departments and agencies, as well as partnerships with state and local communities, non-profits, and the private sector. For more information, please review the following website: http://usich.gov/media_center/news/president-obama-proposes-historic-new-investments-to-end-homelessness/president-obama-proposes-historic-new-investments-to-end-homelessness/matthew-doherty-named-executive-director-of-us-interagency-council-on-hom. On April 1, 2015, the National Alliance to End Homelessness released the 2015 State of Homelessness in America. This report is the fifth in a series of reports that chart progress in ending homelessness in the United States. It uses the most recently available data to present national and state trends in homelessness between 2013 and 2014, trends in populations at risk of homelessness from 2012 to 2013, and trends in the types and utilization of assistance available to people experiencing homelessness. To access the report, please review the following website: http://endhomelessness.org/library/entry/the-state-of-homelessness-in-america-2015
<p>Homeless Youth Task Force (HYTF) Report</p>	<p>Brenda Dowdy on behalf of Supervisor Ramos</p>	<ul style="list-style-type: none"> • The Homeless Youth Taskforce held its first Unaccompanied Youth Survey on April 8, 2015 in five areas of the County; the Morongo Basin, Redlands, Rancho Cucamonga, San Bernardino and Victorville. Youth volunteers conducted the survey and made contact with 300 youth. Currently, the Taskforce is compiling a report that will be presented in the next couple of months. • Several members of the Taskforce including youth members participated in the California Coalition for Youth Conference in Sacramento on Saturday April 26, 2015 through Tuesday, April 28, 2015. Throughout the conference, the Taskforce received praise for its overall success on its implementation of the youth survey. Our next meeting will take place in June, date and time TBD, at the San Bernardino Transitional Age Youth Center, located at 780 E. Gilbert Street in San Bernardino.

Legislative Report	Otis Greer	<ul style="list-style-type: none"> • Mr. Greer provided a status report on State Bills that may be of interest to the ICH. (Copies are available upon request).
Board Agenda Review	Kent Paxton	<ul style="list-style-type: none"> • On Tuesday, April 7, 2015, the Board of Supervisors (BOS) amended the contract with Red Carnation Homes, LLC for emergency shelter services effective July 1, 2015, for the provision of Emergency Shelter Services for DBH clients enrolled in Homeless Intensive Case Management and Outreach Services, updating current contract language and increasing the total contract amount by \$747,000 from \$2,054,250 to \$2,801,250, for the total contract period of October 1, 2012 through June 30, 2016. For additional information please refer to Board Agenda item #22. • On April 21, 2015 the Community Development and Housing entered into an inter-agency agreement between the County of San Bernardino and the City of San Bernardino for the use of HOME funds within the HOME Consortium for Federal fiscal years 2014-15 through 2016-17 under the HOME Investment Partnerships Program (HOME) Consortium. For additional information please refer to Board Agenda item #29. • On May 5, 2015 the Department of Behavioral Health amended the contract with The Institute for Urban Initiatives for Homeless Consulting Services in support of the Continuum of Care Homeless Assistance Program, updating standard contract language, extending an additional year, and increasing the total contract amount by \$87,835, from \$148,150 to \$235,975, for the total contract period of August 30, 2013 through June 30, 2016. For additional information please refer to Board Agenda item #14. • On May 19, 2015 the Transitional Assistance Department amended the contract with the Housing Authority of the County of San Bernardino (HACSB) for California Work Opportunity and Responsibility to Kids (CalWORKs) Housing Support Program Services extending the contract an additional year, and increasing the total contract amount by \$1,075,906 from \$1,075,906 to \$2,151,812 for the total contract amount to \$2,151,812, for the total contract period of January 1, 2015 through June 30, 2016. For additional information please refer to Board Agenda item #65. The HACSB approved the revisions to the HACSB housing services administrative plan governing the housing CHOICE voucher subsidized programs. For additional information please refer to Board Agenda item #71
Reentry Collaborative Report	Jose Marin	<ul style="list-style-type: none"> • Mr. Jose Marin provided an update to the Bridging Reentry Integration by Driving Goal-oriented Effective Strategies (BRIDGES) Program, specifically on the new recidivism rate, that will match what the State Department is using, which is not based on arrest, but conviction. Below is a summary of the update recidivism rate findings: <ul style="list-style-type: none"> ○ 89 participants consented, with 78 being released from custody (87.6%) <ul style="list-style-type: none"> ▪ 5.1% of those released have recidivated (4); New definition of conviction, not just arrest ○ 43.6% of those released have been removed for 30 days, no contact (34) ○ 51.3% of those are still in bi-weekly contact with their advocate (40), two were arrested for a new misdemeanor, but no court date yet ○ 11 removed from the program prior to release (12.4%) <ul style="list-style-type: none"> ▪ 3 facility transfers, 1 participant request, 3 disciplines and 4 still in custody as of 4/1/15 • The Reentry Collaborative Meeting is scheduled on Wednesday, May 27, 2015 at 1:30 pm following ICH.
Housing Authority of the County of San Bernardino Report	Lisa Jones	<ul style="list-style-type: none"> • Over the past several weeks the Housing Authority has increased its collaborative efforts in working with the Sheriff's Homeless Outreach Proactive Enforcement (HOPE) and Department of Behavioral Health's (DBH) Homeless Outreach Support Team (HOST). The collaboration has focused on streamlining criminal background screenings for applicants to the Housing Authorities homeless programs and brainstorming on how to eliminate barriers and reduce bureaucracy that can create hardship. Throughout all of its programs, the Housing Authority encourages all persons in need of housing to apply to available programs. In reviewing criminal background the Housing Authority considers relevant circumstances when considering denial of assistance; such as mitigating circumstances or rehabilitation. In the Shelter Plus Care program, the supportive services provided by DBH help address past incidents and provide rehabilitation support.

Housing Authority of the County of San Bernardino Report	Lisa Jones	<ul style="list-style-type: none"> In addition to discussions around criminal background screenings, the joint meetings have been an excellent opportunity to discuss the various activities of the different stakeholders and share information about the variety of homeless programs throughout the county, as well as discuss ways to address barriers to housing placements for homeless persons. In particular, the need to increase bridge housing options and continue to strengthen partnerships between County Departments as well as community agencies that often serve the same population. The Housing Authority looks forward to continuing this enhanced collaboration effort to better serve our homeless community.
CONSENT ITEMS	PRESENTER	
Approve minutes of the April 22, 2015 ICH meeting	Patricia Nickols-Butler	<ul style="list-style-type: none"> Consent items of the agenda were approved as written.
PRESENTATION	PRESENTER	ACTION/OUTCOME
Illumination Foundation – Recuperative Care for the Homeless	Paul Leon, Paul Cho and Aiko Tan	<ul style="list-style-type: none"> The Illumination Foundation presented on Recuperative Care for the Homeless and bridging the gap for the homeless population and permanent housing. Below are some highlights of the presentation: <ul style="list-style-type: none"> Housing instability, healthcare instability, insufficient income and lack of community support The Recuperative Care (aka Medical Respite) manages the recovery of homeless individuals discharged from hospitals. Recuperative Care provides care to homeless persons recovering from an acute illness or injury, no longer in need of acute care but unable to sustain recovery if living on the street or other unsuitable places. There are 72 nationwide. The Scope of Services for Recuperative Care includes: mental health counseling, Medic-Cal coordination, access to community clinics, case management, housing connections, food, hygiene and transportation, client-centered education and advocacy. Recuperative care benefits include improved healthcare, improved clinical outcomes as Recuperative Care Criteria (RCC) allows for further patient stabilization, allows hospitals to discharge along appropriate Continuum of Care (CoC) provider and improved patient satisfaction ratings. Improved access to care includes: improves access for homeless and housing insecure to healthcare and mental healthcare, RCC connects patients to resources and agencies in the preferred exit destination and RCC's core competency is ensuring successful care transitions for homeless. Reduced cost assists in: reducing the average length of stay (ALOS) in the hospital by providing safe discharge option (4 avoidable inpatient days), reducing the number of denied days from payers to providers, allows hospital to move patient's care along the CoC to a lower cost model that is timely and safe, enabling hospitals opportunity to generate new revenues from open beds, reducing readmits: RCC connects patients to medical home/primary care physician (PCP) and reinforces patient utilization, fulfills obligations of nonprofit hospitals to invest in health and healthcare in the communities they serve. (PowerPoint handouts are available upon request).
PRESENTATION	PRESENTER	
American Roundtable to Abolish Homelessness	Philip F. Mangano	<ul style="list-style-type: none"> Mr. Philip Mangano spoke on homeless veterans in the County of San Bernardino, which is the largest County in the nation. The County of San Bernardino has become a model for best practices in ending homelessness for other counties and States.
Special Assistant to the Secretary of the Department of Veterans Affairs (VA)	Vince Kane	<ul style="list-style-type: none"> Mr. Vince Kane congratulated the committee for all their hard work in supporting and providing the necessary services to our homeless veteran population. One question is how the VA can listen to you, the providers, to customize solutions that use evidence-based practices such as Housing First and provide permanent supportive housing. The highest population exists with the homeless Vietnam veterans. Studies across the country have shown that the Housing First model approach does work.
PRESENTATION	PRESENTER	
Geographic Information System (GIS)	Solomon Nimako	<ul style="list-style-type: none"> The GIS application is a mapping tool that can be setup and used directly from your smartphone to identify specific locations, what services are being offered, contact information, etc.

COUNCIL ROUNDTABLE	PRESENTER	ACTION/OUTCOME
		<ul style="list-style-type: none"> None to report
Adjournment	Supervisor Gonzales	<ul style="list-style-type: none"> Being no further business to discuss, the meeting was adjourned at 11:03 am.
Next Meeting		<p>Wednesday, August 26, 2015 at 9:00 am – 10:30 am Department of Behavioral Health Administration Building 303 E. Vanderbilt Way, San Bernardino, CA 92415</p>

Office of Homeless Services
303 E. Vanderbilt Way ▪ San Bernardino, CA 92415
Phone: (909) 386-8297 ▪ Fax: (909) 890-0868
Email: homelessrfp@hss.sbcounty.gov ▪ Website: <http://www.sbcounty.gov/dbh/sbchp/>

Attendees at May 27, 2015 • Interagency Council on Homelessness				
BEHLING	JACKIE	Global One Development	310-365-4928	behlingsj@aol.com
BLETCHER	MICHELE	Office of Homeless Services	909-386-8231	Michele.Bletcher@dbh.sbcounty.gov
BORING	CONSTANCE	Department of Rehabilitation	909-268-0892	cboring@dor.ca.gov
CARNEGIE	WILLIAM	Feeding America	951-359-4757	wcarnegie@feedingamerica.org
CARTER	KIM	Time for Change Foundation	909-886-2994	kcarter@timeforchangefoundation.org
CISNEROS	SHARON	Finance Manager – Town of Yucca Valley	760-369-7207 229	scisneros@YUCCA-VALLEY.ORG
CONGDON	STEPHANIE	City of San Bernardino – Legal Aide	909-384-7272	congdon_st@sbcity.org
DICKEY	TAMMY	Office of Homeless Services	909-386-8297	tdickey@dbh.sbcounty.gov
DRAKE	SUSAN	Executive Aide IV – Supervisor Lovingood	760-955-8100	susan.drake@bos.sbcounty.gov
DOWDY	BRENDA	County Superintendent of Schools	909-386-2634	Brenda_dowdy@sbc.k12.ca.us
FAZEKAS	DOUG	Department of Behavioral Health	909-421-9481	dfazekas@dbh.sbcounty.gov
GOMEZ	ART	Human Services	909-388-0252	gomez@hss.sbcounty.gov
GRIFFIN	RON	Director	909-841-6001	askrongriffin@msn.com
HAMBLY III	ED	Catholic Charities	909-880-3625	ehambly@ccsbriv.org
HAUGAN	LINDA	Asst. Executive Officer- Human Services Department	909-387-4717	lhaugan@hss.sbcounty.gov
HENDERSON	DANIEL	The Salvation Army	909-991-6189	Daniel.Henderson@usw.salvationarmy.org
HERNANDEZ	JESSICA	SAC Healthcare	909-382-7170	jemhernandez@sachealthsystem.org
HERNANDEZ	TOM	Office of Homeless Services	909-386-8208	thernandez@dbh.sbcounty.gov
JONES	LISA	Housing Authority of the County of San Bernardino		ljones@hacsb.com
JONES	MIKE	SBCSD		mjones@sbcasd.org
KIM	ANTHONY	Inland County Legal Services	951-248-4725	akim@icls.org
KIRKLAND	ELIZABETH	Pacific Clinics	760-228-9657	ekirkland@pacificclinics.org
LAWSON	DESIREE	City of Rancho Cucamonga	909-477-2700	Desiree.Lawson@cityofrc.us

LITTLE	JEFF	Inland Temporary Homes	707-815-7424	jeff@ithomes.org
MARIN	JOSE	Public Health	909-387-6495	Jose.Marin@dph.sbcounty.gov
MARQUEZ	VIRGINIA	City of San Bernardino	909-384-5188	marquez_vi@sbcity.org
MARTINEZ	ENRIQUE	Vocational Development Specialist	909-825-7084 x4483	enrique.martinez@va.gov
MEMROSE	ATIGA	SAC Healthcare	909-382-7169	matiga@sachealthsystem.org
METU	ANNE	The Salvation Army	909-708-9621	anne.metu.@usw.salvationarmy.org
MORALES	SALLY	Kaiser Permanente	909-427-5694	sally.a.morales@kp.org
MYLES	ANGELA	House of Prayer	909-386-1620	director@hoppgom.com
MYLES	VICTOR	House of Prayer	909-386-1620	director@hoppgom.com
NICKOLS-BUTLER	PATRICIA	Community Action Partnership	909-723-1514	plnickols-butler@capsbc.org
OSBORNE	RAY	HomeAid Inland Empire	951-686-0628	ray@homeaidie.org
PACHECO	JENNIFER	Department of Behavioral Health - HOST	909-421-4687	jpacheco@dbh.sbcounty.gov
PAXTON	KENT	Mayor's Office - City of San Bernardino	909-384-5133	paxton_ke@sbcity.org
PERKINS	LOIS	Life Community Development	760-246-0691	jazzlewis@aim.com
REITER	MICHAEL	City of Redlands	909-708-5055	michael@michaelreiterlaw.com
SALAZAR	FRANK	County Counsel		
SMITH	ALICE		909-841-4715	restore2life@aol.com
SMITH	DON	Creating Community Solutions		donsmithsolutions@outlook.com
SWEITZER	MICHAEL	Department of Behavioral Health		
TAN	AIKO	Illumination Foundation		atan@ifhomeless.org
THOMAS	CASONYA	Department of Behavioral Health – Director	909-388-0820	cthomas@dbh.sbcounty.gov
VALDEZ	SAM	Salvation Army	909-567-4759	sam.valdez@usw.salvationarmy.org
WATKINS	DEBRA	NECON Inc.	714-654-8078	d.watkins@neconinc.info
WILTSHIRE	MOLLY	Communications Director	909-387-4855	molly.wiltshire@bos.sbcounty.gov
YOUNG	BRUCE	Project Faith, Hope and Love	760-961-9210	bruce356@aol.com

Interagency Council on Homelessness
Administrative Office
303 E. Vanderbilt Way, San Bernardino, CA 92415-0026
Office: (909) 386-8297



June 15, 2015

The Honorable Ronald Davis, Director
Office of Community Oriented Policing Services
145 N Street NE
Washington, DC 20530

Re: Proposed City of Montclair Trust in Policing Program

Dear Mr. Davis,

This letter is to express the commitment and support of the Interagency Council on Homelessness (ICH) for the application submitted by the Montclair Police Department to the Office of Community Oriented Policing Services.

The Montclair Police Department is committed to providing law enforcement services to the community with due regard for racial, cultural and ethnic diversities of those served. The Department intends to utilize grant funding to create the Trust in Policing Program (TIPP).

TIPP will use specially trained officers to reach out to religious organizations, schools, home and property owner associations, civic and city organizations, and other stakeholders to connect with the community. Each member of TIPP will be designated as a department Homeless Liaison Officer (HLO). As HLOs, members of TIPP will reach out to the homeless community through non-enforcement patrols and referrals from community groups. The Department plans to reinforce its commitment for collaboration with the San Bernardino County Homeless Partnership to coordinate the delivery of services and resources to those in need. This strategy aims to reduce or end homelessness in the City of Montclair with the overall strategy of improving the quality of life for our homeless individuals and families.

ICH fully supports the efforts of the Montclair Police Department as it continues to foster collaboration and comprehensive systemic change to ensure the successful empowerment and assistance of our homeless population.

Respectfully,

JOSIE GONZALES, Chair, Interagency Council on Homelessness
San Bernardino County Continuum of Care

Members of the Interagency Council on Homelessness

Members of the Board of Supervisors
City of Ontario
City of San Bernardino
San Bernardino County Human Services
Community Action Partnership of San Bernardino County
Housing Authority of the County of San Bernardino
San Bernardino County Superintendent of Schools
Department of Community Development and Housing

City of Barstow
City of Redlands
Town of Yucca Valley
Department of Probation
Veteran Administration Loma Linda
Workforce Development Department
Members of the Homeless Provider Network
HMIS Lead Agency

City of Colton
City of Rancho Cucamonga
Department of Behavioral Health
Department of Rehabilitation
211 United Way
Sheriff's Department
General Members-At-Large

San Bernardino Continuum of Care (CoC):

**Working Paper to Establish Written Standards
for Providing Continuum of Care Assistance**

The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH Act): Continuum of Care Program (24 CFR Part 578) describes in § 578.7 Responsibilities of the Continuum of Care, subsection (a) Operate the Continuum of Care (9), the Continuum of Care must:

“In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish and consistently follow written standards for providing Continuum of Care assistance.”¹

This subsection also states that at a minimum, written standards must include “policies and procedures for evaluating individuals’ and families’ eligibility for assistance” for:

1. permanent supportive housing;
2. rapid rehousing; and
3. transitional housing.

However, written standards for the San Bernardino CoC will also include:

4. coordinated entry;
5. seasonal shelter;
6. year-round shelter;
7. bridge housing; and
8. homeless prevention.

These written standards will be developed as HUD provides more guidance.

This subsection also states that written standards must also include:

“policies and procedures for determining and prioritizing which eligible individuals and families will receive” transitional housing, rapid rehousing, and permanent supportive housing assistance.

¹ The Interim Rule for the Emergency Solutions Grant Program does not provide information concerning transitional housing beyond the Interim Rule for the HEARTH Act Continuum of Care program because in order for a transitional facility to receive ESG funds, the facility cannot require occupants to sign leases or occupancy agreements whereas CoC funded transitional housing programs must require occupants to sign leases or occupancy agreements.

I. Determining Written Standards for Permanent Supportive Housing

A. Background information

In regards to rapid rehousing, § 578.7 Responsibilities of the Continuum of Care (a) (9) of the HEARTH Act Interim Rule notes that:

In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish and consistently follow written standards for providing Continuum of Care assistance. At a minimum, these written standards must include:

- Policies and procedures for evaluating individuals' and families' eligibility for assistance under this part;
- Policies and procedures for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance.

Permanent supportive housing is considered permanent housing. HUD's regulatory definition of "permanent housing" states:

"The term 'permanent housing' means community-based housing without a designated length of stay, and includes both permanent supportive housing and rapid re-housing."

HUD also states:

"Additionally, in the regulatory definition of "permanent housing," HUD clarifies that to be permanent housing, "the program participant must be the tenant on a lease for a term of at least one year that is renewable and is terminable only for cause. The lease must be renewable for terms that are a minimum of one month long. HUD has determined that requiring a lease for a term of at least one year that is renewable and terminable only for cause, assists program participants in obtaining stability in housing, even when the rental assistance is temporary. These requirements are consistent with Section 8 requirements."

B. Eligible clients

As stated in the 2014 CoC NOFA under *Beds Dedicated to the Chronically Homeless*

"The total number of permanent supportive housing beds in the CoC's geographic area that are dedicated specifically for use by the chronically homeless, per 24 CFR 578.3, as reported in the CoC's Housing Inventory Count (HIC). For permanent supportive housing beds, when a participant exits the program, the bed must be filled by another chronically homeless participant unless there are no chronically homeless persons located within the CoC's geographic area. This concept only applies to permanent supportive housing projects. (see p. 18)"

Also stated in the 2014 CoC NOFA under *Non-Dedicated Permanent Supportive Housing Beds*

“Permanent supportive housing beds within a CoC’s geographic area that are not currently dedicated specifically for use by the chronically homeless. CoCs and projects are strongly encouraged to prioritize the chronically homeless in non-dedicated permanent supportive housing beds as they become available through turnover. This concept only pertains to permanent supportive housing projects (see p. 19).”

Eligible clients must also meet eligibility criteria as defined in the NOFA under which the program was funded.

C. Prioritizing Permanent Supportive Housing

On July 28, 2014, HUD published Notice: CPD-14-012 “Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status.”

HUD stated that to “ensure that all PSH beds funded through the CoC Program are used as strategically and effectively as possible, PSH needs to be targeted to serve persons with the highest needs and greatest barriers towards obtaining and maintaining housing on their own—persons experiencing chronic homelessness (see p. 2).”

HUD also stated that “CoCs are strongly encouraged to adopt and incorporate into the CoC’s written standards and coordinated entry system” that are consistent with the order of priority established by HUD in the notice concerning CoC Program-funded Permanent Supportive Housing and Permanent Supportive Housing Beds Not Dedicated or Prioritized for Persons Experiencing Chronic Homelessness (see pages 2 and 3).

Thus, with “adoption by CoCs and incorporation into the CoC’s written standards, **all** recipients of CoC Program-funded PSH must then follow this order of priority, consistent with their current grant agreement, which will result in this intervention being targeted to the persons who need it the most (see p. 3).

HUD’s “Order of Priority in CoC Program-funded Permanent Supportive Housing” is as follows:

- First Priority—Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs.
- Second Priority—Chronically Homeless Individuals and Families with the Longest History of Homelessness.
- Third Priority—Chronically Homeless Individuals and Families with the Most Severe Service Needs.
- Fourth Priority—All Other Chronically Homeless Individuals and Families.

HUD's "Order of Priority in Permanent Supportive Housing Beds Not Dedicated or Prioritized for Persons Experiencing Chronic Homelessness" is as follows:

- First Priority—Homeless Individuals and Families with a Disability with the Most Severe Service Needs.
- Second Priority—Homeless Individuals and Families with a Disability with a Long Period of Continuous or Episodic Homelessness.
- Third Priority—Homeless Individuals and Families with Disability Coming from Places Not Meant for Human Habitation, Safe Havens, or Emergency Shelters.
- Fourth Priority—Homeless Individuals and Families with a Disability Coming from Transitional Housing.

Details of both sets of order of priority can be found on pages 6 – 10 of the notice.

A glossary of key terms for this notice can be found on pages 3 – 5.

The notice also requires "Recordkeeping Requirements for Documenting Chronic Homeless Status." HUD stated that this notice "establishes recordkeeping requirements for all recipients of CoC Program-funded PSH that are required to document a program participant's status as chronically homeless as defined in 24 CFR 578.3 and in accordance with 24 CFR 578.103. Further, HUD expects that where CoCs have adopted the orders of priority in Section III. of this Notice into their written standards, the CoC as well as recipients of CoC Program-funded PSH, will maintain evidence of implementing these priorities."

A. CoC Records

In addition to the records required in 24 CFR 578.103, it is recommended that the CoC should supplement such records with the following:

1. Evidence of written standards that incorporate the priorities in Section III. of this Notice, as adopted by the CoC;
2. Evidence of a standardized assessment tool;
3. Evidence that the written standards were incorporated into the coordinated entry policies and procedures.

Details for 1 -3 can be found on pages 11 – 12 of the notice.

B. Recipient Recordkeeping Requirements

In addition to the records required in 24 CFR 578.103, recipients of CoC Program-funded PSH that is required by grant agreement to document chronically homeless status of program participants in some or all of its PSH beds must maintain the following records:

1. Written Intake Procedures;

2. Evidence of Chronically Homeless Status
 - a. Evidence of homeless status
 - b. Evidence of the duration of the homelessness:
 - Evidence that the homeless occasion was continuous, for at least one year;
 - Evidence that the household experienced at least four separate homeless occasions over 3 years;
 - Evidence of diagnosis with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability (as defined in Section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability.

Details for 1 -2 can be found on pages 11 – 12 of the notice.

D. Written Standards

Written Standard #1: No Designated Length of Stay

- **Program participants are provided housing without a designated length of stay that permits them to live as independently as possible.**

In Program Components and Eligible Costs (Subpart D) of the Preamble of the HEARTH Act (see p. 25) the following is noted:

“Consistent with the definition of permanent housing in section 401 of the McKinney-Vento Act and § 578.3 of this interim rule, the permanent housing component is community-based housing without a designated length of stay that permits formerly homeless individuals and families to live as independently as possible. The interim rule clarifies that Continuum of Care funds may be spent on two types of permanent housing: permanent supportive housing for persons with disabilities (PSH) and rapid rehousing that provides temporary assistance (i.e., rental assistance and/or supportive services) to program participants in a unit that the program participant retains after the assistance ends.”

Written Standard #2: Lease Agreement

- **The program participant must be the tenant on a lease for a term of at least one year that is renewable and is terminable only for cause. The lease must be renewable for terms that are a minimum of one month long.**

On page 12 of the Preamble of the HEARTH Act Interim Rule,

“HUD clarifies that to be permanent housing, “the program participant must be the tenant on a lease for a term of at least one year that is renewable and is terminable only for cause.

The lease must be renewable for terms that are a minimum of one month long. HUD has determined that requiring a lease for a term of at least one year that is renewable and terminable only for cause, assists program participants in obtaining stability in housing, even when the rental assistance is temporary. These requirements are consistent with Section 8 requirements.”

Also, § 578.77 Calculating occupancy charges and rent (a) states the following about occupancy agreements:

“(a) Occupancy agreements and leases. Recipients and subrecipients must have signed occupancy agreements or leases (or subleases) with program participants residing in housing.”

Written Standard #3: Restricted Assistance and Disabilities

- **Permanent supportive housing can only provide assistance to individuals with disabilities and families in which one adult or child has a disability.**

§ 578.37 Program components and uses of assistance (a) (1) (i) states that:

“Permanent supportive housing for persons with disabilities (PSH). *PSH can only provide assistance to individuals with disabilities and families in which one adult or child has a disability.* Supportive services designed to meet the needs of the program participants must be made available to the program participants.”

Written Standard #4: Supportive Services

- **Supportive services designed to meet the needs of program participants must be made available to the program participants.**

§ 578.37 Program components and uses of assistance (a) (1) (i) states that:

“Permanent supportive housing for persons with disabilities (PSH). PSH can only provide assistance to individuals with disabilities and families in which one adult or child has a disability. *Supportive services designed to meet the needs of the program participants must be made available to the program participants.*”

Written Standard #5: Duration of Supportive Services Assistance

- **Supportive services to enable program participants to live as independently as possible must be provided throughout the duration of their residence**

§ 578.53 Supportive services (b) (2) states that:

“Permanent supportive housing projects must provide supportive services for the residents to enable them to live as independently as is practicable throughout the duration of their residence in the project.”

Written Standard #6: One Person per Bedroom

- **Two individuals in a shared housing situation must have their own lease and their own bedroom unless the two individuals are presented together as a household**

Information received from HUD Exchange on February 9, 2015 is as follows:

“Under the CoC Program, all housing that is leased with Continuum of Care program funds, or for which rental assistance payments are made with Continuum of Care program funds, must meet the applicable Housing Quality Standards (HQS) under 24 CFR 982.401 of this title, except that 24 CFR 982.401(j) applies only to housing occupied by program participants receiving tenant-based rental assistance.

HQS dictates that, at a minimum, the unit must have a living room, a kitchen, and a bathroom. HQS requirements also dictates that the bathroom must be contained within the unit, afford privacy (usually meaning a door, although no lock is required), and be for the exclusive use of the occupants. Additionally, the unit must have suitable space and equipment to store, prepare, and serve food in a sanitary manner. This includes a requirement for an oven and stove or range, a refrigerator of appropriate size for the family, and a kitchen sink with hot and cold running water. Hot plates are not acceptable substitutes for stoves or ranges. However, a microwave oven may be used in place of a conventional oven, stove, or range if the oven/stove/range are tenant supplied or if microwaves are furnished in both subsidized and unsubsidized units in the building or premises.

The CoC Program also allows for shared housing/roommate situations in projects with leasing or rental assistance funds. **Each household must have the bedroom size that fits their household size. In other words, 2 individuals in a shared housing situation must have their own lease, and their own bedroom. The only situation where 2 people would be sharing one bedroom would be if they presented together as a household.**

For more information about Housing Quality Standards, please refer to Chapter 10 of the HCVP

Guidebook: www.hud.gov/offices/adm/hudclips/guidebooks/7420.10G/7420g10GUID.pdf.”

Written Standard #7: Program Income

- **Program income generated from rent and occupancy charges may be collected from program participants and added to funds committed to the project by HUD and used for eligible program activities**

§ 578.97 Program income includes the following:

“(a) Defined. Program income is the income received by the recipient or subrecipient directly generated by a grant-supported activity.

(b) Use. Program income earned during the grant term shall be retained by the recipient, and added to funds committed to the project by HUD and the recipient, used for eligible activities in accordance with the requirements of this part. Costs incident to the generation of program income may be deducted from gross income to calculate program income, provided that the costs have not been charged to grant funds.

(c) Rent and occupancy charges. Rents and occupancy charges collected from program participants are program income. In addition, rents and occupancy charges collected from residents of transitional housing may be reserved, in whole or in part, to assist the residents from whom they are collected to move to permanent housing.”

Also, § 578.49 Leasing (b) (7) states the following about program income:

“Program income. Occupancy charges and rent collected from program participants are program income and may be used as provided under § 578.97.”

Written Standard #8: Calculating Occupancy Charges and Rent

- **if occupancy charges are imposed, they may not exceed the highest of: 1) 30 percent of the family’s monthly adjusted income (adjustment factors include the number of people in the family, age of family members, medical expenses, and child-care expenses); 2) 10 percent of the family’s monthly income; or 3) If the family is receiving payments for welfare assistance from a public agency and a part of the payments (adjusted in accordance with the family’s actual housing costs) is specifically designated by the agency to meet the family’s housing costs, the portion of the payments that is designated for housing costs.**

§ 578.77 Calculating occupancy charges and rent (b) (1) (2) (3) notes the following about occupancy agreements:

“(b) Calculation of occupancy charges. Recipients and subrecipients are not required to impose occupancy charges on program participants as a condition of residing in the housing. However, if occupancy charges are imposed, they may not exceed the highest of:

(1) 30 percent of the family’s monthly adjusted income (adjustment factors include the number of people in the family, age of family members, medical expenses, and child-care expenses);

(2) 10 percent of the family’s monthly income; or

(3) If the family is receiving payments for welfare assistance from a public agency and a part of the payments (adjusted in accordance with the family's actual housing costs) is specifically designated by the agency to meet the family's housing costs, the portion of the payments that is designated for housing costs."

Written Standard #9: Examining Program Participant's Initial Income

- **a program participant's initial income must be examined at least annually to determine the amount of the contribution toward rent payable by the program participant and adjustments to a program participant's contribution toward the rental payment must be made as changes in income are identified.**

§578.77 Calculating occupancy charges and rent (c)(2) states that:

"Recipients or subrecipients must examine a program participant's income initially, and at least annually thereafter, to determine the amount of the contribution toward rent payable by the program participant. Adjustments to a program participant's contribution toward the rental payment must be made as changes in income are identified."

§578.103 Recordkeeping requirements (7) (i) (ii) states that the recipient or subrecipient must keep records for each program participant that document:

"(i) The services and assistance provided to that program participant, including evidence that the recipient or subrecipient has conducted an annual assessment of services for those program participants that remain in the program for more than a year and adjusted the service package accordingly, and including case management services as provided in § 578.37(a)(1)(ii)(F); and

(ii) Where applicable, compliance with the termination of assistance requirement in § 578.91."

Written Standard #10: Verifying Program Participant's Initial Income

- **each program participant must agree to supply the information or documentation necessary to verify the program participant's income.**

§578.77 Calculating occupancy charges and rent (c)(3) states that:

"As a condition of participation in the program, each program participant must agree to supply the information or documentation necessary to verify the program participant's income. Program participants must provide the recipient or subrecipient with information at any time regarding changes in income or other circumstances that may result in changes to a program participant's contribution toward the rental payment."

§578.103 Recordkeeping requirements (6) (i) (ii) (iii) and (iv) states that the following documentation of annual income must be kept by recipient or subrecipient:

“(i) Income evaluation form specified by HUD and completed by the recipient or subrecipient; and

(ii) Source documents (e.g., most recent wage statement, unemployment compensation statement, public benefits statement, bank statement) for the assets held by the program participant and income received before the date of the evaluation;

(iii) To the extent that source documents are unobtainable, a written statement by the relevant third party (e.g., employer, government benefits administrator) or the written certification by the recipient’s or subrecipient’s intake staff of the oral verification by the relevant third party of the income the program participant received over the most recent period; or

(iv) To the extent that source documents and third-party verification are unobtainable, the written certification by the program participant of the amount of income that the program participant is reasonably expected to receive over the 3-month period following the evaluation.”

Written Standard #11: Recalculating Occupancy Charges and Rent

- **if there is a change in family composition (e.g., birth of a child) or a decrease in the resident’s income during the year, the resident may request an interim reexamination, and the occupancy charge will be adjusted accordingly.**

§ 578.77 Calculating occupancy charges and rent (b) (4) notes the following about recalculating occupancy charges and rent:

“(4) Income. Income must be calculated in accordance with 24 CFR 5.609 and 24 CFR 5.611(a). Recipients and subrecipients must examine a program participant’s income initially, and if there is a change in family composition (e.g., birth of a child) or a decrease in the resident’s income during the year, the resident may request an interim reexamination, and the occupancy charge will be adjusted accordingly.”

Written Standard #12: Supportive Services Agreement

- **program participants may be required to take part in supportive services that are not disability-related services (including substance abuse treatment services) provided through the project as a condition of continued participation in the program. However, HUD tends to believe that these kinds of requirements can be barriers and should be rare and minimal if used as all.**

§ 578.75 General operations (h) states that:

“Recipients and subrecipients may require the program participants to take part in supportive services that are not disability-related services provided through the project as a condition of continued participation in the program. Examples of disability-related services include, but are not limited to, mental health services, outpatient health services, and provision of medication, which are provided to a person with a disability to address a condition caused by the disability. Notwithstanding this provision, if the purpose of the project is to provide substance abuse treatment services, recipients and subrecipients may require program participants to take part in such services as a condition of continued participation in the program.”

From “HOUSING FIRST IN PERMANENT SUPPORTIVE HOUSING” (see www.hudexchange.info/resources/documents/Housing-First-Permanent-Supportive-Housing-Brief.pdf)

“Supportive services are voluntary, but can and should be used to persistently engage tenants to ensure housing stability - Supportive services are proactively offered to help tenants achieve and maintain housing stability, but tenants are not required to participate in services as a condition of tenancy. Techniques such as harm reduction and motivational interviewing may be useful. Harm reduction techniques can confront and mitigate the harms of drug and alcohol use through non-judgmental communication while motivational interviewing may be useful in helping households acquire and utilize new skills and information.”

Written Standard #13: Termination of Assistance

- **Assistance may be terminated to a program participant who violates program requirements or conditions of occupancy by providing a formal process that recognizes the due process of law.**

On page 37 of the Preamble of the HEARTH Act, the following is stated concerning termination of assistance:

“The interim rule provides that a recipient may terminate assistance to a participant who violates program requirements or conditions of occupancy. The recipient must provide a formal process that recognizes the due process of law. Recipients may resume assistance to a participant whose assistance has been terminated.

Recipients that are providing permanent supportive housing for hard-to-house populations of homeless persons must exercise judgment and examine all circumstances in determining whether termination is appropriate. Under this interim rule, HUD has determined that a participant’s assistance should be terminated only in the most severe cases. HUD is carrying over this requirement from the Shelter Plus Care program.”

II. Determining Written Standards for Rapid Rehousing

A. Background information

In regards to rapid rehousing, § 578.7 Responsibilities of the Continuum of Care (a) (9) of the HEARTH Act Interim Rule notes that:

In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish and consistently follow written standards for providing Continuum of Care assistance. At a minimum, these written standards must include:

- Policies and procedures for evaluating individuals' and families' eligibility for assistance under this part;
- Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid rehousing assistance;
- Standards for determining what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance;

Rapid rehousing is considered permanent housing. HUD's regulatory definition of "permanent housing" states:

"The term 'permanent housing' means community-based housing without a designated length of stay, and includes both permanent supportive housing and rapid re-housing."

HUD also states:

"Additionally, in the regulatory definition of "permanent housing," HUD clarifies that to be permanent housing, "the program participant must be the tenant on a lease for a term of at least one year that is renewable and is terminable only for cause. The lease must be renewable for terms that are a minimum of one month long. HUD has determined that requiring a lease for a term of at least one year that is renewable and terminable only for cause, assists program participants in obtaining stability in housing, even when the rental assistance is temporary. These requirements are consistent with Section 8 requirements."

Types of rapid rehousing assistance include:

- Rental assistance;
- Case management;
- Supportive services;
- Security deposits.

B. Eligible Clients

Eligible clients must meet HUD's Category 1 definition of homelessness which is:

Individuals and families who lack a fixed, regular, and adequate nighttime residence:

- An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, etc.
- An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low income individuals); or
- An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

For information on HUD's other homeless categories, eligible for other CoC funds, visit: www.onecpd.info/resources/documents/HEARTH_HomelessDefinition_FinalRule.pdf

Eligible clients must also meet eligibility criteria as defined in the NOFA under which the program was funded.

C. Prioritizing Rapid Rehousing

Recently, HUD provided guidance for rapid rehousing in terms of prioritizing subpopulations. HUD noted in a SNAPS In Focus: Rapid Re-Housing As a Model and Best Practice, August 6, 2014, that:

“Rapid re-housing can be effective for many populations, such as families with children, youth aging out of foster care, domestic violence survivors, single adults, and veterans, but should be targeted to those households that would not be able to get out of homelessness without the assistance. It is particularly a key strategy for achieving the Opening Doors goal of ending family, youth, and child homelessness by 2020.

Rapid re-housing should prioritize people with more challenges, including those with no income, poor employment prospects, troubled rental histories, and criminal records. Providers should link participants with community resources that will help them achieve longer-term stability and well-being. Now is the time for communities to be working together to establish written standards for administering rapid re-housing and thinking strategically about how this type of assistance will be used most effectively within the CoC.”

Recently, HUD also noted on www.hudexchange.info/resources/documents/Rapid-Re-Housing-Brief.pdf that:

“Rapid re-housing is an effective intervention for many different types of households experiencing homelessness, including those with no income, with disabilities, and with poor rental history. The majority of households experiencing homelessness are good candidates for rapid re-housing. The only exceptions are households that can exit homelessness with little or no assistance, those who experience chronic homelessness and who need permanent supportive housing, and households who are seeking a therapeutic residential environment, including those recovering from addiction.”

Thus, the San Bernardino CoC will prioritize the following subpopulations:

- families with children;
- youth aging out of foster care;
- domestic violence survivors;
- single adults;
- and veterans

that can exit homelessness with little or no assistance, those who experience chronic homelessness and who need permanent supportive housing, and households who are seeking a therapeutic residential environment, including those recovering from addiction.

D. Written Standards

Written Standard #1: Lease Agreement

- **The program participant must be the tenant on a lease for a term of at least one year that is renewable and is terminable only for cause. The lease must be renewable for terms that are a minimum of one month long.**

On page 12 of the Preamble of the HEARTH Act Interim Rule,

“HUD clarifies that to be permanent housing, “the program participant must be the tenant on a lease for a term of at least one year that is renewable and is terminable only for cause. The lease must be renewable for terms that are a minimum of one month long. HUD has determined that requiring a lease for a term of at least one year that is renewable and terminable only for cause, assists program participants in obtaining stability in housing, even when the rental assistance is temporary. These requirements are consistent with Section 8 requirements.”

Written Standard #2: Rental Assistance

- **Program participants may receive short-term (up to 3 months) and/or medium-term (for 3 to 24 months) tenant-based rental assistance**

§ 578.37 Program components and uses of assistance (a) (1) (ii) states that:

“Continuum of Care funds may provide supportive services, as set forth in § 578.53, and/or **short-term (up to 3 months) and/or medium-term (for 3 to 24 months) tenant-based rental assistance**, as set forth in § 578.51(c), as necessary to help a homeless individual or family, with or without disabilities, move as quickly as possible into permanent housing and achieve stability in that housing.”

Written Standard #3: Amount of Rental Assistance

- **Standards for determining the share of rent and utilities costs that each program participant must pay, if any, will be based on the following guidelines:**
 - **The maximum amount of rent that a participant will pay can be up to 100% of the rental amount;**
 - **The maximum percentage of income paid by participants towards rent at program completion shall be no more than 50%. However, in certain circumstances, on a case-by-case basis, there may be participants whose rental share may exceed 50% of the rent based on their financial circumstances. In general, the goal will be that participants pay generally no more than 50% of their income in rent;**
 - **100% of the cost of rent in rental assistance may be provided to program participants. However to maximize the number of households that can be served with rapid re-housing resources, it is expected that the level of need will be based on the goal of providing only what is necessary for each household to be stably housed for the long term;**
 - **Rental assistance cannot be provided for a unit unless the rent for that unit is at or below the Fair Market Rent limit, established by HUD;**
 - **The rent charged for a unit must be reasonable in relation to rents currently being charged for comparable units in the private unassisted market and must not be in excess of rents currently being charged by the owner for comparable unassisted units.**

§ 578.37 Program components and uses of assistance (a) (1) (ii) (F) states that a Continuum of Care:

“May set a maximum amount or percentage of rental assistance that a program participant may receive, a maximum number of months that a program participant may receive rental assistance, and/or a maximum number of times that a program participant may receive rental assistance. The recipient or subrecipient may also require program participants to share in the costs of rent. For the purposes of calculating rent

for rapid rehousing, the rent shall equal the sum of the total monthly rent for the unit and, if the tenant pays separately for utilities, the monthly allowance for utilities (excluding telephone) established by the public housing authority for the area in which the housing is located.”

Written Standard #4: Duration of Assistance

- **Program participants may receive up to 24 months of rental assistance. However, it is expected that program participants will only receive the level of assistance necessary to be stably housed for the long-term.**

§ 578.37 Program components and uses of assistance (a) (1) (ii) states that:

“Continuum of Care funds may provide supportive services, as set forth in § 578.53, and/or short-term (up to 3 months) and/or medium-term (for 3 to 24 months) tenant-based rental assistance, as set forth in § 578.51(c), as necessary to help a homeless individual or family, with or without disabilities, move as quickly as possible into permanent housing and achieve stability in that housing.”

Written Standard #5: Security Deposits including Last Month’s Rent

- **Program participants may receive funds for security deposits in an amount not to exceed 2 months of rent.**

§ 578.51 Rental assistance (a) (2) states that:

“Grant funds may be used for security deposits in an amount not to exceed 2 months of rent. An advance payment of the last month’s rent may be provided to the landlord, in addition to the security deposit and payment of first month’s rent.”

Written Standard #6: Receiving Rental Assistance through Other Sources

- **Rental assistance cannot be provided to a program participant who is already receiving rental assistance, or living in a housing unit receiving rental assistance or operating assistance through other federal, State, or local sources.**

§ 578.51 Rental assistance (a) Use states that:

“Grant funds may be used for rental assistance for homeless individuals and families. Rental assistance cannot be provided to a program participant who is already receiving rental assistance, or living in a housing unit receiving rental assistance or operating assistance through other federal, State, or local sources.”

Written Standard #7: Case Management

- Program participants must meet with a case manager not less than once per month to assist the program participant in ensuring long-term housing stability.

§ 578.37 Program components and uses of assistance (a) (1) (ii) (F) states the following requirement:

“Require the program participant to meet with a case manager not less than once per month to assist the program participant in ensuring long-term housing stability. The project is exempt from this requirement if the Violence Against Women Act of 1994 (42 U.S.C. 13925 *et seq.*) or the Family Violence Prevention and Services Act (42 U.S.C. 10401 *et seq.*) prohibits the recipient carrying out the project from making its housing conditional on the participant’s acceptance of services.”

Written Standard #8: Supportive Services

- **Program participants may receive supportive services as set forth in § 578.53 (see Appendix A)**

§ 578.37 Program components and uses of assistance (a) (1) (ii) states that:

“Continuum of Care funds may provide **supportive services**, as set forth in § 578.53, and/or short-term (up to 3 months) and/or medium-term (for 3 to 24 months) tenant-based rental assistance, as set forth in § 578.51(c), as necessary to help a homeless individual or family, with or without disabilities, move as quickly as possible into permanent housing and achieve stability in that housing.”

Written Standard #9: Duration of Supportive Services

- **Program participants may receive supportive services for no longer than 6 months after rental assistance stops**

§ 578.37 Program components and uses of assistance (a) (1) (ii) (F) states that the Continuum of Care “May provide supportive services for no longer than 6 months after rental assistance stops.”

Written Standard #10: Re-evaluation

- **Program participants must be re-evaluated, not less than once annually, in order to determine whether program participants lack sufficient resources and support networks necessary to retain housing without Continuum of Care assistance and the types and amounts of assistance that the program participant needs to retain housing.**

§ 578.37 Program components and uses of assistance (a) (1) (ii) (E) states that the Continuum of Care:

“Must re-evaluate, not less than once annually, that the program participant lacks sufficient resources and support networks necessary to retain housing without Continuum of Care assistance and the types and amounts of assistance that the program participant needs to retain housing. The recipient or subrecipient may require each program participant receiving assistance to notify the recipient or subrecipient of changes in the program participant’s income or other circumstances (e.g., changes in household composition) that affect the program participant's need for assistance. When notified of a relevant change, the recipient or subrecipient must reevaluate the program participant’s eligibility and the amount and types of assistance that the program participant needs.”

III. Determining Written Standards for Transitional Housing

A. Background Information

This section proposes written standards for transitional housing based upon information provided in the HEARTH Act.

Under § 578.3 Definitions of the HEARTH Act, the following is stated:

“Transitional housing means housing, where all program participants have signed a lease or occupancy agreement, the purpose of which is to facilitate the movement of homeless individuals and families into permanent housing within 24 months or such longer period as HUD determines necessary. The program participant must have a lease or occupancy agreement for a term of at least one month that ends in 24 months and cannot be extended.”

B. Eligible Clients

Eligible clients must meet HUD’s Category 1 definition of homelessness which is:

Individuals and families who lack a fixed, regular, and adequate nighttime residence:

- An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, etc.
- An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low income individuals); or

- An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

For information on HUD’s other homeless categories, eligible for other CoC funds, visit: www.onecpd.info/resources/documents/HEARTH_HomelessDefinition_FinalRule.pdf

Eligible clients must also meet eligibility criteria as defined in the NOFA under which the program was funded.

C. Prioritizing Transitional Housing

Domestic violence survivors and youth ages 18 – 24 will be prioritized for transitional housing if they are not assessed as chronically homeless.² All chronically homeless individuals and families will not be served through transitional housing.³ Such households will be served by permanent supportive housing through a Housing First approach. Also, eligible single veterans and veterans with families, will be served by permanent supportive housing through the HUD VASH voucher program or the Supportive Services for Veteran Families program.

D. Written Standards

Written Standard #1:

The program participant must have a lease or occupancy agreement for a term of at least one month that ends in 24 months and cannot be extended” unless a “homeless individual or family may remain in transitional housing for a period longer than 24 months, if permanent housing for the individual or family has not been located or if the individual or family requires

² In the HEARTH Act, chronically homeless is defined as (1) An individual who: (i) Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and (ii) Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year or on at least four separate occasions in the last 3 years; and (iii) Can be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002)), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability; (2) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or (3) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

³ Chronically homeless households are no longer considered chronically homeless once they become residents of transitional housing programs. As a result, such households are no longer eligible for permanent supportive housing programs that are restricted to serve only chronically homeless households. In addition, HUD strongly encourages permanent supportive housing providers to fill vacant beds with chronically homeless households.

additional time to prepare for independent living” as noted in § 578.79 Limitation on transitional housing.

Under § 578.51 Rental assistance, (l) Leases (2) Initial lease for transitional housing, the following is required:

“Program participants in transitional housing must enter into a lease agreement for a term of at least one month. The lease must be automatically renewable upon expiration, except on prior notice by either party, up to a maximum term of 24 months.”

Written Standard #2:

The lease with program participant “must be automatically renewable upon expiration, except on prior notice by either party, up to a maximum term of 24 months.”

Under § 578.37 Program components and uses of assistance, subsection (2), transitional housing is further described in the HEARTH Act as follows:

“Transitional housing facilitates the movement of homeless individuals and families to PH within 24 months of entering TH. Grant funds may be used for acquisition, rehabilitation, new construction, leasing, rental assistance, operating costs, and supportive services.”

Written Standard #3:

In order to facilitate the movement of program participants to PH within 24 months of entering TH, grant funds may be used for all of the following activities: acquisition, rehabilitation, new construction, leasing, rental assistance, operating costs, and supportive services.

Under § 578.53 Supportive services (b) Duration, the following is also noted:

(1) “For a transitional housing project, supportive services must be made available to residents throughout the duration of their residence in the project.”

(3) “Services may also be provided to former residents of transitional housing and current residents of permanent housing who were homeless in the prior 6 months, for no more than 6 months after leaving transitional housing or homelessness, respectively, to assist their adjustment to independent living.”

Written Standard #4:

Supportive services must be made available to program participants “throughout the duration of their residence” and such services “may also be provided to former residents of transitional housing and current residents of permanent housing who were homeless in the

prior 6 months, for no more than 6 months after leaving transitional housing or homelessness, respectively, to assist their adjustment to independent living.”

Under § 578.77 Calculating occupancy charges and rent, the following guidelines are provided:

“(a) Occupancy agreements and leases. Recipients and subrecipients must have signed occupancy agreements or leases (or subleases) with program participants residing in housing.

(b) Calculation of occupancy charges. Recipients and subrecipients are not required to impose occupancy charges on program participants as a condition of residing in the housing. However, if occupancy charges are imposed, they may not exceed the highest of:

(1) 30 percent of the family’s monthly adjusted income (adjustment factors include the number of people in the family, age of family members, medical expenses, and child-care expenses);

(2) 10 percent of the family’s monthly income; or

(3) If the family is receiving payments for welfare assistance from a public agency and a part of the payments (adjusted in accordance with the family’s actual housing costs) is specifically designated by the agency to meet the family’s housing costs, the portion of the payments that is designated for housing costs.

(4) Income. Income must be calculated in accordance with 24 CFR 5.609 and 24 CFR 5.611(a). Recipients and subrecipients must examine a program participant’s income initially, and if there is a change in family composition (e.g., birth of a child) or a decrease in the resident’s income during the year, the resident may request an interim reexamination, and the occupancy charge will be adjusted accordingly.”

Written Standard #5:

Recipients and subrecipients of funding for transitional housing “are not required to impose occupancy charges on program participants as a condition of residing” in transitional housing. “However, if occupancy charges are imposed, they may not exceed the highest of:

(1) 30 percent of the family’s monthly adjusted income (adjustment factors include the number of people in the family, age of family members, medical expenses, and child-care expenses);

(2) 10 percent of the family’s monthly income; or

(3) If the family is receiving payments for welfare assistance from a public agency and a part of the payments (adjusted in accordance with the family’s actual housing costs) is specifically designated by the agency to meet the

family's housing costs, the portion of the payments that is designated for housing costs.

(4) Income. Income must be calculated in accordance with 24 CFR 5.609 and 24 CFR 5.611(a). Recipients and subrecipients must examine a program participant's income initially, and if there is a change in family composition (e.g., birth of a child) or a decrease in the resident's income during the year, the resident may request an interim reexamination, and the occupancy charge will be adjusted accordingly.

Under § 578.79 Limitation on transitional housing, the following is stated:

“A homeless individual or family may remain in transitional housing for a period longer than 24 months, if permanent housing for the individual or family has not been located or if the individual or family requires additional time to prepare for independent living. However, HUD may discontinue assistance for a transitional housing project if more than half of the homeless individuals or families remain in that project longer than 24 months.”

Written Standard #6:

Assistance for a transitional housing project may be discontinued “if more than half of the homeless individuals or families remain in that project longer than 24 months.”

As noted on page 1, § 578.7 Responsibilities of the Continuum of Care, subsection (a) Operate the Continuum of Care (9), states that written standards must also include:

“policies and procedures for determining and prioritizing which eligible individuals and families will receive” transitional housing, rapid rehousing, and permanent supportive housing assistance.

Prioritizing which eligible individuals and families will receive transitional housing has been the focus of a few HUD publications during the past few years. On September 18, 2013, “What about Transitional Housing” was the emphasis of SNAPS Weekly Focus.

“It is time for CoCs to look at transitional housing programs with a critical eye – look at recent research, review each program's eligibility criteria, analyze outcomes and occupancy rates, and make sure the services offered (and paid for) actually match the needs of people experiencing homelessness within the CoC. Many transitional housing programs may need to change their program design or serve a different population. For example, some may need to remove strict eligibility criteria that result in those families that really need intensive services being screened out (often resulting in low occupancy). In other cases, the best course of action is to reallocate the transitional housing program in favor of a more promising model.

For many years, using HUD funds for transitional housing was the only funding alternative for serving families and individuals that did not need permanent supportive housing. With rapid re-housing now eligible under both the CoC Program and the Emergency Solutions Grants (ESG) program, there is an alternative and promising option for families with low-barriers that need shorter interventions. Rapid re-housing can be done with a lower cost per household – increasing the total number of households that can be served with the same amount of funding. If the majority of households served in your CoC's transitional housing are families with lower barriers, you should consider reallocating those projects into new rapid re-housing projects for families.

Similarly, as CoCs move to a more direct Housing First approach, eligible households with disabilities that will need long-term assistance likely do not need an interim stay in transitional housing. For example, a CoC that has a high number of people in transitional housing *waiting* for placement into permanent supportive housing should consider reallocating those transitional housing units into new permanent supportive housing.

We know that there are families and individuals who need more assistance than rapid re-housing offers but who do not qualify for permanent supportive housing. Transitional housing should be reserved for those populations that most need that type of intervention – programs that serve domestic violence survivors and youth and those that provide substance abuse treatment come to mind first – rather than being used either as a holding pattern for those that really need permanent supportive housing or those that need less intensive interventions.”

Appendix A: Supportive Services

§ 578.53 Supportive services.

(a) In general. Grant funds may be used to pay the eligible costs of supportive services that address the special needs of the program participants. If the supportive services are provided in a supportive service facility not contained in a housing structure, the costs of day-to-day operation of the supportive service facility, including maintenance, repair, building security, furniture, utilities, and equipment are eligible as a supportive service.

(1) Supportive services must be necessary to assist program participants obtain and maintain housing.

(2) Recipients and subrecipients shall conduct an annual assessment of the service needs of the program participants and should adjust services accordingly.

(b) Duration.

(1) For a transitional housing project, supportive services must be made available to residents throughout the duration of their residence in the project.

(2) Permanent supportive housing projects must provide supportive services for the residents to enable them to live as independently as is practicable throughout the duration of their residence in the project.

(3) Services may also be provided to former residents of transitional housing and current residents of permanent housing who were homeless in the prior 6 months, for no more than 6 months after leaving transitional housing or homelessness, respectively, to assist their adjustment to independent living.

(4) Rapid rehousing projects must require the program participant to meet with a case manager not less than once per month as set forth in § 578.37(a)(1)(ii)(F), to assist the program participant in maintaining long-term housing stability.

(c) Special populations. All eligible costs are eligible to the same extent for program participants who are unaccompanied homeless youth; persons living with HIV/AIDS; and victims of domestic violence, dating violence, sexual assault, or stalking.

(d) Ineligible costs. Any cost that is not described as an eligible cost under this section is not an eligible cost of providing supportive services using Continuum of Care program funds. Staff training and the costs of obtaining professional licenses or certifications needed to provide supportive services are not eligible costs.

(e) Eligible costs.

(1) Annual Assessment of Service Needs. The costs of the assessment required by § 578.53(a)(2) are eligible costs.

(2) Assistance with moving costs. Reasonable one-time moving costs are eligible and include truck rental and hiring a moving company.

(3) Case management. The costs of assessing, arranging, coordinating, and monitoring the delivery of individualized services to meet the needs of the program participant(s) are eligible costs. Component services and activities consist of:

(i) Counseling;

(ii) Developing, securing, and coordinating services;

(iii) Using the centralized or coordinated entry system as required under § 578.23(c)(9).

(iv) Obtaining federal, State, and local benefits;

(v) Monitoring and evaluating program participant progress;

(vi) Providing information and referrals to other providers;

(vii) Providing ongoing risk assessment and safety planning with victims of domestic violence, dating violence, sexual assault, and stalking; and

(viii) Developing an individualized housing and service plan, including planning a path to permanent housing stability.

(4) Child care. The costs of establishing and operating child care, and providing child-care vouchers, for children from families experiencing homelessness, including providing meals and snacks, and comprehensive and coordinated developmental activities, are eligible.

(i) The children must be under the age of 13, unless they are disabled children.

(ii) Disabled children must be under the age of 18.

(iii) The child-care center must be licensed by the jurisdiction in which it operates in order for its costs to be eligible.

(5) Education services. The costs of improving knowledge and basic educational skills are eligible.

(i) Services include instruction or training in consumer education, health education, substance abuse prevention, literacy, English as a Second Language, and General Educational Development (GED).

(ii) Component services or activities are screening, assessment and testing; individual or group instruction; tutoring; provision of books, supplies, and instructional material; counseling; and referral to community resources.

(6) Employment assistance and job training. The costs of establishing and operating employment assistance and job training programs are eligible, including classroom, online and/or computer instruction, on-the-job instruction, services that assist individuals in securing employment, acquiring learning skills, and/or increasing earning potential. The cost of providing reasonable stipends to program participants in employment assistance and job training programs is also an eligible cost.

(i) Learning skills include those skills that can be used to secure and retain a job, including the acquisition of vocational licenses and/or certificates.

(ii) Services that assist individuals in securing employment consist of:

(A) Employment screening, assessment, or testing;

(B) Structured job skills and job-seeking skills;

(C) Special training and tutoring, including literacy training and pre-vocational training;

(D) Books and instructional material;

(E) Counseling or job coaching; and

(F) Referral to community resources.

(7) Food. The cost of providing meals or groceries to program participants is eligible.

(8) Housing search and counseling services. Costs of assisting eligible program participants to locate, obtain, and retain suitable housing are eligible.

(i) Component services or activities are tenant counseling; assisting individuals and families to understand leases; securing utilities; and making moving arrangements.

(ii) Other eligible costs are:

(A) Mediation with property owners and landlords on behalf of eligible program participants;

(B) Credit counseling, accessing a free personal credit report, and resolving personal credit issues; and

(C) The payment of rental application fees.

(9) Legal services. Eligible costs are the fees charged by licensed attorneys and by person(s) under the supervision of licensed attorneys, for advice and representation in matters that interfere with the homeless individual or family's ability to obtain and retain housing.

(i) Eligible subject matters are child support; guardianship; paternity; emancipation; legal separation; orders of protection and other civil remedies for victims of domestic violence, dating violence, sexual assault, and stalking; appeal of veterans and public benefit claim denials; landlord tenant disputes; and the resolution of outstanding criminal warrants.

(ii) Component services or activities may include receiving and preparing cases for trial, provision of legal advice, representation at hearings, and counseling.

(iii) Fees based on the actual service performed (i.e., fee for service) are also eligible, but only if the cost would be less than the cost of hourly fees. Filing fees and other necessary court costs are also eligible. If the subrecipient is a legal services provider and performs the services itself, the eligible costs are the subrecipient's employees' salaries and other costs necessary to perform the services.

(iv) Legal services for immigration and citizenship matters and issues related to mortgages and homeownership are ineligible. Retainer fee arrangements and contingency fee arrangements are ineligible.

(10) Life skills training. The costs of teaching critical life management skills that may never have been learned or have been lost during the course of physical or mental illness, domestic violence, substance abuse, and homelessness are eligible. These services must be necessary to assist the program participant to function independently in the community. Component life skills training are the budgeting of resources and money management, household management, conflict management, shopping for food and other needed items, nutrition, the use of public transportation, and parent training.

(11) Mental health services. Eligible costs are the direct outpatient treatment of mental health conditions that are provided by licensed professionals. Component services are crisis interventions; counseling; individual, family, or group therapy sessions; the prescription of psychotropic medications or explanations about the use and management of medications; and combinations of therapeutic approaches to address multiple problems.

(12) Outpatient health services. Eligible costs are the direct outpatient treatment of medical conditions when provided by licensed medical professionals including:

(i) Providing an analysis or assessment of an individual's health problems and the development of a treatment plan;

(ii) Assisting individuals to understand their health needs;

(iii) Providing directly or assisting individuals to obtain and utilize appropriate medical treatment;

(iv) Preventive medical care and health maintenance services, including in-home health services and emergency medical services;

(v) Provision of appropriate medication;

(vi) Providing follow-up services; and

(vii) Preventive and non-cosmetic dental care.

(13) Outreach services. The costs of activities to engage persons for the purpose of providing immediate support and intervention, as well as identifying potential program participants, are eligible.

(i) Eligible costs include the outreach worker's transportation costs and a cell phone to be used by the individual performing the outreach.

(ii) Component activities and services consist of: initial assessment; crisis counseling; addressing urgent physical needs, such as providing meals, blankets, clothes, or toiletries; actively connecting and providing people with information and referrals to homeless and mainstream programs; and publicizing the availability of the housing and/or services provided within the geographic area covered by the Continuum of Care.

(14) Substance abuse treatment services. The costs of program participant intake and assessment, outpatient treatment, group and individual counseling, and drug testing are eligible. Inpatient detoxification and other inpatient drug or alcohol treatment are ineligible.

(15) Transportation. Eligible costs are:

(i) the costs of program participant's travel on public transportation or in a vehicle provided by the recipient or subrecipient to and from medical care, employment, child care, or other services eligible under this section.

(ii) Mileage allowance for service workers to visit program participants and to carry out housing quality inspections;

(iii) The cost of purchasing or leasing a vehicle in which staff transports program participants and/or staff serving program participants;

(iv) The cost of gas, insurance, taxes, and maintenance for the vehicle;

(v) The costs of recipient or subrecipient staff to accompany or assist program participants to utilize public transportation; and

(vi) If public transportation options are not sufficient within the area, the recipient may make a one-time payment on behalf of a program participant needing car repairs or maintenance required to operate a personal vehicle, subject to the following:

(A) Payments for car repairs or maintenance on behalf of the program participant may not exceed 10 percent of the Blue Book value of the vehicle (Blue Book refers to the guidebook that compiles and quotes prices for new and used automobiles and other vehicles of all makes, models, and types);

(B) Payments for car repairs or maintenance must be paid by the recipient or subrecipient directly to the third party that repairs or maintains the car; and

(C) The recipients or subrecipients may require program participants to share in the cost of car repairs or maintenance as a condition of receiving assistance with car repairs or maintenance.

(16) Utility deposits. This form of assistance consists of paying for utility deposits. Utility deposits must be a one-time fee, paid to utility companies.

(17) Direct provision of services. If the a service described in paragraphs (e)(1) through (e)(16) of this section is being directly delivered by the recipient or subrecipient, eligible costs for those services also include:

(i) The costs of labor or supplies, and materials incurred by the recipient or subrecipient in directly providing supportive services to program participants; and

(ii) The salary and benefit packages of the recipient and subrecipient staff who directly deliver the services.

Interagency Council on Homelessness

Administrative Office
303 E. Vanderbilt Way, San Bernardino, CA 92415
Office: (909) 386-8296



FROM: Tom Hernandez, Homeless Services Manager

SUBJECT: Coordinated Entry System creation and funding determination for the anticipated fiscal year 2015 Continuum of Care Homeless Assistance Grant

DATE: June 24, 2015

RECOMMENDATION

Approve reallocation of sufficient funding to implement a Coordinated Entry System (CES) and instruct the Office of Homeless Services to make the necessary outreach and changes to accommodate the reallocation process for a CES.

BACKGROUND INFORMATION

On May 20, 2009, President Obama established the new Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act, an amendment and reauthorization of the McKinney-Vento Homeless Assistance Act, which included provisions for the development, implementation, and maintenance of a Coordinated Entry System (CES).

In 2011, the United States Department of Housing and Urban Development (HUD) published the Continuum of Care (CoC) Program interim rule in the Federal Register which focuses on regulatory implementation of the CoC program. The interim rule consolidated the following Homeless Assistance programs: the Shelter Plus Care Program, the Supportive Housing Program, and the Section 8 Moderate Rehabilitation Single Room Occupancy Program. The ruling also established mandatory use of CES as a process designed to organize homeless housing and service program participant intakes, assessment, and provision of referrals.

Under the new rule, there were a number of requirements placed upon local CoCs which include:

- Establishing and maintaining a CES that provides an initial and comprehensive assessment of the needs of individuals and families for housing and homeless related services;
- Requiring all HUD-funded programs (including Emergency Solutions Grant and Continuum of Care awardees) to use the CES once developed and approved by the local CoC;
- Ensuring that the screening and assessment is consistent with the written standards established by the local CoC;
- Comply with any requirements established by HUD in the final interim rule.

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City of San Bernardino
San Bernardino County Human Services
Community Action Partnership of San Bernardino County
Housing Authority of the County of San Bernardino
San Bernardino County Superintendent of Schools
Department of Community Development and Housing

City of Barstow
City of Redlands
Town of Yucca Valley
Department of Probation
Veteran Administration Loma Linda
Workforce Development Department
Members of the Homeless Provider Network
HMIS Lead Agency

City of Colton
City of Rancho Cucamonga
Department of Behavioral Health
Department of Rehabilitation
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The overall goal of a CES is to develop long-term solutions for people in need rather than short-term or inappropriate fixes. The guiding principles for a CES effort should:

- Seek to minimize wait, be easy to use and understand, and focus on positive customer experiences;
- Be based on a clear and easy to understand assessment system conducted by well-trained, well-qualified professionals;
- Be client-centered and client-driven with a focus on offering services that fit specific needs; and
- Ensure the availability and accessibility of all-inclusive services for all clients.

According to the National Alliance to End Homelessness, there are several models for coordinated entry systems – centralized (physical and/or virtual) and decentralized. A geographically centralized front door has one distinct location where every family can go to access intake and assessment, while a decentralized coordinated entry system offers multiple sites for intake and assessment. A virtual or telephone-based centralized intake provides one number that consumers can call to access intake and receive referrals.

The physically centralized intake model is most appropriate for those areas that are small and/or have a reliable and comprehensive mass transit system. The advantages of this model are that the same staff person or people will deliver the assessment to every person requesting services, ensuring consistency in assessment administration and data collection. For centralized intake to work, providers must be confident that they will receive quality referrals as a result of the intake process.

The decentralized intake model offers multiple locations from which homeless individuals and families can access services. However, an increase in the number of organizations a community has participating in the system entry process may increase the likelihood of variation in terms of how assessments and referrals are handled. This particular issue may make the decentralized model less desirable as similarly funded agencies may vary criteria for participation during the intake process.

The virtual or telephone-based intake model offers a centralized phone hotline or web-based service (e.g.. 2-1-1 or community internet access). The advantage of this model is that it is built on a system or structure already in place and increases the likelihood for consistency with only one agency administering the assessment tool and making referrals to other agencies as needed. However, a virtual location may not be accessible for everyone due to lack of telephone and/or Internet access and partner agencies would need to buy into releasing control of their entry and assessment procedures.

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In order to effectively and efficiently assess individuals and families for housing and homeless related services the CES must cover the entire region served by the CoC; be easily accessed by individuals and families seeking housing or services; be well advertised; and include a comprehensive and standardized assessment tool. The CES will be used for entrance into emergency shelter, transitional housing, and permanent supportive housing as well as prevention, diversion, and/or rapid rehousing.

The CES will assist in reducing the burden placed on homeless individuals and families who are already experiencing a high degree of barriers accessing housing and services; improving the speed at which a person or family can be appropriately housed; improving collaboration among service providers; streamlining referrals and ensuring easier access to services; prioritizing and more effectively addressing the needs of hard to serve clients; and improving system performance overall.

Effective coordinated entry requires that the staff performing intake and assessment functions have a thorough understanding of the services available in the community. The National Alliance to End Homelessness suggests having a database or some other information source that can be easily updated and contains provider names, locations, hours of operation, services provided, etc. Intake staff should circulate this list on a regular basis to the rest of the homeless assistance provider community to ensure all the information listed is accurate.

The local CoC anticipates a number of challenges associated with the design and implementation of this approach, including but not limited to lack of available resources; capacity challenges especially related to geography; communication barriers; safety, and liability; and other organizational considerations. In addition, encouraging providers to buy in to the idea of releasing control over the intake process may be difficult at first; however, it is necessary for a coordinated entry system to be successful. A coordinated approach would provide the following benefits to providers:

- A more coordinated intake process will take the pressure off of their staff to assess eligibility, since everyone needing assistance will be assessed at the front door;
- Under a coordinated system, providers will know that the people coming to their programs are already eligible for their services; and
- Developing a coordinated entry process is one of the many ways a community can incorporate the systems-focused approach encouraged by the HEARTH Act.

Though coordinated entry typically means that providers accept whoever is referred into their program, some communities may allow providers to refuse services to a small percentage of referred households.

Members of the Interagency Council on Homelessness

Members of the Board of Supervisors
City of Ontario
City of San Bernardino
San Bernardino County Human Services
Community Action Partnership of San Bernardino County
Housing Authority of the County of San Bernardino
San Bernardino County Superintendent of Schools
Department of Community Development and Housing

City of Barstow
City of Redlands
Town of Yucca Valley
Department of Probation
Veteran Administration Loma Linda
Workforce Development Department
Members of the Homeless Provider Network
HMIS Lead Agency

City of Colton
City of Rancho Cucamonga
Department of Behavioral Health
Department of Rehabilitation
211 United Way
Sheriff's Department
General Members-At-Large

Interagency Council on Homelessness

Administrative Office
303 E. Vanderbilt Way, San Bernardino, CA 92415
Office: (909) 386-8296



The CES will include special consideration for specific at-risk subpopulations seeking homelessness assistance in their community. Below are just a few of the groups whose needs may require tweaks or special consideration when working with CES staff:

- Victims of Domestic Violence
- Unaccompanied and/or Runaway Youth
- Lesbian, Gay, Bi-Sexual, Transgender, Questioning (LGBTQ) Populations
- Veterans
- Chronically Homeless Families with Children

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Human Services
Transitional Assistance

Housing Support Program (HSP)
and
Family Stabilization

Presented by Regional Managers:
Steve Couchot and Elaine Angely

June 24, 2015



HSP History

Senate Bill (SB) 855 provided \$20 million in FY 14/15 from the State General Fund to promote housing stability for CalWORKs families.

- 🎁 San Bernardino County requested \$1,075,906 for the second half of FY 14/15 on 8/13/2014.
- 🎁 Approval letter received from the California Department of Social Services (CDSS) on 9/5/2014 for the amount requested.

HSP in San Bernardino County

- 🎁 The Transitional Assistance Department (TAD) contracted via a Memorandum of Understanding (MOU) with the Housing Authority of the County of San Bernardino (HACSB), who in turn contracted with the non-profit agency, Knowledge and Education for Your Success (KEYS), to facilitate HSP.
- 🎁 HSP began accepting referrals on 1/12/2015.



HSP Eligibility

Homeless families are eligible to HSP if the household:

- 🎁 Is receiving CalWORKs, and
- 🎁 Meets the HSP definition of homeless.

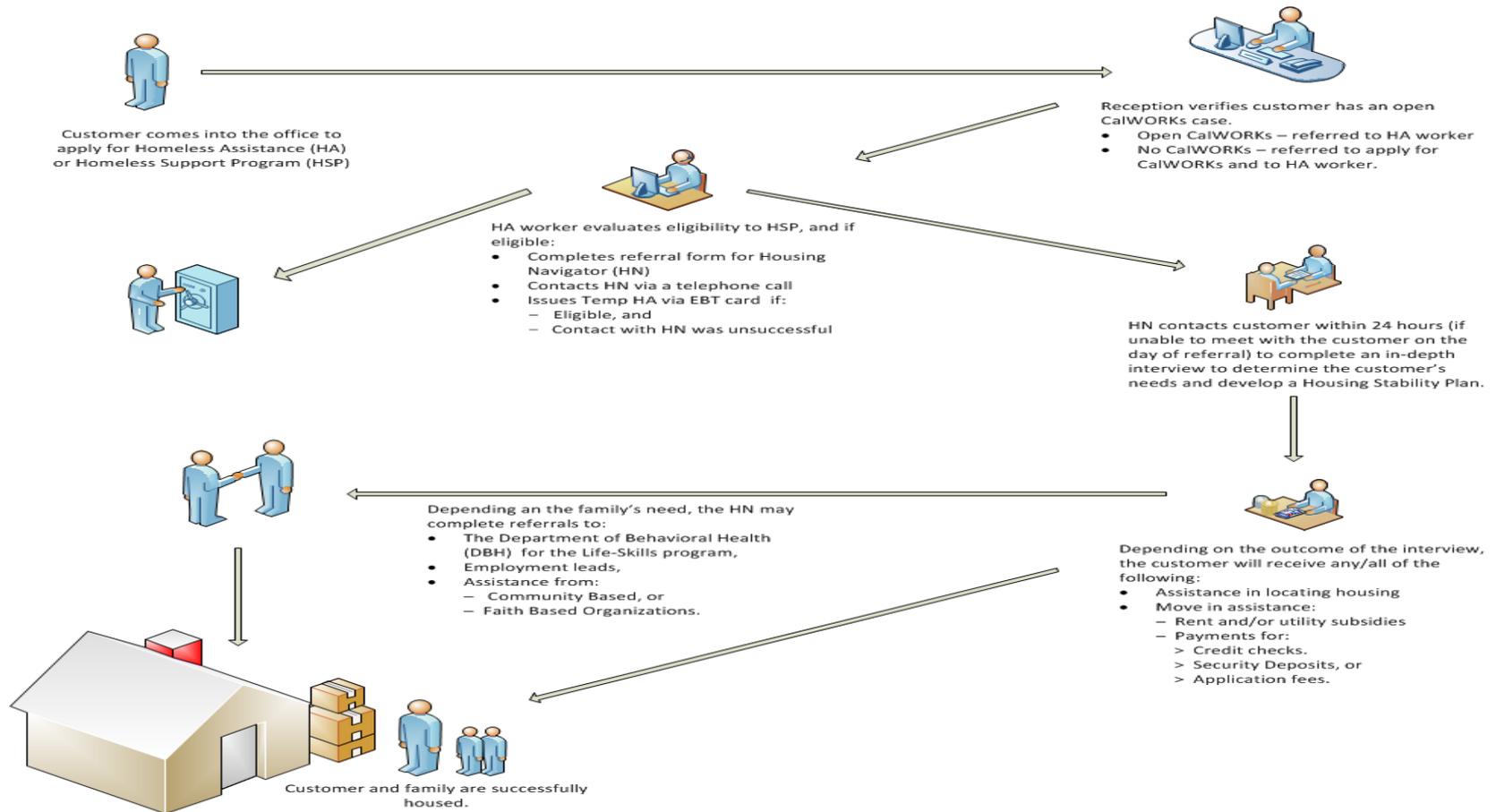
HSP defines homeless as the family is:

- 🎁 Lacking a fixed and regular nighttime residence, **or**
- 🎁 Having a primary nighttime residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations, **or**
- 🎁 Residing in a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings, **or**
- 🎁 In receipt of a judgment for eviction, as ordered by a court.

HSP Process

1. Eligibility Workers (EWs) determine eligibility to HSP and complete the HSP referral process, if eligible.
2. The HSP referral is forwarded to a KEYS Housing Navigator (HN). The HN will assist the customer with:
 - A. Locating housing.
 - B. Completing housing applications.
 - C. Providing mediation with landlords and neighbors.
 - D. Reviewing and understanding the requirements of the lease.
 - E. Obtaining, interpreting, and correcting, as needed, rental and credit history.
 - F. Developing a household budget.
 - G. Providing information and referrals to employment and free or reduced-cost goods and services.
 - H. Referrals to services that can assist in alleviating housing barriers.
 - Case Management with the Department of Behavioral Health (DBH).

HSP Process Overview



05/15

CalWORKs Homeless Statistics

- 🧩 San Bernardino County has approximately 50,000 CalWORKs families.
- 🧩 Of the 50,000 families, approximately 950 (2%) have self-identified as homeless.
- 🧩 Of the self-identified homeless families, approximately 89% have already received Temporary or Permanent CalWORKs Homeless Assistance.

HSP Statistics

The following statistics reflect activity for 1/12/2015 through 6/8/2015.

Total Referrals	750
Active	373
Denied	246
Not eligible	133
Families permanently housed	191
Children served	713
Total people in household	1,191

FS History

- FS is a component of the CalWORKs program that provides intensive case management and services to customers who meet the criteria set forth in Assembly Bill (AB) 74.
- Welfare-to-Work (WTW) customers and family members living in the household may be served if a family is experiencing an identified situation and/or crisis that is destabilizing the family and would interfere with a WTW customer's ability to participate in WTW activities and services.

FS in San Bernardino

- Began on 8/1/2014.
- TAD is collaborating with the Department of Behavioral Health (DBH) to provide intensive case management. Case management services are provided by:
 - Social Workers,
 - Mental Health Specialists,
 - Alcohol and Drug Counselors, and
 - Clinical Therapists.

FS Eligibility

- CalWORKs customers who are required to participate in the WTW Program are eligible for FS services.
- FS services are not limited to the aided or work eligible adult and will address FS issues of children in the CalWORKs Assistance Unit (AU) and ineligible unaided AU members.

FS Process

1. Employment Service Specialists (ESSs) determine eligibility to FS and complete the FS Plan and referral process, if eligible.
2. The FS referral is forwarded to DBH. DBH assists the customer and his/her family with:
 - A. Mental Health services.
 - B. Substance Abuse services.
 - C. Domestic Violence services.
 - D. Temporary and/or Permanent housing assistance.
 - E. Tattoo removal (MOU with Arrowhead Regional Medical Center (ARMC)).

Future FS Services

- Criminal Record Expungement, and
- Vehicle Repair.



FS Statistics

The following statistics reflect activity for 8/1/2014 through 6/8/2015.

Total Customers Served	345
Mental Health	135
Homeless Services	157
Domestic Violence	32
Substance Abuse	21

HSP

- 750 referrals have been received.
- 191 families have been permanently housed.
- Over 700 children have been permanently housed.

FS

- 46 families have transitioned to permanent housing through Rapid Re-Housing.
- 29 customers became employed.
- 58 customers transitioned out of FS and into regular WTW activities.

A mother of six began the FS program in October 2014. At the time of her FS intake she was residing in a homeless shelter with her children, ages 14, 9, 4, 3, 2, and 1. Through FS, the customer began working with the LightHouse Case Manager and housing specialist to secure permanent housing.

On 1/12/2015, the customer reached the 90 day maximum allowed in the homeless shelter. From there the customer and her children were housed temporarily in a motel until permanent housing was secured (at the end of January 2015). The customer is now employed as a Certified Nursing Assistant, and is settled into permanent housing with her children.

Additionally, each year DBH (Alcohol and Drug Services) adopts a family for Christmas. The Social Worker for this case submitted the above family for consideration and they were chosen.

Alcohol and Drug Services was able to provide all six children with several gifts/toys, clothing, pajamas and slippers. The mother also received gifts cards and clothing. The family as a whole also received some food items and gift cards. The children were very happy and excited to receive so many gifts and the mother was overjoyed and very thankful that her children would have a nice Christmas.

A single mother of three lost her housing in February and the family was living in their car. She came into the TAD office in March and applied for Temporary Homeless Assistance (HA) through the CalWORKs program. She was approved for a total of 16 days in a local motel and was referred to HSP. Her HN and the HA worker assisted the customer in locating permanent housing close to her new employment in Riverside County. The family moved into their permanent housing on April 17th.

The family received HSP assistance for application and credit check fees, transportation costs, utility deposits, rental security deposit, and three months of subsidized rent. In addition to housing assistance, the HN and HA worker provided referrals to other assistance agencies to provide household essentials, a refrigerator, and beds for the children.

The customer is now focusing on reenrolling in college to finish her Diagnostic Medical Sonography degree and became employed full-time with anticipated income of approximately \$2,000 per month.

This customer has become self-sufficient with the assistance provided by HSP that allowed her to move closer to her new job and provided her with rental subsidies until her employment pay was stable.

Questions?