California Department of Housing and Community Development

ESG - Regular

2022 ESG Continuum of Care

For any questions related to this program solicitation please contact **ESGNOFA@HCD.CA.GOV**

[Create New Application] [Back to Solicitation]

Application Submissions

Please click the "**Open**" button to begin.

You can save and return to this page to edit your Profile until completed.

You can view your Profile by clicking "Edit".

You cannot move forward until you have completed your Profile."

Once you have completed your Profile and Prior to starting your Application, please scroll to the bottom of the page and complete your Budget and your Goals.

Profile	Complete	Edit

To begin, click **"+Application Process"** button below.When you return to this Homepage, you can see the status of your submission by the colored status bar below the submission card.

- If the status bar is gray, your submission is under review, and no action needs to be taken.
- If the status bar is blue, there is an action required. Click on the Submission Card to complete.

California Department of Housing and Community Development

ESG - Regular

2022 ESG Continuum of Care

For any questions related to this program solicitation please contact **ESGNOFA@HCD.CA.GOV**

[Create New Application] [Back to Solicitation]

Application Submissions

To begin, click **"+Application Process"** button below.When you return to this Homepage, you can see the status of your submission by the colored status bar below the submission card.

- If the status bar is gray, your submission is under review, and no action needs to be taken.
- If the status bar is blue, there is an action required. Click on the Submission Card to complete.
- If the status bar is red, there is an error. Please reach out to the Administrator of this program.

2022 ESG Continuum of Care Application (San Bernardino County)

Created on 08/02/2022

Peer Review

This entry has been submitted. No further action needed at this time.

California Department of Housing and Community Development
ESG - Regular
2022 ESG Continuum of Care

For any questions related to this program solicitation please contact ESGNOFA@HCD.CA.GOV

Create New Application   Back to Solicitation

Application Submissions

Order by: Newest to Oldest ▾

2022 ESG Continuum of Care Application (San Bernardino County)

When you have completed the application, it will no longer state "Action Required," but "Complete." The "Submit" button will turn green, which indicates that you can now submit.

➖ Threshold Requirements   This has been submitted.

Congratulations Applicant,

Your 2022 ESG Continuum of Care Application has been submitted.

Thank you!

Sincerely,

HCD ESG

Threshold Requirements   View

Applications Budget and Goals

Show 10 ▾ entries   Search:

Project Title	Create Date	Status	Total Requested	Actions
N/A	08/02/2022	Draft	$280,769.00	☰

Showing 1 to 1 of 1 entries   Previous 1 Next

➖ Application Section   This has been submitted.

2022 ESG Continuum of Care Application   View
Once this step has been completed, please proceed to the "Provider Selection" step.

Provider Selection   View
Once this step has been completed, please proceed to the "Administrative Entity (AE) Compliance
Certification" step.

View

Applications Budget and Goals

Show 10 ▾ entries   Search:

Project Title	Create Date	Status	Total Requested	Actions
N/A	08/02/2022	Draft	$280,769.00	☰

Showing 1 to 1 of 1 entries   Previous 1 Next

Reload

2022 ESG Continuum of Care Application

Close

Please complete all required fields.

You can save as a draft and return later to complete by clicking "Save Draft" at the bottom of the page.

When you are ready to submit this step, please click the blue "Save" button at the bottom of the page.

2022 ESG Continuum of Care Application

Project Title (Give your Application a unique name)

2022 ESG Continuum of Care Application (San Bernardino County)

This application is subject to the Emergency Solutions Grants (ESG) Program federal regulations established by the U.S. Department of Housing and Urban Development (HUD), **24 Code of Federal Regulations**, **24 CFR § 91** and **24 CFR § 576**, as well as **25 California Code of Regulations (CCR)**, and **25 CCR § 8400 et seq**.

Please read the **2022 ESG Notice of Funding Availability (NOFA)** for the Continuum of Care (CoC) Allocation, as well as any federal and State ESG regulations.

Application Submittal:

- The Department will ONLY be accepting applications through the eCivis Grants Management System portal beginning June 13, 2022.
- Applications and required documentation must be received by HCD via eCivis no later than 5:00 p.m. Pacific Daylight Time on Wednesday August 17, 2022; however earlier applications are highly encouraged.
- Application forms not submitted by deadline will result in a denial of funds to your CoC Service Area. AEs are responsible for ensuring that all required materials are submitted by the deadline.
- Any applications received after this time, will not be accepted.
- All application forms and necessary attachments can be found in the "Files" tab in the **2022 ESG Continuum of Care Solicitation** page.

Application Threshold Requirements

As a reminder, all applications submitted MUST meet HCD's threshold requirements which includes submitting ALL information and documentation requested in this application, as well as noted in the 2022 ESG Continuum of Care NOFA:

These items include but are not limited to the following, however always refer to the 2022 ESG Continuum of Care NOFA:

- Profile MUST be complete
- Budget MUST be complete (Found on the application home page)
- Goals MUST be complete (Found on the application home page)
- Government Agency Taxpayer ID Form (TIN) (Must be complete and current)
- Active DUNS and Registration on SAM.gov
- Single Audit Requirements
- Authorizing Resolution (MUST use HCD Approved Template) AND be approved by the Applicant's governing board

- Homelessness Prevention (HP) Requirements (If applying for HP funding)
- Provider Selection
- AE Compliance Certification
- Indirect Costs Certification
- Match Certification
- Legislative Information
- Racial Equity

All HCD funding decisions are final.

Resources

Provided below is a list of all the Regulations referenced in this Application:

Emergency Solutions Grants Program Webpage

25 CCR § 8400

24 CFR § 576

2 CFR § 200

24 CFR § 91

18 U.S.C. § 1001-1002

31 U.S.C. § 3729-3730

Applicant/Organization Name

San Bernardino County

Select your CoC information

609 - San Bernardino City & County CoC

Estimated CoC Allocation amount as noted in Appendix A (2022 ESG CoC NOFA)

Minimum of 40% for Rapid Re-Housing = $109,003 / Balance for other activities (ES,RR,HP,SO,HMIS) = $163,505 / Grant Administration = $ 8,261

$280,769

Government/Agency Type:

County

Upload any Interagency Agreement (If Applicable to this grant application) here

---

Government Agency Taxpayer ID Form (TIN)

Applicants that are a unit of local government must submit a Government TIN Form with the Application Package. Any forms needed can be found in the "Files" tab of the **2022 ESG Continuum of Care Solicitation** page.

Government Agency Taxpayer ID Form (TIN)

GovtTINForm.pdf

Governing Board Resolution

Please note: You MUST use and follow the 2022 ESG CoC Resolution Template found in the "Files" tab of the **2022 ESG Continuum of Care Solicitation**
Failure to use the required template will result in HCD/ESG reverting your application back to draft in order for ("The Applicant") can resubmit using the required template. This can and will delay processing your Standard Agreement.

Upload Resolution here

ESGCoCResolution-final22.pdf

Upload Designee Letter (If applicable)

Additional upload button (If needed)

Active DUNS and Registration on SAM.gov

Evidence of an active DUNS number with the correct Applicant address is required as part of the application.

*Applicants must include a copy of the search result in the application and may be obtained by searching the System of Award Management **(SAM.gov)**.

Upload proof of active registration on SAM.gov here

[SAMs updated 2.18.2022.pdf](SAMs%20updated%202.18.2022.pdf)

Single Audit Requirements

Did you know?

- An applicant that fails to disclose any findings from their most recent program-specific or single audit will be disqualified without exception or an appeal.
- If an applicant has any "open" single audit findings and does not have a plan or an agreement to remediate those findings, they will be deemed ineligible for funding through the State ESG program until the findings are resolved or a remediation plan or agreement is established.

All Applicants must demonstrate to the satisfaction of the Department that it is in compliance with the financial management requirements of **2 CFR § 200**.

The applicant must provide the Department with its most recent single audit (as submitted to the State Controller's Office), if applicable.

If the applicant has any open single audit findings and does not have a plan or an agreement to remediate those findings, the Applicant will be deemed ineligible for funding through the State ESG program until the findings are resolved or a remediation plan or agreement is established.

Any and all single audit findings are included in this evaluation.

This requirement is not limited to federal funds administered by the Department. If an applicant is not subject to single audit requirements, the Applicant is not required to submit an audit.

Applicants that fail to disclose findings on their most recent single audit will be disqualified without exception or appeal.

The Single Audit requirement is triggered for agencies that spend $750,000 or more of federal funds.

• *Single Audit:* A non-Federal entity that expends $750,000 or more during the non-Federal entity's fiscal year in Federal awards must have a single audit conducted in accordance with **2 CFR § 200.514**.

Has your Agency spent at least $750,000 of federal funds in any fiscal year?

Yes

Have you filed or requested an extension to file your most recent Single Audit?

Yes, I have filed my single audit

Enter the most current fiscal year you have filed a Single Audit below:

2021

Did your Agency have any audit findings?

No

Upload your most current fiscal year Single Audit here

San Bernardino County 2021 Final Single Audit Report.pdf

Additional upload Button (If needed)

Homelessness Prevention Requirements (HP)

All Applicants that are awarded funding for the Homelessness Prevention activity are now required to develop and implement written policies and procedures (P&Ps) that fully details their ESG-HP operations.

At minimum, they must include the following content pieces:
a. Participant Triage
b. Coordinated Entry Integration
c. Participant Eligibility
d. Suite of Services
e. Staffing Patterns
f. Termination and Appeals
g. Other Requirements
h. General Operation
i. Approval

A Homelessness Prevention Manual has been developed and is available to all ESG CoCs and Stakeholders for guidance on operating their HP programs. Please see the ESG Webpage, Resources: **Homelessness Prevention Manual**

Are you applying for Homelessness Prevention Funding?

No

Applicant and Authorized Representative Name Verification

NOTE: Name of Applicant must be the same as stated in the Board Resolution and Government Agency Taxpayer ID Form (TIN). If these names do NOT match exactly then this can and will delay the processing of your application.

Applicant Name listed in the "Profile" section

San Bernardino County

Applicant Name as listed in the Authorized Resolution

San Bernardino County

Applicant Name as listed on the Government Agency Taxpayer ID Form (TIN)

San Bernardino County

Authorized Representative Name listed in the "Profile" section

Deputy Executive Officer

Authorized Representative Named in the Resolution

Deputy Executive Officer

Budget and Goals Reminder If you have not already done so please click "Save Draft" and access the Application Budget and Goals tables on the home page. For detailed instructions please see the **HCD External User Guide Reference**

Have you completed your Budget?

Yes

Have you completed your Goals?

Yes

Additional File Upload (if needed)

Additional File Upload (if needed)

Additional File Upload (if needed)

Provider Selection

Close

Provider Selection - Funded Award Package

Provide a letter describing the provider selection process and certifying that the process meets the requirements of **25 CCR § 8403(g)**.

Upload Provider Selection Process Letter here

Provider Selection Process.pdf

Have you completed your provider selection process for this award?

No

Please provide a brief explanation as to when your selection process will be completed and submitted to HCD/ESG

Provider selection to take place in Fall/Winter of 2022.

Did you know that HCD will NOT issue a standard agreement until all documentation has been received?

FUNDED & PENDING ONLY###Provider/Applicant-Project Information #1

Provider/Applicant Selection Status

Provider/Applicant Name, Address, City, State and Zipcode

Project Name, Address, City, State and Zipcode

(If different than Provider/Applicant information otherwise please type "N/A")

Provider/Applicant-Project Information #2

Provider/Applicant Selection Status

Provider/Applicant Name, Address, City, State and Zipcode

Project Name, Address, City, State and Zipcode

(If different than Provider/Applicant information otherwise please type "N/A")

Provider/Applicant - Project Information #3

Provider/Applicant Selection Status

Provider/Applicant Name, Address, City, State and Zipcode

Project Name, Address, City, State and Zipcode

(If different than Provider/Applicant information otherwise please type "N/A")

Do you have additional Providers/Applicants you need to enter?

Street Outreach

NOT FUNDED/DENIED APPLICANTS

#1: Provider/Applicant Name, Address, City, State and Zipcode

Provide the reason why the Provider/Applicant did NOT get funded

Upload Denial letter (if applicable)

#2: Provider/Applicant Name, Address, City, State and Zipcode

Provide the reason why the Provider/Applicant did NOT get funded

Upload Denial letter (if applicable)

#3: Provider/Applicant Name, Address, City, State and Zipcode

Provide the reason why the Provider/Applicant did NOT get funded

Upload Denial letter (if applicable)

#4: Provider/Applicant Name, Address, City, State and Zipcode

Provide the reason why the Provider/Applicant did NOT get funded

Upload Denial letter (if applicable)

#5: Provider/Applicant Name, Address, City, State and Zipcode

Provide the reason why the Provider/Applicant did NOT get funded

Upload Denial letter (if applicable)

#6: Provider/Applicant Name, Address, City, State and Zipcode

Provide the reason why the Provider/Applicant did NOT get funded

Upload Denial letter (if applicable)

ADDITIONAL UPLOAD BUTTON

Administrative Entity (AE) Compliance Certification

Close

On behalf of the

Insert Name of State ESG AE

San Bernardino County

I certify that funding recommendations being made for use of ESG funds meet federal and State ESG requirements pursuant to **25 CCR § 8403**, **25 CCR § 8408**, and **25 CCR § 8409**.

The CoC used a process that meets the following requirements:

A. Is fair and open, and avoids conflicts of interest in project selection, implementation, and the administration of funds.
B. Considers the State application eligibility and rating criteria in the Department's 2022 ESG NOFA for the CoC allocation.
C. Complies with the Core Practice requirements in 25 CCR § 8409 and 25 CCR § 8409.
D. Incorporates the performance standards set forth in the Department's Annual Action Plan.
E. Complies with federal ESG.
F. Considers any other practices promoted or required by HUD.
G. Ensures the funded homeless service provider will maintain documentation of satisfactory match pursuant to the requirements of **24 CFR § 576.201**.

CERTIFICATION

PLEASE STOP! This Must be completed by the Authorized Representative listed in your Resolution.

Please print or pdf this form and either provide an original signature, printed name, title and date, using blue ink -OR- you may Electronically sign and date. Once the Authorized Representative has signed the document, please upload the signed copy in the below file upload button labeled "Upload signed copy here"

Name of Authorized Representative

Martha Zepeda

Title of Authorized Representative

Deputy Executive Officer

Signature of Authorized Representative

Martha Zepeda

Date

08/17/2022

Upload signed copy here

Administrative Entity (AE) Compliance Certification.pdf

Indirect Costs Certification

Indirect Costs Certification

Applicant/Organization Name

San Bernardino County

Will the applicant seek reimbursement for indirect costs for the 2022 ESG funds?

No

I certify under penalty of perjury that:

1. To the best of my knowledge and belief that the form is true, complete, and accurate, an the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the ESG program.

2. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. **18 U.S.C. § 1001**, **31 U.S.C. § 3729**, **31 U.S.C. § 3730**, and **31 U.S.C. § 3801-3812**.

3. If the applicant will seek reimbursement for any indirect costs, the applicant must:

- Comply with all OMB requirements and standards including **2 CFR § 200.403**, **2 CFR § 200.415**, and **Appendix IV to Part 200**,

- Certify that the applicant and/or any subcontractor seeking reimbursement for indirect costs at the de minimis rate do not meet the definition of a major nonprofit organization as defined by OMB **2 CFR § 200.414**, and

- Maintain records including evidence of the Modified Total Direct Cost (MTDC) **2 CFR § 200.68** calculations, indirect cost limits, and supporting documentation for actual direct cost billing.

I further certify that I am aware that there are penalties for willfully and knowingly giving false information on an application for federal or State funds that may include immediate repayment of all federal or State funds received. I understand that the information submitted is subject to verification by federal or State personnel as part of compliance monitoring.

CERTIFICATION

PLEASE STOP! Must be signed by the Authorized Representative named in your Resolution

Please print or pdf this form and either provide an original signature, printed name, title and date, using blue ink -OR- you may Electronically sign and date. Once you have signed the document, please upload the signed copy in the below file upload button labeled "Upload signed copy here"

Name of Authorized Representative

Martha Zepeda
Title of Authorized Representative

Deputy Executive Officer
Signature of Authorized Representative

Martha Zepeda
Date

08/17/2022
Please upload signed copy here

[Indirect Costs Certification.pdf](#)

Match Certification

Close

MATCH CERTIFICATION - 2022 ESG Continuum of Care Allocation

Match requirements

Funded applicants must make matching contribution amounts that equals the amount of federal ESG funds awarded. HCD will request documentation as part of its monitoring to determine the sources

and amounts used to meet the federal ESG matching requirements in accordance with **24 CFR § 576.201** and **25 CCR § 8410**.

Instructions:

- Enter the proposed ESG application amount
- Provide the match contributions, and the source of match funds

Please list all Matching Funds as well as sources of Match you are going to use. You must itemize each source of Match separately.

NOTE: The total match funds must equal the total federal ESG grant amount.

Applicant Name (As listed in your Profile and Resolution)

San Bernardino County

Enter Estimated HCD allocation amount for your Service Area found in Appendix A of the 2022 ESG Continuum of Care NOFA.

$280,769

FEDERAL ESG Allocation - If you are claiming HUD ESG Allocation funding. A 100% match is required.

Match Amount #1

$280,769

Source of Match Funds #1

NPQ (ECD-Tax Exempt Bonds)

Match Amount #2 (If Applicable)

Source of Match Funds #2

Match Amount #3 (If Applicable)

Source of Match Funds #3

Match Amount #4 (If Applicable)

Source of Match Funds #4

Match Amount #5 (If Applicable)

Source of Match Funds #5

Match Amount #6 (If Applicable)

Source of Match Funds #6

Total Match Contributions

$280,769

PLEASE STOP! Must be signed by the Authorized Representative named in your Resolution

Please print or pdf this form and either provide an original signature, printed name, title and date, using blue ink -OR- you may Electronically sign and date. Once you have signed the document, please upload the signed copy in the below file upload button labeled "Upload signed copy here"

By signing below, I certify on behalf of my Organization that all of the above information is accurate, true and complete to the best of my knowledge. I am also aware that HCD has the right to request proof of all information provided to verify accuracy and maintain the integrity of the program.

Name of Authorized Representative

Martha Zepeda

Title of Authorized Representative

Deputy Executive Officer

Signature of Authorized Representative

Martha Zepeda

Date

08/17/2022

Upload Signed Copy Here

Match Certification.pdf

Legislative Contact Information

Close

Legislative Contact Information

Please select ALL county(ies) in which the Applicant, Applicant's subrecipient and or activity location will be.

San Bernardino

Provide the Legislative and Congressional information for the applicant, applicant's subrecipient AND each activity location, (if different than applicant location), included in this application.

To locate or verify the Legislative and Congressional information, click on the respective links below and enter the Applicant's location zip code, the activity location site zip code(s) (i.e. zip code(s) where activities are performed), and any additional activity location site(s), as applicable.

California State Assembly

California State Senators

US House of Representatives

[California State Assembly](#)

[California State Senate](#)

[US House of Representatives](#)

Assembly Members (Check ALL that apply)

   District 47 - Eloise Gomez Reyes
Senators (Check ALL that apply)

   District 20 - Connie Leyva
Representatives (Check ALL that apply)

   District 31 - Pete Aguilar

Racial Equity

Close

Racial Equity

It is a Department priority to ensure that ESG programs are implemented in a way that addresses racial disparities in the homeless population and creates equitable outcomes. The following list of questions highlight items that you as the Grantee – either Continuum of Care (CoC) or Administrative Entity (AE) - might be doing to address racial equity. If you have not yet started to address racial equity in your homelessness response system, there is an opportunity to describe what you are planning to do at the end of each section. Answers in this section will not serve to qualify or disqualify applicants but rather will serve as a baseline measure of the current state of each applicant's disparities, efforts and outcomes.

1. Please select your Continuum of Care from the **HUD CoC Racial Equity Analysis Tool (version 3.0)** and upload as an attachment.
2. Please refer to the NOFA for your designated CoC number.
3. After downloading the tool, navigate to the 'Dashboard' tab and select your CoC from the highlighted dropdown box.
4. Save the file and upload below.

Upload your Continuum of Care's Racial Equity Analysis Tool from HUD Exchange

CoC-Analysis-Tool-3.0.xlsb
If your organization has already completed an analysis of racial disparities in its homeless response system please upload here

Strategic Plan_Gaps Analysis.pdf
Does your organization have requirements for all sub-grantees to look at data to determine racial disparities in their programs?

No
Does your organization have requirements for all sub-grantees to put a plan in place to address racial disparities if they exist?

No
Describe how underserved and marginalized communities learn about the ESG program offerings. What marketing and communication strategies are used to increase equitable access? Check all that apply.

Formal partnerships such as MOUs or subrecipient agreements with organizations serving underserved and marginalized communities., Informal partnerships with organizations serving underserved and marginalized communities., Coordinated Entry Access Points in underserved and marginalized communities
Please provide a narrative and links for the Formal Partnerships selection:

Formal Partnership Selection: Core Process for Selection of the Board. The highest tier of formal partnership consists of the partnerships established through the Board, of the Interagency Council on Homelessness ("ICH"). The ICH includes nineteen (19) seats. Members of the ICH must be able to represent an array of community sectors, special needs populations, and geographic areas throughout the region. ICH Member selection is pre-designated by terms established in the Bylaws and as recommended by the San Bernardino County Homeless Partnership 10-Year Strategy to End Homelessness. Members serve an unlimited term unless the relationship is terminated pursuant to the terms of Article
IV of the Bylaws.

ICH Composition is reviewed regularly through the ICH Bylaws and Membership Sub-Committee. Members of the ICH serve as liaisons to other community stakeholders and their Regional Subcommittees. Results of nominations are reviewed by the ICH Bylaws and Membership Sub Committee to ensure that adequate representation is available for each of the required constituencies (community sectors, subpopulations, geography). San Bernardino County Continuum of Care (CoC) Operations and Governance Manual provides details regarding membership selection. The Coe Program interim rule requires Boards to include representatives from relevant organizations and projects serving homeless subpopulations, such as persons with substance use

disorders; persons with HIV/AIDS; veterans; the chronically homeless; families with children; unaccompanied youth; the seriously mentally ill; and victims of domestic violence, dating violence, sexual assault, and stalking (One Board member may represent more than one subpopulation).

The Board must also include at least one homeless or formerly homeless individual. Designation and selection of current Sub Committee members mirrors the general concept of a Coe Board. The Sub-Committee constitutes a moderately small committee that provides expertise on the various homeless subpopulation and regions and provides a viable means for direct input from homeless and formerly homeless persons. A copy of the ICH Sub Committee Policies and Procedures is available under Appendix A.

Recently, after the strategic planning conducted in 2019, the COC moved to a Regional approach due to the immense size of the county of San Bernardino (22,000 square miles). Regional subcommittees have representations on the ICH Board. Each region has an equal number of chairs for non-government and government representation. Therefore, encourage participation of local cities, non-profits- and service providers to ensure collaboration among the stakeholders on a regional basis. In 2020 the COC adopted a Multijurisdictional Homeless Action Plan which included ESG.

The Process for the selection of the Board contains the following:

The ICH serves as the Board and includes nineteen (19) seats. Members of the ICH must be able to represent an array of community sectors, special needs populations, and geographic areas throughout the region.

• ICH Member selection is predesignated by terms established in the Bylaws and as recommended by the San Bernardino County Homeless Partnership 10-Year Strategy to End Homelessness.
• ICH Composition is reviewed regularly through the ICH Bylaws and Membership Sub Committee.
• Members of the ICH serve as liaisons to other community stakeholders and their Regional Subcommittees.
• Results of nominations are reviewed by the ICH Bylaws and Membership Sub Committee to ensure that adequate representation is available for each of the required constituencies (community sectors, subpopulations, geography).
• ICH Members serve an unlimited term unless the relationship is terminated pursuant to the terms of Article IV of the Bylaws in San Bernardino County Coe Operations and Governance Manual 12
• Regular attendance at ICH meetings and participation in Coe activities is required. Members failing to meet the attendance and participation standard are subject to removal and replacement.
• The HPN serves as an advisory body of the ICH. The HPN is charged with facilitating a joint working approach through collaborations among the HPN members to implement action steps adopted in the 10-Year Strategy.
• ICH officers are elected to two-year terms. HPN officers are elected to two-year terms.

An additional formal partnership is established through the Community Development and Housing Agency's Notices of Funding Availability ("NOFA") or a Request for Proposals ("RFP") process. NOFAs or RFPs are published on the Community Development and Housing Department's website. An announcement of the NOFA or RFP publication is also provided at the Interagency Council on Homelessness's monthly meetings and various homeless platforms (Homeless RFP email blast with over 700 recipients). Provider's respond to the NOFA or RFP, then submittals are reviewed. The review can have an identified committee who determines applicants to be eligible, accurate information, meet the requested priorities, meet all necessary requirements, and submit requested documentation. Based on results the highest recommended applicants are recommended for funding. The formal partnership or subcontractor selection is established

Link: ICH Amended Bylaws: https://wp.sbcounty.gov/dbh/sbchp/wpcontent/uploads/sites/2/2020/09/ICH-Bylaws-8.28.19.pdf

Please provide a narrative and links for the Informal Partnerships selection:

Informal partnership selection is established through provider participation in the Interagency Council on Homelessness ("ICH"). The ICH is the policy making body for the Homeless Provider Network ("HPN"). ICH, HPN and the Office of Homeless Services work together to ensure that the recommendations listed in the

County's 10-Year Strategy to End Homelessness are realized. The ICH meets monthly and includes elected and County officials and representatives from the HPN.

Link: https://wp.sbcounty.gov/dbh/sbchp/ich/

Please provide a narrative and links for the Coordinated Entry Access Points selection:

The Coordinated Entry System (CES) is a powerful tool designed to ensure that homeless persons are matched, as quickly as possible, with the intervention that will most efficiently and effectively end their homelessness when programs have availability. The CES system is housed under Inland Empire United Way alongside the 2-1-1 San Bernardino County (SBC) call center. The CES is the San Bernardino County's groundbreaking collaboration between more than 30 agencies within the Homeless Partnership with the express purpose of creating sustainable, cost-effective, client centered pathways out of homelessness and diverting them into community resources or self resolve. Access points are through the 2-1-1 SBC call center and through various outreach community partnerships who are recipients of State, Federal, and private funds for homeless services. The Sheriff's HOPE team as well as the outreach team INNRoads spearheaded by the Department of Behavioral Health serve as mobile access points throughout the County providing, onsite engagement and assessments of clients.

Links:
https://wp.sbcounty.gov/dbh/sbchp/wp-content/uploads/sites/2/2019/04/CES-HEAPOrientation.pdf

San Bernardino County Coordinated Entry System Guidebook:
https://wp.sbcounty.gov/d bh/sbchp/wp-content/uploads/sites/2/2018/08/SBC-CES-1st-DraftPolicies-Procedures.pdf

If your organization has only done a few of these, please describe what concrete steps it will take to build equitable access and outcomes for ESG programs and other homeless services in the coming program year: (If not applicable please type N/A)

N/A

Does your grant making process prioritize programs that address the disproportionate impacts of homelessness and on communities of color, particularly Black, Latinx, Asian, Pacific Islander, Native and Indigenous communities?

No

Please describe what steps your organization will take to prioritize programs that address the disproportional impacts of homelessness on communities of color in the coming program year:

(Narrative) Describe:

(Narrative) Describe:

During the 2022-2023 fiscal year and going forward, the San Bernardino County COC and the San Bernardino County Community Development and Housing Agency anticipate prioritizing how best to implement programs that address the disproportional impacts of homelessness and COVID-19 on communities of color by:
(1) reviewing the Racial Equity Analysis,
(2) surveying existing and potential organization partners regarding disproportionalities,
(3) Ensuring that providers and program administrators are trained in racial equity frameworks and practice, cultural humility/sensitivity, and trauma-informed practice. Undertake continuous quality improvement and self-evaluation of this process, and
(4) include in the program approval process a review committee comprised of more diverse members representatives.

Please answer the following questions in regards to whether the voices of Black, Latinx, Asian, Pacific Islander, Native and Indigenous communities and those who have lived experience of homelessness is being centered in a meaningful, sustained way in creating effective approaches to reducing and ending homelessness; And whether they are involved in the funding decision making processes.

Does your CoC or Organizational governance structure include permanent seats for individuals with lived experience of homelessness?

Yes

Does your CoC or Organizational governance structure include seats for representatives from Black, Latinx, Asian, Pacific Islander, Native and Indigenous communities?

No

Does your ESG Grantee funding application review panel/body include permanent seats for individuals with lived experience of homelessness?

No

Does your ESG Grantee funding applications review panel/body include permanent seats for representatives from Black, Latinx, Asian, Pacific Islander, Native and indigenous communities?

No

Does your CoC or Organization utilize other policies or methods of centering voices of Black, Latinx, Asian, Pacific Islander, Native and Indigenous communities and those with lived experience of homelessness?

No

Does your organization have other advisory bodies that provide input and recommendations around your homeless response system?

Yes

Please list and include the Name of advisory body:

Homeless Provider Network

Does this body include permanent seats for (Check all that apply):

Individuals with lived experience of homelessness

Are there additional advisory bodies?

No

Are ESG funds being made accessible to smaller and non-traditional organizations that have historically served communities of color but may not have previously participated formally in the CoC or be a part of the homeless provider community?

No

What steps has your organization taken to ensure these funds address the organizational capacity of organizations that are led by Black, Latinx, Asian, Pacific Islander, Native and Indigenous people that support the goal of making homelessness rare, brief and non-recurring? (Please Describe):

The voices of the above referenced communities are instrumental as the County creates effective approaches to reducing and ending homelessness. Both the Office of Homeless Services and the Community Development and Housing Agency partner with the Interagency Council on Homelessness ("ICH"). ICH is the governing body of the Coe, it is a racially diverse body that has representation of the most, if not all, of the ethnic groups listed. It is comprised of members who are not only racially diverse but hold positions of authority and influence which are integral to the determination and implementation of decisions made by the governing body. ICH is comprised of two members form the Board of Supervisors, five (5) City Elected Officials or designees, A designee from San Bernardino Law and Justice Group, Superintendent of San Bernardino County Schools or designee, Director or designee
of Community Development and Housing Agency, Director or designee of Human Services, Director or designee of the Department of Behavioral Health, Director of designee of the Housing Authority of the San Bernardino

County, five (5) Elected Homeless Provider Network Representative (HPN), as well as Homeless/Formerly Homeless Representative.

Attach communications, memo, resolution, policies, procedures or guidelines your CoC has developed to build capacity for these non-traditional organizations.

11-Item 8 - Homeless Housing, Assistance and Prevention Round 3 Ad Hoc Committee Recommendations.pdf

What steps will your Organization take in the coming program year to ensure these funds address the organizational capacity of organizations that are led by Black, Latinx, Asian, Pacific Islander, Native and Indigenous people that support the goal of making homelessness rare, brief, and non-recurring.

During the 2022-2023 fiscal year and going forward, the San Bernardino County COC and the San Bernardino County Community Development anticipate prioritizing how best to implement programs that address the disproportional impacts of homelessness and COVID-19 on communities of color by:
(1) reviewing the Racial Equity Analysis,
(2) surveying existing and potential organization partners regarding disproportionalities,
(3) Ensuring that providers and program administrators are trained in racial equity frameworks and practice, cultural humility/sensitivity, and trauma-informed practice. Undertake continuous quality improvement and self-evaluation of this process, and
(4) include in the program

Attach communications, memo, resolution, policies, procedures or guidelines your CoC has developed to build capacity for these non-traditional organizations.

1-ICH Agenda 6.22.22 (SAA Edits 6-15-22).pdf

Partner Organizations Addressing Racial Equality

Do you have partner organizations that are addressing racial equity in the housing and homeless response system?

Yes

List your partner organizations that are addressing racial equity in the housing and homeless response system and how you partner with them:

Organization Name:

Inland Fair Housing Mediation Board

Partnership Type:

Other

Number of years in this type of partnership:

25

Group(s) Served (Check all that apply):

Black, Latinx, Asian, Pacific Islander, Native American, Indigenous People

Do you have additional partners to list?

No

Submission Date

Application Budget for County of San Bernardino Community Development and Housing Agency

Program: 2022 ESG Continuum of Care
Project name:

Return to Application

Budget Stage:	Pre-Award	
Actions		

Budget Summary

$280,769.00	**Total Direct Costs**	$0.00	**Match / Cost Share**
$0.00	**Total Indirect Costs**	$0.00	**Program Income**
$280,769.00	**Total Amount (Direct + Indirect)**		

Budget Settings

Budget Items

	Ext Cost	Direct Cost	Ind Cost	Cost Share
1. Street Outreach	$0.00	$0.00	$0.00	$0.00

	Ext Cost	Direct Cost	Ind Cost	Cost Share
2. Emergency Shelter	$0.00	$135,258.00	$0.00	$0.00

	Ext Cost	Direct Cost	Ind Cost	Cost Share
3. Homelessness Prevention	$0.00	$0.00	$0.00	$0.00

https://portal.ecivis.com/#/index/editBudget/10C2999A-10D6-4613-B206-BF3DD14C8D05

Clerk of the Board...   FMRs   IDIS Log-In   211+ Sign In   DIRECT PAYMENT t...   Outlook   National Fair Housi...   Treasury Reporting   SBCRRP FTP   FTP Manual   SBCRRP Interactive...

	Ext Cost	Direct Cost	Ind Cost	Cost Share
4. Rapid Re-Housing	$0.00	$110,000.00	$0.00	$0.00
5. HMIS	$0.00	$27,250.00	$0.00	$0.00
6. Administration	$0.00	$8,261.00	$0.00	$0.00
7. Indirect	$0.00	$0.00	$0.00	$0.00
8. Other	$0.00	$0.00	$0.00	$0.00

Other

	Ext Cost	Direct Cost	Ind Cost	Cost Share
1. Other	$0.00	$0.00	$0.00	$0.00

https://portal.ecivis.com/#/index/editBudget/10C2999A-10D6-4613-B206-BF3DD14C8D05

Clerk of the Board...   FMRs   IDIS Log-In   211+ Sign In   DIRECT PAYMENT t...   Outlook   National Fair Housi...   Treasury Reporting   SBCRRP FTP   FTP Manual   SBCRRP Interactive...   HEROS   HCD SharePoint   Program Support -...

Program Income

	Income
1. Program Income	$0.00

Save Changes   Discard Changes

Budget Narrative

Enter your budget narrative below.

</> H1 H2 H3 **B** *I* U̲ ☰ ☷ ☰ ☰ 🔗

The State ESG-CoC funding will support the County's Homeless Strategic Action Plan in addressing the root causes of homelessness by increasing access to housing opportunities for at-risk populations by extending funds for Emergency Shelter and Rapid Rehousing activities. The subject funding will further the County's efforts to address homelessness by allocating funding to improve the number and quality of emergency shelters for homeless individuals and families; help operate emergency shelters; provide essential services to shelter residents; and rapidly re-house homeless individuals and families.

Save Narrative   📄   7396 characters remaining

State of California
Financial Information System for California (FI$Cal)
GOVERNMENT AGENCY TAXPAYER ID FORM
2000 Evergreen Street, Suite 215
Sacramento, CA 95815
www.fiscal.ca.gov
1-855-347-2250

FI$Cal
Financial Information System for California

The principal purpose of the information provided is to establish the unique identification of the government entity.

Instructions: You may submit one form for the principal government agency and all subsidiaries sharing the same TIN. Subsidiaries with a different TIN must submit a separate form. Fields marked with an asterisk (*) are required. Hover over fields to view help information. Please print the form to sign prior to submittal. You may email the form to: vendors@fiscal.ca.gov, or fax it to (916) 576-5200, or mail it to the address above.

Principal Government Agency Name*	San Bernardino County
Remit-To Address (Street or PO Box)*	385 N. Arrowhead Avenue, 3rd Floor

City*: San Bernardino   State *: CA   Zip Code*+4: 92415

Government Type:
- [ ] City
- [x] County
- [ ] Special District
- [ ] Federal
- [ ] Other (Specify)

Federal Employer Identification Number (FEIN)*: 95-6002748

List other subsidiary Departments, Divisions or Units under your principal agency's jurisdiction who share the same FEIN and receives payment from the State of California.

Dept/Division/Unit Name		Complete Address	
Dept/Division/Unit Name		Complete Address	
Dept/Division/Unit Name		Complete Address	
Dept/Division/Unit Name		Complete Address	

Contact Person*: Martha Zepeda   Title: Deputy Executive Officer

Phone number*: (909) 501-0641   E-mail address: martha.zepeda@cao.sbcounty.gov

Signature*: _(signed)_   Date: 8/17/22

Sample COC Resolution of the Governing Body

RESOLUTION NO.____

A RESOLUTION APPROVING AN APPLICATION FOR FUNDING AND THE EXECUTION OF A GRANT AGREEMENT AND ANY AMENDMENTS THERETO FROM THE 2022-2023 FUNDING YEAR OF THE STATE ESG PROGRAM, CONTINUUM OF CARE ALLOCATION NOFA.

[All, or A necessary quorum and majority] of the [directors, supervisors, members, council members, etc.] of [official name of applicant entity, and type of entity: non-profit, county, municipality, etc.] ("Applicant") hereby consent to, adopt and ratify the following resolution:

A. WHEREAS the State of California (the "State"), Department of Housing and Community Development ("Department") issued a Notice of Funding Availability ("NOFA") for the **Continuum of Care Allocation** dated [MM/DD/YYYY] under the Emergency Solutions Grants (ESG) Program (Program, or ESG Program); and

INSTRUCTION: The correct date that the NOFA itself was issued by the Department is required - do not use other dates such as email/listserv announcements, associated memos, etc.

B. WHEREAS Applicant is an approved state ESG Administrative Entity

SECTION 1:

Applicant is an approved Applicant by their Continuum of Care under the Continuum of Care Allocation and is hereby authorized and directed to receive an ESG grant, in an amount not to exceed $ [Insert amount for CoC Service Area or a higher amount per the instruction below] in accordance with all applicable rules and laws.

INSTRUCTION: It is recommended that you list an approved dollar amount that is at least double the amount you expect to receive. Award amounts are frequently recalculated and are subject to change. If the amount your entity is eligible to receive increases above the dollar amount your entity authorizes, a new resolution will be required to receive the new higher amount. Articulating a higher dollar amount in this resolution helps reduce the chances you will need an entirely new resolution.

SECTION 2:

The Department may approve funding allocations for the ESG Program, subject to the terms and conditions of the NOFA, Program regulations, and the Standard Agreement. The Applicant acknowledges compliance with all state and federal public participation requirements in the development of its applications.

SECTION 3:

If applicant receives a grant of ESG funds from the Department pursuant to the above referenced ESG NOFA, it represents and certifies that it will use all such funds in a manner consistent and in compliance with all applicable state and federal statutes, rules, regulations, and laws, including without limitation all rules and laws regarding the ESG Program, as well as any and all other contracts Applicant may have with the Department.

SECTION 4:

The Applicant hereby authorizes and directs the (Title of authorized signor) _____, or designee*, to execute and deliver all applications and act on the Applicant's behalf in all matters pertaining to all such applications.

SECTION 5:

If an application is approved, the (Title of authorized signor) _____, or designee*, is authorized to enter into, execute and deliver the grant agreement (*i.e.*, Standard Agreement) and any and all subsequent amendments thereto with the State of California for the purposes of the grant.

SECTION 6:

If an application is approved, the (Title of authorized signor) _____, or designee*, is authorized to sign and submit Funds Requests and all required reporting forms and other documentation as may be required by the State of California from time to time in connection with the grant.

Instruction: Multiple signors may be included, with appropriate language to indicate whether all or only one of the individuals being authorized must sign. The word "and" should be used where you intend to require all of the listed individuals sign the documents, and the word "or" should where you intend for any one of the individuals listed to be able to sign the documents. The use of "and / or" in this context is legally insufficient and therefore is not acceptable. Regarding the signatory, it is recommended that Cities, counties, and JPAs list the signatories title only, to reduce the need for a new resolution in the event of employment turnover.

* **Important Note**: If the designee is signing any application, agreement, or any other document on behalf of the designated official of the City/County, written proof of designee authority to sign on behalf of such designated official must be included with the Resolution, otherwise the Resolution will be deemed deficient and rejected. Additionally, do not add limitations or conditions on the ability of the signatory or signatories to sign documents, or the Resolution may not be accepted. If more than one party's approval is required, list them as a signatory. The only exception is for county counsel or city attorney to approve as to form or legality or both, IF such approval is already part of the standard city/county signature block as evidenced by the signed Resolution itself. Inclusions of additional limitations or conditions on the authority of the signer will result in the Resolution being rejected and will require your entity to issue a corrected Resolution prior to the Department issuing a Standard Agreement.

PASSED AND ADOPTED at a regular meeting of the **City Council/County Board of Supervisors** of the **City/County** of _____ held on _____ by the following vote:

INSTRUCTION: *Fill in all four vote-count fields below. If none, indicate "0" for that field.*

AYES: _____   NOES: _____
ABSENT: _____   ABSTAIN: _____

_____
Name and Title
City Council/Board of Supervisors

STATE OF CALIFORNIA
City/County of _____

I, _____, City/County Clerk of the City/County of _____, State of California, hereby certify the above and foregoing to be a full, true and correct copy of a resolution adopted by said City Council/Board of Supervisors on this ___ day of _____, 20____.

_____
Name, City/County Clerk of the City/County of
_____, State of California

By: _____
      Name and Title

Note: The attesting officer cannot be the person identified in the Resolution as the authorized signer.

⚠ **Please verify your identity:** As an entity administrator, you should verify your identity to register, update, or deactivate your entity's registration in SAM.gov. This will become mandatory in FY 2022.

[Verify Your Identity]

Show Workspace For
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| BioPreferred Reporting |
| Service Contract Reporting |

Filter By ⊖

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Entity ⌄
Entity Status ⌃

☐ Draft
☐ Work in Progress
☐ Submitted
☑ Active
☐ Expired
☐ ID Assigned

Expiration Date ⌄
Address Update ⌄

Reset ↻

< 1 of 1 >   Results per page: 25   Sort by: Expiration Date Ascending ▼

SAN BERNARDINO, COUNTY OF   ⋮

DUNS Unique Entity ID:
009241659

SAM Unique Entity ID:
MD9GKE5818S4

CAGE/NCAGE:
5HTE9

Purpose of Registration:
Federal Assistance Awards

Address:
385 N Arrowhead Ave 3rd Fl
SAN BERNARDINO, CA 92415-0103 USA

Entity Status: ● Active

Expiration Date: Mar 29, 2022

SAN BERNARDINO, COUNTY OF   ⋮

DUNS Unique Entity ID:
131620564

SAM Unique Entity ID:
T375EKKZVXG8

CAGE/NCAGE:
66E87

Purpose of Registration:
Federal Assistance Awards

Address:
385 N Arrowhead Ave 3rd Fl
San Bernardino, CA 92415-0103 USA

Entity Status: ● Active

Expiration Date: Mar 29, 2022

Browser Window 2

Verify Address

Your entity has the following validated physical address. Please verify that this is still your current physical address.

| ENTITY OVERVIEW: |

SAN BERNARDINO, COUNTY OF

SAM UNIQUE ENTITY ID   CAGE/NCAGE
MD9GKE5818S4   5HTE9

PURPOSE OF REGISTRATION
FEDERAL ASSISTANCE AWARDS ONLY

DUNS UNIQUE ENTITY ID   PHYSICAL ADDRESS
009241659   385 N ARROWHEAD AVE 3RD FL
SAN BERNARDINO, CA 92415-0103
USA

☐ I verify that the address above matches my entity's physical address.

☑ Allow the selected record to be a public display record.

If you feel displaying non-sensitive information like your registration status, legal business name and physical address in the search engine results poses a security threat or danger to you or your organization, you can restrict the public viewing of your record in SAM's search engine. However, your non-sensitive registration information remains available under the Freedom of Information Act to those who download the SAM public data file. Learn more about SAM public search results ⬈.

If your entity's physical address doesn't match the address in our records, please contact Dun & Bradstreet. You must resolve your address issue before you update/renew your registration.

[Contact Dun & Bradstreet]

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Register Entity

Submit Registration   SAN BERNARDINO, COUNTY OF

Core Data

Confirmation Page

Representations and Certifications   Unique Entity ID (DUNS): 009241659   Unique Entity ID (SAM): MD9GKE5818S4   CAGE Code: 5HTE9

Points of Contact

Submit Registration

✓ Entity Review   **Registration Submitted - Confirmation**

→ Confirmation Page   Fri Feb 18 13:39:54 EST 2022

You successfully submitted your entity registration. This registration record will remain in Submitted status until all external validations are complete. This process is entirely FREE to you. It is FREE to register and maintain your registration in SAM. It is FREE to get help with your registration.

What happens next?

1. If you provided a Taxpayer Identification Number (TIN), the Internal Revenue Service (IRS) will conduct a validation of your TIN and Taxpayer Name. This could take two business days. You will get an email from @sam.gov when that review is complete.

2. Your registration will then be sent to the Defense Logistics Agency (DLA) Commercial and Government Entity (CAGE) Code system for assignment or validation of your CAGE Code. This also is a FREE service. This step averages two business days, but the DLA CAGE team can take up to ten business days, or longer, in peak periods. You will get an email from @sam.gov when that review is complete.

3. If the DLA CAGE team has any questions, they will contact the individual you listed as the Government Business Point of Contact (POC) via email. The email will come from an @dla.mil address. Please tell your Government Business POC to respond right away to any requests from an @dla.mil email. If a timely response is not received, your registration will be returned to SAM and your registration status changed to Work in Progress. You will have to resubmit and provide the requested information to DLA CAGE to continue.

4. You will get an email from @sam.gov when your registration passes these external validations and becomes Active. While you are waiting, select Check Status on the SAM.gov homepage to see where your registration is in the review process.

5. Remember, it is FREE to register and maintain your registration in SAM. If you get an email from any address that does not end in .gov or .mil, be cautious. If you get an email, text message, or phone call asking for money or payment of any amount, be very cautious. These parties do not represent the U.S. government. You engage third party vendors at your own risk.

6. You can get FREE help with your registration by contacting our supporting Federal Service Desk (FSD). In addition, if you are located in the U.S. and its outlying areas, you can get FREE support from your local Procurement Technical Assistance Center (PTAC), an official resource for government contracting assistance. Check the PTAC website to locate your closest PTAC.

Select Back to Workspace to be navigated to your Workspace where you can view your entity record and print or save a PDF.

Back to Workspace

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Register Entity

Submit Registration   SAN BERNARDINO, COUNTY OF

Core Data

Confirmation Page

Representations and Certifications   Unique Entity ID (DUNS): 131620564   Unique Entity ID (SAM): T375EKKZVXG8   CAGE Code: 66E87

Points of Contact

Submit Registration

✓ Entity Review   **Registration Submitted - Confirmation**

→ Confirmation Page   Fri Feb 18 13:46:03 EST 2022

You successfully submitted your entity registration. This registration record will remain in Submitted status until all external validations are complete. This process is entirely FREE to you. It is FREE to register and maintain your registration in SAM. It is FREE to get help with your registration.

What happens next?

1. If you provided a Taxpayer Identification Number (TIN), the Internal Revenue Service (IRS) will conduct a validation of your TIN and Taxpayer Name. This could take two business days. You will get an email from @sam.gov when that review is complete.

2. Your registration will then be sent to the Defense Logistics Agency (DLA) Commercial and Government Entity (CAGE) Code system for assignment or validation of your CAGE Code. This also is a FREE service. This step averages two business days, but the DLA CAGE team can take up to ten business days, or longer, in peak periods. You will get an email from @sam.gov when that review is complete.

3. If the DLA CAGE team has any questions, they will contact the individual you listed as the Government Business Point of Contact (POC) via email. The email will come from an @dla.mil address. Please tell your Government Business POC to respond right away to any requests from an @dla.mil email. If a timely response is not received, your registration will be returned to SAM and your registration status changed to Work in Progress. You will have to resubmit and provide the requested information to DLA CAGE to continue.

4. You will get an email from @sam.gov when your registration passes these external validations and becomes Active. While you are waiting, select Check Status on the SAM.gov homepage to see where your registration is in the review process.

5. Remember, it is FREE to register and maintain your registration in SAM. If you get an email from any address that does not end in .gov or .mil, be cautious. If you get an email, text message, or phone call asking for money or payment of any amount, be very cautious. These parties do not represent the U.S. government. You engage third party vendors at your own risk.

6. You can get FREE help with your registration by contacting our supporting Federal Service Desk (FSD). In addition, if you are located in the U.S. and its outlying areas, you can get FREE support from your local Procurement Technical Assistance Center (PTAC), an official resource for government contracting assistance. Check the PTAC website to locate your closest PTAC.

Select Back to Workspace to be navigated to your Workspace where you can view your entity record and print or save a PDF.

Federal Awards Reports in Accordance
with the Uniform Guidance
June 30, 2021

San Bernardino County, California

EideBailly®

Independent Auditor's Report on Internal Control over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards*

To the Honorable Board of Supervisors
San Bernardino County, California

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the governmental activities, the business-type activities, the discretely presented component unit, each major fund, and the aggregate remaining fund information of San Bernardino County, California (County), as of and for the year ended June 30, 2021, and the related notes to the financial statements, which collectively comprise the County's basic financial statements and have issued our report thereon dated January 19, 2022. Our report includes an emphasis of matter related to the County's adoption of the provisions of Governmental Accounting Standards Board (GASB) Statement No. 84, *Fiduciary Activities,* which has resulted in a restatement of the net position and fund balance as of July 1, 2020. Our report also included a reference to other auditors who audited the financial statements of the San Bernardino County Fire Protection District, the San Bernardino County Redevelopment Successor Agency Private-Purpose Trust Fund and San Bernardino County Employees' Retirement Association (SBCERA) as described in our report on the County's financial statements. This report does not include the results of the other auditors' testing of internal control over financial reporting or compliance and other matters that are reported on separately by those auditors.

Internal Control over Financial Reporting
In planning and performing our audit of the financial statements, we considered the County's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the County's internal control. Accordingly, we do not express an opinion on the effectiveness of the County's internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Compliance and Other Matters
As part of obtaining reasonable assurance about whether the County's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report
The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the County's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Eide Bailly LLP

Rancho Cucamonga, California
January 19, 2022

Independent Auditor's Report on Compliance for Each Major Federal Program; Report on Internal Control over Compliance; Report on the Schedule of Expenditures of Federal Awards Required by the Uniform Guidance; and the Supplemental Schedule of Office of California State Department of Aging Grants

To the Honorable Board of Supervisors
San Bernardino County, California

Report on Compliance for Each Major Federal Program
We have audited San Bernardino County, California's (County) compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of the County's major federal programs for the year ended June 30, 2021. The County's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility
Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

Auditor's Responsibility
Our responsibility is to express an opinion on the compliance for each of the County's major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of *Title 2 U.S. Code of Federal Regulations Part 200*, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about the County's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of the County's compliance.

Opinion on Each Major Federal Program
In our opinion, the County complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2021.

Other Matters

The results of our auditing procedures disclosed instances of noncompliance, which are required to be reported in accordance with the Uniform Guidance and which are described in the accompanying schedule of findings and questioned costs as items 2021-001 through 2021-006. Our opinion on each major federal program is not modified with respect to these matters.

The County's response to the noncompliance findings identified in our audit is described in the accompanying schedule of findings and questioned costs and the County's separate Corrective Action Plan. The County's response was not subjected to the auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

Report on Internal Control over Compliance

Management of the County is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered the County's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the County's internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. *A material weakness in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. *A significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies and therefore, material weaknesses and significant deficiencies may exist that have not been identified. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, we identified certain deficiencies in internal control over compliance, described in the accompanying schedule of findings and questioned costs as items 2021-001 through 2021-006, that we consider to be significant deficiencies.

The County's response to the internal control over compliance findings identified in our audit is described in the accompanying Schedule of Findings and Questioned Costs and the County's separate Corrective Action Plan. The County's response was not subjected to the auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance and Supplemental Schedule of Office of California State Department of Aging Grants
We have audited the financial statements of the governmental activities, the business-type activities, the discretely presented component unit, each major fund, and the aggregate remaining fund information of the County as of and for the year ended June 30, 2021, and the related notes to the financial statements, which collectively comprise the County's basic financial statements. We issued our report thereon dated January 19, 2022, which contained unmodified opinions on those financial statements. Our report included an emphasis of matter related to the County's adoption of the provisions of Governmental Accounting Standards Board (GASB) Statement No. 84, *Fiduciary Activities*, which has resulted in a restatement of the net position and fund balance as of July 1, 2020. Our report also included a reference to other auditors who audited the financial statements of the San Bernardino County Fire Protection District, the San Bernardino County Redevelopment Successor Agency Private-Purpose Trust Fund, and San Bernardino County Employees' Retirement Association (SBCERA), as described in our report on the County's financial statements. Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the basic financial statements. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the basic financial statements. The Supplemental Schedule of Office of California State Department of Aging Grants is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards and Supplemental Schedule of Office of California State Department of Aging Grants are fairly stated in all material respects in relation to the basic financial statements as a whole.

Eide Bailly LLP

Rancho Cucamonga, California
April 29, 2022

Federal Grantor/Pass-Through Grantor/Program or Cluster Title	Federal Financial Assistance Listing/Federal CFDA Number	Grant Identification/ Pass-Through Entity Identifying Number	Federal Award Expenditures	Pass-through Award to Subrecipients
U.S. DEPARTMENT OF AGRICULTURE				
Pass-Through Programs:				
Child Nutrition Cluster:				
California Department of Education:				
School Breakfast Program	10.553	36-10363-6037469-01	$ 104,673	$ -
COVID-19 School Breakfast Program	10.553	36-10363-6037469-01	10,329	-
National School Lunch Program	10.555	36-10363-6037469-01	127,454	-
Total Child Nutrition Cluster			242,456	-
Supplemental Nutrition Assistance Program (SNAP) Cluster:				
California Department of Aging:				
State Administrative Matching Grants for the Supplemental Nutrition Assistance Program	10.561	CF-1920-20	19,979	-
California Department of Public Health:				
State Administrative Matching Grants for the Supplemental Nutrition Assistance Program - Education	10.561	19-10364	2,451,545	878,340
California Department of Social Services:				
State Administrative Matching Grants for the Supplemental Nutrition Assistance Program - Food Stamps Administration	10.561	1946001347-A7	53,425,169	-
Total SNAP Cluster			55,896,693	878,340
California Department of Education:				
Child and Adult Care Food Program	10.558	223600	369,754	-
California Department of Food and Agriculture:				
Plant and Animal Disease, Pest Control, and Animal Care - Detector Dog Team Program	10.025	20-0474-006-SF	159,904	-
Plant and Animal Disease, Pest Control, and Animal Care - Light Brown Apple Moth Detection Trapping	10.025	20-0270-018-SF	34,967	-
Plant and Animal Disease, Pest Control, and Animal Care - Pierce's Disease Control Program	10.025	19-0727-037-SF	28,041	-
Subtotal			222,912	-
California Department of Public Health:				
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	10.557	19-10180	11,020,198	-
COVID-19 - Special Supplemental Nutrition Program for Woman, Infants & Children (WIC)	10.557	19-10180	552,521	-
Subtotal			11,572,719	-
Forest Service Schools and Roads Cluster:				
State Controller's Office:				
Schools and Roads - Grants to States	10.665	99003012	304,693	-
Direct Programs:				
Emergency Watershed Protection Program	10.923		411,485	-
TOTAL - U. S. DEPARTMENT OF AGRICULTURE			69,020,712	878,340
U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT				
Pass-Through Programs:				
Community Development Block Grant (CDBG) - Entitlement Grants Cluster:				
City of Chino Hills:				
Community Development Block Grants/Entitlement Grants	14.218	0711008883190	8,802	-
Direct Programs:				
Community Development Block Grants/Entitlement Grants	14.218		6,453,388	2,407,427
Community Development Block Grants/Entitlement Grants - Neighborhood Stabilization Program Grant #1	14.218		856,056	-
Community Development Block Grants/Entitlement Grants - Neighborhood Stabilization Program Grant #3	14.218		16,225	-
COVID-19 Community Development Block Grant/Entitlement Grants	14.218		789,377	599,933
Total CDBG Entitlement Grants Cluster			8,123,848	3,007,360
Pass-Through Programs:				
California Department of Housing and Community Development:				
Emergency Solutions Grant Program	14.231	19-ESG-13121	3,935	2,670
Direct Programs:				
Emergency Solutions Grant Program	14.231		216,059	174,990
COVID-19 - Emergency Solutions Grant Program	14.231		157,347	122,005
Subtotal			377,341	299,665
Home Investment Partnerships Program	14.239		227,292	-
Continuum of Care Program - Homeless Assistance Planning Project PLN19	14.267		372,687	-
Continuum of Care Program - Homeless Management Information System (HMIS) FY 19-20	14.267		250,158	-
Continuum of Care Program - Homeless Management Information System (HMIS) FY 20-21	14.267		250,158	-
Subtotal			873,003	-
TOTAL - U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT			9,601,484	3,307,025

See Notes to Schedule of Expenditures of Federal Awards

Federal Grantor/Pass-Through Grantor/Program or Cluster Title	Federal Financial Assistance Listing/Federal CFDA Number	Grant Identification/ Pass-Through Entity Identifying Number	Federal Award Expenditures	Pass-through Award to Subrecipients
U.S. DEPARTMENT OF JUSTICE				
Pass-Through Programs:				
California Governor's Office of Emergency Services:				
Crime Victim Assistance:				
Crime Victim Assistance - Unserved/Underserved Victim Advocacy and Outreach Program	16.575	071-00000	$ 196,254	$ -
Crime Victim Assistance - County Victim Services Program	16.575	071-00000	236,661	124,821
Crime Victim Assistance - Victim Witness Assistance Program	16.575	071-00000	2,721,509	-
Subtotal			3,154,424	124,821
Paul Coverdell Forensic Sciences Improvement Grant Program - FY 18-19	16.742	CQ19130360	69,050	-
Paul Coverdell Forensic Sciences Improvement Grant Program - FY 19-20	16.742	CQ20140360	4,758	-
Subtotal			73,808	
California Victim Compensation Board:				
Antiterrorism Emergency Reserve	16.321	VC-G6042	62,579	-
California Board of State and Community Corrections				
Edward Byrne Memorial Justice Assistance Grant Program - Mental Health Training Grant	16.738	BSCC 0053-18-MH	147,998	-
Direct Programs:				
DNA Backlog Reduction Program - FY 18-19	16.741		196,398	-
DNA Backlog Reduction Program - FY 19-20	16.741		1,361	-
Subtotal			197,759	-
Law Enforcement Assistance Narcotics and Dangerous Drugs Training - Drug Enforcement Administration - FY 19-20	16.004		1,207	-
Law Enforcement Assistance Narcotics and Dangerous Drugs Training - Drug Enforcement Administration - FY 20-21	16.004		48,225	-
Subtotal			49,432	-
2020 Domestic Cannabis Eradication/Suppression Program	16.U01	16.2020-36	36,801	-
2021 Domestic Cannabis Eradication/Suppression Program	16.U01	16.2021-37	100,067	-
Subtotal			136,868	-
San Bernardino Inland Empire Hybrid Drug Task Force	16.U02	16.281C-LA-5714097	12,203	-
Internet Crime Against Children Taskforce	16.U03	16.31C-LA-C2137079	11,323	-
Equitable Sharing Program - NARCOTICS	16.922		1,613,609	-
TOTAL - U.S. DEPARTMENT OF JUSTICE			5,460,003	124,821
U.S. DEPARTMENT OF LABOR				
Pass-Through Programs:				
WIOA Cluster:				
California Employment Development Department:				
WIOA Adult Program	17.258	07154900	6,626,315	-
WIOA Youth Activities	17.259	07154900	4,119,102	3,205,179
WIOA Dislocated Worker Formula Grants	17.278	07154900	6,410,756	-
Total WIOA Cluster			17,156,173	3,205,179
California Department of Aging:				
Senior Community Service Employment Program - Title V (SCSEP)	17.235	TV-2021-20	330,042	-
TOTAL - U.S. DEPARTMENT OF LABOR			17,486,215	3,205,179
U.S. DEPARTMENT OF TRANSPORTATION				
Pass-Through Programs:				
Highway Planning and Construction Cluster:				
California Department of Transportation:				
Highway Planning and Construction	20.205	85954	1,472,567	-
Total Highway Planning and Construction Cluster			1,472,567	-
Highway Safety Cluster:				
California Office of Traffic Safety:				
State and Community Highway Safety - FY 19-20	20.600	PT20150	76,157	-
State and Community Highway Safety - FY 20-21	20.600	PT21048	96,606	-
Subtotal			172,763	-
National Priority Safety Programs	20.616	69A3752130000405DCAM	295,746	-
Total Highway Safety Cluster			468,509	-
Minimum Penalties for Repeat Offenders for Driving While Intoxicated - Intensive Probation Supervision for High Risk Felony and Repeat DUI Offenders	20.608	20.309	314,839	-
Minimum Penalties for Repeat Offenders for Driving While Intoxicated	20.608	PT20150	118,441	-
Minimum Penalties for Repeat Offenders for Driving While Intoxicated	20.608	PT21048	181,378	-
Subtotal			614,658	-
TOTAL - U.S. DEPARTMENT OF TRANSPORTATION			2,555,734	-

See Notes to Schedule of Expenditures of Federal Awards

Federal Grantor/Pass-Through Grantor/Program or Cluster Title	Federal Financial Assistance Listing/Federal CFDA Number	Grant Identification/ Pass-Through Entity Identifying Number	Federal Award Expenditures	Pass-through Award to Subrecipients
U.S. DEPARTMENT OF TREASURY				
Pass-Through Programs:				
California Department of Finance:				
COVID-19 - Coronavirus Relief Fund	21.019	243	$ 50,179,490	$ -
Direct Programs:				
COVID-19 - Coronavirus Relief Fund	21.019	SLT0117	323,331,815	55,556,012
Subtotal			373,511,305	55,556,012
COVID-19 - Emergency Rental Assistance Program	21.023	1505-0266	25,397,171	25,267,171
Equitable Sharing	21.016		20,394	-
TOTAL - U.S. DEPARTMENT OF TREASURY			398,928,870	80,823,183
U.S. ELECTION ASSISTANCE COMMISSION				
Pass-Through Programs:				
California Secretary of State:				
COVID-19 - Help America Vote Act (HAVA) Election Security Grants	90.404	20G26136	3,215,263	-
TOTAL - U.S. ELECTION ASSISTANCE COMMISSION			3,215,263	-
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES				
Pass-Through Programs:				
Medicaid Cluster:				
California Department of Health Care Services:				
Medical Assistance Program - Caseload Relief	93.778	4260-111-0001	391,059	-
Medical Assistance Program - Early Periodic Screening and Training	93.778	4260-111-0001	417,915	-
Medical Assistance Program - Medi-Cal Assistance Program (Alcohol)	93.778	17-94066	17,754,474	15,018,571
Medical Assistance Program - Children's Medical Services Plan (CMS) - CM	93.778	4260-111-0001	80,166	-
Medical Assistance Program - Children's Health Insurance Program (Title XIX)	93.778	4260-111-0001	5,235,220	-
Medical Assistance Program - Medi-Cal Assistance Program - Children & Family Services Portion Only	93.778	MSO1809-17	18,172,070	-
Medical Assistance Program - Mental Health Administrative Cost	93.778	N/A	10,925,662	-
Medical Assistance Program - Family Support Services - Health Care Program for Children in Foster Care (HCPCFC)	93.778	4260-111-0001	1,351,587	-
Medical Assistance Program - Family Support Services - Psychotropic Medication Monitoring & Oversight (PMM&O)	93.778	4260-111-0001	257,483	-
Medical Assistance Program - Transitional Assistance Department Portion Only	93.778	MS01809-17	45,742,338	-
California Department of Aging:				
Medical Assistance Program (Title XIX, MSSP)	93.778	MS-2021-17	682,401	-
California Department of Social Services:				
Medical Assistance Program (Title XIX, IHSS)	93.778	MS0809-17	18,131,080	-
Medical Assistance Program - In-Home Supportive Services - Public Authority-IHSS-PA	93.778	N/A	6,177,060	-
Total Medicaid Cluster			125,318,515	15,018,571
Aging Cluster:				
California Department of Aging:				
Special Programs for the Aging - Title VII, Chapter 3 - Programs for Prevention of Elder Abuse, Neglect, and Exploitation	93.041	AP-2021-20	15,898	-
Special Programs for the Aging - Title VII, Chapter 2 - Long Term Care Ombudsman Services for Older Individuals	93.042	AP-2021-20	44,848	-
Special Programs for the Aging - Title III, Part D Disease Prevention and Health Promotion Services	93.043	AP-2021-20	135,974	135,974
Special Programs for the Aging - Title III, Part B Grants for Supportive Services and Senior Centers	93.044	AP-2021-20	1,540,202	839,052
COVID-19 - Special Programs for the Aging, Title III, Part B, Grants for Supportive Services and Senior Centers	93.044	N/A	153,000	-
Special Programs for the Aging - Title III, Part C Nutrition Services	93.045	AP-2021-20	3,241,830	3,241,830
COVID-19 - Special Programs for the Aging, Title III, Part C, Nutrition Services	93.045	N/A	2,160,718	2,160,718
COVID-19 - Special Programs for the Aging, Title III, Part C, Nutrition Services	93.045	N/A	609,695	609,695
National Family Caregiver Support, Title III, Part E	93.052	AP-2021-20	858,189	434,111
COVID-19 - National Family Caregiver Support, Title III, Part E	93.052	N/A	200,000	-
Nutrition Services Incentive Program	93.053	AP-2021-20	497,359	497,359
Total Aging Cluster			9,457,713	7,918,739
TANF Cluster:				
California Department of Social Services:				
Temporary Assistance for Needy Families	93.558	1946001347-A7	144,644,659	1,771,494
Total TANF Cluster			144,644,659	1,771,494

Federal Grantor/Pass-Through Grantor/Program or Cluster Title	Federal Financial Assistance Listing/Federal CFDA Number	Grant Identification/ Pass-Through Entity Identifying Number	Federal Award Expenditures	Pass-through Award to Subrecipients
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (Continued)				
California Department of Health Care Services:				
Projects for Assistance in Transition from Homelessness (PATH)	93.150	68-0317191	$ 507,750	$ -
Children's Health Insurance Program - XXI	93.767	4260-111-0001	1,022,919	-
Block Grants for Community Mental Health Services	93.958	N/A	5,200,774	1,430,793
Block Grants for Prevention and Treatment of Substance Abuse	93.959	17-94153	10,611,382	9,017,972
California Department of Public Health:				
Project Grants and Cooperative Agreements for Tuberculosis Control Programs	93.116	NU52PS004656	206,976	-
Childhood Lead Poisoning Prevention Projects - State and Local Childhood Lead Poisoning Prevention and Surveillance of Blood Lead Levels in Children	93.197	20-10541	150,275	-
HIV Care Formula Grants	93.917	15-692 A-1	646,252	575,743
HIV Prevention Activities Health Department Based - Integrated HIV programs for Health Departments to Support Ending the HIV Epidemic in the United States	93.940	20-10751	21,313	-
HIV Prevention Activities Health Department Based	93.940	18-10767	504,266	-
Subtotal			525,579	-
COVID-19 - Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	93.323	COVID-19-36	984,813	-
COVID-19 - Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) - Enhancing Detection	93.323	COVID-19-36	4,381,106	352,752
COVID-19 - Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) - Enhancing Detection Expansion	93.323	COVID-19ELC94	35,026,561	-
Subtotal			40,392,480	352,752
Maternal and Child Health Services Block Grant to the States - Black Infant Health (BIH)	93.994	202036	490,653	-
Maternal and Child Health Services Block Grant to the States - Maternal, Child, and Adolescent Health (MCAH)	93.994	202036	464,939	-
Subtotal			955,592	-
Public Health Emergency Preparedness	93.069	17-10186	1,353,460	-
Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Aligned Cooperative Agreements	93.074	17-10157	525,771	-
COVID-19 - Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Aligned Cooperative Agreements	93.074	17-10157	156,972	-
Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Aligned Cooperative Agreements - Multiple Counties Local Emergency Medical Services Agency Coordinator (MCLEMSA)	93.074	17-10158	36,450	-
COVID-19 - Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Aligned Cooperative Agreements - Multiple Counties Local Emergency Medical Services Agency Coordinator (MCLEMSA)	93.074	17-10158	8,973	-
Subtotal			728,166	-
Immunization Cooperative Agreements	93.268	17-10343 A02	499,923	-
COVID-19 - Immunization Cooperative Agreements	93.268	17-10343 A02	17,447	-
Subtotal			517,370	-
Viral Hepatitis Prevention and Control	93.270	19-10935	4,140	-
California Department of Social Services:				
Guardianship Assistance	93.090	1946001347-A7	10,423,018	-
MaryLee Allen Promoting Safe and Stable Families	93.556	1946001347-A7	2,078,171	1,905,518
Refugee and Entrant Assistance State/Replacement Designee Administered Programs - Administration	93.566	1946001347-A7	442	-
Refugee and Entrant Assistance State/Replacement Designee Administered Programs	93.566	1946001347-A7	62,923	-
Subtotal			63,365	-
Stephanie Tubbs Jones Child Welfare Services Program	93.645	1946001347-A7	1,394,731	-
Foster Care Title IV-E - Probation	93.658	TAD 006852425, DCS 136498818	1,871,124	-
Foster Care Title IV-E - Children & Family Services	93.658	1946001347-A7	32,520,891	326,280
COVID-19 - Foster Care - Title IV-E - Transitional Assistance Department	93.658	1946001347-A7	7,831	-
Foster Care Title IV-E - Transitional Assistance Department	93.658	1946001347-A7	59,788,756	45,302,724
Subtotal			94,188,602	45,629,004
Adoption Assistance - Administration	93.659	1946001347-A7	2,061,720	-
Adoption Assistance	93.659	1946001347-A7	54,105,026	-
Subtotal			56,166,746	-
Social Services Block Grant - Title XX	93.667	1946001347-A7	3,765,514	-
Social Services Block Grant	93.667	1946001347-A7	3,686,481	-
Subtotal			7,451,995	-
Adoption and Legal Guardianship Incentive Payments	93.603	1946001347-A7	772,312	-
John H. Chafee Foster Care Program for Successful Transition to Adulthood	93.674	1946001347-A7	666,152	294,089

Federal Grantor/Pass-Through Grantor/Program or Cluster Title	Federal Financial Assistance Listing/Federal CFDA Number	Grant Identification/ Pass-Through Entity Identifying Number	Federal Award Expenditures	Pass-through Award to Subrecipients
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (Continued)				
California Department of Child Support Services:				
Child Support Enforcement	93.563	2001CACSES	$ 28,749,734	$ -
COVID-19 - Child Support Enforcement	93.563	2001CACSES	1,137,779	-
Subtotal			29,887,513	-
Child Support Enforcement Research	93.564	10-0685-21	336,919	-
California Department of Aging:				
Medicare Enrollment Assistance Program - Medicare Improvements for Patients and Providers Act (MIPPA)	93.071	MI1819-20, MI-2021-20	58,406	54,807
State Health Insurance Assistance Program - Health Insurance Counseling and Advocacy Program (HICAP)	93.324	HI-2021-20	163,992	144,735
Support for Ombudsman and Beneficiary Counseling Programs for States Participating in Financial Alignment Model Demonstrations for Dually Eligible Individuals	93.634	FA1718-20, FA-2021-20	6,320	2,780
National Environmental Health Association:				
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health	93.421	20-62	2,500	-
Essential Access Health:				
Family Planning Services	93.217	454-5320-71219-19-20	299,530	-
Direct Programs:				
Health Center Program Cluster:				
Health Center Program (Community Health Centers, Migrant Health Centers, Health Care for the Homeless, and Public Housing Primary Care)	93.224		720,976	-
COVID-19 - Health Center Program (Community Health Centers, Migrant Health Centers, Health Care for the Homeless, and Public Housing Primary Care)	93.224		542,876	-
Affordable Care Act (ACA) Grants for New and Expanded Services under the Health Center Program	93.527		1,879,596	-
Total Health Center Program Cluster			3,143,448	-
Head Start Cluster:				
Head Start - Early Head Start Program - Child Care Partnership	93.600	09HP000209-02	2,057,199	-
COVID-19 - Head Start - Head Start Coronavirus Response and Relief Supplemental Appropriations (CRRSA) and American Rescue Plan (ARP) Grant	93.600	09HE000668-01	44,352	-
Head Start - Early Head Start Program - Child Care Partnership	93.600	09HP000209-02	94,911	-
Head Start - Head Start and Early Head Start	93.600	09CH011719-01	47,025,428	4,660,725
Head Start and Early Head Start	93.600	09CH10016-05	3,571,121	-
COVID-19 - Head Start and Early Head Start	93.600	09CH10016-05	3,177,317	489,428
Total Head Start Program Cluster			55,970,328	5,150,153
Ending the HIV Epidemic: A Plan for America — Ryan White HIV/AIDS Program Parts A and B	93.686		527,908	461,177
HIV Emergency Relief Project Grants (Ryan White HIV/AIDS Program Part A)	93.914		6,707,580	5,853,943
COVID-19 - HIV Emergency Relief Project Grants (Ryan White HIV/AIDS Program Part A)	93.914		156,239	156,239
Subtotal			6,863,819	6,010,182
Grants to Provide Outpatient Early Intervention Services with Respect to HIV Disease (Ryan White HIV/AIDS Program Part C)	93.918		444,665	-
COVID-19 - Grants to Provide Outpatient Early Intervention Services with Respect to HIV Disease (Ryan White HIV/AIDS Program Part C EIS COVID-19 Response)	93.918		60,458	-
Subtotal			505,123	-
COVID-19 - Health Resources & Services Administration (HRSA) COVID-19 Claims Reimbursement for the Uninsured Program and the COVID-19 Coverage Assistance	93.461		79,266	-
Healthy Marriage Promotion and Responsible Fatherhood Grants	93.086		148,814	-
COVID-19 - Provider Relief Fund and American Rescue Plan (ARP) Rural Distribution	93.498		7,317,082	-
TOTAL - U.S. DEPARTMENT HEALTH AND HUMAN SERVICES			620,760,062	95,738,509

Federal Grantor/Pass-Through Grantor/Program or Cluster Title	Federal Financial Assistance Listing/Federal CFDA Number	Grant Identification/ Pass-Through Entity Identifying Number	Federal Award Expenditures	Pass-through Award to Subrecipients
U.S. EXECUTIVE OFFICE OF THE PRESIDENT				
Direct Programs:				
High Intensity Drug Trafficking Areas Program - High Intensity Drug Trafficking Area (Inland Regional Narcotics Enforcement Team (IRNET), Regional Methamphetamine (RMTF), and Vehicle Interdiction Pipeline Enforcement Resource (VIPER))	95.001	G20LA0001A	$ 479,605	$ -
High Intensity Drug Trafficking Areas Program - High Intensity Drug Trafficking Area (Inland Regional Narcotics Enforcement Team (IRNET), Regional Methamphetamine (RMTF), and Vehicle Interdiction Pipeline Enforcement Resource (VIPER))	95.001	G21LA0001A	465,607	-
High Intensity Drug Trafficking Areas Program - Southern California Drug Task Force (SCDTF) FY 19-20	95.001		3,240	-
High Intensity Drug Trafficking Areas Program - Southern California Drug Task Force (SCDTF) FY 20-21	95.001		42,653	-
Subtotal			991,105	-
TOTAL - U.S. EXECUTIVE OFFICE OF THE PRESIDENT			991,105	-
U.S. DEPARTMENT OF HOMELAND SECURITY				
Pass-Through Programs:				
California Governor's Office of Emergency Services:				
Emergency Management Performance Grants (EMPG) FY 18-19	97.042	2019-0003	266,719	180,811
COVID-19 Emergency Management Performance Grants (EMPG) FY 18-19	97.042	2019-0003	1,917	1,917
Subtotal			268,636	182,728
Fire Management Assistance Grant - 2020 Apple Fire	97.046	071-00000	5,505	-
Fire Management Assistance Grant - 2019 Hillside Fire	97.046	071-00000	4,723	-
Subtotal			10,228	-
BRIC: Building Resilient Infrastructure and Communities	97.047	Grant #2017-0003, Project PJ0031, FIPS 071-91103	3,135,007	-
Hazard Mitigation Grant - West Fontana Channel	97.039	FEMA-4344-DR-CA, Project #PJ0053, FIPS #071-91103	354,538	-
Hazard Mitigation Grant - Carbon Canyon	97.039	FEMA-4353-DR-CA, Project #PJ0029, FIPS #071-91103	258,328	-
Subtotal			612,866	-
Homeland Security Grant Program - FY 16-17	97.067	071-00000	115,598	44,966
Homeland Security Grant Program - FY 17-18	97.067	071-00000	602,276	378,208
Homeland Security Grant Program - FY 18-19	97.067	071-00000	530,298	166,592
Homeland Security Grant Program - 2019 Urban Areas Security Initiative	97.067	065-6200	174,380	-
Subtotal			1,422,552	589,766
California Department of Parks & Recreation:				
Boating Safety Financial Assistance	97.012	C1870613	128,800	-
Boating Safety Financial Assistance	97.012	C20L0620	60,000	-
Subtotal			188,800	-
Direct Programs:				
Preparing for Emerging Threats and Hazards - 2016 Program to Prepare Communities for Complex Coordinated Terrorist Attacks	97.133		12,886	12,886
COVID-19 Assistance to Firefighters Grant FY 19-20	97.044		217,175	-
TOTAL - U.S. DEPARTMENT OF HOMELAND SECURITY			5,868,150	785,380
TOTAL EXPENDITURES OF FEDERAL AWARDS			$ 1,133,887,598	$ 184,862,437

Note 1 - Basis of Presentation

The accompanying schedule of expenditures of federal awards (Schedule) includes the federal award activity of San Bernardino County, California (County) under programs of the federal government for the year ended June 30, 2021. The information in this Schedule is presented in accordance with the requirements of *Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of the County, it is not intended to and does not present the financial position, changes in net position, or cash flows of the County. The County's reporting entity is defined in Note 1 to the County's basic financial statements.

Note 2 - Summary of Significant Accounting Policies

Expenditures reported on the Schedule are reported on the modified accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance and 2 CFR Part 200.502, wherein certain types of expenditures are recognized on a basis which differs from generally accepted accounting principles, or are not allowable or are limited as to reimbursement.

Note 3 - Pass-Through Entities' Identifying Number

When federal awards were received from a pass-through entity, the Schedule shows, if available, the identifying number assigned by the pass-through entity. When no identifying number is shown, the County has determined that no identifying number is assigned for the program or the County was unable to obtain an identifying number from the pass-through entity.

Note 4 - Catalog of Federal Domestic Assistance (CFDA) Numbers/Assistance Listing Numbers

The CFDA numbers included in this report were determined based on the program name, review of grant contract information, and the Office of Management and Budget's Catalog of Federal Domestic Assistance.

Note 5 - Aging Cluster

The California Department of Aging considers other closely-related pass through programs by the State to be included with the Aging Cluster, in accordance with 2 CFR 200.17.

Note 6 -   Medicaid Cluster

Except for Medi-Cal administrative expenditures, Medicaid (Medi-Cal) and Medicare program expenditures are excluded from the Schedule. These expenditures represent fees for services; therefore, neither is considered a federal award program of the County for purposes of the Schedule or in determining major programs. The County assists the State of California (the State) in determining eligibility and provides Medi-Cal and Medicare services through County-owned health facilities. Medi-Cal administrative expenditures are included in the Schedule as they do not represent fees for services.

Note 7 -   Indirect Cost Rate

The County, as a whole, has not elected to use the 10-percent de minimis indirect cost rate allowed under the Uniform Guidance. Individual departments, or programs, may have a negotiated rate or they may have elected to use the 10-percent de minimis indirect cost rate within their individual grants.

Note 8 -   Provider Relief Funds

The County received amounts from the U.S. Department of Health and Human Services (HHS) through the Provider Relief Fund (PRF) program (Federal Financial Assistance Listing/CFDA #93.498) during the year ended June 30, 2020 totaling $7,317,082. The County incurred eligible expenditures and, therefore, recognized revenues totaling $7,317,082 for the year ended June 30, 2020 on the financial statements. In accordance with the 2021 compliance supplement, the PRF expenditures recognized on the schedule are based on the reporting to HHS for Period 1, defined as payments received during April 10, 2020 to June 30, 2020 of $7,317,082, as required under the PRF program.

Section I – Summary of Auditor's Results

FINANCIAL STATEMENTS

Type of report the auditor issued	Unmodified

Internal control over financial reporting:
    Material weakness(es) identified?   No
    Significant deficiency(ies) identified?   None Reported

Noncompliance material to financial statements noted?   No

FEDERAL AWARDS

Internal control over major federal programs:
    Material weakness(es) identified?   No
    Significant deficiency(ies) identified?   Yes

Type of auditor's report issued on compliance for major programs: Unmodified

Any audit findings disclosed that are required to be reported in
    accordance with 2 CFR 200.516(a)?   Yes

Identification of major programs:

Name of Federal Program	Federal Financial Assistance Listing/CFDA Number
Supplemental Nutrition Assistance Program Cluster	10.561
Special Supplemental Nutrition Program for Women, Infants, and Children	10.557
Workforce Innovation and Opportunity Act Cluster	17.258, 17.259, 17.278
Coronavirus Relief Fund	21.019
Emergency Rental Assistance Program	21.023
Temporary Assistance for Needy Families	93.558
Epidemiology and Laboratory Capacity for Infectious Diseases	93.323
Foster Care- Title IV-E	93.658
Head Start Cluster	93.600
Provider Relief Fund and American Rescue Plan (ARP) Rural Distribution	93.498

Dollar threshold used to distinguish between Type A
and Type B programs: $3,401,663

Auditee qualified as low-risk auditee?   No

Section II – Financial Statement Findings

None reported.

Section III – Federal Award Findings and Questioned Costs

2021-001 **Program:** COVID-19 Coronavirus Relief Fund
CFDA No.: 21.019
Federal Grantor: U.S. Department of Treasury
Award No. and Year: SLT0117 (2020)

Compliance Requirements: Subrecipient Monitoring
Type of Finding: Significant Deficiency in Internal Control and Instance of Non-Compliance

Criteria:

In accordance with *Title 2 U.S. Code of Federal Regulations* (CFR) 200.332, pass-through entities must comply with the following:
  • 2 CFR 200.332(a) - Ensure that every subaward is clearly identified to the subrecipient as a subaward and includes the information at 2 CFR 200.332(a)(1) through (6) at the time of the subaward and if any of those data elements change, include the changes in subsequent subaward modification.
  • 2 CFR 200.332(d)- Monitor the activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, in compliance with Federal statutes, regulations, and the terms and conditions of the subaward; and that subaward performance goals are achieved. Pass-through entity monitoring of the subrecipient must include the information at 2 CFR 200.332(d)(1) through (4).
  • 2 CFR 200.332(f) – Verify that every subrecipient is audited as required by Subpart F of this part when it is expected that the subrecipient's Federal awards expended during the respective fiscal year equaled or exceeded the threshold set forth in 200.501.

Condition:

For each subrecipient sample selected for testing, we noted the County (County Administrative Office) did not identify at the time of the subaward, the Contractor Data Universal Number System (DUNS) and the Federal Award Identification Number (FAIN). This is one of the required elements of the subaward in accordance with 2 CFR 200.332(a) of the Uniform Grant Guidance.

Additionally, for each subrecipient sample selected for testing, we noted the County did not maintain evidence of the verification of the subrecipients audit status during the period of performance.

Cause:

The County did not ensure that all of the required elements of the subaward were included in accordance with 2 CFR 200.332(a) of the Uniform Grant Guidance.

Additionally, the County did not maintain evidence of verification of each subrecipient's audit status.

Effect:

There is an increased risk of noncompliance with subrecipient monitoring requirements related to the program.

Questioned Costs:

None reported.

Context/Sampling:

A nonstatistical sample of 11 subrecipients out of 58 were selected for subrecipient monitoring testing.

Repeat Finding from Prior Year(s):

No

Recommendation:

We recommend that the County continue to update and implement current subrecipient policies and procedures to ensure that all required award information at 2 CFR Section 200.332(a) is communicated to subrecipients at the time of subaward in accordance with 2 CFR 200.331(a) of the Uniform Grant Guidance.

Additionally, we recommend the County strengthen policies and procedures over subrecipient monitoring to include the documented review of verification of each subrecipients audit status.

Views of Responsible Officials:

Management agrees. See separately issued Corrective Action Plan.

2021-002   **Program:** COVID-19 Emergency Rental Assistance Program
CFDA No.: 21.023
Federal Grantor: U.S. Department of Treasury
Award No. and Year: 1505-0266 (2021)

Compliance Requirements: Other
Type of Finding: Significant Deficiency in Internal Control and Instance of Non-Compliance

Criteria:

Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance) requires non-federal entities receiving federal awards to prepare a Schedule of Expenditures of Federal Awards (SEFA) showing both total federal expenditures and amounts passed through to subrecipients for the year.

Per Title 2 CFR 200.502, the determination of when a Federal award must be expended must be based on when the activity related to the Federal award occurs. Generally, the activity pertains to events that require the non-Federal entity to comply with Federal statutes, regulations, and the terms and conditions of Federal awards, such as: expenditure/expense transactions associated with awards including grants, cost-reimbursement contracts under the FAR, compacts with Indian Tribes, cooperative agreements, and direct appropriations; the disbursement of funds to subrecipients; the use of loan proceeds under loan and loan guarantee programs; the receipt of property; the receipt of surplus property; the receipt or use of program income; the distribution or use of food commodities; the disbursement of amounts entitling the non-Federal entity to an interest subsidy; and the period when insurance is in force.

Condition:

The County made an advance payment to a subrecipient which was not originally reported on the SEFA. In accordance with Title 2 CFR 200.502, the federal expenditure and related compliance obligation occurred at the time of disbursement to the subrecipient.

Cause:

The County (Community Development and Housing Department) did not have adequate internal controls in place to ensure total federal expenditures and amounts passed through to subrecipients were appropriately reported on the SEFA.

Effect:

Prior to correction, the total federal expenditures on the SEFA was understated by $24,177,675 and amounts passed through to subrecipients was understated by $24,177,325.

Questioned Costs:

None

Context/Sampling:

No sampling was used; program expenditures on the SEFA were reconciled to supporting records.

Repeat Finding from Prior Year(s):

No

Recommendation:

We recommend the County enhance controls to ensure federal expenditures and payments to subrecipients are reported as expenditures of federal awards at the time of disbursement.

Views of Responsible Officials:

Management agrees. See separately issued Corrective Action Plan.

2021-003   **Program:** Temporary Assistance for Needy Families
CFDA No.: 93.558
Federal Grantor: U.S. Department of Health and Human Services
Passed-through: California Department of Social Services
Award No. and Year: 1946001347-A7 (2021)

Compliance Requirements: Allowable Costs and Cost Principles; Eligibility
Type of Finding: Significant Deficiency in Internal Control and Instance of Non-Compliance

Criteria:

Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance) requires non-federal entities receiving federal awards to establish and maintain internal controls designed to reasonably ensure compliance with federal laws, regulations, and program compliance requirements.

In accordance with *Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance) entities must comply with the following:

- In determining the allowability of costs, entities must ensure direct costs did not consist of improper payments, including payments that were made to an ineligible party for an ineligible service.
- In determining eligibility for individuals, entities must track the period of time during which an individual is eligible to receive benefits, i.e., from the beginning date of eligibility through the date when those benefits stop, generally at the end of a predetermined period, unless there is a redetermination of eligibility.

In accordance with the All County Letters (ALCs) No. 18-75 and No. 19-24, Emergency Caregivers (EC) payments are funded through the Emergency Assistance (EA)-TANF program. The EC under the EA program shall receive payments through the EA program up to a total of 180 days and may receive up to 365 total days of payment if all requirements are met, e.g., documenting good cause reason(s) for the delay in approving or denying Resource Family Approval (RFA) applicants. Counties are reminded that when an RFA application is approved, the county must shift payments to the appropriate Foster Care or Approved Relative Caregiver (ARC) aide code.

Condition:

In two (2) case files tested, the applicants were participants in the EA program, pending Foster Care program placement. Assistance payments were made to these program participants for a period beyond the not-to-exceed determination date (180 days) resulting in unallowable costs charged to the federal program. For the 2 EA cases tested, there was no documentation supporting a delay in approving or denying the RFA applicant. The applicant payments were not shifted to the Foster Care aid code at the time the participant was no longer eligible for TANF program funding.

Cause:

The County (Human Services Department) did not have controls in place to ensure assistance payments for emergency assistance cases were appropriately suspended in accordance with the allowable determination period.

Effect:

Assistance payments were made to program participants subsequent to the end of the period in which the participants were determined eligible to receive payments.

Questioned Costs:

Known questioned costs from the sample selected for testing were $9,017. Known questioned costs for the audit period totaled $32,294.

Context/Sampling:

A nonstatistical sample of 60 assistance payments totaling $253,983 out of $51,653,237 of federal program assistance payments were selected for allowable costs, cost principles, and eligibility testing.

Repeat Finding from Prior Year(s):

No

Recommendation:

We recommend the County improve current policies and procedures to ensure proper suspension of TANF assistance payments to claimants when period of eligibility expires.

Views of Responsible Officials:

Management agrees. See separately issued Corrective Action Plan.

2021-004 **Program:** COVID-19 Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)-Enhancing Detection Expansion
CFDA No.: 93.323
Federal Grantor: U.S. Department of Health and Human Services- Centers for Disease Control and Prevention
Passed-through: California Department of Public Health
Award No. and Year: COVID-19ELC94 (2021)

Compliance Requirements: Allowable Costs and Cost Principles; Cash Management
Type of Finding: Significant Deficiency in Internal Control and Instance of Non-Compliance

Criteria:

Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance) requires non-federal entities receiving federal awards to establish and maintain internal controls designed to reasonably ensure compliance with federal laws, regulations, and program compliance requirements.

Entities must ensure direct costs do not consist of improper payments, including payments that should not have been made or that were made in incorrect amounts or duplicate payments.

Additionally, per the Uniform Guidance, non-federal entities funded under the reimbursement method, must pay for costs for which reimbursement is requested prior to the date of the reimbursement request.

Condition:

During our testing, we noted the following:
- One instance in which an expense was duplicated.
- Two instances in which the costs charged to the program exceeded the payments to the vendor.
- One instance in which the cost was allowable, however, the cost was charged to the program in the current fiscal year but pertained to fiscal year 2022.

Cause:

The County did not have adequate controls in place to ensure direct costs were accurately charged to the program.

Effect:

In three instances, the County received reimbursement for costs that were not incurred. In one instance, the County recorded federal expenditures in the incorrect period.

Questioned Costs:

Known questioned costs were $104,582.

Context/Sampling:

A nonstatistical sample of 60 individual expenditures out of 4,261 were selected for allowable costs and cost principles testing, which accounted for $11,937,748 of $40,392,480 of federal program expenditures.

Repeat Finding from Prior Year(s):

No

Recommendation:

We recommend that the County enhance internal controls to ensure costs are accurately charged to the ELC program.

Views of Responsible Officials:

Management agrees. See separately issued Corrective Action Plan.

2021-005   **Program:** COVID-19 Foster Care Title IV-E
CFDA No.: 93.658
Federal Grantor: U.S. Department of Health and Human Services
Passed-through: California Department of Social Services
Award No. and Year: 1946001347-A7 (2021)

Compliance Requirements: Subrecipient Monitoring
Type of Finding: Significant Deficiency in Internal Control and Instance of Non-Compliance

Criteria:

In accordance with *Title 2 U.S. Code of Federal Regulations* (CFR) 200.332, pass-through entities must ensure that every subaward is clearly identified to the subrecipient as a subaward and include the information at 2 CFR 200.332(a)(1) through (6) at the time of the subaward and if any of those data elements change, include the changes in subsequent subaward modification.

Condition:

For each subrecipient sample selected for testing, we noted the County (Human Services Department) did not identify at the time of subaward, the required elements of the subaward in accordance with 2 CFR 200.332(a) of the Uniform Guidance.

Cause:

During the last quarter of the fiscal year, the County was in the process of revising subrecipient policies and procedures over Group Homes, FFAs and STRTPs in order to comply with the requirements applicable to subrecipients in 2 CFR 200.332. The County communicated the assistance listing number, the Contractor Data Universal Numbering System (DUNS) and the Federal Award Identification Number (FAIN) during the period of performance and the remaining required award information per 2 CFR 200.332(a) was not communicated to individual subrecipients until subsequent to the period of performance.

Effect:

The County did not communicate all of the required elements of the subaward to the subrecipients at the time of subaward in accordance with 2 CFR 200.332(a).

Questioned Costs:

None reported.

Context/Sampling:

A nonstatistical sample of 33 subrecipients out of 162 were selected for subrecipient monitoring testing.

Repeat Finding from Prior Year(s):

Yes, see prior year finding 2020-001

Recommendation:

We recommend that the County continue to update and implement current subrecipient policies and procedures to ensure that all required award information at 2 CFR Section 200.332(a) is communicated to subrecipients at the time of subaward in accordance with 2 CFR 200.331(a) of the Uniform Grant Guidance.

Views of Responsible Officials:

Management agrees. See separately issued Corrective Action Plan.

2021-006   **Program:** COVID-19 Head Start Cluster
CFDA No.: 93.600
Federal Grantor: U.S. Department of Health and Human Services
Award No. and Year: 09HP000209-02 (2020), 09HE000668-01 (2021), 09CH011719-01 (2020), 09CH10016-05 (2019)

Compliance Requirements: Reporting
Type of Finding: Significant Deficiency in Internal Control and Instance of Non-Compliance

Criteria:

Under the requirements of the Federal Funding Accountability and Transparency Act (FFATA), which is codified in 2 CFR Part 170, direct recipients of grants or cooperative agreements are required to report first-tier subawards of $30,000 or more to the Federal Funding Accountability and Transparency Act Subaward Reporting System (FSRS). Award information is required to be reported to the FSRS no later than the last day of the month following the month in which the subaward/subaward amendment obligation was made.

Condition:

In two subaward agreements tested, the required reporting under FFATA was not submitted timely. The required reporting was submitted approximately 10 months after the due date. See details of FFATA reporting below:

Transactions Tested	Subaward not reported	Report not timely	Subaward amount incorrect	Subaward missing key elements
2	0	2	0	0
Dollar Amount of Tested Transactions	Subaward not reported	Report not timely	Subaward amount incorrect	Subaward missing key elements
$5,196,637	$0	$5,196,637	$0	$0

Cause:

The County (Preschool Services Department) did not have adequate internal controls in place to ensure the required reporting under FFATA was submitted timely.

Effect:

Subaward information required by the FFATA was not submitted timely to the FSRS.

Questioned Costs:

None

Context/Sampling:

A nonstatistical sample of two contracts representing the entire population, was selected for testing.

Repeat Finding from Prior Year:

No

Recommendation:

We recommend the County enhance controls to ensure required reporting under FFATA is submitted to the FSRS timely.

Views of Responsible Officials:

Management agrees. See separately issued Corrective Action Plan.

Summarized below is the status of all audit findings reported in the prior year audit's schedule of audit findings and questioned costs.

Financial Statements Findings:

None noted.

Federal Award Findings:

Finding No.	Program Name/Description	CFDA No.	Compliance Requirements	Status of Corrective Action
2020-001	Foster Care Title IV-E	93.658	Subrecipient Monitoring	Partially Implemented- See 2021-005

Federal Grantor/Program Title	Federal CCFDA Number	Contract Number	Federal Award Expenditures	State Expenditures
State Administrative Matching Grants for the Supplemental Nutrition Assistance Program	10.561	CF-1920-20	$ 19,979	$ 19,979
Senior Community Service Employment Program - Title V (SCSEP)	17.235	TV-2021-20	330,042	-
Special Programs for the Aging, Title VII, Chapter 3, Prevention of Elder Abuse, Neglect, and Exploitation	93.041	AP-2021-20	15,898	-
Special Programs for the Aging, Title VII, Chapter 2, Long Term Care Ombudsman Services for Older Individuals	93.042	AP-2021-20	44,848	-
Special Programs for the Aging, Title III, Part D, Disease Prevention and Health Promotion Services	93.043	AP-2021-20	135,974	-
Special Programs for the Aging, Title III, Part B, Grants for Supportive Services and Senior Centers	93.044	AP-2021-20	1,540,202	355,017
COVID-19 Special Programs for the Aging, Title III, Part B, Grants for Supportive Services and Senior Centers	93.044	N/A	153,000	-
Special Programs for the Aging, Title III, Part C1, Nutrition Services	93.045	AP-2021-20	3,241,830	1,165,755
COVID-19 Special Programs for the Aging, Title III, Part C1, Nutrition Services (CARES)	93.045	N/A	2,160,718	-
COVID-19 Special Programs for the Aging, Title III, Part C1, Nutrition Services (FFCRA)	93.045	N/A	609,695	-
National Family Caregiver Support, Title III, Part E	93.052	AP-2021-20	858,189	-
COVID-19 National Family Caregiver Support, Title III, Part E (CARES)	93.052	N/A	200,000	-
Nutrition Services Incentive Program (NSIP)	93.053	AP-2021-20	497,359	-
Medicare Enrollment Assistance Program - Medicare Improvements for Patients and Providers Act (MIPPA)	93.071	MI-1819-20/ MI-2021-20	58,406	-
State Health Insurance Assistance Program - Health Insurance Counseling and Advocacy Program (HICAP)	93.324	HI-2021-20	163,992	194,566
Support for Ombudsman and Beneficiary Counseling Programs for States Participating in Financial Alignment Model Demonstrations for Dually Eligible Individuals	93.634	FA-1718-20/ FA-2021-20	6,320	-
Medi-Cal Assistance Program (Title XIX, MSSP)	93.778	MS-2021-17	682,401	682,401
Ombudsman SHF Citation Penalty Fund (SHFCitPen)	N/A	AP-2021-20	-	54,093
Ombudsman Skilled Nursing Facility Quality & Accountability Fund (SNFQAF)	N/A	AP-2021-20	-	46,341
Ombudsman Public Health L & C Program Fund	N/A	AP-2021-20	-	6,587
Totals			$ 10,718,853	$ 2,524,739

SAN BERNARDINO COUNTY

Community Revitalization
Community Development and Housing

Martha Zepeda
Deputy Executive Officer

August 17, 2022

Department of Housing and Community Development
Division of Financial Assistance, Federal Programs Branch
Emergency Solutions Grants Program
2020 W. El Camino Ave, Suite 200
Sacramento, CA 95833

RE: 2022 COC ESG NOTICE OF FUNDING AVAILABILITY - Provider Selection Process

Dear NOFA Unit:

This letter documents that the efforts to be undertaken by the County of San Bernardino, Community Development and Housing Department (CDH) will ensure fair and competitive procurement practices are employed, when and where practically feasible, and that the process is in conformance with 25 CCR Section 8403 (g) and 24 CFR Part 85. CDH will conduct the RFP/NOFA process in Fall 2021 and select providers in December 2021.

The RFP process will entail the posting of the RFP/NOFA on the County of San Bernardino's Electronic Procurement (ePro) Network and made readily available to approximately 180 prospective bidders registered in the ePro system. Responses from RFP/NOFA process will be evaluated by a review committee comprised of staff from various County of San Bernardino departments, upon identification and selection of providers, contract awards will be recommended to the County Board of Supervisors for consideration and approval.

If you have any questions regarding the selection process or would like additional information, please feel free to contact Stephanie Bruce, Community Revitalization Operations Chief, at (909) 387-4391.

Respectfully,

Martha Zepeda
Deputy Executive Officer

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SAN BERNARDINO COUNTY

Community Revitalization
Community Development and Housing

Martha Zepeda
Deputy Executive Officer

August 17, 2022

Department of Housing and Community Development
Division of Financial Assistance, Federal Programs Branch
Emergency Solutions Grants Program
2020 W. El Camino Ave, Suite 200
Sacramento, CA 95833

RE: 2022 COC ESG NOFA – Administrative Entity (AE) Compliance Certification

Dear NOFA Unit:

I certify that funding recommendations being made for use of ESG funds meet federal and State
ESG requirements pursuant to 25 CCR § 8403, 25 CCR § 8408, and 25 CCR § 8409.
The CoC utilizes a process that meets the following requirements:

A. Is fair and open, and avoids conflicts of interest in project selection, implementation, and the administration of funds.

B. Considers the State application eligibility and rating criteria in the Department's 2022 ESG NOFA for the CoC allocation.

C. Complies with the Core Practice requirements in 25 CCR § 8409 and 25 CCR § 8409.

D. Incorporates the performance standards set forth in the Department's Annual Action Plan.

E. Complies with federal ESG.

F. Considers any other practices promoted or required by HUD.

G. Ensures the funded homeless service provider will maintain documentation of satisfactory match pursuant to the requirements of 24 CFR § 576.201.

If you have any questions regarding the AE Compliance Certification or would like additional
information, please feel free to contact Stephanie Bruce, Community Revitalization Operations
Chief, at (909) 387-4391.

Respectfully,

Martha Zepeda
Deputy Executive Officer

SAN BERNARDINO COUNTY

Community Revitalization
Community Development and Housing

Martha Zepeda
Deputy Executive Officer

August 17, 2022

Department of Housing and Community Development
Division of Financial Assistance, Federal Programs Branch
Emergency Solutions Grants Program
2020 W. El Camino Ave, Suite 200
Sacramento, CA 95833

RE: 2022 COC ESG NOFA – Indirect Costs Certification

Dear NOFA Unit:

I certify under penalty of perjury that:

1. To the best of my knowledge and belief that the form is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the ESG program.

2. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. 18 U.S.C. § 1001, 31 U.S.C. § 3729, 31 U.S.C. § 3730, and 31 U.S.C. § 3801-3812.

3. If the applicant will seek reimbursement for any indirect costs, the applicant must:

- Comply with all OMB requirements and standards including 2 CFR § 200.403, 2 CFR § 200.415, and Appendix IV to Part 200,
- Certify that the applicant and/or any subcontractor seeking reimbursement for indirect costs at the de minimis rate do not meet the definition of a major nonprofit organization as defined by OMB 2 CFR § 200.414, and
- Maintain records including evidence of the Modified Total Direct Cost (MTDC) 2 CFR § 200.68 calculations, indirect cost limits, and supporting documentation for actual direct cost billing.

I further certify that I am aware that there are penalties for willfully and knowingly giving false information on an application for federal or State funds that may include immediate repayment of all federal or State funds received. I understand that the information submitted is subject to verification by federal or State personnel as part of compliance monitoring.

If you have any questions regarding the County's Indirect Cost Certification or would like additional information, please feel free to contact Stephanie Bruce, Community Revitalization Operations Chief, at (909) 387-4391.

Respectfully,

Martha Zepeda
Deputy Executive Officer

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Chief Executive Officer

SAN BERNARDINO COUNTY

Community Revitalization
Community Development and Housing

Martha Zepeda
Deputy Executive Officer

August 17, 2022

Department of Housing and Community Development
Division of Financial Assistance, Federal Programs Branch
Emergency Solutions Grants Program
2020 W. El Camino Ave, Suite 200
Sacramento, CA 95833

RE: 2022 COC ESG NOFA – Match Certification

Dear NOFA Unit:

The County acknowledges that funded applicants must make matching contribution amounts that equal the amount of federal ESG funds awarded and that HCD will request documentation as part of its monitoring to determine the sources and amounts used to meet the federal ESG matching requirements in accordance with 24 CFR § 576.201 and 25 CCR § 8410.

San Bernardino County will match its allocation of $280,769 with $280,769 in NPQ funding.

By signing below, I certify on behalf of my organization that all the above information is accurate, true, and complete to the best of my knowledge. I am also aware that HCD has the right to request proof of all information provided to verify accuracy and maintain the integrity of the program.

If you have any questions regarding the County's match or would like additional information, please feel free to contact Stephanie Bruce, Community Revitalization Operations Chief, at (909) 387-4391.

Respectfully,

Martha Zepeda
Deputy Executive Officer

Understanding Racial Disparity in Your CoC

Each community has unique circumstances impacting homeless populations. The CoC Analysis Tool: Race and Ethnicity draws on Point-In-Time Count (PIT) and American Community Survey (ACS) data to facilitate analysis of racial disparities among people experiencing homelessness. Such an analysis is a critical first step in identifying and changing racial and ethnic disparities in our systems and services.

How to Use the Tool

Select a CoC from the dropdown at the top of the Dashboard tab. The charts and tables will automatically populate with local and state data.

The first bar chart shows racial distributions for the selected CoC for the total population, people living in poverty, people experiencing homelessness, and people experiencing unsheltered homelessness. By comparing racial distributions between persons experiencing homelessness and the general population, we can identify if certain racial groups experience homelessness at disproportionate rates. Comparing the demographics of people experiencing homeless to people experiencing poverty, we are able to identify racial disparities in homelessness that poverty alone cannot account for. We can also identify demographic differences between people who experience sheltered and unsheltered homelessness.

The bar charts also include the racial distribution for individuals in families with children who were experiencing homelessness. For these individuals, the race data is based on the racial identity of the head of household. It is a proxy and may not accurately represent the racial identity of all household members.

The bar charts in the center and on the right show the total population and homelessness data for youth and veterans, respectively. Comparable poverty data is not available for these subgroups.

Example Reading of Distribution of Race Chart

For example, when reading the chart below, we see that 8% of the total population of the geography served by the CoC identified as Black in the 2015-2019 American Community Survey. We also see that 37% of people experiencing homelessness in the Point-In-Time Count identified as Black. What factors might contribute to this large racial disparity in homelessness?

Looking at families with children experiencing homelessness in this sample CoC, we see an even larger portion of Black households experiencing homelessness (41%).
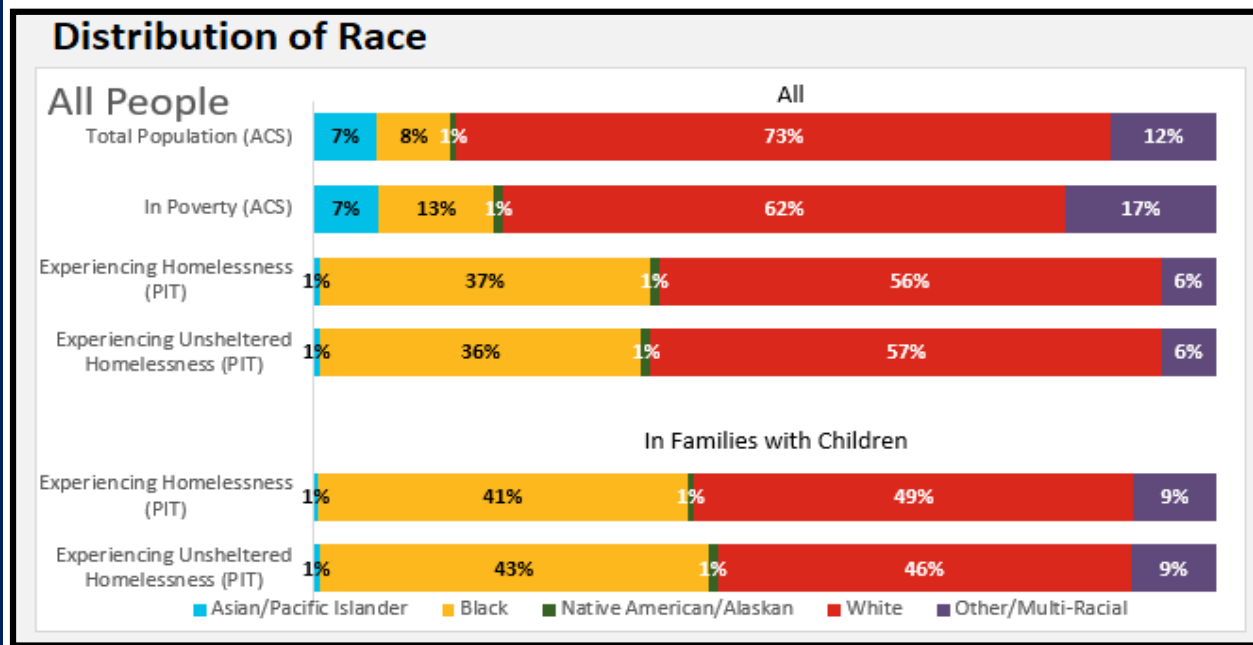
The next set of bar charts in the Dashboard displays the distribution of Hispanic and Non-Hispanic groups in the same configurations, enabling a comparison between the general population of the geography served by the CoC and people experiencing homelessness amongst singles, families, youth, and veterans.

The CoC Data tables below the charts include the data that is represented in the charts as well as additional detail, including the raw numbers used to calculate the percentages in each group.

The State Data table provides a broader context with racial distributions for the entire state, those in poverty, and persons experiencing homelessness, with a breakout of families with children.

Example Reading of CoC Data Table

In this example, we see that the CoC serves a geography with a total population of 1,291,603 households, of which 104,673 (8%) are Black households. The PIT data shows that 1,083 (37%) of the 2,954 households experiencing homelessness were Black.

CoC Data

Race and Ethnicity	Total Population (ACS)[1]				In Poverty (ACS)[1]				Experiencing Homelessness (PIT)[2]			
	All		In Families with Children		All		In Families with Children		All		In Families with Children	
	#	%	#	%	#	%	#	%	#	%	#	%
All People	1,291,603		509,692		147,330		61,452		2,954		1,059	
Race												
Asian/Pacific Islander	92,033	7%	42,619	8%	10,679	7%	1,964	3%	21	1%	6	1%
Black	104,673	8%	41,284	8%	18,895	13%	9,622	16%	1,083	37%	433	41%
Native American/Alaskan	8,077	1%	4,213	1%	1,358	1%	948	2%	27	1%	8	1%
White	937,752	73%	348,783	68%	91,975	62%	34,553	56%	1,644	56%	516	49%
Other/Multi-Racial	149,068	12%	72,793	14%	24,423	17%	14,366	23%	179	6%	96	9%
Ethnicity												
Hispanic	427,387	33%	215,508	42%	71,849	49%	44,045	72%	960	32%	481	45%
Non-Hispanic	864,216	67%	294,184	58%	75,481	51%	17,407	28%	1,994	68%	578	55%

COVID-19 Impact on PIT Count Data

In response to the COVID-19 pandemic, HUD waived the requirement for CoCs to conduct a full unsheltered point in time count in 2021 and allowed greater flexibility in how communities conducted their counts, including allowing them to collect less data. Therefore, CoCs that did not conduct an unsheltered count or did not collect race and ethnicity data in their unsheltered count do not have data available for those sections of the Dashboard. Those CoCs may want to reference the race and ethnicity data from their 2019 PIT count (see CoC Analysis Tool 2.1) to compare with the population data included in this version of the tool (drawn from the 2015-2019 ACS).

To learn more about the waivers, see the HUD memo:

https://www.hudexchange.info/resource/6246/cpd-memo-availability-of-waivers-for-the-biennial-pointintime-count-of-unsheltered-homelessness/

To find out more information about how a specific CoC conducted their 2021 PIT Count, please contact the CoC directly. Contacts can be located on the HUD Exchange:

Grantee Contact Information page

Technical Notes

1. When you first open the document, select Enable Content in the yellow bar.

2. If you get a pop-up asking to make it a trusted document, select "Yes"

3. In order to best view the charts and tables on your monitor or for printing, you may need to adjust the zoom in the lower right corner of the Excel window.

4. Scroll to the right to view all six bar graphs and two data tables.

5. Percentages of 5% or less might be difficult to view in the charts at the top of the page, but can be referenced in the corresponding tables below.

6. Percentages of less than 0.5% will be rounded down and displayed as 0%. Use the "N" to calculate the unrounded percentage.

7. If you see #### instead of a number in a cell, widen the column until you can see the numbers.

8. Blank cells in the tables indicate that data is not available for that subpopulation.

Do NOT…

1. Hide rows below 89 on the DASHBOARD tab. These are necessary for the charts.

2. Modify table cells on the DASHBOARD tab. Doing so will overwrite the formulas.
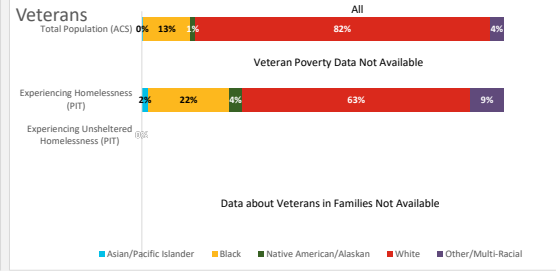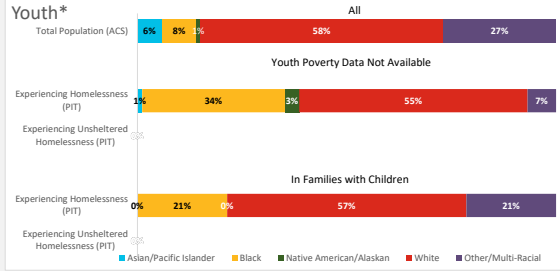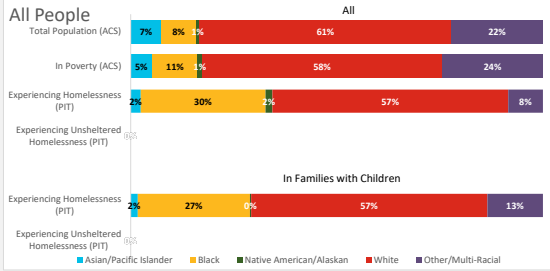
CoC Racial Equity Analysis Tool (version 3.0)

Homelessness and poverty counts at the CoC and State level
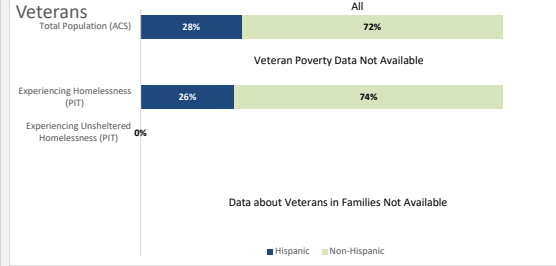
Select your CoC

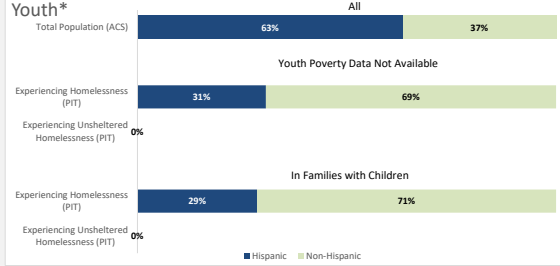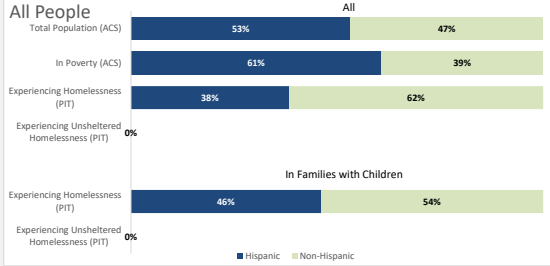**CA-609**   **San Bernardino City & County CoC**

CoC Distribution of Race

All People — All

Youth* — All

Veterans — All

*Youth experiencing homelessness is limited to unaccompanied and parenting persons under 25.

CoC Distribution of Ethnicity

All People — All

Youth* — All

Veterans — All

*Youth experiencing homelessness is limited to unaccompanied and parenting persons under 25.

CoC Data

Race and Ethnicity	Total Population (ACS)[1] All #	%	In Families with Children #	%	In Poverty (ACS)[1] All #	%	In Families with Children #	%	Experiencing Homelessness (PIT)[2] All #	%	In Families with Children #	%	Experiencing Sheltered Homelessness (PIT)[2] All #	%	In Families with Children #	%	Experiencing Unsheltered Homelessness (PIT)[2] All #	%	In Families with Children #	%
All People	2,149,031		1,059,112		333,613		198,604		905		349		905		349		NOT AVAILABLE			
Race																				
Asian/Pacific Islander	161,170	7%	71,585	7%	17,498	5%	7,161	4%	22	2%	6	2%	22	2%	6	2%	--	--	--	--
Black	179,292	8%	87,592	8%	36,923	11%	23,705	12%	274	30%	95	27%	274	30%	95	27%	--	--	--	--
Native	17,782	1%	12,412	1%	3,263	1%	2,420	1%	15	2%	1	0%	15	2%	1	0%	--	--	--	--
White	1,315,238	61%	618,709	58%	194,722	58%	110,942	56%	518	57%	200	57%	518	57%	200	57%	--	--	--	--
Other/Multi-Racial	475,549	22%	268,813	25%	81,207	24%	54,377	27%	76	8%	47	13%	76	8%	47	13%	--	--	--	--
Ethnicity																				
Hispanic	1,145,874	53%	670,336	63%	202,795	61%	138,802	70%	347	38%	161	46%	347	38%	161	46%	--	--	--	--
Non-Hispanic	1,003,157	47%	388,776	37%	130,818	39%	59,802	30%	558	62%	188	54%	558	62%	188	54%	--	--	--	--
Youth <25	798,411		NOT AVAILABLE						88		14		88		14		NOT AVAILABLE			
Race																				
Asian/Pacific Islander	46,266	6%	--	--	--	--	--	--	1	1%	0	0%	1	1%	0	0%	--	--	--	--
Black	66,658	8%	--	--	--	--	--	--	30	34%	3	21%	30	34%	3	21%	--	--	--	--
Native	6,697	1%	--	--	--	--	--	--	3	3%	0	0%	3	3%	0	0%	--	--	--	--
White	463,641	58%	--	--	--	--	--	--	48	55%	8	57%	48	55%	8	57%	--	--	--	--
Other/Multi-Racial	215,149	27%	--	--	--	--	--	--	6	7%	3	21%	6	7%	3	21%	--	--	--	--
Ethnicity																				
Hispanic	506,210	63%	--	--	--	--	--	--	27	31%	4	29%	27	31%	4	29%	--	--	--	--
Non-Hispanic	292,201	37%	--	--	--	--	--	--	61	69%	10	71%	61	69%	10	71%	--	--	--	--
Veterans	82,145		NOT AVAILABLE						54		NOT AVAILABLE		54		NOT AVAILABLE		NOT AVAILABLE			
Race																				
Asian/Pacific Islander	328	0%	--	--	--	--	--	--	1	2%	--	--	1	2%	--	--	--	--	--	--
Black	10,800	13%	--	--	--	--	--	--	12	22%	--	--	12	22%	--	--	--	--	--	--
Native	906	1%	--	--	--	--	--	--	2	4%	--	--	2	4%	--	--	--	--	--	--
White	67,004	82%	--	--	--	--	--	--	34	63%	--	--	34	63%	--	--	--	--	--	--
Other/Multi-Racial	3,107	4%	--	--	--	--	--	--	5	9%	--	--	5	9%	--	--	--	--	--	--
Ethnicity																				
Hispanic	23,000	28%	--	--	--	--	--	--	14	26%	--	--	14	26%	--	--	--	--	--	--
Non-Hispanic	59,145	72%	--	--	--	--	--	--	40	74%	--	--	40	74%	--	--	--	--	--	--

State Data for California

Race and Ethnicity	All (ACS)[1] All #	%	In Families with Children #	%	In Poverty (ACS)[1] All #	%	In Families with Children #	%	Experiencing Homelessness (PIT)[2,†] All #	%	In Families with Children #	%
All People	39,283,497		16,900,288		5,149,742		2,584,994		57,013		20,746	
Race												
Asian/Pacific Islander	5,847,713	15%	2,455,875	15%	592,257	12%	208,299	8%	1,910	3%	553	3%
Black	2,274,108	6%	929,316	5%	446,672	9%	217,222	8%	17,122	30%	6,947	33%
Native	303,998	1%	166,425	1%	57,434	1%	38,158	1%	1,729	3%	432	2%
White	23,453,222	60%	9,467,866	56%	2,814,013	55%	1,329,327	51%	33,081	58%	11,378	55%
Other/Multi-Racial	7,404,456	19%	3,880,806	23%	1,239,366	24%	791,989	31%	3,171	6%	1,436	7%
Ethnicity												
Hispanic	15,327,688	39%	8,511,489	50%	2,660,658	52%	1,770,002	68%	19,600	34%	9,953	48%
Non-Hispanic	23,955,809	61%	8,388,799	50%	2,489,084	48%	814,992	32%	37,413	66%	10,793	52%
Youth <25	12,811,954		NOT AVAILABLE		1,574,098		NOT AVAILABLE		3,495		750	
Race												
Asian/Pacific Islander	1,561,260	12%	--	--	9,020	1%	--	--	107	3%	11	1%
Black	729,126	6%	--	--	189,856	12%	--	--	1,256	36%	287	38%
Native	104,180	1%	--	--	25,715	2%	--	--	115	3%	12	2%
White	7,135,172	56%	--	--	1,210,379	77%	--	--	1,765	51%	385	51%
Other/Multi-Racial	3,282,216	26%	--	--	139,128	9%	--	--	252	7%	55	7%
Ethnicity												
Hispanic	6,513,849	51%	--	--	1,428,068	91%	--	--	1,399	40%	365	49%
Non-Hispanic	6,298,105	49%	--	--	146,030	9%	--	--	2,096	60%	385	51%
Veterans	1,402,876		NOT AVAILABLE						3,351		NOT AVAILABLE	
Race												
Asian/Pacific Islander	7,148	1%	--	--					104	3%	--	--
Black	151,154	11%	--	--					1,000	30%	--	--
Native	14,371	1%	--	--					100	3%	--	--
White	1,174,500	84%	--	--					2,009	60%	--	--
Other/Multi-Racial	55,703	4%	--	--					138	4%	--	--
Ethnicity												
Hispanic	263,369	19%	--	--					544	16%	--	--
Non-Hispanic	1,139,507	81%	--	--					2,807	84%	--	--

Sources:
[1] American Community Survey (ACS) 2015-2019 5-yr estimates
[2] Point-In-Time (PIT) 2021 data
† Sum of all reported data

Note:
- Race estimates of individuals in families with children are based on the race of the householder.
- Youth counts from the ACS data are rollups of race estimates of the number of households with householders under 25 years old, a proxy for unaccompanied youth. Youth counts from the PIT data are estimates of the number of unaccompanied youth and parenting persons under 25 years old.
- CoC's that are missing demographic data, such as age or race, for a portion of the households in their PIT Count are required by HUD to extrapolate to account for and report on their demographic characteristics.

Methodology Notes

Definition and Data Sources for Homelessness

The number of people experiencing homelessness represented in this tool is drawn from the 2021 Point-In-Time (PIT) Count data reported in the Annual Homeless Assessment Report (AHAR) to the U.S Congress. PIT Counts are unduplicated 1-night estimates of sheltered and unsheltered homeless populations conducted by CoCs nationwide during the last week of January each year.

People who are experiencing **sheltered homelessness** are defined as "an individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangement (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)," as defined at 24 CFR 578.3 of the Homeless Definition Final Rule.

People who are experiencing **unsheltered homelessness** are defined as "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, airport, or camping ground," as defined at 24 CFR 578.3 of the Homeless Definition Final Rule.

For more information on homelessness definitions, see the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Defining Homeless Final Rule:

https://www.hudexchange.info/resource/1928/hearth-defining-homeless-final-rule/

PIT Count data is not perfect- methodologies vary place to place and year to year; the unsheltered count is particularly challenging. While some CoC PIT data may include duplication of households, it is more likely that PIT data is an undercount, due to not all homeless households being identified. Staffing, weather, and geography all have an impact on the data. In most communities there remains a need for improved data accuracy and increased cultural competence in outreach and engagement.

Nevertheless, PIT Count Data is an important indicator to consider, and our best available estimate of rates of homelessness in a given community. More information on the PIT Count and AHAR can be found here:

https://www.hudexchange.info/homelessness-assistance/ahar/

CoC's that are missing demographic data, such as age or race, for a portion of the households in their PIT Count are required by HUD to extrapolate to account for and report on their demographic characteristics.
See the Point-in-Time Count Implementation Tools page for more information on extrapolation:

https://www.hudexchange.info/resource/4433/point-in-time-count-implementation-tools/

Unsheltered PIT Count Flexibility

In response to the COVID-19 pandemic, HUD encouraged communities to determine if they could safely conduct unsheltered PIT counts and, if they could not and conducted a count the year prior, waived the requirement to conduct a full unsheltered count in 2021. For communities that determined they could conduct unsheltered PIT counts, HUD allowed greater flexibility in how communities conducted their counts and what data they collected, including allowing them to collect less data.

https://www.hudexchange.info/resource/6246/cpd-memo-availability-of-waivers-for-the-biennial-pointintime-count-of-unshelter

Definition and Data Sources for Poverty and Race

Individuals are counted as being in poverty if they are part of a household whose total annual income is less than the poverty threshold. Threshold levels are set by household size, but are not adjusted by location. For this reason, the impact of poverty on housing affordability varies from community to community. For more information on how poverty is measured, see below:

https://www.census.gov/topics/income-poverty/poverty/about.html

The racial distributions of all people and of those living in poverty are sourced from the American Community Survey (ACS) 2015-2019 5-year estimates. Tract estimates were pulled from the census TIGER data found at the link below. For this analysis, the following tables were used:
• ACS2019_RACE_tract.csv
• ACS2019_FAMILY_HOUSEHOLD_tract.csv
• ACS2019_ETHNICITY_tract.csv
• ACS2019_AGE_tract.csv
• ACS2019_VETERAN_tract.csv
• ACS2019_POVERTY_tract.csv

Race data for individuals in families is based on the racial identity of the head of household. It is a proxy and may not accurately represent the racial identity of all household members.

The race categories used in this analysis may not accurately reflect the racial identities and lived experience of individuals. The availability of this data, however imperfect, provides a starting place to examine racial disparities in each CoC.

The CoC estimates were aggregated from Tract estimates, using a Tract-to-CoC crosswalk that was created with ArcGIS mapping software. For consistency (especially for statewide CoCs), the state estimates were aggregated in the same way and, as a result, may look slightly different from the state-level estimates available directly from the ACS.

Estimates of individuals "In Families with Children" are calculated from the number of families in the given category, by race, multiplied by the average family household size for the given category, by race. For example:

Black people in families with children = Number of black families with children * average black family household size

Note that tract-level, by-race data on Veterans in families with children are not available and are therefore not included.

Estimates of total youth come from a proxy variable capturing the number of households where the householder (an ACS term consistent with "head of household" in the PIT Count) is under 25 years old. This is a reasonable estimate of the number of unaccompanied youth, and is thus slightly more comparable to the homelessness numbers from the PIT, which include "unaccompanied youth and parenting persons under 25 years old."

More information about the ACS can be found here:
United State Census Bureau: Census Data

Updates from Version 1

There are three methodology updates since version 1:
- In Version 1, data were pulled at the Block Group (BG) level. Since not all data points are available at the BG level, county proportions were used in many cases. In Version 2, all data are pulled at the Tract level.

- In Version 1, the number of **individuals in families with children** may have been overestimates because the underlying variables did not distinguish families with children from families without children. In Version 2, the calculation of individuals in families with children makes this distinction (see above calculation). Though this change impacted the estimated number of individuals in families, it had a relatively small impact on the race breakouts of individuals in families. The results we see are that this approach tends to bring the degree to which families with children in poverty are White down (by 6% on average) and the degree to which those same families are Black and in the "other" category up (by 2% each on average). Native and Asian breakouts were stable. The differences were not tremendous and we believe this represents an improvement to the methodology.

- In Version 1, the number of **youth** reflected the number of people under 25 years old. In Version 2, to be more aligned to the PIT data which focus on unaccompanied and parenting youth, the number of **youth** reflects the number of households with the householder under 25 years old (see note on youth above).

Additional Data Available & Recommended Analysis

In order to understand whether racial disparities are impacting people's experience of homelessness in a given community, stakeholders should look at multiple data sources. This tool helps communities identify disparities in who experiences homelessness in their does not shed light on how the homeless service system is serving communities of color. Fortunately, other data sources and visualization tools are available to support taking the next step with that analysis.

Longitudinal Systems Analysis and Stella Performance

In 2018, the Longitudinal Systems Analysis (LSA) replaced the Annual Homeless Assessment Report (AHAR) as the primary mechanism for reporting demographic and system use data to HUD. The LSA includes data on households served in HMIS-participating emergency shelter, Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects. More information about the LSA can be found here:

https://www.hudexchange.info/homelessness-assistance/lsa/

Stella Performance (Stella P) is a visualization tool based on the LSA data, highlighting system performance for households that have been served in HMIS participating programs during the report period. Performance measures include:

- The length of time people spent homeless and in the service system (Days Homeless),
- Successfully exiting homelessness to permanent housing (Exits), and
- The degree to which households that have exited the homeless system return to the system (Returns).

Stella P supports CoCs in understanding how their homeless crisis response system is serving households that belong to difference race and ethnicity groups through the Population Group analysis for each of the above performance measures.

In addition, Stella P includes race and ethnicity distributions for households served in different project types in the Demographic Comparison section.

Stella P is available to CoCs through the HDX 2.0. More information about equity analysis with Stella P can be found here:

Stella P Race and Ethnicity Analysis Guide

Coordinated Entry: Access, Assessment, Prioritization, and Referral

CoCs are encouraged to conduct their own equity analyses of their coordinated entry (CE) systems. Some of these analyses suggest that CE assessments may be perpetuating racial and ethnic inequities. For more information:

Advancing Racial Equity through Assessments and Prioritization

Qualitative Data

To understand how race and ethnicity disparities are playing out in the homeless crisis response system and what to do about it, communities will need to look beyond the numbers. System planning and evaluation should include input from people with lived expertise of homelessness, members of race and ethnic groups that have been historically marginalized, and front-line staff who work directly with people experiencing homelessness. For guidance on qualitative analysis see:

Untapped Expertise - Inclusive Stakeholder Engagement

Engaging with People who have been Homeless

Additional Resources

Disaster Response Rehousing: Equity

Note:

The contents of this document, except when based on statutory or regulatory authority or law, do not have the force and effect of law and are not meant to bind the public in any way. This document is intended only to provide clarity to the public regarding existing requirements under the law or agency policies.

San Bernardino County
Strategic Plan to Solve Homelessness:
Working Document

TABLE OF CONTENTS

Best Practices

       Housing First

       Trauma-informed Design and Care

INTRODUCTION

On November 17, 2020, the Board of Supervisors (BoS) mandated that a Homeless Strategic Plan be developed to include needs and asset mapping, a Homeless Services gap Analysis, and the development of an outcomes framework. The BoS also mandated a data driven approach to reduce homelessness in the County of San Bernardino to identify improvements to the homeless services system, including both County and contract delivered services based on a shared outcomes framework, and also shape recommendations for homeless program funding priorities to be adopted by the BoS.

The San Bernardino County Strategic Plan to Solve Homelessness: Working Document (Working Document) provides local data trends and a gaps and needs analysis to help a wide-range of public and private stakeholders shape recommendations to implement innovative evidence-based, best, promising, and emerging practices to prevent and end homelessness.

Local Data Trends

The Working Document identifies local trends in data by focusing on the four primary county-wide data sources regarding homelessness, which includes Point-in-Time (PIT) Homeless Counts; Housing Inventory Charts (HICs); Homeless Management Information System (HMIS); and Coordinated Entry System (CES).

The **Point-in-Time (PIT) Homeless count** is a count of sheltered and unsheltered people experiencing homelessness on a single night during the last 10 days of January. HUD requires that Continuums of Care conduct an annual count of people experiencing homelessness who are sheltered in emergency shelter, transitional housing, and Safe Havens on a single night. Continuums of Care also must conduct a count of unsheltered people experiencing homelessness every other year (odd numbered years). San Bernardino County conducts an unsheltered count every year. Each count is planned, coordinated, and carried out locally.

The **Housing Inventory Count (HIC)** is a point-in-time inventory of provider programs within a Continuum of Care that provide beds and units dedicated to serve people experiencing homelessness (and, for permanent housing projects, where homeless at entry, per HUD's homeless definition), categorized by five Program Types: Emergency Shelter; Transitional Housing; Rapid Re-housing; Safe Haven; and Permanent Supportive Housing.

Homeless Management Information System (HMIS) is a locally administered, electronic data collection system that stores longitudinal personal-level information about persons who access the homeless service system. It is used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. Data collection includes universal data elements that support the unique identification of each person served (e.g., gender) and universal project stay elements that include prior living situation, project start date, project exit date, destination at exit for purposes of tracking and

outcome measurement, and housing move-in date. Data collection also includes program specific data elements that focus on income and sources, non-cash benefits, health insurance, physical disability, developmental disability, chronic health condition, HIV/AIDS, mental health problems, substance abuse, domestic violence, current living situation, date of engagement in project services, bed-night utilization, coordinated entry assessment, and coordinated entry key referral and placement events.

The local **Coordinated Entry System (CES)** facilitates the coordination and management of resources and services through the crisis response system**.** CES allows users to efficiently and effectively connect people to interventions that aim to rapidly resolve their housing crisis. CES works to connect the highest need, most vulnerable persons in the community to available housing and supportive services equitably. Collected data is used for prioritization determination, service eligibility, service request, and housing barrier data.

Other community data sources were also used to identify local data trends, which include street outreach and engagement data from the San Bernardino County Sheriff's Homeless Outreach and Proactive Enforcement (H.O.P.E.) Program and the San Bernardino County Department of Behavioral Health Innovative Remote Onsite Assistance Delivery (InnROADs) Program.

Other community data sources also included housing search data from Inland Housing Solutions.

Gaps and Needs Analysis

The Working Document also identifies gaps in the local homeless service system based on the local data trends, recommends program re-design and scaling strategies, and highlights opportunities for strengthening and expanding existing programs and creating new programs.

The gaps and needs analysis focuses on

- Street Outreach
- Morbidity/Mortality Prevention
- By-Name List
- Coordinated Entry System
- Homeless Management Information System
- Case Conferencing
- Housing Search
- Housing Navigation
- Emergency Shelter
- Transitional Housing
- Permanent Supportive Housing
- Rapid Rehousing
- Home-based Case Management

The gaps and needs analysis also focuses on various subpopulations including

- Seniors
- Unaccompanied Women
- Veterans
- Youth Age 8 – 24

STREET OUTREACH AND ENGAGEMENT

Local Data Trends

Local data trends regarding street outreach and engagement was largely based on data from San Bernardino County Sheriff's Homeless Outreach and Proactive Enforcement (H.O.P.E.) Program and the San Bernardino County Department of Behavioral Health Innovative Remote Onsite Assistance Delivery (InnROADs) Program.

The number of persons entered into their data system by jurisdiction are noted in the following table. Also listed is the number of persons counted as unsheltered in each jurisdiction during the January, 2020 PIT count.

The two jurisdictions that had the most persons entered by the HOPE Team and InnROADS program were the City of San Bernardino and Victorville, which also have the largest number of unsheltered persons counted during the 2020 PIT count.

Two jurisdictions that had a notable number of persons counted as unsheltered during the 2020 PIT count but did not have any persons entered by the HOPE Team and InnROADS program were Joshua Tree and Needles.

Table 1. Comparison of 2020 Outreach and PIT Count Data

Jurisdiction	2020 PIT Unsheltered Count	Hope Team - # of Persons Entered	Hope Team - % of Persons Entered	InnROADs Team - # of Persons Entered	InnROADs Team - % of Persons Entered	Fontana Out-Reach Team	Montclair Out-reach Team	SWAG Outreach - Rialto	SWAG Outreach - Chino	Redlands PD Outreach
Adelanto	11	3	0.2	3	0.3					
Apple Valley	24	49	3.4	19	1.8					
Barstow	78	11	0.8	41	3.9					
Big Bear Lake	12	0	0.0	8	0.8					
Bloomington	19	20	1.4	15	1.4					
Chino	31	3	0.2	5	0.5				✓	
Chino Hills	2	0	0.0	1	0.1					
Colton	136	54	3.8	22	2.1					
Crestline	22	1	0.1	0	0.0					
Fontana	116	15	1.0	26	2.4	✓				
Grand Terrace	5	11	0.8	3	0.3					
Helendale	0	1	0.1	0	0.0					
Hesperia	19	33	2.3	7	0.7					
Highland	78	65	4.5	21	2.0					
Joshua Tree	54	0	0.0	0	0.0					

City										
Lake Arrowhead	11	0	0.0	0	0.0					
Landers	2	0	0.0	0	0.0					
Loma Linda	27	37	2.6	10	0.9					
Lucerne Valley	0	0	0.0	2	0.2					
Mentone	0	5	0.3	0	0.0					
Montclair	54	9	0.6	31	2.9		✓			
Morongo	0	0	0.0	0	0.0					
Muscoy	24	0	0.0	0	0.0					
Needles	16	0	0.0	0	0.0					
Ontario	74	9	0.6	34	3.2					
Phelan	2	6	0.4	14	1.3					
Rancho Cucamonga	48	23	1.6	14	1.3					
Redlands	141	54	3.8	54	5.1					✓
Rialto	115	18	1.3	12	1.1				✓	
Running Springs	1	0	0.0	0	0.0					
San Bernardino	823	555	38.6	349	32.8					
Twentynine Palms	28	6	0.4	19	1.8					
Upland	44	0	0.0	16	1.5					
Victorville	298	410	28.5	281	26.4					
Yucaipa	13	19	1.3	18	1.7					
Yucca Valley	44	2	0.1	23	2.2					
Unknown	18	18	1.3	16	1.5					
Total:	**2390**	**1437**	**100**	**1064**	**100**					

Gaps and Needs Analysis

The next table notes that nearly three-fourths (72.6%) or 2,270 of the 3,125 homeless adults and children were counted during the January 2020 PIT count were within eight cities that include Barstow, Colton, Fontana, Ontario, Redlands, Rialto, San Bernardino, and Victorville. These eight cities accounted for three-fourths (74.5%) of the total unsheltered population as well as nearly three-fourths (70.2%) of persons counted in shelters and transitional housing including a safe haven program.

Of the eight cities, three have a dedicated street outreach team—Fontana; Redlands; and Rialto—as noted in the table above.

Also, noted in the table above is that nearly 60% of the persons that the HOPE Team and InnROADS program entered into their database were in the cities of San Bernardino and Victorville.

The remaining cities in the table below—Barstow; Colton; and Ontario—do not have a dedicated street outreach team, though the HOPE Team and InnROADS program are fairly active.

Jurisdictions in which there are not a dedicated street outreach team and the HOPE Team and InnROADS program are not fairly active or active include the following as noted in the table above:

- Joshua Tree;
- Needles; and
- Upland.

Table 2. Jurisdictions with Largest Number of Homeless Persons

Jurisdiction	Sheltered		Unsheltered	Total
	Shelter	**Transitional Hg**		
County	537	198	2390	3,125
Barstow	3	27	78	108
Colton	0	0	136	136
Fontana	0	0	116	116
Ontario	14	14	74	102
Redlands	45	0	141	186
Rialto	0	0	115	115
San Bernardino	183	50	823	1,056
Victorville	132	21	298	451
Total:	**377**	**112**	**1781**	**2,270**

Recommendations

Recommendation 1: Establish a Coordinated Outreach Resources and Engagement Program (CORE) consisting of all street outreach and engagement teams that would meet twice a week to ensure that street outreach and engagement is nimble enough to regularly engage homeless persons in a timely manner by appropriate street outreach teams.

All street outreach and engagement teams that receive funding from the County would be required to participate in the twice-a-week CORE meetings and all non-County funded street outreach and engagement teams would be strongly encouraged to participate.

All street outreach and engagement teams that receive funding from the County would also be required to use the County's Pre-By-Name List/By-Name List/Coordinated Entry System/ Homeless Management Information System software.

Recommendation 2: Advance the development of a By-Name List of all persons experiencing homelessness by subpopulation that includes a set of data points that are integrated into the Coordinated Entry System and the Homeless Management Information System.

Street outreach and engagement teams will focus on creating a real-time list of all persons experiencing homelessness in all jurisdictions, regions, and districts. Upon consent, street outreach and engagement teams will collect data points that include age, gender, race, ethnicity, chronic homelessness, veteran status, and other subpopulation information.

Without consent, outreach and engagement teams will collect data points that include location and best guess observed information concerning age, gender, race, ethnicity, and health needs.

Recommendation 3: Focus on ending homelessness for prioritized unsheltered subpopulations within cities and designated encampments

Ending homelessness for the more than 3,000 unsheltered and sheltered persons counted as homeless in 2020 is a daunting task and seemingly impossible all at once. Ending homelessness for various subpopulations such as seniors, veterans, women, and youth is not as daunting and possible.

For example, the number of seniors age 62+ counted as unsheltered in 2020 was 139. Ending homelessness for the 31 unsheltered seniors age 62+ who were women or the 29 who were veterans is even less daunting and possible. The same is true for the 28 unsheltered seniors age 62+ who were counted in the City of San Bernardino, 14 in Fontana, 11 in Redlands, and 10 in Victorville.

For example, the number of veterans counted as unsheltered in 2020 was 127. Ending homelessness for the 13 unsheltered veterans who were women and the 29 who were age 62+ is even less daunting and possible. The same is true for the 34 unsheltered veterans who were counted in the City of San Bernardino, 22 in Victorville, 8 in Redlands, 7 in Fontana, and the 6 counted in Twentynine Palms and Yucca Valley.

For example, the number of women counted as unsheltered in 2020 was 676. Ending homelessness for the 31 unsheltered women who were seniors age 62+ or the 13 who were veterans is even less daunting and possible. The same is true for the 220 unsheltered women who were counted in the City of San Bernardino, 99 in Victorville, 40 in Rialto, 39 in Fontana, and the 33 counted in Colton.

The number of unsheltered women counted during the 2018 – 2020 Point-in-Time homeless counts has increased significantly. The number of unsheltered women counted in 2018 was 368 and 676 in 2020 as noted in the chart below, which represents an increase of 308 unsheltered women or 84%.

Chart 1

Unaccompanied Women

Efforts to end homelessness among seniors age 62+ will include expanding current street outreach and engagement to include a SOS (Street Outreach for Seniors) Program that will provide crisis intervention, counseling, and advocacy for unsheltered seniors age 62+.

The SOS Program will respond to any calls for service involving seniors age 62+. The Program will include weekly outreach at senior centers and senior meal sites to help identify unsheltered seniors.

Chart 2

Unsheltered Seniors Age 62+

Year	Count
2018	94
2019	145
2020	173

MORBIDITY/MORTALITY PREVENTION

Local Data Trends

Recorded deaths by the Coroner's Office regrading persons who died while homeless for 2020 was <u>67</u> or nearly 6 persons per month or more than one person per week.

Gender

- Nearly three-fourths (73.1%) of persons who died homeless were male and more than one-fourth (26.9%) were female.

Table 1. Gender

Gender	#	%
Male	49	73.1
Female	18	26.9
Unknown	0	0.0
Total:	**67**	**100**

Age

- Nearly one-third (29.9%) of persons who died homeless were under the age of 40.

Table 2.

Age	#	%
18 – 24	2	3.0
25 – 29	3	4.5
30 – 39	15	22.4
40 – 49	12	17.9
50 – 61	20	29.8
62+	14	20.9
Unknown	1	1.5
Total:	**67**	**100**

- More than two-thirds (68.7%) of persons who died homeless were over the age of 40.

Chart 1

	Under 40	40+	Unknown
■ Number	20	46	1
■ Percent	29.8	68.7	1.5

■ Number ■ Percent
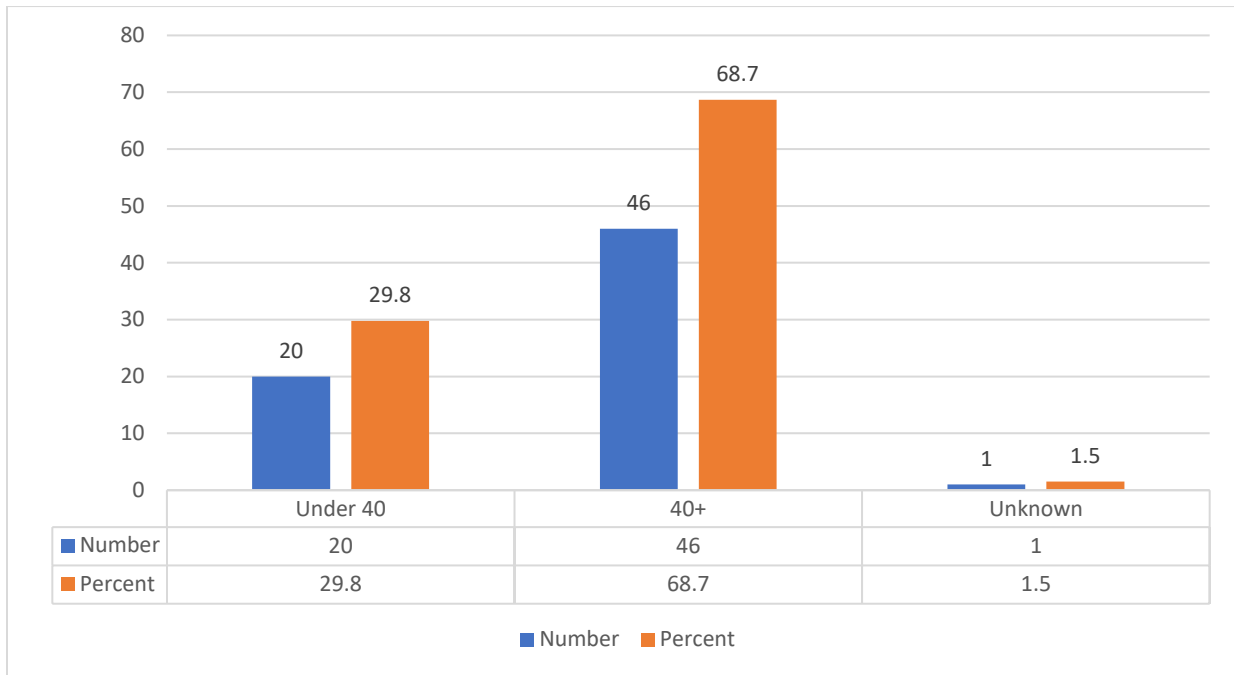
- More than half (50.7%) of persons who died homeless were over the age of 50.

Chart 2

	Under 50	50+	Unknown
■ Number	32	34	1
■ Percent	47.8	50.7	1.5

■ Number ■ Percent

- Nearly one-fourth (20.9%) of persons who died homeless were age 62+

14

Chart 3.

	Under 62	62+	Unknown
■ Number	52	14	1
■ Percent	77.6	20.9	1.5

■ Number ■ Percent
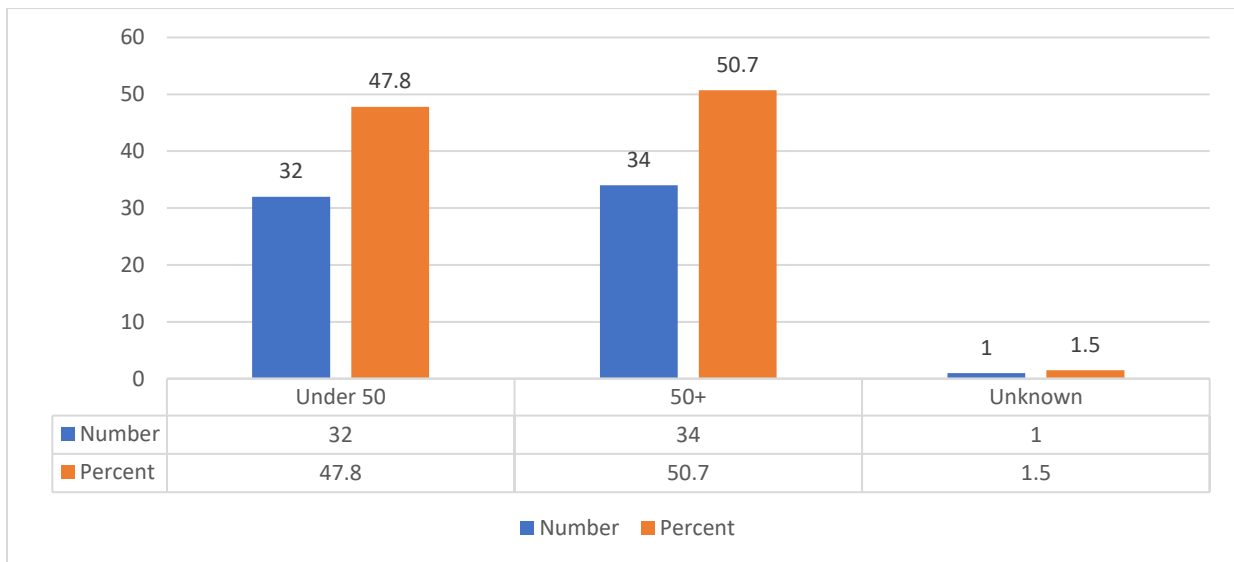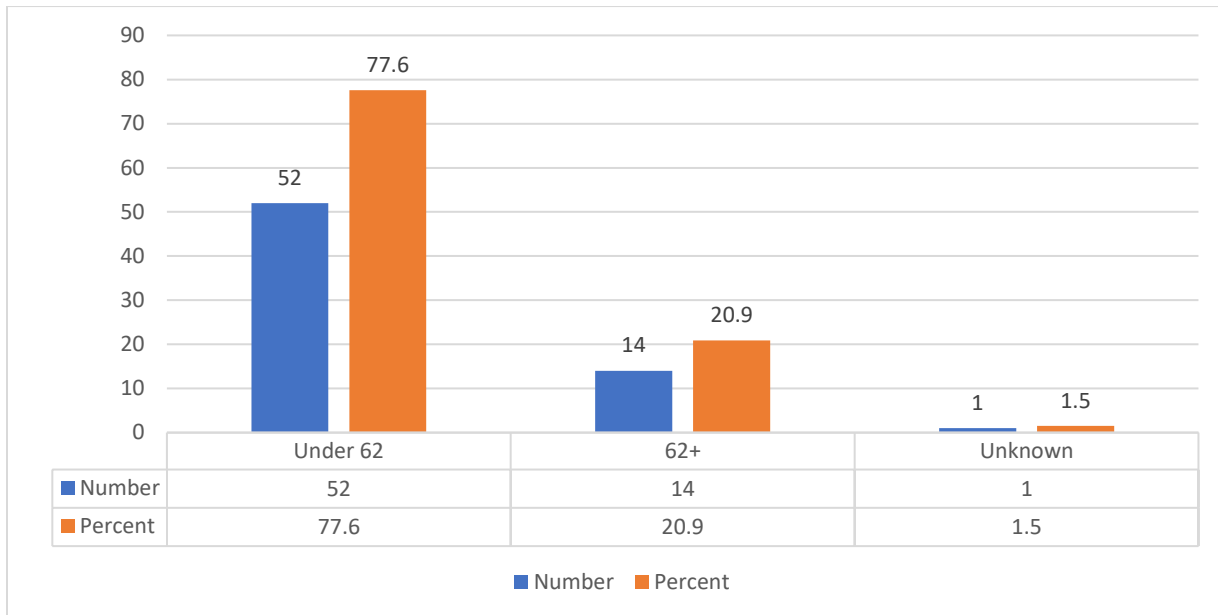
Manner of Death

- More than half (50.7%) of deaths were noted as either accident or traffic. Accident included carbon monoxide toxicity, drowning, drug overdose, electrocution, environmental exposure, hyperthermia, thermal injuries, and traffic and blunt force injuries to chest and head. Traffic included multiple blunt force injuries on streets, railroad tracks, and interstate.

- More than one-fourth (26.9%) of deaths were natural. Examples of natural manner of death include chronic drug abuse with hypertensive heart disease, congestive heart failure, cardiac arrest, acute diabetes, alcoholic liver disease, and bronchopneumonia.

Table 3.

Manner of Death	#	%
Accident	23	34.3
Homicide	2	3.0
Natural	18	26.9
Pending	11	16.4
Suicide	1	1.5
Traffic	11	16.4
Undetermined	1	1.5
Total:	**67**	**100**

City of Death

Table 4. City of Death

City of Death	#	%
Adelanto	1	1.5
Barstow	2	3.0
Chino	2	3.0
Colton	4	6.0
Fontana	6	9.0
Hesperia	3	4.5
Highland	1	1.5
Landers	1	1.5
Loma Linda	5	7.5
Montclair	1	1.5
Morongo Valley	1	1.5
Muscoy	2	3.0
Ontario	3	4.5
Phelan	1	1.5
Redlands	2	3.0
Rialto	1	1.5
San Bernardino	22	32.8
Upland	1	1.5
Victorville	8	11.9
Total:	**67**	**100**

Race/Ethnicity	#	%
African American or Black	9	13.4
Hispanic/Latino	23	34.3
White	35	52.2
Total:	**67**	**100**

- More than one-third (34.8%) of Hispanic/Latino were females; more than one-fourth (25.7%) of Whites were female; and 11.1% of African Americans were female.

Table 5.

Race/Ethnicity	Male		Female		Total	
	#	%	#	%	#	%
African American/Black	8	88.9	1	11.1	9	100
Hispanic/Latino	15	63.2	8	34.8	23	100
White	26	74.3	9	25.7	35	100
Total:	49	73.1	18	26.9	67	100

Gaps and Needs Analysis

The obvious gap and need to prevent persons dying while homeless is housing. There are gaps and needs in the interim.

More than one-fourth (26.9%) of persons died of natural causes that were likely complicated by wounds that needed immediate and on-going care. Wound care is difficult for unsheltered persons. Acute wounds can become chronic, non-healing wounds that can become very difficult to treat later and lead to serious illnesses and death.

More than half (50.7%) of persons who died homeless were over the age of 50 and nearly one-fourth (20.9%) of persons who died homeless were age 62+. Providing immediate wound care to unsheltered persons who are aging on the streets and growing increasingly ill or frail to recover from a physical illness or injury on the streets is needed. They may not be ill enough to be in a hospital or ill enough or not able to gain access to hospital care. Needed wound care can prevent death on the streets.

Aging on the streets exacerbates deteriorating health problems. As unsheltered seniors age, they are less resilient and less resistant to illness prior to, and during, their homelessness experience. Illnesses such cardiac conditions, cancer, diabetes, high blood pressure are compounded by other health problems and illnesses such as arthritis, colds, flu, hepatitis, mental health problems, pneumonia, respiratory problems, and seizures.

Prolonged exposure to homelessness, particularly during wet and cold winter months, has a significant negative effect on individuals that can result in death. Heavy rains cause flooding in areas where homeless persons sleep and cold weather can lead to hypothermia which occurs when the body gets cold and loses heat faster than the body can make it.

Blunt force injuries are a serious problem according to the coroner's office data. More than half (50.7%) of deaths were noted as either accident or traffic. Traffic deaths included multiple blunt force injuries on the streets.

Recommendations

Recommendations focus on enhancing and expanding Street Outreach and Engagement in San Bernardino County.

Street outreach and engagement includes building a personal connection with individuals, assessing their immediate needs a with a basic field needs assessment, and working to identify barriers that the individual must address and overcome to improve health status, social support networks, and end their housing crisis. Engagement involves continued multiple contacts with individuals living on the street and continued attempts during those contacts to develop and establish a rapport and trust that leads to a trusting relationship that can facilitate the development of a housing goal and plan as well as addressing the individuals medical, mental health and service needs.

Enhancing street outreach and engagement involves activities that not only solves people's homelessness but can save people's lives. A proactive approach is necessary to solve people's homelessness and to save people's lives, which includes not only engaging persons who are visibly homeless on the streets but those hidden as well.

Expanding street outreach and engagement to all areas of the county will help ensure that outreach workers will engage persons living in highly visible and hidden homeless encampments. Such visible and hidden persons are often the most vulnerable who have been languishing on the streets and prone to injury and death.

Treatment and care for people experiencing chronic homelessness should be the primary motivators for any intervention. As individuals with chronic patterns age, they will need more medical services and assistance with activities of daily living rather than behavioral health services. Symptoms of severe mental illness or substance abuse may become less acute, but people develop other severe chronic health conditions

Enhancing and expanding street outreach and engagement should be contingent upon the following recommendations:

Recommendation 1: Provide immediate health care

Providing immediate health care in collaboration with existing street outreach and engagement teams who have already established relationships with persons living unsheltered in tents, under tarps, in boxes, or wrapped in sleeping bags and blankets will likely help unsheltered persons be more receptive to health care. Collaboration with existing street outreach and engagement teams should include

- Having health care providers initially meet with unsheltered persons with existing street outreach and engagement teams;
- Having health care providers meet with unsheltered persons without existing street outreach and engagement teams once providers when safe and appropriate to do so;
- Having health care providers go to hard-to-reach places with existing street outreach and engagement teams.

Providing immediate health care to unsheltered persons who are too ill or frail to recover from a physical illness or injury on the streets but not ill enough to be in a hospital or ill enough or not able to gain access to hospital care can prevent death on the streets. Wound care is difficult for unsheltered persons. Acute wounds can become chronic, non-healing wounds that can become very difficult to treat later and lead to serious illnesses and death.

Recommendation 2: Eliminate barriers to health care

Eliminating barriers to health care in collaboration with existing street outreach and engagement teams who have already established relationships with unsheltered persons will likely encourage them to overcome barriers and be more receptive to health care.

Barriers are well documented and include:

- Disengagement from public systems of care;
- Distrust of public systems of care;
- Reluctance to apply for services and benefits;
- Low literacy levels;
- Language barriers;
- Mental health conditions;
- Physical disabilities;
- Lack of documentation including identification cards;
- Distance to service and benefit sites; and
- Lack of transportation.

Successful strategies to eliminate barriers to health care for unsheltered persons are also well documented and include:

- Long-term periods of street outreach and engagement to build rapport and trust;
- Provide immediate health care first by meeting them where they are;
- Educating them about the overall process to obtain on-going health care;
- Ensure transportation to health care sites providing enrollment and care; and

- On-going outreach and engagement to help encourage continuing engagement with health care services.

Recommendation 3: Direct specialized services to unsheltered seniors

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Directing specialized services to unsheltered seniors (age 55+) in collaboration with existing street outreach and engagement teams who have already established relationships with unsheltered persons will also likely encourage them to overcome barriers and be more receptive to health care.

Aging on the streets exacerbates deteriorating health problems. As unsheltered seniors age, they are less resilient and less resistant to illness prior to, and during, their homelessness experience. Illnesses such cardiac conditions, cancer, diabetes, high blood pressure are compounded by other health problems and illnesses such as arthritis, colds, flu, hepatitis, mental health problems, pneumonia, respiratory problems, and seizures.

Successful strategies to direct specialized services for unsheltered seniors include those in the previous recommendation:

- Long-term periods of street outreach and engagement to build rapport and trust;
- Provide immediate health care first by meeting them where they are;
- Educating them about the overall process to obtain on-going health care;
- Ensure transportation to health care sites providing enrollment and care; and
- On-going outreach and engagement to help encourage continuing engagement with health care services.

Recommendation 4: Develop a county-wide warning system

Data from the Coroner's Division of the San Bernardino County Sheriff's Department revealed that more than half of the homeless persons brought to the county morgue died of chronic drug abuse with hypertensive heart disease, congestive heart failure, cardiac arrest, acute diabetes, alcoholic liver disease, and bronchopneumonia.

However, nearly one-fourth of persons died by accidents that included carbon monoxide toxicity, drowning, drug overdose, electrocution, environmental exposure, hyperthermia, thermal injuries, and traffic and blunt force injuries to chest and head. Traffic included multiple blunt force injuries on streets, railroad tracks, and interstate.

Blunt force injuries in other parts of the state and country are a serious problem according to media reports. Dumpster-related deaths are an increasing problem. While sleeping, people are collected by garbage or recycling trucks and compacted along with the trash.

A warning system should be developed and include:

- Notices to waste management services that people may be sleeping in dumpsters, boxes, and tents and that precautions should be taken to prevent loss of life or injury including workers checking every bin, box, and tent before compacting materials and companies posting warnings on bins;
- Warnings should be posted along rivers, creeks, channels and other places where flooding may occur, and verbal warnings should be given to people sleeping in such places, when flash flood warnings are issued by weather services;
- Working with companies that use railroad tracks to ensure that tracks are regularly patrolled and warning signage is posted;
- Warning homeless persons sleeping near tracks that trains can be deceptively slow and quiet and that tracks seemingly unused are often used infrequently.

Recommendation 5: Provide additional emergency shelter beds during winter weather months

The reason for the additional beds is to ensure that homeless adults and children are not exposed to the harsh elements during the winter months.

Prolonged exposure to homelessness, particularly during wet and cold winter months, has a significant negative effect on individuals that can result in death. Homelessness is much more than the absence of physical housing; it is a tension-filled, trauma-filled, and treacherous-filled condition that too often results in fatalities. Heavy rains cause flooding in areas where homeless persons sleep and cold weather can lead to hypothermia which occurs when the body gets cold and loses heat faster than the body can make it.

Additional emergency shelter beds should be strategically located throughout the county in low barrier shelter settings. Low barriers should ensure that persons are not denied access to beds because of having to 1) be separated from a partner; 2) leave their pets; and 3) leave their belongings because of the lack of storage space.

On-site services should include emergency health care along with access to showers, bathrooms, meals, and beds. Case management should be made available but not mandatory for participants and include a trauma-informed approach.

The shelter provider should be required to participate in the Homeless Management Information System (HMIS) and the local Coordinated Entry System, which is embedded in HMIS.

By-Name List

Recommendation 1: Establish an actionable, real-time By-Name List of all local persons experiencing homelessness that is supported by robust street outreach and engagement and case conferencing.

Establishing a By-Name List is necessary to help accurately reflect the number of persons experiencing homelessness county-wide or within a given region, district, city, community, and encampment. A By-Name List is also necessary to help accurately reflect the number of persons within a given subpopulation such as veterans, women, or youth.

The By-Name List will be supported by robust street outreach and engagement. Initial engagement will focus on entering all persons living homeless in the local By-Name List, which will result in a comprehensive real-time list of persons experiencing homelessness.

Upon consent, street outreach and engagement teams will collect data points that include age, gender, race, ethnicity, chronic homelessness, veteran status, and other subpopulation information about persons living homeless. Upon consent, street outreach and engagement teams will also update individual information each time they come into contact with an individual.

Recommendation 2: Conduct an outreach/entry 'blitz' or Registry Week where all homeless individuals in targeted areas are entered into the By-Name List upon consent.

An outreach/entry blitz or Registry Week will be conducted at least annually. The blitz will focus on targeted areas. Outreach and engagement teams will engage all homeless persons and collect the data points noted above and update the information pertaining to those persons already entered in the By-Name List upon consent.

The local By-Name List will be embedded into the local Coordinated Entry System (CES) and the local Homeless Management Information System (HMIS). The local CES and HMIS are designed to gain the necessary information to successfully navigate homeless persons through the local crisis response system to obtain and maintain appropriate permanent housing.

The By-Name List will also be supported by robust case conferencing. All agencies and teams involved in the process of temporarily and/or permanently housing will participate in case conferencing. Consent, a release of information that covers as many agencies as possible, will allow for effective data sharing and case conferencing.

COORDINATED ENTRY SYSTEM

Local Data Trends

There were 1,977 persons (entries) in the Coordinated Entry System (CES) in 2020.

Gender

As noted in the chart below,

- More than half (55%) or 1,091 persons were female; and
- Less than half (45%) or 881 persons were male.

Chart 1.

Gender

	Female	Male	Transgender	Missing Data
Total Number	1,091	881	4	1
Percent	55%	45%	0%	0%
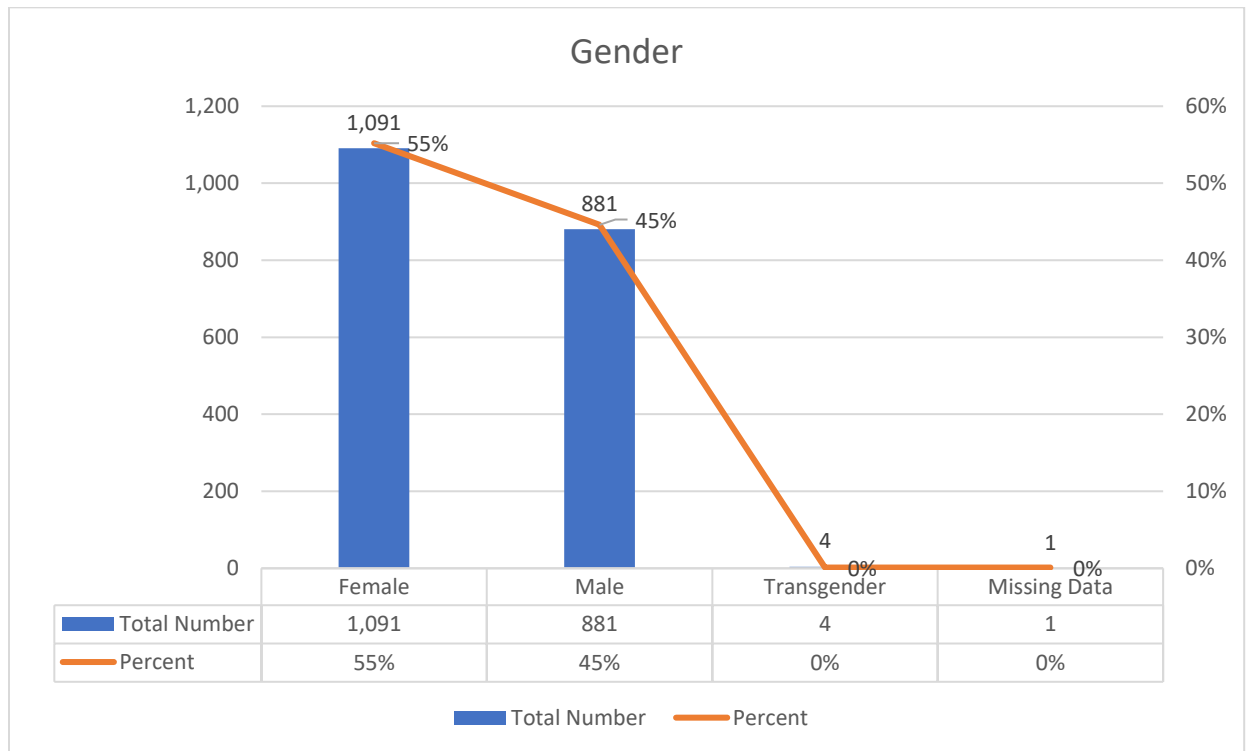
Age

Of the 1,977 persons

- 5% or 97 were youth age 18 – 24; and
- 13% or 264 were age 62+.

More than one-third (38%) were age 50+ and nearly two-thirds (62%) were age 18 – 49.

Chart 2

Age

	18 - 24	25 - 39	40 - 49	50 - 61	62+
Totall Number	97	684	443	489	264
Percent	5%	35%	22%	25%	13%
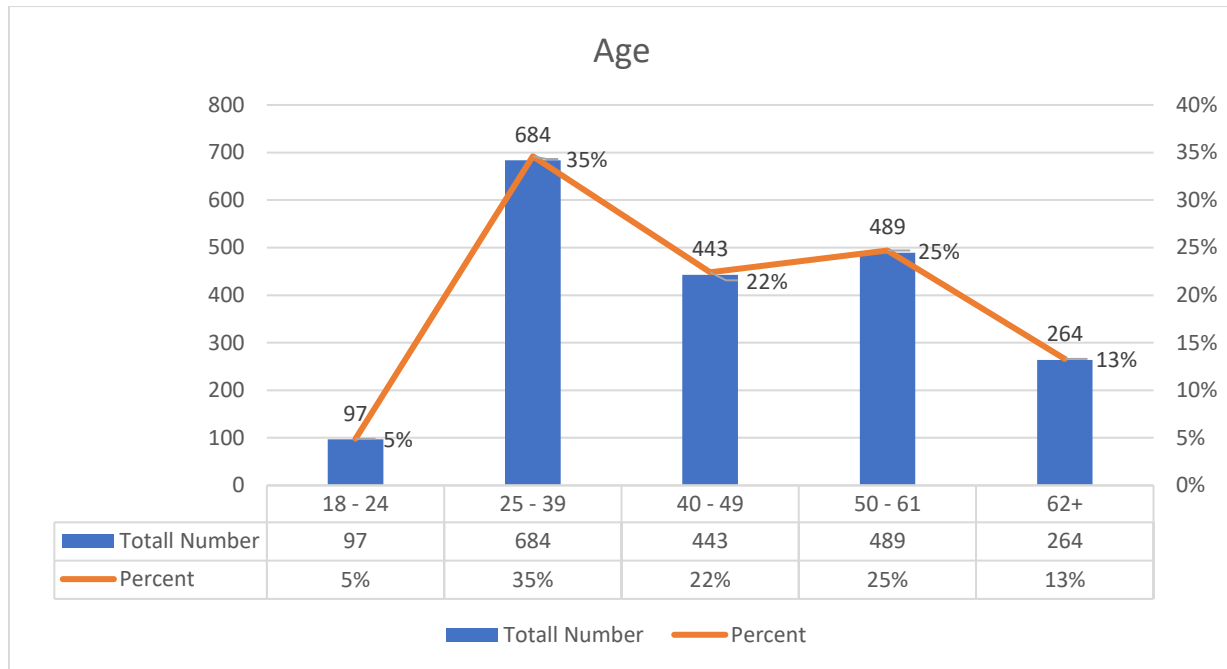
Race

Blacks or African Americans and Whites made up 93.2% of the 1,977 persons. As noted in the following table

- More than one-third (33.6%) or 733 were Black or African American; and
- More than half (56.1%) or 1,109 were White.

Table 1.

Race	Number	Percent
American Indian or Alaska Native	32	1.6
Asian	11	0.6
Black or African American	733	37.1
Native Hawaiian or Other Pacific Islander	19	1.0
White	1,109	56.1
Other	37	1.9
Unknown	36	1.7
Total:	**1,977**	**100**

Ethnicity

Of the 1,977 persons, as noted in the following chart,

- 239 or 24.5% were Hispanic/Latino;
- 736 or 75.3% were non-Hispanic/Latino;
- 2 or 0.2% were unknown.

Chart 3.

Ethnicity

	Hispanic/Latino	Non-Hispanic/Latino	Unknown
Total Number	606	1,364	7
Percent	31%	69%	0%
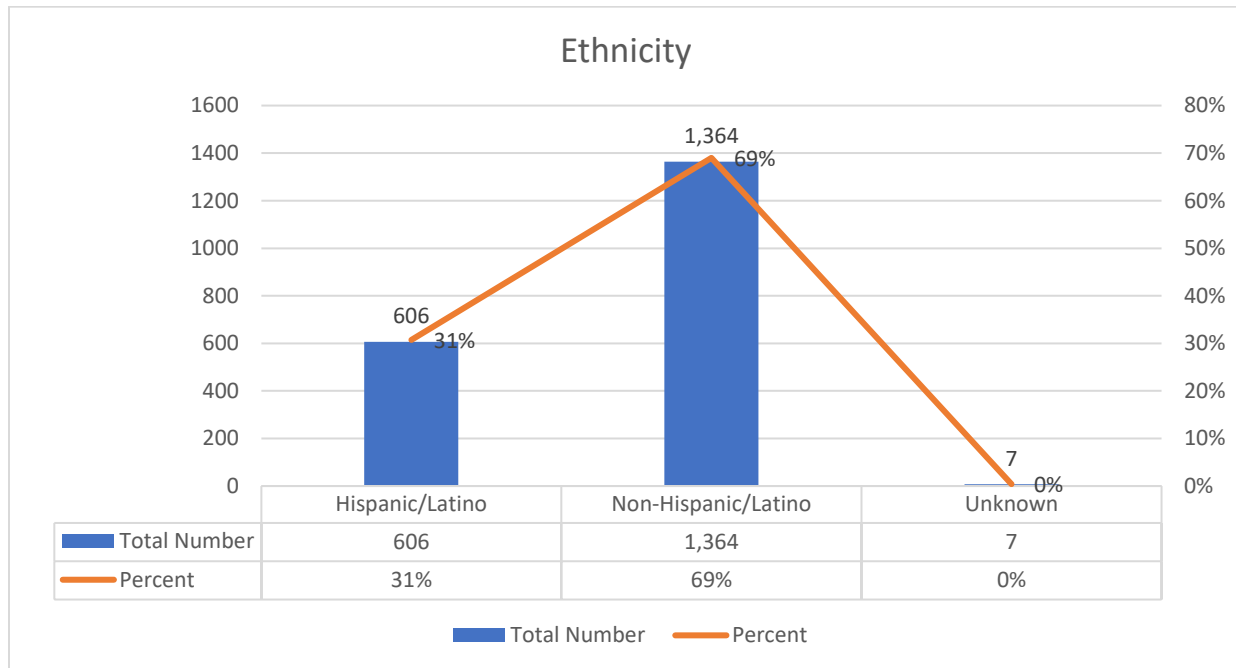
Veteran Status

- 285 persons or 14.4% were veterans.

Priority and Acuity Score

The chart below groups the 1,977 persons in the Coordinated Entry System (CES) in 2020 by intervention. A score of 0 – 3 means no housing intervention; 4 – 7 means an assessment for Rapid Re-Housing; and 8+ means an assessment for Permanent Supportive Housing/Housing First.

- More than one-half (59%) or 1,170 persons were assessed for Permanent Supportive Housing/Housing First;
- More than one-third (34%) or 679 persons were assessed for Rapid re-housing.

Chart 4.
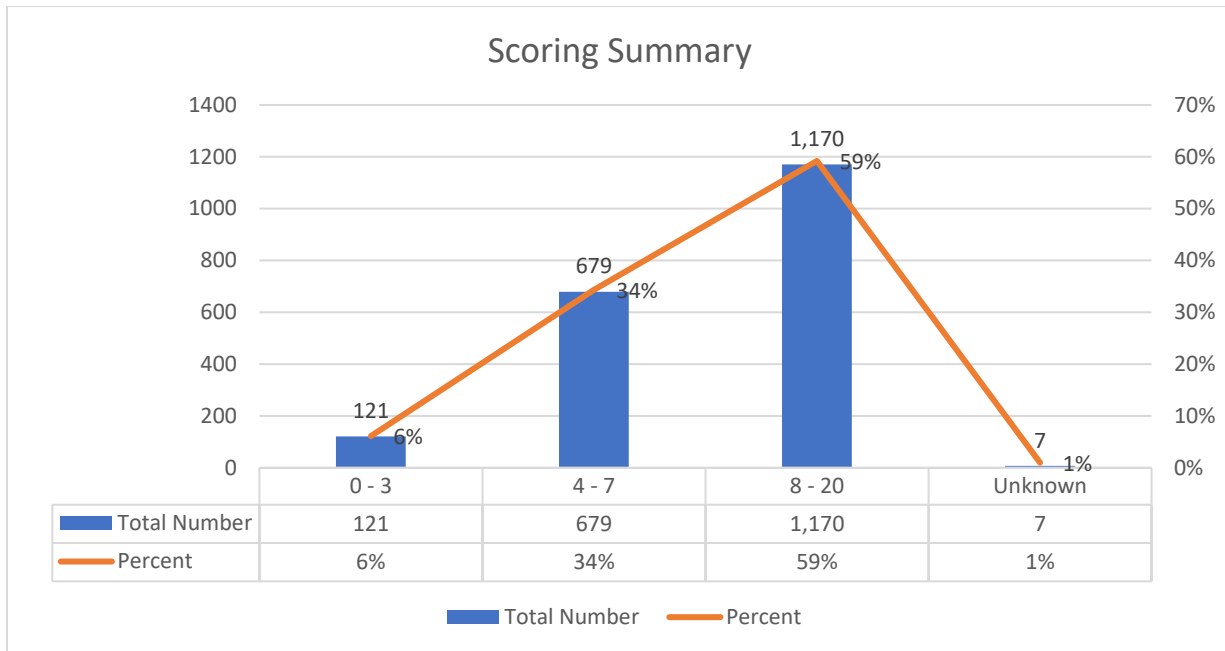
Scoring Summary

	0 - 3	4 - 7	8 - 20	Unknown
Total Number	121	679	1,170	7
Percent	6%	34%	59%	1%

The following table lists each priority score and the related number of persons and percent.

Table 2.

Priority Score	Number of Persons	Percent
1	18	1
2	38	2
3	65	3
4	118	6
5	160	8
6	197	10
7	204	10
8	218	11
9	211	11
10	179	9
11	182	9
12	152	8
13	85	4
14	63	3
15	34	2
16	33	2
17	9	1
18	2	0

27

19	0	0
20	2	0
Unknown	7	0
Total:	**1,977**	**100**

Gaps and Needs Analysis

Destination at Exit

The chart below shows the number and percentage of persons whose destination at exit was

- **Permanent housing for 339 persons or 17%,** which includes host homes; long-term care facility or nursing home; housing owned by client; rental housing including rapid re-housing and other rental subsidy assistance; staying or living with family, permanent tenure (e.g., room, apartment or house); and staying or living with friends, permanent tenure; and

- **Temporary housing for 224 persons or 12%**, which includes emergency shelter; hotel or motel paid for with an emergency shelter voucher; hotel or motel paid for without an emergency shelter voucher; jail, prison, or juvenile detention facility; psychiatric hospital or other psychiatric facility; residential project or halfway house with no homeless criteria; safe haven; staying or living with family, temporary tenure (e.g., room, apartment or house); staying or living with friends, temporary tenure (e.g., room, apartment or house); hospital or other residential non-psychiatric medical facility; substance abuse treatment or detox center; and transitional housing for homeless persons (including homeless youth).

The number and percentage of persons whose destination at exit was a place not meant for habitation such as a vehicle, abandoned building, or anywhere outside was 209 or 11%.

The number and percentage of persons whose destination at exit was noted as Other was 113 or 6%. Other includes client doesn't know, client refused, data not collected, deceased, ad no exit interview completed.

Chart 5.

Destination at Exit

	Place not Meant for Habitation	Temporary Housing	Permanent Housing	Other	Unknown
Total Number	209	224	339	113	1,092
Percent	11%	12%	17%	6%	55%
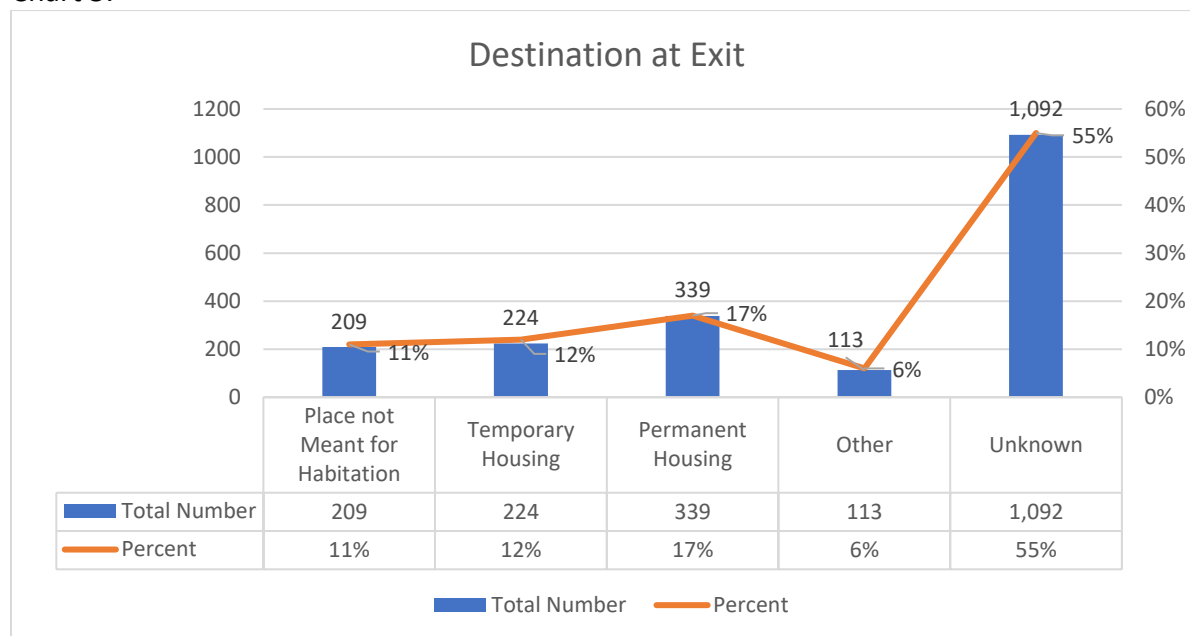
Gaps and Needs Analysis

Coordinated Entry System: Background and Best Practices

Background

HUD developed and outlined a framework for Coordinated Entry Systems (CES), which was issued in 2017 with an implementation date of January 2018. 17-01CPDN.PDF (hud.gov)

Collaborative Applicants, acting as CES Lead Agencies, ensured that the framework was implemented on time.

The framework underlined the initial CES requirements described in the CoC Interim Rule (24 CFRR 578.7(a) (8) and 24 CFR 578.3) in 2012, which are known as the initial and minimum CES requirements and components.

The framework also described the additional requirements, key objectives, and responsibilities, which focus on the many aspects of CES planning, management, operations, monitoring, and evaluation that were not explicitly identified in existing HUD regulations and notices, but critical for effective CES design and management. Coordinated Entry Self-Assessment - HUD Exchange

Minimum requirements and components

HUD's CoC Program Interim Rule has established minimum requirements and components for all CES. As per the requirements of 24 CFR 567 and 24 CFR 578 a CoC's CES must:

1. Cover the entire geographic area claimed by the CoC;
2. Be easily accessed by individuals and families seeking housing or services;
3. Be well advertised;
4. Include a comprehensive and standardized assessment tool;
5. Provide an initial, comprehensive assessment of individuals and families for housing and services; and
6. Include a specific policy to guide the operation of the centralized or coordinated assessment system to address the needs of individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, human trafficking, or stalking, but who are seeking shelter or services from non-victim specific providers.

Additional Requirements, Key Objectives and Responsibilities

1. Oversee a consistent implementation of core system policies and procedures by providing technical assistance to collaborative partners and other relevant partners including workflows and data collection efforts;
2. Identify and implement evidence-based, best, promising, and emerging practices to improve the Coordinated Entry System;
3. Provide training that covers coordinated entry system requirements to collaborative partners and other relevant partners;
4. Implement and lead a continuous quality improvement process throughout the Coordinated Entry System by identifying gaps and barriers in the system with collaborative partners;
5. Guide Coordinated Entry System improvement efforts with collaborative partners by focusing on closing gaps and removing barriers;
6. Monitor Coordinated Entry System performance using system data and feedback form collaborative partners to improve the system's overall efficiency and effectiveness;
7. Monitor Coordinated Entry System performance using system data and feedback form collaborative partners to improve the system's overall efficiency and effectiveness for various subpopulations including seniors, veterans, unaccompanied women, and youth;
8. Evaluate Coordinated Entry System performance using system data and feedback form collaborative partners to ensure gender, racial, and ethnic equality;
9. Perform ongoing Coordinated Entry System program assessments including the documentation of the performance and challenges of the coordinated access system for review and input by collaborative partners;
10. Ensure adherence to all internal policies, procedures and practices, and compliance with all U.S. Department of Housing and Urban Development (HUD) and State of California regulatory requirements;
11. Attend all appropriate federal and state technical assistance webinars regarding coordinated entry systems;
12. Monitor entries to ensure consistency of data entry;
13. Maintain required records accurately, comprehensively and in a timely manner, including data entry into the Homeless Management Information System;

14. Ensure the confidentiality of all client information;
15. Coordinate twice-a-week street outreach and engagement meetings by providing appropriate updated reports;
16. Coordinate all case-conferencing meetings by providing appropriate updated reports;
17. Represent the CoC with key external constituency groups, including community collaborations, other governmental agencies, and private organizations to enhance services integration for homeless populations;
18. Lead ongoing meetings of collaborative partners to promote regular ongoing opportunities for all sub-recipients to give feedback, improve processes and leverage residential and non-residential resources.

Best Practices

1. **Multiple Access Points**

   - Walk-in locations - Households in need of assistance are able to walk in to any of the approved access point locations and receive assistance;
   - Phone-based system - Individuals and families experiencing a housing crisis should contact 2-1-1. A 2-1-1 should be a free, confidential, phone service and searchable on-line database, that provides information on emergency assistance and community resources, including homeless prevention resources as well as location and hours of agencies trained to assist households experiencing homelessness and in need of permanent housing, known as Access Points. All CES Access Point locations are accessible by phone and callers can complete an assessment without having to physically be present at the location; and
   - Street Outreach: Street outreach services are available to connect with households in the geographic location where individuals and families experiencing homelessness reside, including streets, parks, campsites, abandoned buildings, cars, other places not meant for human habitation, or those in more rural areas where physical Access Points are limited. Street-based outreach teams act as mobile Access Points and have the capability of conducting assessments and assess their need for services in the same way as those who connect to services via phone or walk-in.

2. **CES Triage Tools**

CES Triage Tools should be designed to identify experiences and vulnerabilities of the following populations:

   - Single: Adults 25 years of age or older, not pregnant, with no children under the age of 18;
   - Family: Pregnant women; Men, Women, or Couples with Children under the age of 18; and

- Transition Age Youth 18-24 (TAY): Youth, not pregnant, no children, between the ages of 18-24

3. Community Queue

Once a CES Triage Tool is completed and a household is enrolled in CES, the household should be placed in a Community Queue in HMIS. Enrollment in the Community Queue requires an additional step of completing an assessment and referring the households to the Community Queue after enrollment in CES. The CES uses the Community Queue in identifying prioritized households and matching to available resources.

4. Match and Referral

When a permanent housing resource becomes available, CES will identify the next eligible households on the Community Queue based on CES community prioritization criteria and make a 1:1 referral for that opening based on:

- Appropriate / Best match: Client reported experience aligns with program eligibility;
- Client choice: CES emphasizes client choice in all referrals. When no specific preference is indicated, clients are referred to the most restrictive or most abundant housing resource that they are eligible for. For example, a Veteran eligible for Veterans Affairs Supportive Housing (VASH) most likely would be matched to that program, rather than one utilizing CoC funding.

5. Case Conferencing

Case conferencing is a targeted discussion where homeless response providers including street outreach, CES, and housing providers, work together in meeting the needs of the most vulnerable households experiencing homelessness across the CoC geographic region. These households are identified by the CES team from the prioritized Community Queue (CQ). The discussion of households should include:

- Current engagement with the identified provider/s;
- Current steps that are being taken to resolve their homelessness;
- Description of current barriers to housing;
- Diversion strategies have been utilized, etc.;
- Service provider collaboration and support; and
- Specific housing needs/ interventions to support the household's on-going stability.

6. Program Check-in

Program check-ins provide additional support to housing providers who have received CES referrals for their resources, while ensuring that households referred through CES are 'kept in

view' until lease up. Program check-ins should be a collaborative meeting that discusses the following:

- Current status of open referrals;
- Barriers to project enrollment;
- Reviewing data quality in Clarity;
- Finalizing move-in dates for CES referred households; and
- Transfers/move-outs/vacancies.

7. Referral Policy

Housing programs that receive CoC/ESG and some state and local funding are required under their funding awards, to receive referrals through the CoC's CES as the only referral source from which to fill program vacancies.

The referral policy applies should apply to all housing referrals made through CES in the CoC:

- All referrals are made based on a household's vulnerability/prioritization and case conferencing discussions;
- Referrals are prioritized from the Community Queue in the following order:
  - Chronic Homeless;
  - Current Living Situation;
  - Most Needs;
  - Sub-population; and
  - Housing Intervention

The referral policy should also apply

- CES staff should notify both the housing provider and service providers associated with the referred household of a referral both via email and in HMIS.
- The housing provider must make initial contact with the household within 2 business days of receiving the referral, using all contact information listed in HMIS. The housing provider is required at minimum to make three (3) unique attempts to reach the household within five (5) business days of receiving the referral.
- Supporting the need for community collaboration, housing providers must also contact the service provider/s currently working with the household and listed on the referral. The housing provider is required at minimum to make three (3) unique attempts to reach the service provider/s connected with the referred household within five (5) business days of receiving the referral.
- All attempts to contact referred households and service providers must be documented in Clarity. All contact and attempts to contact household and service providers should be documented in the Clarity referral notes section.

- Supportive service providers connected to referred households are encouraged to contact housing providers on behalf of the household in an effort to coordinate efforts and secure housing resources as quickly as possible.
- If a household cannot be contacted, or if the household is not interested in the available housing resource, the housing provider must decline the referral in HMIS and request an additional referral and move to the next client referral sent.
- Once a household is accepted into a program, the housing provider should enroll the household into their project in HMIS and schedule a move-in date with the appropriate entities.

8. Accepting or Rejecting Referrals - Households

When a household accepts a referral for either a RRH, TH/RRH joint component or PSH, the agency who enrolled the household into CES will help the household navigate the housing process for submitting completed applications that comply with the housing program's eligibility requirements and facilitate a "warm" introduction between the household and the housing program provider.

For participants who accept a referral while in the shelter, shelter staff should also assist the household with housing navigation. In the event a household turns down a housing referral, Access Point, Shelter Provider and/or Street Outreach staff are responsible for communicating with the household next steps in the CES process including a possible delay in referrals to subsequent housing resources.

9. Accepting or Rejecting Referrals - Providers

Housing programs need to use a Housing First orientation. This includes having minimal barriers to program entry and accepting any referred adult and/or family who meet the program's eligibility criteria regardless of challenges the household may have such as health or behavioral health issues, little or no income, criminal justice histories, and others. However, programs may decline a household referred by CES if they are ineligible to participate in the program or accepting the client would pose a safety concern.

Whenever a program rejects a referral, the program must decline the referral in HMIS and include the reason for denial. The rejection must also be communicated verbally and in writing to the client in accordance with the housing providers policies and procedures including a process for appealing a denial decision.

10. Discrimination Complaints

CES participants have the right to file discrimination complaints. All locations where persons are likely to access or attempt to access CES (such as Access Points, emergency shelter and street outreach) will include signs or brochures displayed in prominent locations informing participants of their right to file a discrimination complaint and containing the contact

information needed to file a discrimination complaint. The requirements associated with filing a discrimination complaint, if any, will be included on the signs or brochures.

When a discrimination complaint is received, the CES Director, or their designee, will complete an investigation of the complaint within 60 days by attempting to contact and interview a reasonable number of persons who are likely to have relevant knowledge, and by attempting to collect any documents that are likely to be relevant to the investigation.

Within 30 days after completing the investigation, the CES Director, or their designee, will develop a written report of the investigation's findings, including the investigator's opinion about whether inappropriate discrimination occurred and the action(s) recommended by the investigator to prevent discrimination from occurring in the future.

The findings of the investigation will be shared with the CoC and in alignment with CoC policy and procedures. If appropriate, the investigator may recommend that the complainant be re-assessed or re-prioritized for housing or services. The report will be kept on file in accordance with agency protocol.

11. Affirmative Marketing and Advertising Strategy

CES processes are widely marketed and advertised to ensure all households have fair and equal access regardless of the location or method by which they access the system.
The CoC will affirmatively market CES as the Access Point for available housing and supportive services to eligible persons who are least likely to apply in the absence of special outreach, as determined through a regular review of the housing market area and the populations currently being served to identify underserved populations. This may include an evaluation of HMIS service data, the Point-in-Time Count, and region's demographics and census data. Marketing materials will clearly convey the location of Access Points and the populations that may be served at those locations.

For identified populations, marketing will be conducted at least annually, and may use the following media:

- Brochures / Flyers;
- Announcements at Community Events;
- Newspapers / Magazines;
- Radio;
- Television-PSAs;
- Social Media / Websites; and
- Direct outreach / Peer Outreach

CES marketing campaigns will be designed to ensure that the CES process is available to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status,

disability, actual or perceived sexual orientation, gender identify, or marital status. Similarly, CES marketing campaigns will be designed to ensure that people in different populations and subpopulations in the CoC's geographic area – including people experiencing chronic homelessness, veterans, families with children, youth, and survivors of domestic violence – have fair and equal access to CES.

The CES staff engages mainstream partners and supporting agencies with whom they conduct outreach, education, referrals, and training to help market and advertise CES to eligible households across the Continuum. Scheduled meetings, trainings and capacity building sessions are planned.

12. Trainings

Training opportunities should be provided at least once annually to organizations and/or staff people at organizations that serve as access points or administer assessments. The purpose of the training is to provide all staff who administer assessments with access to materials that clearly describe the methods by which assessments are to be conducted, with fidelity to the CES's written policies and procedures.

HMIS Policy and Procedures require that users be trained in order to access HMIS. That training must be authorized by a prospective user's HMIS Agency Administrator, and then scheduled for project analysis. Once trained, a user receives an HMIS license, username, and password. In order to access CES, users must complete additional training modules tailored to their intended use of the system.

13. Evaluation

At least annually, a CES team, in coordination with a CES Workgroup, should consult with participating projects, and with a random sample of project participants, to evaluate the intake, assessment, and referral processes associated with CES.

Feedback should be solicited addressing the quality and effectiveness of the entire CES experience for both participating projects and for households. All feedback collected should be private and protected as confidential information.

The evaluation should employ multiple feedback methodologies to ensure that participating projects and households have frequent and meaningful opportunities for feedback. The annual evaluation should use one or more of the following methods:

- Surveys designed to reach at least a representative sample of participating providers and households;
- Focus groups of five or more participants that approximate the diversity of the participating providers and households;

- Individual interviews with enough participating providers and households to approximate the diversity of participating households.

As part of the evaluation process, the CES Director and/or their designees in collaboration with the CoC lead, should examine how the CES is affecting the system performance measures, CES Dashboards, and the System Framework. At the completion of the evaluation period, the CES Director and/or their designees should present the final evaluation with recommendations to CoC Leadership and the CoC Evaluation Committee.

Recommendations

Recommendation 1. Hire a Full-Time Coordinated Entry System Manager

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A full-time Coordinated Entry System Manager should

1. Oversee a consistent implementation of core system policies and procedures by providing technical assistance to collaborative partners and other relevant partners including workflows and data collection efforts;
2. Identify and implement evidence-based, best, promising, and emerging practices to improve the Coordinated Entry System;
3. Provide training that covers coordinated entry system requirements to collaborative partners and other relevant partners;
4. Implement and lead a continuous quality improvement process throughout the Coordinated Entry System by identifying gaps and barriers in the system with collaborative partners;
5. Guide Coordinated Entry System improvement efforts with collaborative partners by focusing on closing gaps and removing barriers;
6. Monitor Coordinated Entry System performance using system data and feedback form collaborative partners to improve the system's overall efficiency and effectiveness;
7. Monitor Coordinated Entry System performance using system data and feedback form collaborative partners to improve the system's overall efficiency and effectiveness for various subpopulations including seniors, veterans, unaccompanied women, and youth;
8. Evaluate Coordinated Entry System performance using system data and feedback form collaborative partners to ensure gender, racial, and ethnic equality;
9. Perform ongoing Coordinated Entry System program assessments including the documentation of the performance and challenges of the coordinated access system for review and input by collaborative partners;
10. Ensure adherence to all internal policies, procedures and practices, and compliance with all U.S. Department of Housing and Urban Development (HUD) and State of California regulatory requirements;
11. Attend all appropriate federal and state technical assistance webinars regarding coordinated entry systems;

12. Monitor entries to ensure consistency of data entry;
13. Maintain required records accurately, comprehensively and in a timely manner, including data entry into the Homeless Management Information System;
14. Ensure the confidentiality of all client information;
15. Participate in twice-a-week street outreach and engagement meetings by providing appropriate updated reports;
16. Participate in all case-conferencing meetings by providing appropriate updated reports;
17. Represent the CoC with key external constituency groups, including community collaborations, other governmental agencies, and private organizations to enhance services integration for homeless populations; and
18. Lead ongoing meetings of collaborative partners to promote regular ongoing opportunities for all sub-recipients to give feedback, improve processes and leverage residential and non-residential resources.

HOMELESS MANAGEMENT INFORMATION SYSTEM

There were 7,530 persons (entries) in the Homeless Management Information System (HMIS) in 2020.

Gender

As noted in the chart below,

- Half (50%) or 3,746 persons were male; and
- Half (50%) or 3,769 persons were female.

Chart 1.
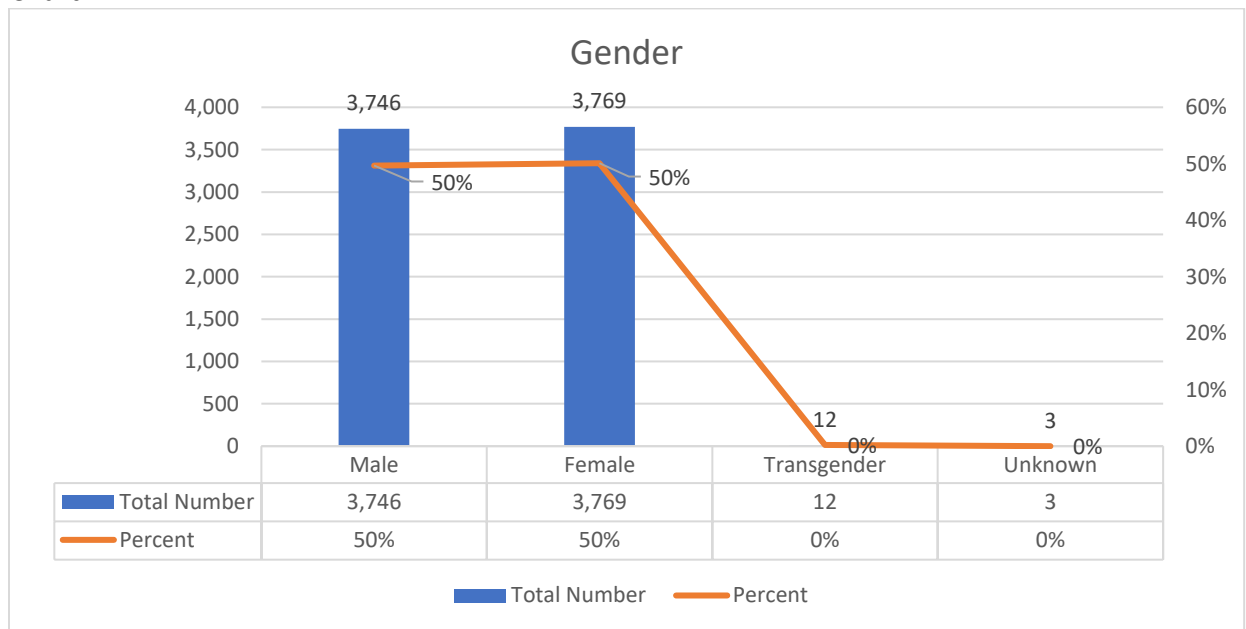
Age

Of the 7,530 persons

- 12% or 915 were youth age 18 – 24; and
- 12% or 936 were age 62+.

More than one-third (35%) were age 50+ and nearly two-thirds (63%) were age 18 – 49.

Chart 2.

Age

	18 - 24	25 - 39	40 - 49	50 - 61	62+	Unknown
Total Number	915	2,533	1,314	1,752	936	80
Percent	12%	34%	17%	23%	12%	1%
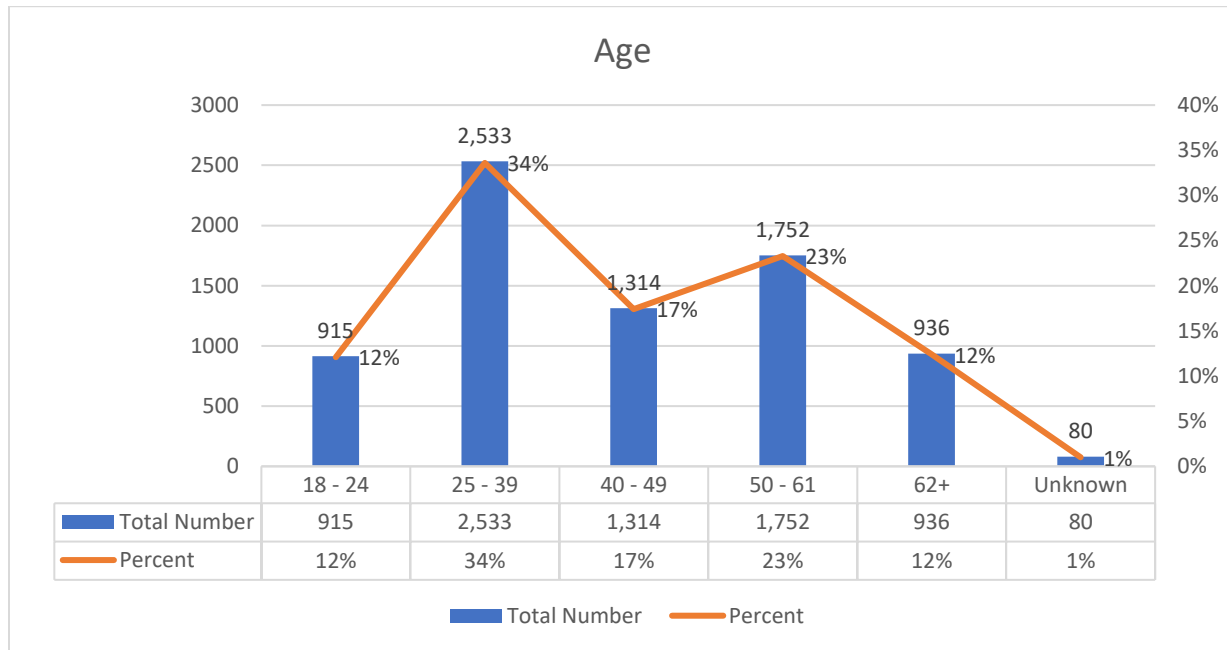
Race

Blacks or African Americans and Whites made up 92.5% of the 7,530 persons. As noted in the following table

- More than one-third (35.7%) or 2,686 were Black or African American; and
- More than half (56.8%) or 4,276 were White.

Table 1.

Race	Number	Percent
American Indian or Alaska Native	152	2.0
Asian	62	0.8
Black or African American	2,686	35.7
Native Hawaiian or Other Pacific Islander	68	0.9
White	4,276	56.8
Other	216	2.9
Unknown	70	0.9
Total:	**7,530**	**100**

Ethnicity

Of the 7,530 persons, as noted in the following chart,

- Approximately one-third (34%) or 2,541 were Hispanic/Latino;
- Approximately two-thirds (66%) or 4,952 were non-Hispanic/Latino;
- 0% or 37 were unknown.

Chart 3.

Ethnicity

	Hispanic/Latino	Non-Hispanic/Latino	Unknown
Total Number	2,541	4,952	37
Percent	34%	66%	0%
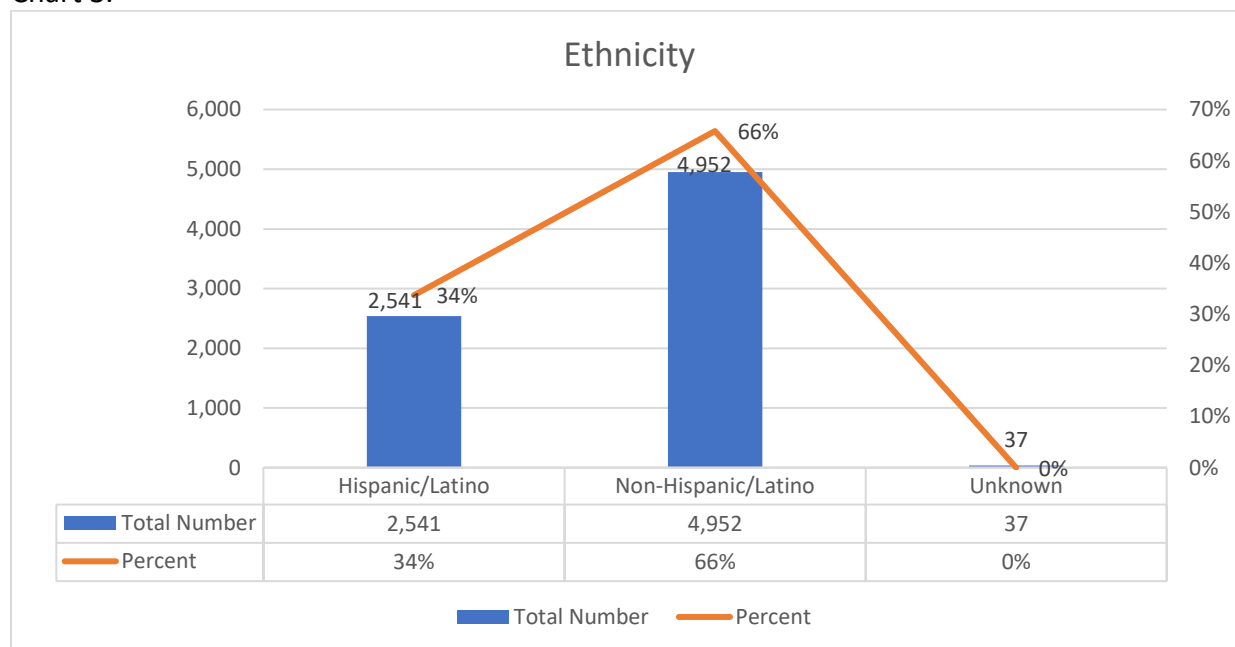
Prior Residence

Prior to entry into HMIS, as noted in the chart below,

- Nearly half (47%) of persons where living in a place not meant for habitation such as a vehicle, abandoned building, or anywhere outside;

- More than one-third (37%) of persons where living in temporary housing, which includes emergency shelter; hotel or motel paid for with an emergency shelter voucher; hotel or motel paid for without an emergency shelter voucher; jail, prison, or juvenile detention facility; psychiatric hospital or other psychiatric facility; residential project or halfway house with no homeless criteria; safe haven; staying or living with family, temporary tenure (e.g., room, apartment or house); staying or living with friends, temporary tenure (e.g., room, apartment or house); hospital or other residential non-psychiatric medical facility; substance abuse treatment or detox center; and transitional housing for homeless persons (including homeless youth);

- 14% of persons were living in permanent housing including host homes; long-term care facility or nursing home; housing owned by client; rental housing including rapid re-housing and other rental subsidy assistance; staying or living with family, permanent tenure (e.g., room, apartment or house); and staying or living with friends, permanent tenure;

- Other (2%) means client doesn't know, client refused, data not collected, deceased, and no exit interview completed.

Chart 4.
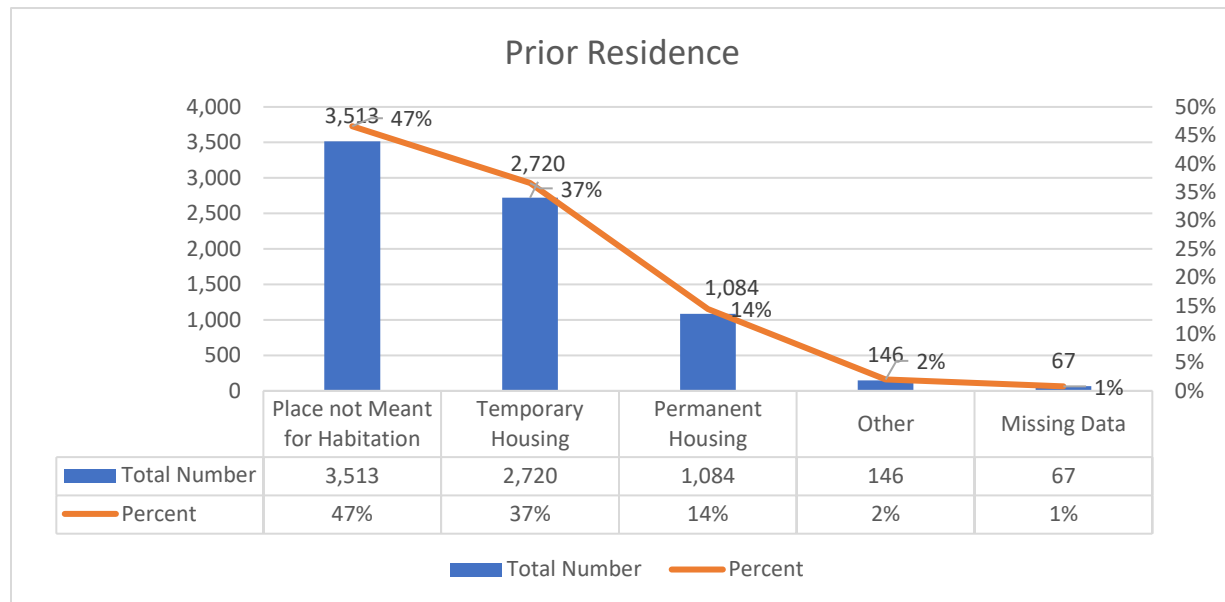
Prior Residence

	Place not Meant for Habitation	Temporary Housing	Permanent Housing	Other	Missing Data
Total Number	3,513	2,720	1,084	146	67
Percent	47%	37%	14%	2%	1%

Destination at Exit

The chart below shows the number and percentage of persons whose destination at exit was

- **Permanent housing for 1,919 persons or 25%,** which includes host homes; long-term care facility or nursing home; housing owned by client; rental housing including rapid re-housing and other rental subsidy assistance; staying or living with family, permanent tenure (e.g., room, apartment or house); and staying or living with friends, permanent tenure; and
- **Temporary housing for 873 persons or 12%**, which includes emergency shelter; hotel or motel paid for with an emergency shelter voucher; hotel or motel paid for without an emergency shelter voucher; jail, prison, or juvenile detention facility; psychiatric hospital or other psychiatric facility; residential project or halfway house with no homeless criteria; safe haven; staying or living with family, temporary tenure (e.g., room, apartment or house); staying or living with friends, temporary tenure (e.g., room, apartment or house); hospital or other residential non-psychiatric medical facility;

substance abuse treatment or detox center; and transitional housing for homeless persons (including homeless youth).

The number and percentage of persons whose destination at exit was a place not meant for habitation such as a vehicle, abandoned building, or anywhere outside was 544 or 7%.

The number and percentage of persons whose destination at exit was noted as Other was 781 or 10%. Other includes client doesn't know, client refused, data not collected, deceased, ad no exit interview completed.

Missing data for Destination at Exit was nearly half (45%). There was missing data for 3,413 persons.

Chart 5.

	Place not Meant for Habitation	Temporary Housing	Permanent Housing	Other	Missing Data
Total Number	544	873	1,919	781	3,413
Percent	7%	12%	25%	10%	45%
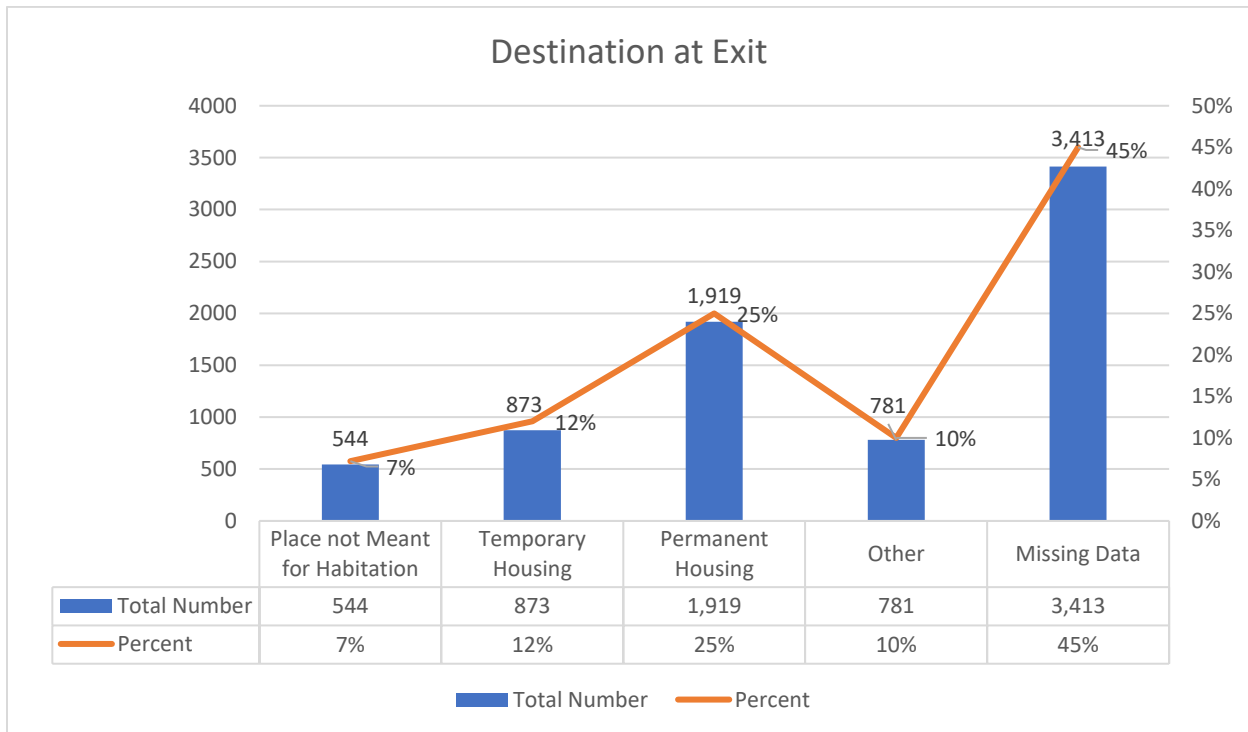
Case Conferencing

Recommendation 1: Conduct weekly case conferencing meetings to identify and recommend the most appropriate temporary and permanent housing interventions for persons entered into the Coordinated Entry System

All agencies and teams involved in the process of temporarily and/or permanently housing persons entered into the By-Name List or into the Coordinated Entry System will participate in case conferencing.

Written protocols will be followed regarding connecting persons to appropriate services and housing to ensure the case conferencing process does not result in a subjective process of referring people to housing by relying on data and protocols and not the loudest client advocate.

CES prioritization is based on the determination of a household's vulnerabilities, not acuity.

- Acuity: the measurement on the level of care or services a household may need to stabilize their housing crisis.
- Vulnerability: identifies and prioritizes housing based on the fragility of one' health and assesses what households are most at risk of dying on the streets.

Case conferencing will help ensure that the By-Name List and Coordinated Entry System does not become a static waitlist. Case conferencing meetings will help ensure that listed persons will be guided and assisted with appropriate housing interventions for obtaining and maintaining permanent housing placement.

Case conferencing meetings with all relevant stakeholders will be weekly. Meeting practices will include tracking:

- Attendance levels of relevant stakeholders;
- Metrics including length of time from entry into By-Name List to Coordinated Entry System;
- Metrics including length of time from entry into Coordinated Entry System to appropriate service connections;
- Metrics including length of time from entry into Coordinated Entry System to appropriate temporary and/or permanent housing options.

Housing Search

Recommendation 1: Expand Housing Search by increasing the number of Housing Locators whose sole responsibility is housing search

Increasing the number of Housing Locators would make it more feasible to identify units that property owners are willing to rent to homeless individuals and families, particularly in cities where a limited number of units have been identified in the past.

As noted in the charts below, more than half of units were identified in just three cities and nearly two-thirds in just five cities.

Housing Locators should be dedicated solely to housing search activities and not be involved in street outreach, housing navigation, or case management services. Their activities should solely focus on finding as many of the limited number of potential units as possible by engaging a broad network of property owners; property managers; residential care providers; affordable housing developers; affordable housing operators; single room occupancy corporations; permanent supportive housing providers; and others through

- one-on-one meetings; and
- group meetings including representatives from the broad network noted above.

A key resource for Housing Locators to recruit representatives should be a Landlords Incentive Program that addresses concerns such as unpaid rent, excessive damages, insurance deductibles, and court costs if needed. The program should also make a contact person available to respond expediently to landlords if and when needed.

Total Units by Year

The following chart shows that property owners were willing to rent nearly 4,000 units (3,837) to homeless individuals and families during the four-year period of 2017 – 2020.

- Nearly one-third (32.8%) of the units were identified in 2020;
- Nearly one-fourth (21.0%) of the units were identified in 2019; and
- One-fourth (25.3%) of the unis were identified in 2018.

Chart 1.

Chart titled "Units by Year" showing Total Number (bars) and Percent (line):
- 2017: 571, 15%
- 2018: 972, 25%
- 2019: 806, 21%
- 2020: 1,257, 33%
- Unknown: 231, 6%
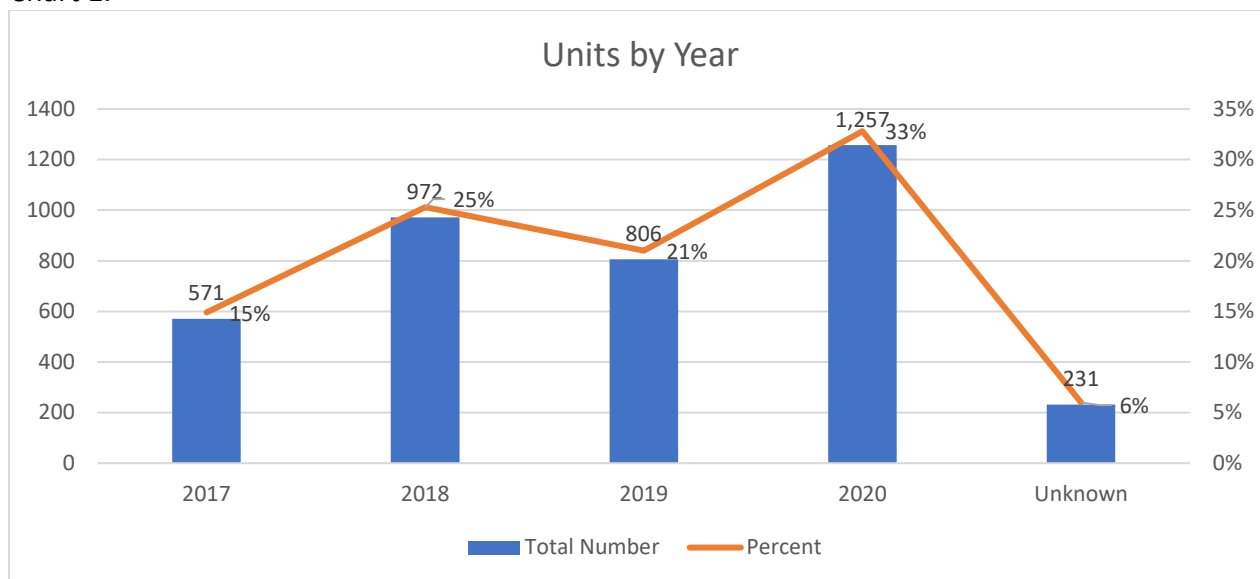
Monthly Rent Range

The following chart groups the nearly 4,000 identified by monthly rent.

- Nearly 40% of the identified units had rents for less than $1,000 per month—18 or 1% of units had rents for under $500 and 1,497 or 39% of units had rents between $500 and $999.
- Approximately 40% or 1,629 identified units had rents between $1000 and $1,499; and
- 15% of identified units had rents between $1,500 and $1,999.

Chart 2.

Chart titled "Monthly Rent Range" showing Total Number (bars) and Percent (line):
- Under $500: 18, 1%
- $500 - $999: 1,497, 39%
- $1,000 - $1,499: 1,629, 42%
- $1,500 - $1,999: 565, 15%
- $2,000 or More: 117, 3%
- Unknown: 11, 0%
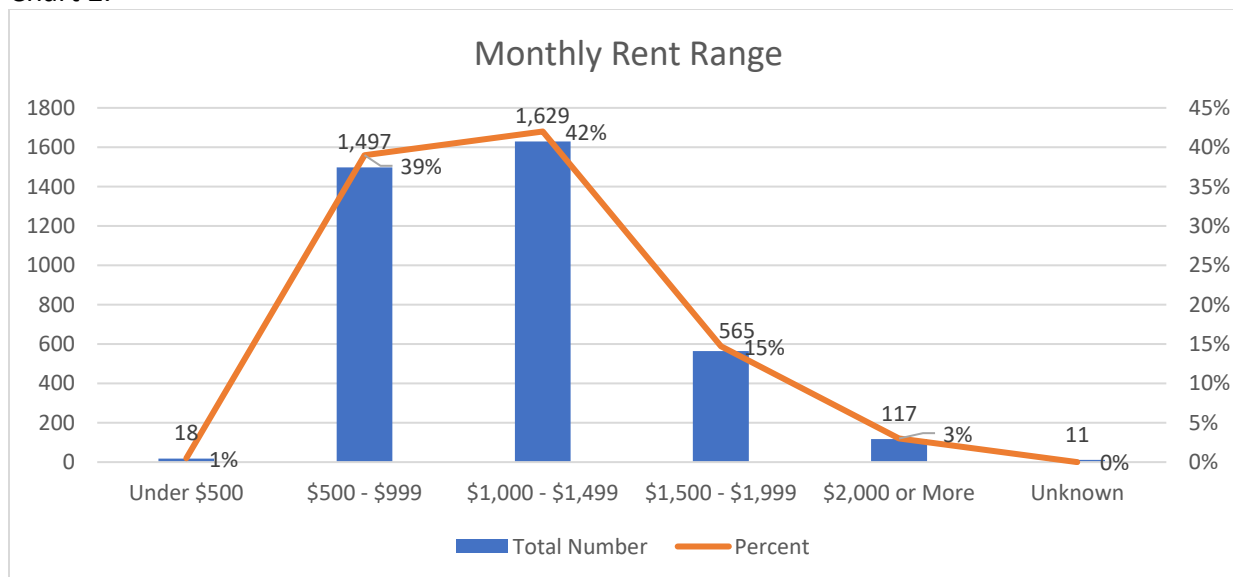
City

More than 80% (81.3%) of the nearly 4,000 units were identified in 11 cities. The following chart lists the 11 cities and the total number of units identified.

- More than half (52%) of the nearly 4,000 units were identified in the three cities of Barstow, San Bernardino, and Victorville; and
- Nearly two-thirds (62%) of the nearly 4,000 units were identified in the five cities of Barstow, Highland, Redlands, San Bernardino, and Victorville

Chart 3.

Identified Units by Selected Cities

City	Units
Victorville	343
San Bernardino	1,312
Redlands	154
Ontario	122
Loma Linda	118
Highland	198
Hesperia	130
Fontana	140
Barstow	358
Apple Valley	140
Adelanto	107
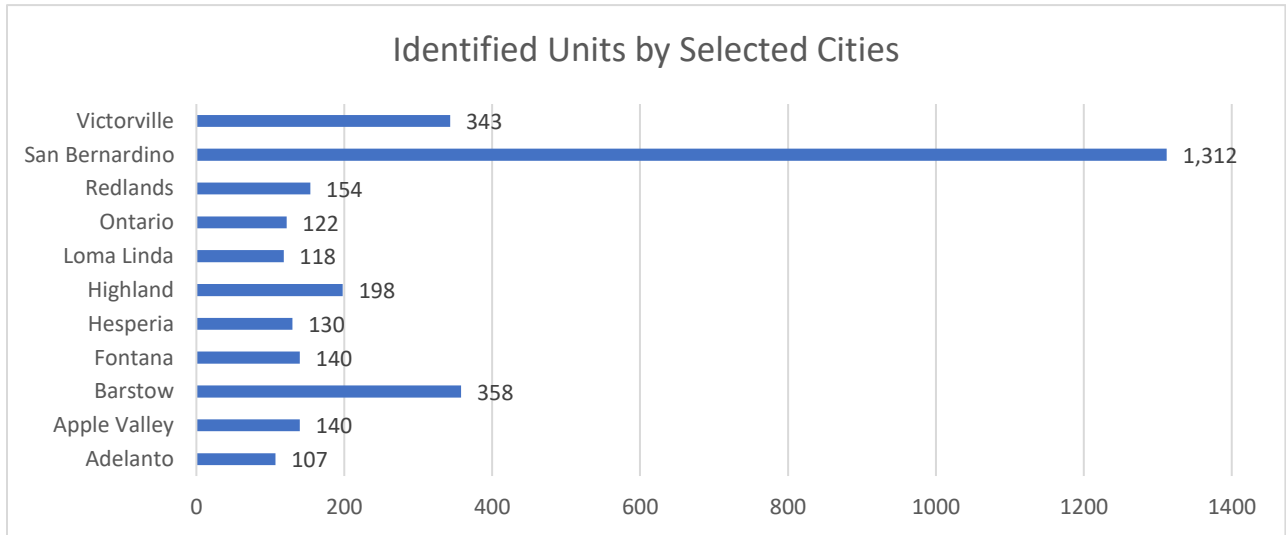
The following chart lists 10 other cities in which less than 100 units were identified. All other cities, including all unincorporated areas, had less than 10 identified units.

Together, these 10 cities identified a total of 366 units or 10% of the nearly 4,000 units.

Chart 4.

Identified Units by Other Cities

City	Units
Colton	65
Desert Hot Springs	16
Hemet	19
Montclair	20
Moreno Valley	13
Palm Springs	13
Rancho Cucamonga	27
Rialto	85
Twentynine Palms	27
Upland	81
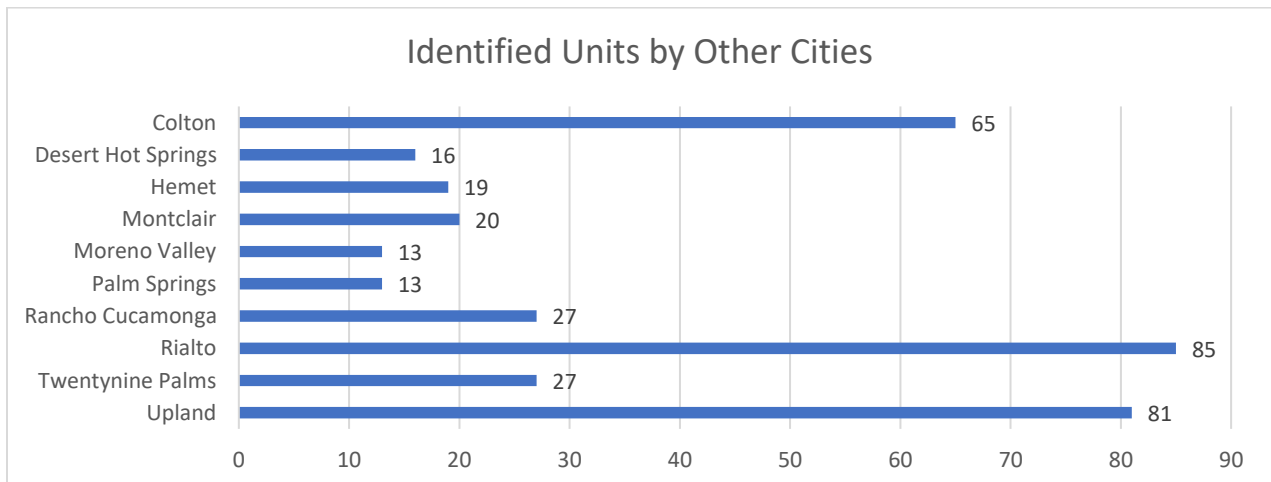
Housing Navigation

Recommendation 1: Ensure adequate housing navigation by increasing the number of Housing Navigators whose sole responsibility is housing navigation

The chief function of Housing Navigators is to serve as the lead person for each household that is assigned to them through case conferencing. The primary responsibility of Housing Navigators is to move households from homelessness to hosing as quickly as possible by eliminating or mitigating impediments to obtaining housing.

Housing Navigators help households with

- Identifying barriers to housing and helping with developing a progress plan to overcome the barriers;
- Assist with facilitating a wide variety of support services including health, mental health, substance abuse treatment, benefits, employment, transportation, etc.;
- Helping to mitigate any issues with credit reports, utility arrears, criminal records, and/or unfavorable landlord references;
- preparing/obtaining any needed documentation;
- Accompanying them during housing related appointments and assisting with the rental application process;
- Guiding households with subsidized housing applications and opportunities in the public and private market;
- timely inspections and landlord corrective action requests;
- Assisting with acquisition of furniture and other move-in essentials (kitchen utensils, cleaning supplies, etc.);
- Helping make connections to temporary housing programs, if needed.

EMERGENCY SHELTER

Local Data Trends

The following chart is based on data from the 2017 – 2021 Housing Inventory Counts (HIC), which are required by and submitted to the U.S. Department of Housing and Urban Development (HUD) annually.

The Housing Inventory Count (HIC) is a point-in-time inventory of provider programs within a Continuum of Care that provide beds and units dedicated to serve people experiencing homelessness (and, for permanent housing projects, where homeless at entry, per the **HUD homeless definition**), categorized by five Program Types: Emergency Shelter; Transitional Housing; Rapid Re-housing; Safe Haven; and Permanent Supportive Housing.

HUD defines emergency shelter as "any facility, the primary purpose of which is to provide temporary or transitional shelter for the homeless in general or for specific populations of the homeless."

Emergency Shelter: Year-Round

The chart summarizes the data from the table below and reveals that the

- number of emergency shelter beds increased from 257 beds in 2017 to 331 beds in 2020, which represents an increase of 74 beds or 29%;
- number of emergency shelter projects remained about the same between 2017 and 2020—there were 21 projects in 2017 and 22 in 2021.

Emergency Shelter: Year-Round

	2017	2018	2019	2020	2021
Total Beds	257	243	316	337	331
Total Projects	21	29	25	27	22

Table 2.

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Emergency Shelter: Year Round							
Desert Manna	DMM ESG Desert Manna (ES)	Barstow	24	14			
Desert Sanctuary	DS1 DV Haley House (ES)	Barstow		8	2	5	1
Doves of Big Bear	DBB DV Domestic Violence Shelter (ES)	Big Bear	3	3	22	2	2
Victor Valley Family Resource Center	VVF ESG County SB (ES)	Hesperia		3	29	2	11
Victor Valley Family Resource Center	VVF HEAP Genesis Project (ES)	Hesperia				2	7
House of Ruth	Emergency Shelter (DV)	Ontario	28	6		7	3
Illumination Foundation	ILF PF Ilumination Foundation (ES)	Ontario				1	30
Family Assistance Program	FA2 RHY Our House (ES)	Redlands	9	20	5	5	13
Center for Spiritual Living-Cold Weather Shelter-Privately Funded	CSL PF Inland Empire (ES)	Redlands			4		
Holy Name Catholic Church-Cold Weather Shelter-Privately Funded	HCC Emergency Shelter (ES)	Redlands			3		
The Salvation Army Redlands	Redlands Cold Weather	Redlands	28		17	65	
Avector, Inc.	Avector	San Bernardino	2				
Lutheran Social Services of Southern California	CCL EFSP Private Emergency Shelter (ES)	San Bernardino	24	8		48	45
Lutheran Social Services of Southern California	CCL ESG City SB (ES)	San Bernardino	8	12	33	15	15
Lutheran Social Services of Southern California	CCL ESG County SB (ES)	San Bernardino	25	20	7	1	10
Lutheran Social Services of Southern California	CCL ESG State (ES)	San Bernardino			1	1	
Lutheran Social Services of Southern California	CCL ESG State (ES)	San Bernardino			16	1	
Operation Grace	OG1 PF Shelter Program (ES)	San Bernardino	9	6	6	7	3
Option House Inc.	Emergency Shelter	San Bernardino	6	14		5	1
Restoration House of Angels	HOA DV House of Angels (ES)	San Bernardino		1	15	15	12
Salvation Army	SA1 EFSP Hospitality House Overflow (ES)	San Bernardino	12	13		39	37
Salvation Army	SA1 FEMA Hospitality House Shelter (ES)	San Bernardino	14	18	33	15	34
Time for Change Foundation	TFC ESG City SB MV (ES)	San Bernardino	1	2	6	2	
Time for Change Foundation	TFC ESG City SB SD (ES)	San Bernardino	5	5	10	17	
Time for Change Foundation	TFC ESG County SB MV (ES)	San Bernardino	1	3			
Time for Change Foundation	TFC ESG County SB SD (ES)	San Bernardino	3	3			
Time for Change Foundation	TFC ESG State MV (ES)	San Bernardino	1	2			
Time for Change Foundation	TFC ESG State SD (ES)	San Bernardino	2	2			
Foothill Family Shelter	FFS ESG ONT Stepping Stones (ES)	Upland		9	15		
Foothill Family Shelter	FFS Stepping Stones (ES)	Upland		14			
Pacific Lifeline	DV-Shelter	Upland		12			
Family Assistance Program	FA2 DV Hope Homes (ES)	Victorville	15	17	22	16	15
High Desert Homeless Services	HDH CDBG Apple Valley (ES)	Victorville		7	3	3	4
High Desert Homeless Services	HDH CDBG Hesperia (ES)	Victorville		1	3	3	6
High Desert Homeless Services	HDH CDBG Victorville (ES)	Victorville		13	26	22	
High Desert Homeless Services	HDH ESG County SB (ES)	Victorville	37	4	14	24	4
Victor Valley Domestic Violence	VVD DV A Better Way (ES)	Victorville			10	6	10
High Desert Homeless Services	Victor Valley Warming Center	Victorville			7		
Victor Valley Warming Center	Victor Valley Cold Weather Shelter	Victorville					60
Set Free Church	SFC PF Set Free Church (ES)	Yucaipa					
Morongo Basin Unity Home	Morongo Basin Unity Home-ES	Yucca Valley		3	7	8	8
		Total Beds:	257	243	316	337	331
		Total Seasonal Projects:	21	29	25	27	22

The following tables list the organizational names, project names, total number of beds, and the total number of projects for each of the 10 cities that are listed in the table above.
The next table focuses on the City of San Bernardino

- The total number of beds increased from 113 in 2017 to 157 in 2021, which represents an increase of 44 beds or 39%;
- Conversely, the number of projects decreased from 14 in 2017 to 8 in 2021.

Table 3. San Bernardino

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Emergency Shelter: Year Round							
Avector, Inc.	Avector	San Bernardino	2	■	■	■	■
Lutheran Social Services of Southern California	CCL EFSP Private Emergency Shelter (ES)	San Bernardino	24	8	■	48	45
Lutheran Social Services of Southern California	CCL ESG City SB (ES)	San Bernardino	8	12	33	15	15
Lutheran Social Services of Southern California	CCL ESG County SB (ES)	San Bernardino	25	20	7	1	10
Lutheran Social Services of Southern California	CCL ESG State (ES)	San Bernardino	■	■	1	1	■
Lutheran Social Services of Southern California	CCL ESG State (ES)	San Bernardino	■	■	16	1	■
Operation Grace	OG1 PF Shelter Program (ES)	San Bernardino	9	6	6	7	3
Option House Inc.	Emergency Shelter	San Bernardino	6	14	■	5	1
Restoration House of Angels	HOA DV House of Angels (ES)	San Bernardino	■	1	15	15	12
Salvation Army	SA1 EFSP Hospitality House Overflow (ES)	San Bernardino	12	13	■	39	37
Salvation Army	SA1 FEMA Hospitality House Shelter (ES)	San Bernardino	14	18	33	15	34
Time for Change Foundation	TFC ESG City SB MV (ES)	San Bernardino	1	2	6	2	■
Time for Change Foundation	TFC ESG City SB SD (ES)	San Bernardino	5	5	10	17	■
Time for Change Foundation	TFC ESG County SB MV (ES)	San Bernardino	1	3	■	■	■
Time for Change Foundation	TFC ESG County SB SD (ES)	San Bernardino	3	3	■	■	■
Time for Change Foundation	TFC ESG State MV (ES)	San Bernardino	1	2	■	■	■
Time for Change Foundation	TFC ESG State SD (ES)	San Bernardino	2	2	■	■	■
		Total Beds:	113	109	127	166	157
		Total Seasonal Projects:	14	14	9	12	8

The next table focuses on Victorville

- The total number of beds increased from 52 in 2017 to 99 in 2021, which represents an increase of 47 beds or 90%;
- The number of projects increased from 2 in 2017 to 6 in 2021.

Table 4. Victorville

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Emergency Shelter: Year Round							
Family Assistance Program	FA2 DV Hope Homes (ES)	Victorville	15	17	22	16	15
High Desert Homeless Services	HDH CDBG Apple Valley (ES)	Victorville	■	7	3	3	4
High Desert Homeless Services	HDH CDBG Hesperia (ES)	Victorville	■	1	3	3	6
High Desert Homeless Services	HDH CDBG Victorville (ES)	Victorville	■	13	26	22	■
High Desert Homeless Services	HDH ESG County SB (ES)	Victorville	37	4	14	24	4
Victor Valley Domestic Violence	VVD DV A Better Way (ES)	Victorville	■	■	10	6	10
High Desert Homeless Services	Victor Valley Warming Center	Victorville	■	■	7	■	■
Victor Valley Warming Center	Victor Valley Cold Weather Shelter	Victorville	■	■	■	■	60
		Total Beds:	52	42	85	74	99
		Total Seasonal Projects:	2	5	7	6	6

The next table focuses on Ontario

- The total number of beds increased from 28 in 2017 to 33 in 2021, which represents a slight increase of 5 beds or 18%;
- The number of projects increased from 1 in 2017 to 2 in 2021.

Table 5.

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Emergency Shelter: Year Round							
House of Ruth	Emergency Shelter (DV)	Ontario	28	6	■	7	3
Illumination Foundation	ILF PF Ilumination Foundation (ES)	Ontario	■	■		1	30
		Total Beds:	28	6	0	8	33
		Total Seasonal Projects:	1	1	0	2	2

The next table focuses on Redlands

- The total number of beds decreased from 37 in 2017 to 13 in 2021, which represents a decrease of 24 beds or 65%.

Table 6. Redlands

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Emergency Shelter: Year Round							
Family Assistance Program	FA2 RHY Our House (ES)	Redlands	9	20	5	5	13
Center for Spiritual Living-Cold Weather Shelter-Privately Funded	CSL PF Inland Empire (ES)	Redlands	■	■	4	■	■
Holy Name Catholic Church-Cold Weather Shelter-Privately Funded	HCC Emergency Shelter (ES)	Redlands	■	■	3	■	■
The Salvation Army Redlands	Redlands Cold Weather	Redlands	28	■	17	65	■
		Total Beds:	37	20	29	70	13
		Total Seasonal Projects:	2	1	4	2	1

The next table focuses on Hesperia

- The total number of beds 18 in 2021, which were provided by two projects.

Table 7.

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Emergency Shelter: Year Round							
Victor Valley Family Resource Center	VVF ESG County SB (ES)	Hesperia	■	3	29	2	11
Victor Valley Family Resource Center	VVF HEAP Genesis Project (ES)	Hesperia	■	■		2	7
		Total Beds:	0	3	29	4	18
		Total Seasonal Projects:	0	1	1	2	2

The next table focuses on Yucca Valley

- The total number of beds is 8 in 2021, which were provided by one project.

Table 8.

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Emergency Shelter: Year Round							
Morongo Basin Unity Home	Morongo Basin Unity Home-ES	Yucca Valley	■	3	7	8	8
		Total Beds:	0	3	7	8	8
		Total Seasonal Projects:	0	1	1	1	1

The next table focuses on Big Bear Lake

- The total number of beds is 2 in 2021, which were provided by one project.

Table 9.

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Emergency Shelter: Year Round							
Doves of Big Bear	DBB DV Domestic Violence Shelter (ES)	Big Bear	3	3	22	2	2
		Total Beds:	3	3	22	2	2
		Total Seasonal Projects:	1	1	1	1	1

The next table focuses on Barstow

- The total number of beds is 1 in 2021, which was provided by one project.

Table 10.

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Emergency Shelter: Year Round							
Desert Manna	DMM ESG Desert Manna (ES)	Barstow	24	14	■	■	■
Desert Sanctuary	DS1 DV Haley House (ES)	Barstow		8	2	5	1
		Total Beds:	24	22	2	5	1
		Total Seasonal Projects:	1	2	1	1	1

The next table focuses on Upland

- The total number of beds is 0 in 2021.

Table 11.

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Emergency Shelter: Year Round							
Foothill Family Shelter	FFS ESG ONT Stepping Stones (ES)	Upland		9	15	■	■
Foothill Family Shelter	FFS Stepping Stones (ES)	Upland	■	14	■	■	■
Pacific Lifeline	DV-Shelter	Upland		12	■	■	■
		Total Beds:	0	35	15	0	0
		Total Seasonal Projects:	0	3	1	0	0

The next table focuses on Yucaipa

- The total number of beds is 0 in 2021.

Table 12.

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Emergency Shelter: Year Round							
Set Free Church	SFC PF Set Free Church (ES)	Yucaipa					
		Total Beds:	0	0	0	0	0
		Total Seasonal Projects:	0	0	0	0	0

Emergency Shelter: Seasonal

- In 2021, there is one seasonal shelter that is providing 60 beds.

Table 13.

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Seasonal:							
Center for Spiritual Living-Cold Weather Shelter-Privately Funded	CSL PF Inland Empire (ES)	Redlands			4		
High Desert Homeless Services	Victor Valley Warming Center	Victorville			7		
Holy Name Catholic Church-Cold Weather Shelter-Privately Funded	HCC Emergency Shelter (ES)	Redlands			3		
Set Free Church	SFC PF Set Free Church (ES)	Yucaipa					
The Salvation Army Redlands	Redlands Cold Weather	Redlands	28		17	65	
Victor Valley Warming Center	Victor Valley Cold Weather Shelter	Victorville					60
		Total Beds:	28	0	31	65	60
		Total Seasonal Projects:	1	0	4	1	1

Emergency Shelter: Motel Vouchers

- The total number of beds provided by motel vouchers decreased from 164 beds in 2017 to 137 in 2021, which represents a decrease of 27 beds or 17%;
- Conversely, the total number of seasonal projects increased from 5 in 2017 to 15 in 2021, which represents an increase of 10 projects or 200%.

Table 14.

Organization Name	Project Name	City	2017	2018	2019	2020	2021
211 United Way	UW1 HDAP 211 United Way V (ES)	Scattered Sites			19	9	13
Catholic Charities	CC1 ESG State V (ES)	Scattered Sites		3			
Catholic Charities	CC1 HEAP No Wrong Door BH V (ES)	Scattered Sites				23	13
City of Redlands	RED HEAP No Wrong Door V (ES)	Scattered Sites				11	3
Community Action Partnership of San Bernardino County	CAP ESG County SB V (ES)	Scattered Sites	4		2	24	10
County of SB Transitional Assistance Dept.	STA TAD Voucher Program V (ES)	Scattered Sites	135	93	85	98	30
Family Service Association of Redlands	FSA ESG City SB V (ES)	Scattered Sites				1	3
Family Service Association of Redlands	FSA ESG County SB Motel Vouchers (ES)	Scattered Sites	9	4	3	7	9
Family Service Association of Redlands	FSA PF Motel Vouher V (ES)	Scattered Sites			34	34	24
Foothill AIDS Project	FA1 PF Foothill AIDS Project V (ES)	Scattered Sites				2	
Mercy House	MH1 PF Ont Motel Voucher (ES)	Scattered Sites	12	4	5	3	6
Mercy House	MH1 ESG CV City	Scattered Sites					4
Morongo Basin Unified School District	MUS HEAP Motel Vouchers (ES)	Scattered Sites				17	4
Red Carnation	Emergency And Shelter Beds Homeless Intensive Case	Scattered Sites	4	36			
Salvation Army Highland	SA3 HEAP Motel Assistance V (ES)	Scattered Sites				1	5
St. Mary Medical Center	SMM HEAP Hospital Discharge V (ES)	Scattered Sites				4	7
Water of Life	ESG City of Fontana	Scattered Sites					4
Water of Life	HEAP Short Term Hotel Motel V (ES)	Scattered Sites					2
		Total Beds:	**164**	**140**	**148**	**234**	**137**
		Total Seasonal Projects:	**5**	**5**	**6**	**13**	**15**

Gaps and Needs Analysis

There are several jurisdictions that do not have any year-round shelter beds as noted in the table below.

Table 15.

	Unsheltered Homeless Counts			Year-Round Shelter Beds
	2018	**2019**	**2020**	
Adelanto	11	3	11	0
Apple Valley	17	20	24	0
Barstow	60	59	78	1
Big Bear City/Sugarloaf	0	2	12	0
Big Bear Lake	7	7	0	2
Bloomington	7	24	19	0
Cajon Canyon	0	2	0	0
Chino	28	23	31	0
Chino Hills	6	4	2	0
Colton	42	58	136	0
Crestline	18	7	22	0
Fontana	72	94	116	0
Grand Terrace	1	1	5	0
Hesperia	26	21	19	18
Highland	49	72	78	0
Joshua Tree	19	30	54	0

Lake Arrowhead	0	6	11	0
Landers	0	0	2	0
Lenwood	0	0	0	0
Loma Linda	7	8	27	0
Lytle Creek	0	0	0	0
Mentone/Crafton	0	3	0	0
Montclair	8	24	54	0
Morongo Valley	4	0	0	0
Muscoy	7	13	24	0
Needles	11	29	16	0
Ontario	56	94	74	33
Phelan	4	0	2	0
Rancho Cucamonga	52	48	48	0
Redlands	136	141	141	13
Rialto	71	133	115	0
Running Springs	3	1	1	0
San Bernardino	333	639	823	157
Twenty Nine Palms	20	40	28	0
Upland	102	43	44	0
Victorville	187	179	298	99
West Cajon Valley	0	0	0	0
Yermo	0	1	0	0
Yucaipa	11	16	13	0
Yucca Valley	37	45	44	8
County-wide or Unknown	31	30	18	0
Total:	**1,443**	**1,920**	**2,390**	**331**

The following table shows that eight jurisdictions had 62% of all persons counted as unsheltered in 2020 or 1,477 persons of the total count of 2,390 persons as noted in the table below. The eight jurisdictions had 100% or 331 of the 331 beds.

Table 16.

	Unsheltered Homeless Counts			Year-Round Shelter Beds
	2018	**2019**	**2020**	
Barstow	60	59	78	1
Big Bear Lake	7	7	0	2
Hesperia	26	21	19	18
Ontario	56	94	74	33
Redlands	136	141	141	13
San Bernardino	333	639	823	157

Victorville	187	179	298	99
Yucca Valley	37	45	44	8
Subtotal:	**842**	**1,185**	**1,477**	**331**
Total:	**1,443**	**1,920**	**2,390**	**331**

The following table shows that 32 jurisdictions had 38% of all persons counted as unsheltered in 2020 or 913 persons of the total count of 2,390 persons as noted in the table below. The 32 jurisdictions did not have any of the total of 331 beds in 2020.

Those jurisdictions that counted more than 100 unsheltered persons in 2020 and had no unsheltered beds include:

- Colton;
- Fontana; and
- Rialto.

Those jurisdictions that counted more than 50 unsheltered persons in 2020 but less than 100 persons and had no unsheltered beds include:

- Highland;
- Joshua Tree; and
- Montclair.

Table 17.

	Unsheltered Homeless Counts			Year-Round Shelter Beds
	2018	**2019**	**2020**	
Adelanto	11	3	11	0
Apple Valley	17	20	24	0
Big Bear City/Sugarloaf	0	2	12	0
Bloomington	7	24	19	0
Cajon Canyon	0	2	0	0
Chino	28	23	31	0
Chino Hills	6	4	2	0
Colton	42	58	136	0
Crestline	18	7	22	0
Fontana	72	94	116	0
Grand Terrace	1	1	5	0
Highland	49	72	78	0
Joshua Tree	19	30	54	0
Lake Arrowhead	0	6	11	0
Landers	0	0	2	0

Lenwood	0	0	0	0
Loma Linda	7	8	27	0
Lytle Creek	0	0	0	0
Mentone/Crafton	0	3	0	0
Montclair	8	24	54	0
Morongo Valley	4	0	0	0
Muscoy	7	13	24	0
Needles	11	29	16	0
Phelan	4	0	2	0
Rancho Cucamonga	52	48	48	0
Rialto	71	133	115	0
Running Springs	3	1	1	0
Twenty Nine Palms	20	40	28	0
Upland	102	43	44	0
West Cajon Valley	0	0	0	0
Yermo	0	1	0	0
Yucaipa	11	16	13	0
County-wide or Unknown	31	30	18	0
Subtotal:	**638**	**780**	**913**	**0**
Total:	**1,443**	**1,920**	**2,390**	**331**

Recommendations

Recommendation 1: Motel voucher programs should target those jurisdictions who counted 50 unsheltered persons or more in 2020. The priority population should be those persons most vulnerable to illness and death including unsheltered persons age 62+.

Table 18.

Organization Name	Project Name	City	2017	2018	2019	2020	2021
211 United Way	UW1 HDAP 211 United Way V (ES)	Scattered Sites			19	9	13
Catholic Charities	CC1 ESG State V (ES)	Scattered Sites		3			
Catholic Charities	CC1 HEAP No Wrong Door BH V (ES)	Scattered Sites				23	13
City of Redlands	RED HEAP No Wrong Door V (ES)	Scattered Sites				11	3
Community Action Partnership of San Bernardino County	CAP ESG County SB V (ES)	Scattered Sites	4		2	24	10
County of SB Transitional Assistance Dept.	STA TAD Voucher Program V (ES)	Scattered Sites	135	93	85	98	30
Family Service Association of Redlands	FSA ESG City SB V (ES)	Scattered Sites				1	3
Family Service Association of Redlands	FSA ESG County SB Motel Vouchers (ES)	Scattered Sites	9	4	3	7	9
Family Service Association of Redlands	FSA PF Motel Vouher V (ES)	Scattered Sites			34	34	24
Foothill AIDS Project	FA1 PF Foothill AIDS Project V (ES)	Scattered Sites				2	
Mercy House	MH1 PF Ont Motel Voucher (ES)	Scattered Sites	12	4	5	3	6
Mercy House	MH1 ESG CV City	Scattered Sites					4
Morongo Basin Unified School District	MUS HEAP Motel Vouchers (ES)	Scattered Sites				17	4
Red Carnation	Emergency And Shelter Beds Homeless Intensive Case	Scattered Sites	4	36			
Salvation Army Highland	SA3 HEAP Motel Assistance V (ES)	Scattered Sites				1	5
St. Mary Medical Center	SMM HEAP Hospital Discharge V (ES)	Scattered Sites				4	7
Water of Life	ESG City of Fontana	Scattered Sites					4
Water of Life	HEAP Short Term Hotel Motel V (ES)	Scattered Sites					2
		Total Beds:	**164**	**140**	**148**	**234**	**137**
		Total Seasonal Projects:	**5**	**5**	**6**	**13**	**15**

TRANSITIONAL HOUSING

Local Data Trends

The following chart is based on data from the 2017 – 2021 Housing Inventory Counts (HIC), which are required by and submitted to the U.S. Department of Housing and Urban Development (HUD) annually.

The Housing Inventory Count (HIC) is a point-in-time inventory of provider programs within a Continuum of Care that provide beds and units dedicated to serve people experiencing homelessness (and, for permanent housing projects, where homeless at entry, per the **HUD homeless definition**), categorized by five Program Types: Emergency Shelter; Transitional Housing; Rapid Re-housing; Safe Haven; and Permanent Supportive Housing.

HUD defines transitional housing as "a project that has as its purpose facilitating the movement of homeless individuals and families to permanent housing within a reasonable amount of time (usually 24 months). Transitional housing includes housing primarily designed to serve deinstitutionalized homeless individuals and other homeless individuals with mental or physical disabilities and homeless families with children."

The chart summarizes the data from the table below and reveals that the

- number of transitional housing beds decreased significantly (50%) between 2017 and 2020 but increased to 336 beds in 2021, which is nearly the same number of beds (353) in 2017;
- number of transitional housing projects also decreased significantly (40%) between 2017 and 2020 but increased to 20 projects in 2021, which is the same number of projects (20) in 2017.

Chart 1.

Transitional Housing

	2017	2018	2019	2020	2021
Total Beds	353	336	246	176	336
Total Projects	20	17	14	12	20
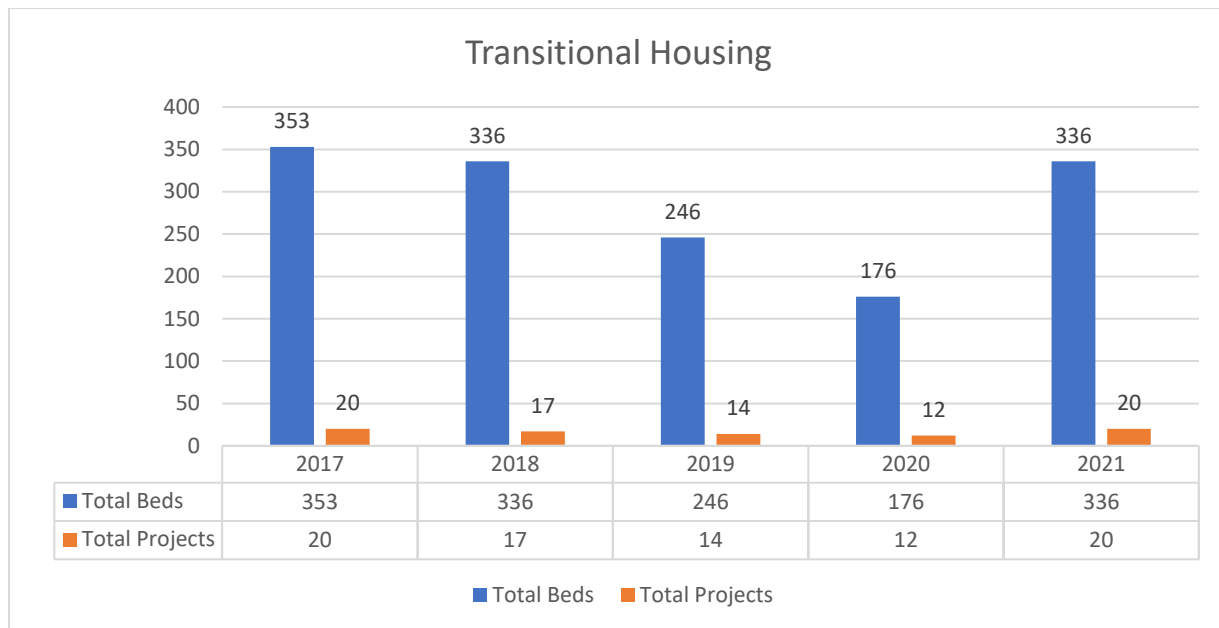
Gaps and Needs Analysis

Table 1 notes the total number of transitional housing projects and beds for each jurisdiction during the period 2017 – 2021. The jurisdictions with the most beds and projects are

- San Bernardino
- Victorville.

However, the number of beds and projects have decreased in the City of San Bernardino from 176 beds and 7 projects in 2018 to 87 beds and 5 projects in 2021.

The number of beds and projects have increased in Victorville from 17 beds in 2017 to 68 beds in 2021. The number of projects were the same (2) in 2017 and (2) in 2021.

Table 1. Total Number of Transitional Housing Projects and Beds by Jurisdiction

Jurisdiction	2017		2018		2019		2020		2021	
	Beds	Projects	Beds	Projects	Beds	Projects	Beds	Projects	Beds	Projects
Adelanto	47	3	42	3	15	2	9	1	12	1
Apple Valley	0	0	0	0	0	0	0	0	0	0
Barstow	12	1	30	1	4	1	20	1	26	3
Big Bear Lake	0	0	0	0	10	1	0	0	0	0
Bloomington	0	0	0	0	0	0	0	0	14	1
Chino	0	0	0	0	0	0	0	0	0	0
Chino Hills	0	0	0	0	0	0	0	0	0	0
Colton	0	0	0	0	0	0	0	0	0	0

	Beds	Projects	Beds	Projects	Beds	Projects	Beds	Projects	Beds	Projects
Crestline	0	0	0	0	0	0	0	0	0	0
Fontana	0	0	0	0	0	0	0	0	0	0
Grand Terrace	0	0	0	0	0	0	0	0	0	0
Helendale	0	0	0	0	0	0	0	0	0	0
Hesperia	25	2	13	1	4	1	2	1	2	1
Highland	0	0	0	0	0	0	0	0	0	0
Joshua Tree	0	0	0	0	0	0	0	0	0	0
Lake Arrowhead	0	0	0	0	0	0	0	0	0	0
Landers	0	0	0	0	0	0	0	0	0	0
Loma Linda	0	0	15	1	0	0	0	0	30	1
Lucerne Valley	0	0	0	0	0	0	0	0	0	0
Mentone	0	0	0	0	0	0	0	0	0	0
Montclair	0	0	0	0	0	0	0	0	0	0
Morongo	0	0	0	0	0	0	0	0	0	0
Muscoy	0	0	0	0	0	0	0	0	0	0
Needles	0	0	0	0	0	0	0	0	0	0
Ontario	16	1	33	2	36	2	14	2	20	2
Phelan	0	0	0	0	0	0	0	0	0	0
Rancho Cucamonga	0	0	0	0	0	0	0	0	0	0
Redlands	0	0	0	0	0	0	16	1	15	1
Rialto	0	0	0	0	0	0	0	0	0	0
Running Springs	0	0	0	0	0	0	0	0	0	0
San Bernardino	173	9	176	7	130	4	72	3	87	5
Twentynine Palms	0	0	0	0	0	0	0	0	3	1
Upland	49	1	0	0	10	1	3	1	59	2
Victorville	17	2	15	1	17	1	21	1	68	2
Yucaipa	0	0	0	0	0	0	0	0	0	0
Yucca Valley	14	1	12	1	20	1	19	1	0	0
Total:	**353**	**20**	**336**	**17**	**246**	**14**	**176**	**12**	**336**	**20**

The next table notes all the jurisdictions from the table above that currently have, or did have, transitional housing projects and beds.

Table 2. Total Number of Transitional Housing Projects and Beds by Jurisdiction

Jurisdiction	2017		2018		2019		2020		2021	
	Beds	Projects	Beds	Projects	Beds	Projects	Beds	Projects	Beds	Projects
Adelanto	47	3	42	3	15	2	9	1	12	1
Barstow	12	1	30	1	4	1	20	1	26	3
Big Bear Lake	0	0	0	0	10	1	0	0	0	0
Bloomington	0	0	0	0	0	0	0	0	14	1
Hesperia	25	2	13	1	4	1	2	1	2	1

Loma Linda	0	0	15	1	0	0	0	0	30	1
Ontario	16	1	33	2	36	2	14	2	20	2
Redlands	0	0	0	0	0	0	16	1	15	1
San Bernardino	173	9	176	7	130	4	72	3	87	5
Twentynine Palms	0	0	0	0	0	0	0	0	3	1
Upland	49	1	0	0	10	1	3	1	59	2
Victorville	17	2	15	1	17	1	21	1	68	2
Yucca Valley	14	1	12	1	20	1	19	1	0	0
Total:	**353**	**20**	**336**	**17**	**246**	**14**	**176**	**12**	**336**	**20**

The next table notes those jurisdictions from the Table 1 that have not had any transitional housing projects and beds during the five-year period 2017 – 2021.

Table 3. Total Number of Transitional Housing Projects and Beds by Jurisdiction

Jurisdiction	2017		2018		2019		2020		2021	
	Beds	**Projects**	**Beds**	**Projects**	**Beds**	**Projects**	**Beds**	**Projects**	**Beds**	**Projects**
Apple Valley	0	0	0	0	0	0	0	0	0	0
Chino	0	0	0	0	0	0	0	0	0	0
Chino Hills	0	0	0	0	0	0	0	0	0	0
Colton	0	0	0	0	0	0	0	0	0	0
Crestline	0	0	0	0	0	0	0	0	0	0
Fontana	0	0	0	0	0	0	0	0	0	0
Grand Terrace	0	0	0	0	0	0	0	0	0	0
Helendale	0	0	0	0	0	0	0	0	0	0
Highland	0	0	0	0	0	0	0	0	0	0
Joshua Tree	0	0	0	0	0	0	0	0	0	0
Lake Arrowhead	0	0	0	0	0	0	0	0	0	0
Landers	0	0	0	0	0	0	0	0	0	0
Lucerne Valley	0	0	0	0	0	0	0	0	0	0
Mentone	0	0	0	0	0	0	0	0	0	0
Montclair	0	0	0	0	0	0	0	0	0	0
Morongo	0	0	0	0	0	0	0	0	0	0
Muscoy	0	0	0	0	0	0	0	0	0	0
Needles	0	0	0	0	0	0	0	0	0	0
Phelan	0	0	0	0	0	0	0	0	0	0
Rancho Cucamonga	0	0	0	0	0	0	0	0	0	0
Rialto	0	0	0	0	0	0	0	0	0	0
Running Springs	0	0	0	0	0	0	0	0	0	0
Yucaipa	0	0	0	0	0	0	0	0	0	0
Total:	**353**	**20**	**336**	**17**	**246**	**14**	**176**	**12**	**336**	**20**

Table 4 notes the transitional housing projects by jurisdiction listed in the HIC for the years 2017 – 2021.

Table 4. Transitional Housing Projects by Jurisdiction: 2017 - 2021

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Life Community Development	LCD CoC Restore to Hope (TH)	Adelanto	19	19			
Life Community Development	LCD CoC The Gatekeeper (TH)	Adelanto	19	11	10		
Life Community Development	LCD GPD Program (TH)	Adelanto	9	12	5	9	12
Desert Sanctuary	DV-Transitional Housing	Barstow					3
New Hope Village, Inc.	NHV PF New Hope Village (TH)	Barstow	12	30	4	20	20
New Hope Village, Inc.	New Hope Village DBH Transitional Housing (TH)	Barstow					3
Doves of Big Bear	Transitional Housing	Big Bear			10		
Cedar House	Life Change Center for Youth	Bloomington					14
Victor Valley Family Resource Center	VVF AB109 Victor Valley (TH)	Hesperia	20	13	4	2	2
Victor Valley Family Resource Center	VVF PF Cedar House (TH)	Hesperia	5				
Inland Temporary Homes	Inland Housing Solutions - TH	Loma Linda		15			
Steps 4 Life	Transitional Housing	Loma Linda					30
House of Ruth	HOR DV House of Ruth (TH)	Ontario		10	10	1	7
Mercy House	MH1 CDBG Assisi House (TH)	Ontario	16	23	26	13	13
Family Assistance Program	FA2 HEAP Youth (TH)	Redlands				16	15
Community Action Partnership of San Bernardino	CAP Obershaw House (TH)	San Bernardino	18	23	34	12	22
Frazee Community Center	FCC GPD Chestnut Veterans (TH)	San Bernardino	8	8			
Frazee Community Center	FCC GPD Crescent House (TH)	San Bernardino	5				
Lutheran Social Services of Southern California	CCL CoC St. Martins Too (TH)	San Bernardino	4				
Lutheran Social Services of Southern California	CCL Men's Transitional Housing (TH)	San Bernardino	8				
Mary's Mercy Center	MMC PF Veronica's Home of Mercy (TH)	San Bernardino	40	53	18	10	
Mary's Mercy Center	Mary's Village	San Bernardino					9
Operation Grace	Transitional Housing	San Bernardino		1			
Restoration House of Angels	House of Angels-San Bernardino	San Bernardino	12	13			
Salvation Army	SA1 CoC Transitional Living Center	San Bernardino	48	48	48		
Salvation Army	SA1 Path to Prosperity (TH)	San Bernardino	30	30	30		
Salvation Army	SA1 PF Hospitality House (TH)	San Bernardino				50	50
Time For Change Foundation	RAP SC (TH)	San Bernardino					3
Time For Change Foundation	RAP NC (TH)	San Bernardino					3
Morongo Basin ARCH	Transitional Housing	Twenty-Nine Palms					3
Foothill Family Shelter	FFS Stepping Stones Program (TH)	Upland	49				56
Pacific Lifeline	PL1 DV Pacific Lifeline (TH)	Upland			10	3	3
Family Assistance Program	Transitional Housing - Hope House-Domestic Violence	Victorville	5		17	21	49
Victor Valley Domestic Violence	A Better Way TH	Victorville	12	15			19
Morongo Basin Unity Home	MBU DV Transitional Housing (TH)	Yucca Valley	14	12	20	19	
		Total Beds:	353	336	246	176	336
		Total Projects:	20	17	14	12	20

The following tables note the transitional housing projects listed in the HIC for the years 2017 – 2021 for each jurisdiction.

Table 5. Adelanto

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Life Community Development	LCD CoC Restore to Hope (TH)	Adelanto	19	19			
Life Community Development	LCD CoC The Gatekeeper (TH)	Adelanto	19	11	10		
Life Community Development	LCD GPD Program (TH)	Adelanto	9	12	5	9	12
		Total Beds:	**47**	**42**	**15**	**9**	**12**
		Total Projects:	**3**	**3**	**2**	**1**	**1**

Table 6. Barstow

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Desert Sanctuary	DV-Transitional Housing	Barstow					3
New Hope Village, Inc.	NHV PF New Hope Village (TH)	Barstow	12	30	4	20	20
New Hope Village, Inc.	New Hope Village DBH Transitional Housing (TH)	Barstow					3
		Total Beds:	**12**	**30**	**4**	**20**	**26**
		Total Projects:	**1**	**1**	**1**	**1**	**3**

Table 7. Big Bear City

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Doves of Big Bear	Transitional Housing	Big Bear			10		
		Total Beds:	**0**	**0**	**10**	**0**	**0**
		Total Projects:	**0**	**0**	**1**	**0**	**0**

Table 8. Bloomington

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Cedar House	Life Change Center for Youth	Bloomington					14
		Total Beds:	**0**	**0**	**0**	**0**	**14**
		Total Projects:	**0**	**0**	**0**	**0**	**1**

Table 9. Hesperia

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Victor Valley Family Resource Center	VVF AB109 Victor Valley (TH)	Hesperia	20	13	4	2	2
Victor Valley Family Resource Center	VVF PF Cedar House (TH)	Hesperia	5				
		Total Beds:	**25**	**13**	**4**	**2**	**2**
		Total Projects:	**2**	**1**	**1**	**1**	**1**

Table 10. Loma Linda

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Inland Temporary Homes	Inland Housing Solutions - TH	Loma Linda		15			
Steps 4 Life	Transitional Housing	Loma Linda					30
		Total Beds:	**0**	**15**	**0**	**0**	**30**
		Total Projects:	**0**	**1**	**0**	**0**	**1**

Table 11. Ontario

Organization Name	Project Name	City	2017	2018	2019	2020	2021
House of Ruth	HOR DV House of Ruth (TH)	Ontario		10	10	1	7
Mercy House	MH1 CDBG Assisi House (TH)	Ontario	16	23	26	13	13
		Total Beds:	**16**	**33**	**36**	**14**	**20**
		Total Projects:	**1**	**2**	**2**	**2**	**2**

Table 12. Redlands

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Family Assistance Program	FA2 HEAP Youth (TH)	Redlands				16	15
		Total Beds:	**0**	**0**	**0**	**16**	**15**
		Total Projects:	**0**	**0**	**0**	**1**	**1**

Table 13. San Bernardino

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Community Action Partnership of San Bernardino	CAP Obershaw House (TH)	San Bernardino	18	23	34	12	22
Frazee Community Center	FCC GPD Chestnut Veterans (TH)	San Bernardino	8	8			
Frazee Community Center	FCC GPD Crescent House (TH)	San Bernardino	5				
Lutheran Social Services of Southern California	CCL CoC St. Martins Too (TH)	San Bernardino	4				
Lutheran Social Services of Southern California	CCL Men's Transitional Housing (TH)	San Bernardino	8				
Mary's Mercy Center	MMC PF Veronica's Home of Mercy (TH)	San Bernardino	40	53	18	10	
Mary's Mercy Center	Mary's Village	San Bernardino					9
Operation Grace	Transitional Housing	San Bernardino		1			
Restoration House of Angels	House of Angels-San Bernardino	San Bernardino	12	13			
Salvation Army	SA1 CoC Transitional Living Center	San Bernardino	48	48	48		
Salvation Army	SA1 Path to Prosperity (TH)	San Bernardino	30	30	30		
Salvation Army	SA1 PF Hospitality House (TH)	San Bernardino				50	50
Time For Change Foundation	RAP SC (TH)	San Bernardino					3
Time For Change Foundation	RAP NC (TH)	San Bernardino					3
		Total Beds:	**173**	**176**	**130**	**72**	**87**
		Total Projects:	**9**	**7**	**4**	**3**	**5**

Table 14. Twenty-Nine Palms

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Morongo Basin ARCH	Transitional Housing	Twenty-Nine Palms					3
		Total Beds:	**0**	**0**	**0**	**0**	**3**
		Total Projects:	**0**	**0**	**0**	**0**	**2**

Table 15. Upland

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Foothill Family Shelter	FFS Stepping Stones Program (TH)	Upland	49				56
Pacific Lifeline	PL1 DV Pacific Lifeline (TH)	Upland			10	3	3
		Total Beds:	**49**	**0**	**10**	**3**	**59**
		Total Projects:	**1**	**0**	**1**	**1**	**2**

Table 16. Victorville

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Family Assistance Program	Transitional Housing - Hope House-Domestic Violence	Victorville	5		17	21	49
Victor Valley Domestic Violence	A Better Way TH	Victorville	12	15			19
		Total Beds:	**17**	**15**	**17**	**21**	**68**
		Total Projects:	**2**	**1**	**1**	**1**	**2**

Table 17. Yucca Valley

Organization Name	Project Name	City	2017	2018	2019	2020	2021
Morongo Basin Unity Home	MBU DV Transitional Housing (TH)	Yucca Valley	14	12	20	19	
		Total Beds:	**14**	**12**	**20**	**19**	**0**
		Total Projects:	**1**	**1**	**1**	**1**	**0**

The next table notes that approximately 20% of the transitional housing programs were for survivors of domestic violence each year from 2017 – 2021.

Table 18. Transitional Housing: Domestic Violence Survivors

Organization Name	Program Name	2017	2018	2019	2020	2021
		Beds	Beds	Beds	Beds	Beds
Desert Sanctuary	DV-Transitional Housing	■	■	■	■	3
Doves of Big Bear	Transitional Housing	■	■	10	■	■
Family Assistance Program	Transitional Housing - Domestic Violence	5	■	17	21	49
House of Ruth	HOR DV House of Ruth (TH)	■	■	10	1	7
Mary's Mercy Center	MMC PF Veronica's Home of Mercy (TH)	40	53	18	10	■
Morongo Basin Unity Home	MBU DV Transitional Housing (TH)	14	12	20	19	■
Pacific Lifeline	PL1 DV Pacific Lifeline (TH)	■	■	10	3	3
Restoration House of Angels	HOA PF Restoration House of Angels	■	13	■	■	■
Victor Valley Domestic Violence	A Better Way TH	12	15	■	■	19
	Total Beds:	71	93	85	54	81
	Total DV Projects:	4	4	6	5	5

Recommendations

Permanent Supportive Housing

Local Data Trends

The following chart is based on data from the 2017 – 2021 Housing Inventory Counts (HIC), which are required by and submitted to the U.S. Department of Housing and Urban Development (HUD) annually.

The Housing Inventory Count (HIC) is a point-in-time inventory of provider programs within a Continuum of Care that provide beds and units dedicated to serve people experiencing homelessness (and, for permanent housing projects, where homeless at entry, per the **HUD homeless definition**), categorized by five Program Types: Emergency Shelter; Transitional Housing; Rapid Re-housing; Safe Haven; and Permanent Supportive Housing.

HUD defines permanent supportive housing as "permanent housing in which supportive services are provided to assist homeless persons with a disability to live independently."

The chart summarizes the data from the table below and reveals that the

- number of permanent supportive housing beds increased from 1,412 in 2017 to 1,603 in 2020, which represents an increase of 191 beds or 13%;
- number of permanent supportive housing beds decreased by 47 beds between 2020 and 2021 or by 3%.

Chart 1.

Permanet Supportive Housing

	2017	2018	2019	2020	2021
Total Beds	1,412	1,368	1,528	1,603	1,556
Total Projects	19	19	19	19	17
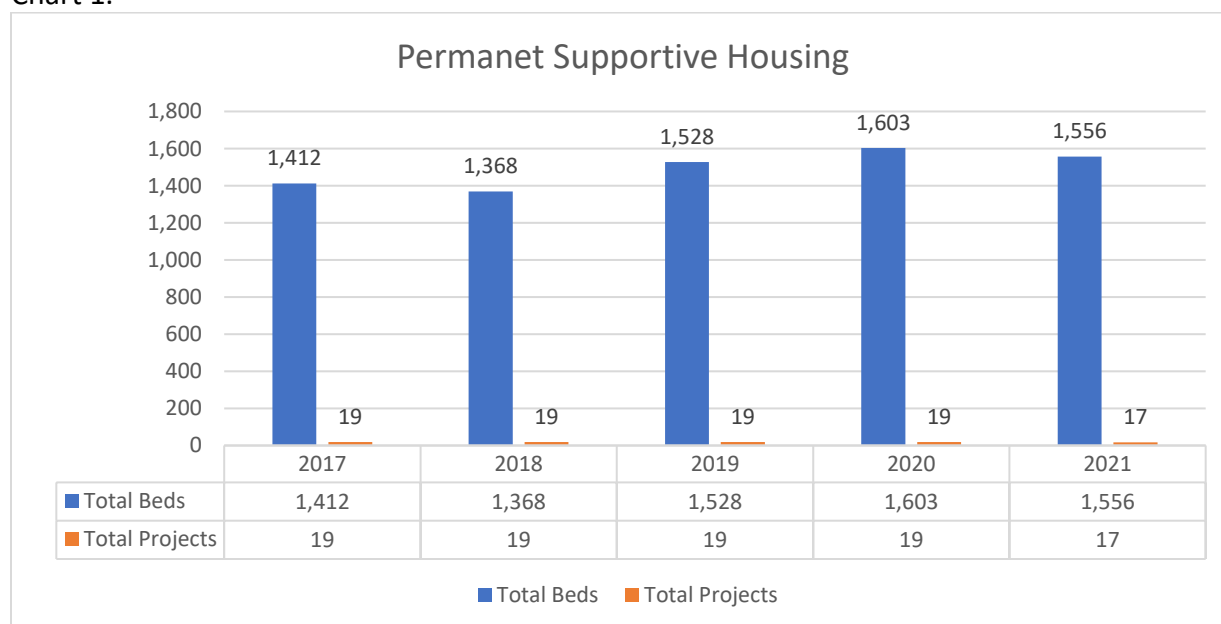
The table below provides a list of the names of the organizations that operate the permanent supportive housing projects and the name of their projects. The number of beds for each project are noted each year between 2017 and 2021.

Table 1.

| Organization Name	Project Name	Location	2017	2018	2019	2020	2021
Permanent Supportive Housing:							
Global One Development Center	GDC CoC TAY Housing (PSH)	Barstow	12	12	3		
Lighthouse Social Services	LSS CoC Hope for Heroes II (PSH)	Scattered Site	11	12	12	10	11
Lighthouse Social Services	LSS HUD Hope for Heroes (PSH)	Scattered Site	32	40	44	39	39
Lutheran Social Services of Southern California	CCL CoC Permanent Supportive Housing (PSH)	San Bernardino	31	23	30	19	19
New Hope Village, Inc.	NHV CoC New Hope, Too! (PSH)	Barstow	5	5	5	6	5
San Bernardino County Housing Authority	DBH CoC Laurel Brook (PSH)	Scattered Site	27	27	29	31	35
San Bernardino County Housing Authority	DBH CoC New Horizons (PSH)	Scattered Site	282	302	321	341	318
San Bernardino County Housing Authority	DBH CoC Project Cornerstone (PSH)	Scattered Site	91	35	55	67	66
San Bernardino County Housing Authority	DBH CoC Project Gateway (PSH)	Ontario	60	21	16	17	17
San Bernardino County Housing Authority	DBH CoC Project Lantern Woods (PSH)	Scattered Site	20	18	16	16	15
San Bernardino County Housing Authority	DBH CoC Project Stepping Stones (PSH)	Scattered Site	58	58	56	30	46
San Bernardino County Housing Authority	DBH CoC Whispering Pines (PSH)	Scattered Site	54	16	23	30	30
San Bernardino County Housing Authority	DBH HUD Golden Apartments (PSH)	San Bernardino				26	39
San Bernardino County Housing Authority	HA1 GF NCLU County SB (PSH)	Scattered Site	50	101	88	88	85
San Bernardino County Housing Authority	HA1 VA VASH (PSH)	Scattered Site	407	418	561	564	529
Step Up on Second Street, Inc.	SUS CoC Bonus FSP Expansion (PSH)	Scattered Site		19	19	28	
Step Up on Second Street, Inc.	SUS CoC Step Up (PSH)	Scattered Site	112	123	112	142	
Step Up on Second Street, Inc.	SUS CoC Step Up Bonus (PSH)	Scattered Site	19	13	13	14	173
The Salvation Army San Bernardinio	Salvation Army PSH (PSH)	San Bernardino	13				
Time for Change Foundation	TFC CoC Home of Hope (PSH)	Scattered Site	30	30	30	40	30
US Veterans Inc.	USV CoC Veterans PSH (PSH)	Scattered Site	98	95	95	95	99
		Total:	1412	1368	1528	1603	1556

Gaps and Needs Analysis

The following chart shows that there were hundreds of unsheltered adults counted during the Point-in-Time counts of 2018, 2019, and 2020 that were chronically homeless, had chronic health conditions, and/or had serious mental illness.

Chart 2.
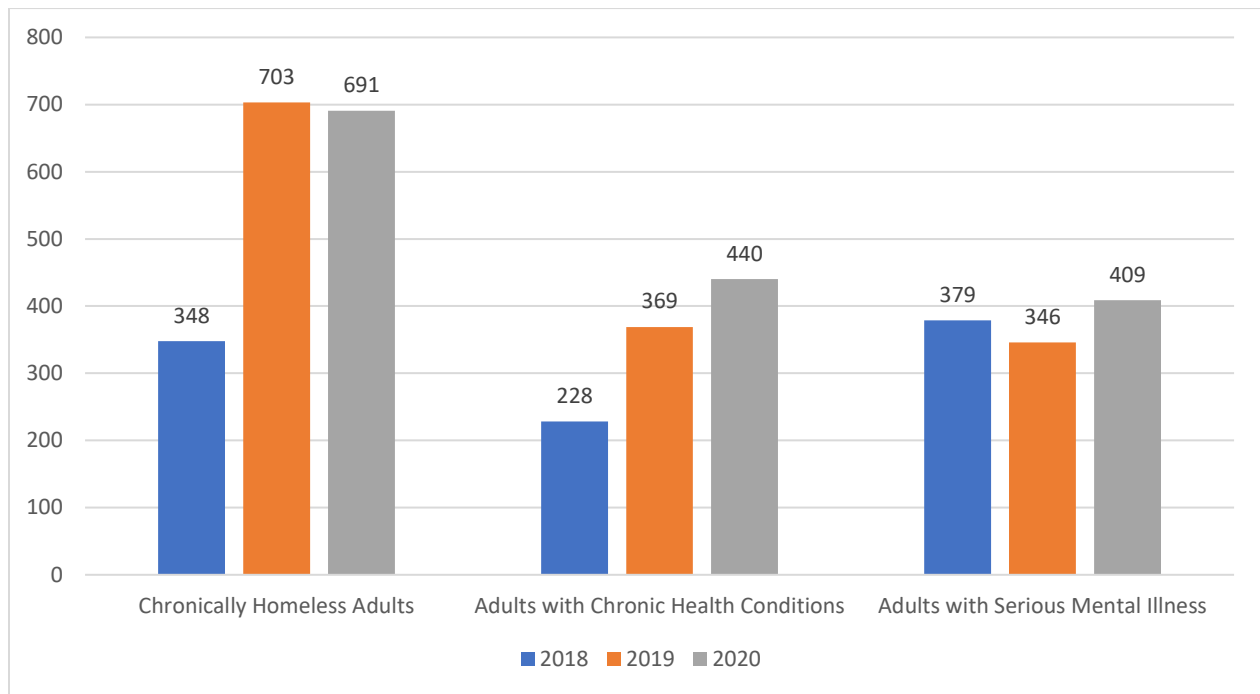
Permanent supportive housing is an evidence-based best practice for permanently housing chronically homeless persons, persons with chronic health conditions, and persons with serious mental illness.

The number and percent of vacant permanent supportive housing beds available during a day like today for the hundreds of unsheltered adults who are chronically homeless, have chronic health conditions, and/or have serious mental illness during a day like today is inadequate. As revealed in the table below

- the number of vacant beds is likely 20 or less, which represents a vacancy rate of around 1%.

Table 1.

	Total # of Beds	# of Occupied Beds	# and % of Vacant Beds	
			#	%
2018	1,368	1,269	99	7.2
2019	1,528	1,508	20	1.3
2020	1,603	1,591	12	0.7

Recommendations

Recommendation 1: Prioritize the creation of scattered-site permanent supportive housing projects

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Scattered-site approaches that focus on leasing existing housing stock avoids some of the obstacles to single-site permanent supportive housing projects noted below and results in scaling up permanent supportive housing projects in a shorter time.

Currently, the number of scattered-site permanent supportive housing beds (1,476) far outnumber single-site permanent supportive housing beds (80), as noted in the chart below.

Chart 3.

Permanent Supportive Housing

Year	# of Scattered-Site Beds	# of Single-Site Beds
2017	1,291	108
2018	1,307	61
2019	1,474	54
2020	1,535	68
2021	1,476	80
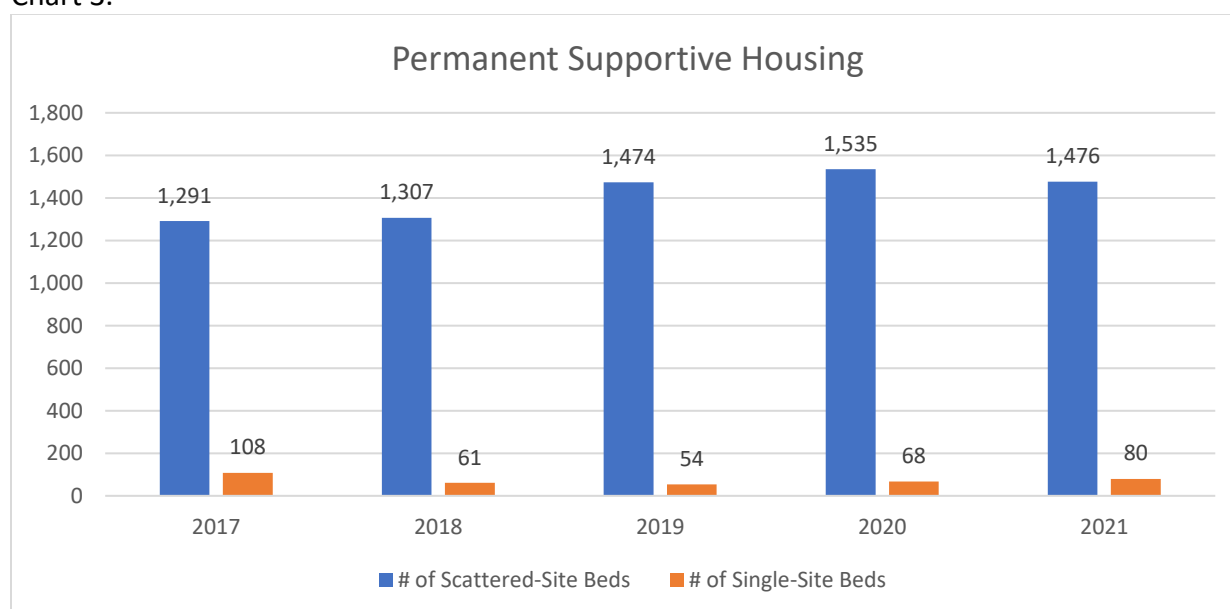
Creating single-site permanent supportive housing projects is often a very complicated and lengthy process, often taking a few years or more to complete. The high capital costs and long development process are a substantive barrier to the replicability of successful programs.

In the case of single-site permanent supportive housing developments, myriad local land-use, permitting, and other regulatory barriers, which may be undergirded by prejudicial stereotypes and neighborhood opposition, makes land unavailable, leads to protracted delays, and drives up development costs by as much as 20-35 percent.

Recommendation 2: Design a Flexible Funding Pool of Funds to remove financial barriers to rapidly house persons that qualify for permanent supportive housing that other sources of funding will not pay for because of funding restrictions.

A Flexible Funding Pool of Funds should boost a "whatever it takes" approach to house homeless households by designing a flexible pool of funds to respond rapidly to the homeless experiences of individuals and families unlike ever before.

One key ingredient for a flexible pool of funds is to have one source of funding that subsidizes costs to rapidly house homeless households that no other sources of funding in the pool will pay for because of funding restrictions.

A "whatever it takes" approach to house a household involves paying for costs considered to be property owner incentives. Such incentives have become increasingly needed to secure permanent housing units and to rapidly house homeless households.

Incentives should include using flexible funding to

- bridge subsidies to property owners waiting for approval from another permanent rental subsidy source (e.g., waiting for housing officials to inspect the unit before the tenant moves in);
- vacancy payments;
- project-based rent or operating reserves;
- repairs made in advance of occupancy to ensure compliance with habitability standards; and
- technical assistance in the form of contractors to assist the landlord in making repairs.

However, other property owner incentives have become increasingly needed to change property owner reluctance to secure units and rapidly house homeless households. Payment for the following incentives should be considered for inclusion:

- Up to two months' rent security deposit and/or utility assistance;
- Unpaid rent before and after tenant moves;
- Contingency fund to help landlords cover expenses such as repairs that exceed security deposits and legal costs related to eviction process and disposal assistance of property;
- One-time Leasing bonus for additional units;
- Holding fees to hold available units;
- Indemnification of property owners for property damage;
- Damage claims to mitigate damage caused by tenants during occupancy;
- Dedicated point person responsive to property owner concerns and needs for prompt intervention with tenants when requested;

- Application fees and any credit/background check reports required for leasing unit;
- Apartment furnishings to help ensure a healthy living environment;
- Renters insurance policy;
- Move-in/move-out cleaning service;
- Percentage of security services (or motion censored lighting) if several or many units are leased.

Rapid Re-housing

Local Data Trends

The following chart is based on data from the 2017 – 2021 Housing Inventory Counts (HIC), which are required by and submitted to the U.S. Department of Housing and Urban Development (HUD) annually.

The Housing Inventory Count (HIC) is a point-in-time inventory of provider programs within a Continuum of Care that provide beds and units dedicated to serve people experiencing homelessness (and, for permanent housing projects, where homeless at entry, per the **HUD homeless definition**), categorized by five Program Types: Emergency Shelter; Transitional Housing; Rapid Re-housing; Safe Haven; and Permanent Supportive Housing.

HUD defines rapid rehousing as "an intervention, informed by a Housing First approach that is a critical part of a community's effective homeless crisis response system. Rapid re-housing rapidly connects families and individuals experiencing homelessness to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services."

The chart summarizes the data from the table below and reveals that the

- number of rapid rehousing beds increased from 1,718 in 2017 to 2,120 in 2021, which represents an increase of 402 beds or 23%.
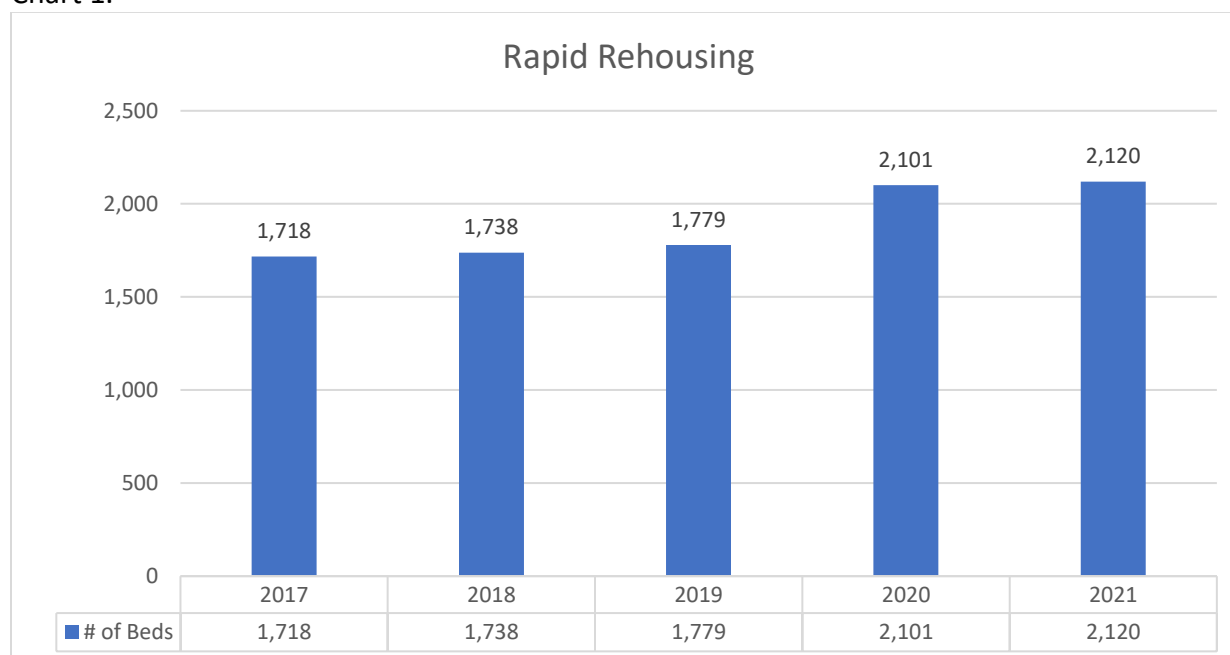
Chart 1.

Rapid Rehousing

	2017	2018	2019	2020	2021
# of Beds	1,718	1,738	1,779	2,101	2,120

Table 1.

Organization Name	Project Name	City	Location	2017	2018	2019	2020	2021
Rapid Rehousing:								
Catholic Charities	CC1 ESG City SB (RR-H)	San Bernardino	Scattered Sites	0	3			
Catholic Charities	CC1 ESG County SB (RR-H)	San Bernardino	Scattered Sites	0	3			
Catholic Charities	CC1 HEAP No Wrong Door (RR-H)	San Bernardino	Scattered Sites				14	5
Central City Lutheran Mission	CC1 ESG City SB (RR-H)	San Bernardino	Scattered Sites	0	0			
Central City Lutheran Mission	CC1 ESG County SB (RR-H)	San Bernardino	Scattered Sites	0				
City of Barstow	BAR HEAP Homeward Bound (RR-H)	Barstow	Scattered Sites				86	32
City of Colton	COL HEAP Homeless Assistance Program (RR-H)	Colton	Scattered Sites				16	4
City of Montclair	MON HEAP City (RR-H)	Montclair	Scattered Sites				7	2
City of Rialto	RIA HEAP City (RR-H)	Rialto	Scattered Sites				48	
Community Action Partnership of San Bernardino County	CAP ESG CITY SB (RR-H)	San Bernardino	Scattered Sites	0		3	2	
Community Action Partnership of San Bernardino County	CAP ESG County SB (RR-H)	San Bernardino	Scattered Sites	0		4	7	
Community Action Partnership of San Bernardino County	CAP ESG County SB Vet Deposit (RR-H)	San Bernardino	Scattered Sites			4	2	
County of SB Transitional Assistance Dept.	TAD HEAP Family Stabilization Program (RR-H)	County Wide	Scattered Sites				29	
Family Service Association of Redlands	FSA ESG County SB Housing Advocacy (RR-H)	Redlands	Scattered Sites	0	15	5	7	
Family Services Assn. of Redlands	ESG-Rapid Re-Housing	Redlands	Scattered Sites	15	15		1	
High Desert Homeless	HDH ESG County SB (RR-H)	Victorville	Scattered Sites	35	42	4	12	12
High Desert Homeless Services	HDH HEAP Rapid Re-Housing (RR-H)	Victorville	Scattered Sites				36	28
Inland Counties Legal Services	ICL ESG County (RR-H)	Loma Linda	Scattered Sites				27	
Inland Counties Legal Services	ICL ESG State (RR-H)	Loma Linda	Scattered Sites				6	1
Inland Temporary Homes	LTH CoC Infinite Horizons (RR-H)	Loma Linda	Scattered Sites	26	38	41	69	39
Inland Temporary Homes	LTH ESG HSS County (RR-H)	Loma Linda	Scattered Sites		74	38	42	75
Inland Temporary Homes	LTH ESG HSS State (RR-H)	Loma Linda	Scattered Sites			76	7	
Inland Valley Hope Partners	IHP CoC Family Stabilization Program (RR-H)	County Wide	Scattered Sites	63	41	77	4	32
Inland Valley Hope Partners	IHP HEAP Rapid Re-Housing (RR-H)	County Wide	Scattered Sites				5	7
Knowledge & Education for Your Success	KEY CoC KEYs for Life (RR-H)	San Bernardino	Scattered Sites	173	110	100	84	121
Knowledge & Education for Your Success	KEY CoC KEYs for Success (RR-H)	San Bernardino	Scattered Sites	16	61	165	79	70
Knowledge & Education for Your Success	KEY SF Housing Support Program (RR-H)	San Bernardino	Scattered Sites	1085	932	893	738	888
Knowledge & Education for Your Success	KEY SF HSP Interim Housing (RR-H)	San Bernardino	Scattered Sites			6	25	51
Knowledge & Education for Your Success	KEY SSVF Category 2 (RR-H)	San Bernardino	Scattered Sites	33	63	55	67	66
Knowledge & Education for Your Success	KEYS HEAP Housing Stability (RR-H)	San Bernardino	Scattered Sites				45	
Lighthouse Social Services	LSS SF Family Stabilization Program (RR-H)	San Bernardino	Scattered Sites	151	176	173	223	32
Lighthouse Social Services	LSS SSVF Rapid Re-Housing (RR-H)	San Bernardino	Scattered Sites	35	23	41	74	51
US Veterans Inc.	USV SSVF Rapid Re-Housing (RR-H)	San Bernardino	Scattered Sites	35	62			
US Veterans Inc.	USV-Rapid Re-Housing-Priority 1 (RR-H)	San Bernardino	Scattered Sites	43				
Lighthouse Social Services	LSS GOV Adult Re-entry (RR-H)	San Bernardino	Scattered Sites				1	98
Lighthouse Social Services	LSS GOV Warm Re-entry (RR-H)	San Bernardino	Scattered Sites				1	
Lutheran Social Services of Southern California	CC1 ESG City SB (RR-H)	San Bernardino	Scattered Sites		0	0	31	
Mental Health Systems, Inc.	MHS HEAP TAY (RR-H)	San Bernardino	Scattered Sites				9	19
Mercy House	MH1 ESG CV City Ont (RR-H)	Ontario	Scattered Sites					1
Mercy House	MH1 HEAP Rapid Rehousing (RR-H)	Ontario	Scattered Sites			4	16	21
Mercy House	MH1 PF San Manuel (RR-H)	Ontario	Scattered Sites					7
Morongo Basin Unified School District	MUS HEAP Rapid Re-Housing (RR-H)	Twenty-Nine Palms	Scattered Sites				5	
Salvation Army Highland	SA3 HEAP Rapid Rehousing (RR-H)	Highland	Scattered Sites				10	3
Step Up on Second Street, Inc.	SUS HEAP Step Up (RR-H)	San Bernardino	Scattered Sites				21	35
The Chance Project Pathways Network	TCP HEAP Chance Project (RR-H)	Redlands	Scattered Sites				179	291
The Chance Project Pathways Network	TCP ESG CV2 Moving Forward (RR-H)	Redlands	Scattered Sites					74
US Veterans Inc.	USV SSVF Rapid Re-Housing (RR-H)	San Bernardino	Scattered Sites		71	81	30	34
Water of Life Community Church	WOL ESG City Fon (RR-H)	Fontana	Scattered Sites	8	9	9	2	
Water of Life Community Church	WOL HEAP WRAP (RR-H)	Fontana	Scattered Sites				34	21
		Total Beds:		**1718**	**1738**	**1779**	**2101**	**2120**
		Total Projects:		**13**	**17**	**19**	**40**	**29**

The following charts breakdown the chart above by city.

Table 2. San Bernardino City

Organization Name	Project Name	City	Location	2017	2018	2019	2020	2021
Rapid Rehousing:								
Catholic Charities	CC1 ESG City SB (RR-H)	San Bernardino	Scattered Sites	0	3			
Catholic Charities	CC1 ESG County SB (RR-H)	San Bernardino	Scattered Sites	0	3			
Catholic Charities	CC1 HEAP No Wrong Door (RR-H)	San Bernardino	Scattered Sites				14	5
Central City Lutheran Mission	CC1 ESG City SB (RR-H)	San Bernardino	Scattered Sites	0	0			
Central City Lutheran Mission	CC1 ESG County SB (RR-H)	San Bernardino	Scattered Sites	0				
Community Action Partnership of San Bernardino County	CAP ESG CITY SB (RR-H)	San Bernardino	Scattered Sites	0		3	2	
Community Action Partnership of San Bernardino County	CAP ESG County SB (RR-H)	San Bernardino	Scattered Sites	0		4	7	
Community Action Partnership of San Bernardino County	CAP ESG County SB Vet Deposit (RR-H)	San Bernardino	Scattered Sites			4	2	
Knowledge & Education for Your Success	KEY CoC KEYs for Life (RR-H)	San Bernardino	Scattered Sites	173	110	100	84	121
Knowledge & Education for Your Success	KEY CoC KEYs for Success (RR-H)	San Bernardino	Scattered Sites	16	61	165	79	70
Knowledge & Education for Your Success	KEY SF Housing Support Program (RR-H)	San Bernardino	Scattered Sites	1085	932	893	738	888
Knowledge & Education for Your Success	KEY SF HSP Interim Housing (RR-H)	San Bernardino	Scattered Sites			6	25	51
Knowledge & Education for Your Success	KEY SSVF Category 2 (RR-H)	San Bernardino	Scattered Sites	33	63	55	67	66
Knowledge & Education for Your Success	KEYS HEAP Housing Stability (RR-H)	San Bernardino	Scattered Sites				45	
Lighthouse Social Services	LSS SF Family Stabilization Program (RR-H)	San Bernardino	Scattered Sites	151	176	173	223	32
Lighthouse Social Services	LSS SSVF Rapid Re-Housing (RR-H)	San Bernardino	Scattered Sites	35	23	41	74	51
US Veterans Inc.	USV SSVF Rapid Re-Housing (RR-H)	San Bernardino	Scattered Sites	35	62			
US Veterans Inc.	USV-Rapid Re-Housing-Priority 1 (RR-H)	San Bernardino	Scattered Sites	43				
Lighthouse Social Services	LSS GOV Adult Re-entry (RR-H)	San Bernardino	Scattered Sites				1	98
Lighthouse Social Services	LSS GOV Warm Re-entry (RR-H)	San Bernardino	Scattered Sites				1	
Lutheran Social Services of Southern California	CC1 ESG City SB (RR-H)	San Bernardino	Scattered Sites		0	0	31	
Mental Health Systems, Inc.	MHS HEAP TAY (RR-H)	San Bernardino	Scattered Sites				9	19
Step Up on Second Street, Inc.	SUS HEAP Step Up (RR-H)	San Bernardino	Scattered Sites				21	35
US Veterans Inc.	USV SSVF Rapid Re-Housing (RR-H)	San Bernardino	Scattered Sites		71	81	30	34
		Total Beds:		**1571**	**1504**	**1525**	**1453**	**1470**
		Total Projects:		**14**	**12**	**12**	**18**	**12**

Table 3. Redlands

Organization Name	Project Name	City	Location	2017	2018	2019	2020	2021
Rapid Rehousing:								
Family Service Association of Redlands	FSA ESG County SB Housing Advocacy (RR-H)	Redlands	Scattered Sites	0	15	5	7	
Family Services Assn. of Redlands	ESG-Rapid Re-Housing	Redlands	Scattered Sites	15	15		1	
The Chance Project Pathways Network	TCP HEAP Chance Project (RR-H)	Redlands	Scattered Sites				179	291
The Chance Project Pathways Network	TCP ESG CV2 Moving Forward (RR-H)	Redlands	Scattered Sites					74
		Total Beds:		**15**	**30**	**5**	**187**	**365**
		Total Projects:		**2**	**2**	**1**	**3**	**2**

Table 4. Loma Linda

Organization Name	Project Name	City	Location	2017	2018	2019	2020	2021
Rapid Rehousing:								
Inland Counties Legal Services	ICL ESG County (RR-H)	Loma Linda	Scattered Sites	██████	██████	██████	27	██████
Inland Counties Legal Services	ICL ESG State (RR-H)	Loma Linda	Scattered Sites				6	1
Inland Temporary Homes	LTH CoC Infinite Horizons (RR-H)	Loma Linda	Scattered Sites	26	38	41	69	39
Inland Temporary Homes	LTH ESG HSS County (RR-H)	Loma Linda	Scattered Sites	██████	74	38	42	75
Inland Temporary Homes	LTH ESG HSS State (RR-H)	Loma Linda	Scattered Sites	██████	██████	76	7	██████
			Total Beds:	26	112	155	151	115
			Total Projects:	1	2	3	5	3

Table 5. Victorville

Organization Name	Project Name	City	Location	2017	2018	2019	2020	2021
Rapid Rehousing:								
High Desert Homeless	HDH ESG County SB (RR-H)	Victorville	Scattered Sites	35	42	4	12	12
High Desert Homeless Services	HDH HEAP Rapid Re-Housing (RR-H)	Victorville	Scattered Sites	██████	██████	██████	36	28
			Total Beds:	35	42	4	48	40
			Total Projects:	1	1	1	2	2

Table 6. County-wide

Organization Name	Project Name	City	Location	2017	2018	2019	2020	2021
Rapid Rehousing:								
County of SB Transitional Assistance Dept.	TAD HEAP Family Stabilization Program (RR-H)	County Wide	Scattered Sites	██████	██████	██████	29	██████
Inland Valley Hope Partners	IHP CoC Family Stabilization Program (RR-H)	County Wide	Scattered Sites	63	41	77	4	32
Inland Valley Hope Partners	IHP HEAP Rapid Re-Housing (RR-H)	County Wide	Scattered Sites	██████	██████	██████	5	7
			Total Beds:	63	41	77	38	39
			Total Projects:	1	1	1	3	2

Table 7. Barstow

Organization Name	Project Name	City	Location	2017	2018	2019	2020	2021
Rapid Rehousing:								
City of Barstow	BAR HEAP Homeward Bound (RR-H)	Barstow	Scattered Sites	██████	██████	██████	86	32
			Total Beds:	0	0	0	86	32
			Total Projects:	0	0	0	1	1

Table 8. Ontario

Organization Name	Project Name	City	Location	2017	2018	2019	2020	2021
Rapid Rehousing:								
Mercy House	MH1 ESG CV City Ont (RR-H)	Ontario	Scattered Sites	██████	██████	██████	██████	1
Mercy House	MH1 HEAP Rapid Rehousing (RR-H)	Ontario	Scattered Sites	██████	██████	4	16	21
Mercy House	MH1 PF San Manuel (RR-H)	Ontario	Scattered Sites	██████	██████			7
			Total Beds:	0	0	4	16	29
			Total Projects:	0	0	1	1	3

Table 9. Fontana

Organization Name	Project Name	City	Location	2017	2018	2019	2020	2021
Rapid Rehousing:								
Water of Life Community Church	WOL ESG City Fon (RR-H)	Fontana	Scattered Sites	8	9	9	2	■
Water of Life Community Church	WOL HEAP WRAP (RR-H)	Fontana	Scattered Sites	■	■	■	34	21
		Total Beds:		8	9	9	36	21
		Total Projects:		1	1	1	2	1

Table 10. Colton

Organization Name	Project Name	City	Location	2017	2018	2019	2020	2021
Rapid Rehousing:								
City of Colton	COL HEAP Homeless Assistance Program (RR-H)	Colton	Scattered Sites	■	■	■	16	4
		Total Beds:		0	0	0	16	4
		Total Projects:		0	0	0	2	2

Table 11. Highland

Organization Name	Project Name	City	Location	2017	2018	2019	2020	2021
Rapid Rehousing:								
Salvation Army Highland	SA3 HEAP Rapid Rehousing (RR-H)	Highland	Scattered Sites	■	■	■	10	3
		Total Beds:		0	0	0	10	3
		Total Projects:		0	0	0	1	1

Table 12. Montclair

Organization Name	Project Name	City	Location	2017	2018	2019	2020	2021
Rapid Rehousing:								
City of Montclair	MON HEAP City (RR-H)	Montclair	Scattered Sites	■	■	■	7	2
		Total Beds:		0	0	0	7	2
		Total Projects:		0	0	0	1	1

Table 13. Rialto

Organization Name	Project Name	City	Location	2017	2018	2019	2020	2021
Rapid Rehousing:								
City of Rialto	RIA HEAP City (RR-H)	Rialto	Scattered Sites	■	■	■	48	■
		Total Beds:		0	0	0	48	0
		Total Projects:		0	0	0	1	0

Table 14. Twentynine Palms

| Organization Name	Project Name	City	Location	2017	2018	2019	2020	2021
Rapid Rehousing:								
Morongo Basin Unified School District	MUS HEAP Rapid Re-Housing (RR-H)	Twenty-Nine Palms	Scattered Sites	■	■	■	5	■
		Total Beds:		0	0	0	5	0
		Total Projects:		0	0	0	1	0

Gaps and Needs Analysis

Rapid re-housing focuses on identifying persons with a moderate level of needs. These individuals and members of families are provided time limited financial and/or case management assistance, along with assistance accessing housing.

Rapid re-housing is NOT simply access to an apartment nor is it just rental subsidy. Given the flexibility of case management supports within this time-limited period (usually 3-6 months with some possibility for extension), some people need a light to medium "touch" to stabilize in housing and access other mainstream services.

During 2020, 679 persons were given a priority score of 4 through 7, which means an assessment for rapid re-housing.

Gender

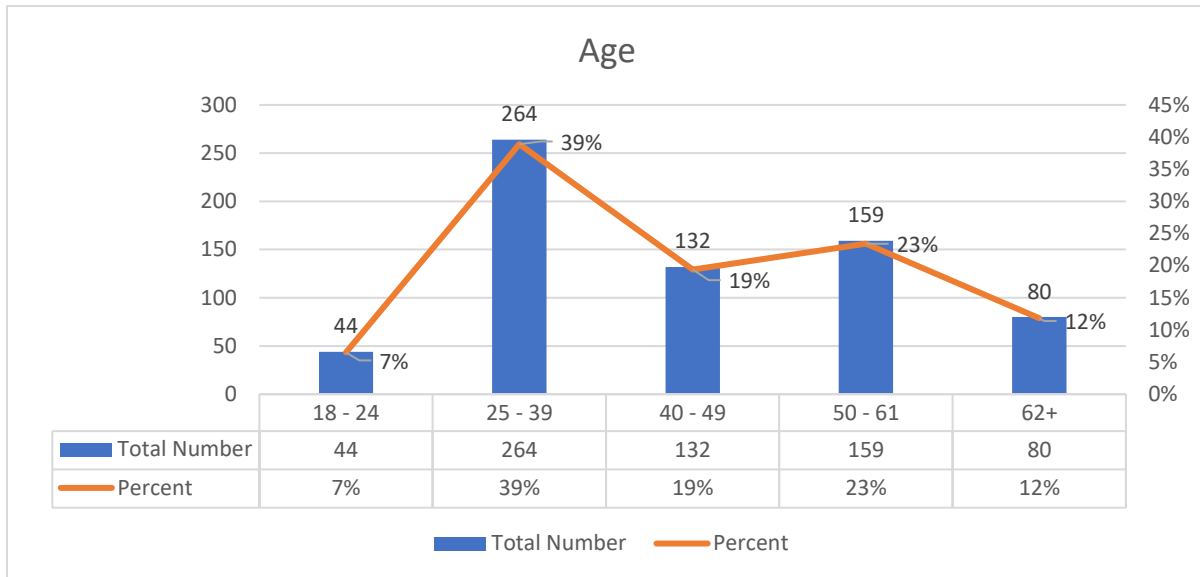- More than half (54%) were female and less than half (46%) were male.

Gender

	Male	Female	Transgender
Total Number	310	368	1
Percent	46%	54%	0%
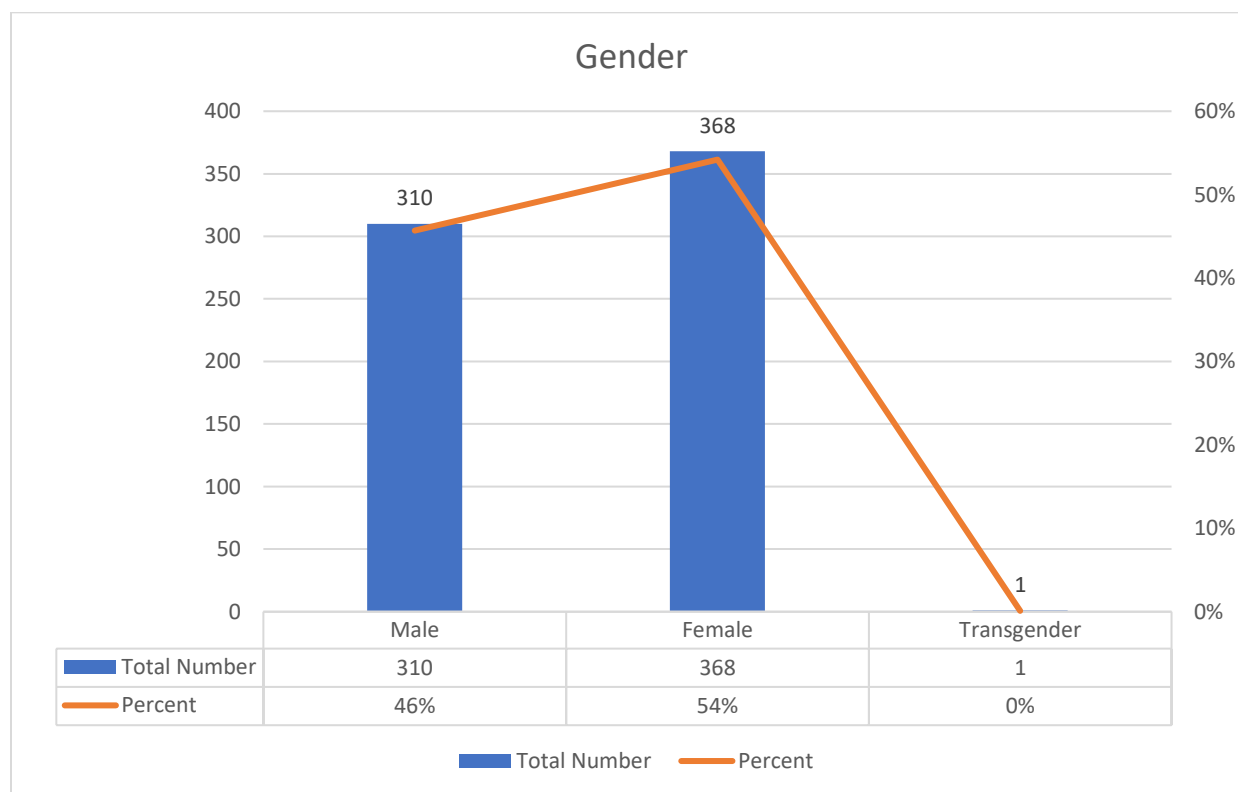
Age

Of the 679 persons

- 7% or 44 were youth age 18 – 24; and
- 12% or 80 were age 62+.

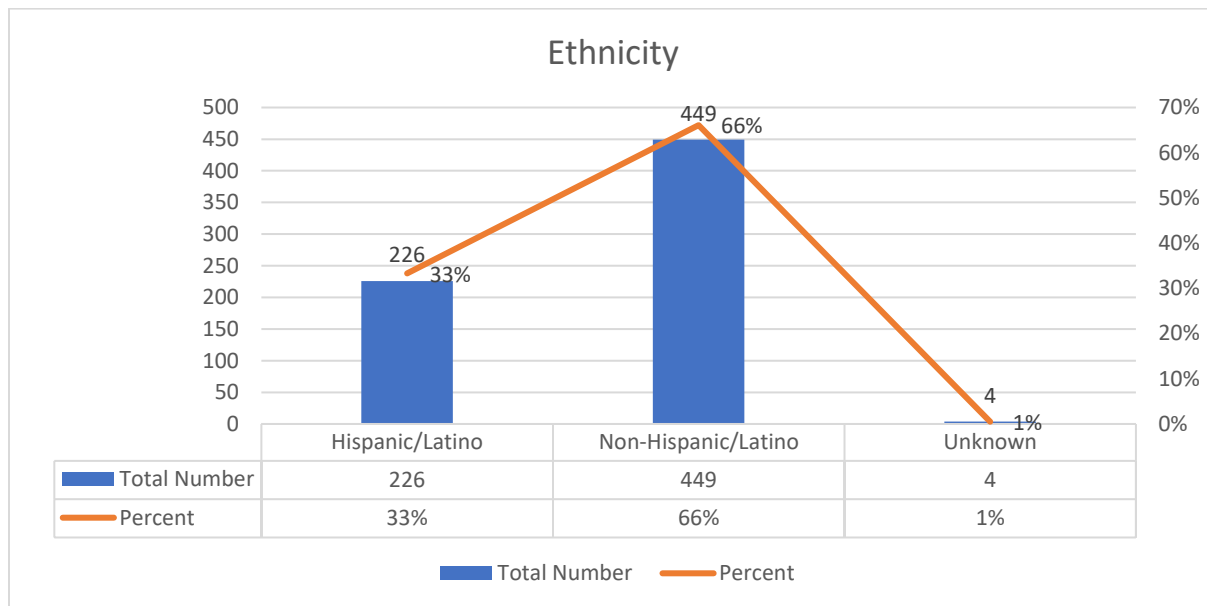More than one-third (35%) were age 50+ and nearly two-thirds (65%) were age 18 – 49.

Chart x.

	18 - 24	25 - 39	40 - 49	50 - 61	62+
Total Number	44	264	132	159	80
Percent	7%	39%	19%	23%	12%

Race

Table x.

| Race	Number	Percent
American Indian or Alaska Native	15	2.2
Asian	3	0.4
Black or African American	246	36.2
Native Hawaiian or Other Pacific Islander	7	1.0
White	380	56.0
Other	10	1.5
Unknown	18	2.7
Total:	**679**	**100**

Ethnicity

Of the 679 persons, as noted in the following chart,

- One-third (33%) or 226 were Hispanic/Latino;
- Two-thirds (66%) or 449 were non-Hispanic/Latino;
- 4 or 1% were unknown.

Ethnicity

	Hispanic/Latino	Non-Hispanic/Latino	Unknown
Total Number	226	449	4
Percent	33%	66%	1%

Family Type

- More than one-third (35%) of family type was family and nearly two-thirds (65%) were single adults.

Family Type

	Family	Single Adults
Total Number	239	440
Percent	35%	65%
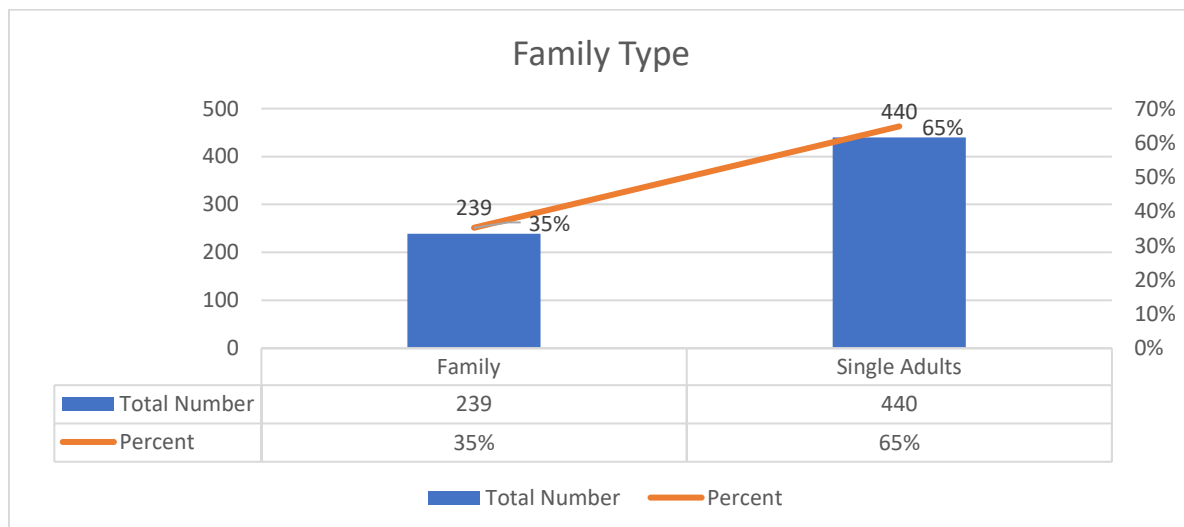
Recommendations

Recommendation 1: Provide funding for rapid re-housing assistance for individuals and families given a priority score of 4 through 7

Rapid re-housing assistance will be provided to individuals and families **given a priority score of 4 through 7**. These individuals and members of families will be provided time limited financial and/or case management assistance, along with assistance accessing housing.

HIC Data:

Data Trends: Temporary and Permanent Housing

The line chart below provides a series of data points taken from the Housing Inventory Count (HIC) over the six-year period between 2017 and 2021. HUD requires CoCs to submit a HIC each year that includes an inventory of year-round beds for emergency shelter, transitional housing, safe haven, rapid rehousing, and permanent supportive housing available during the CoC's Point-in-Time homeless count.
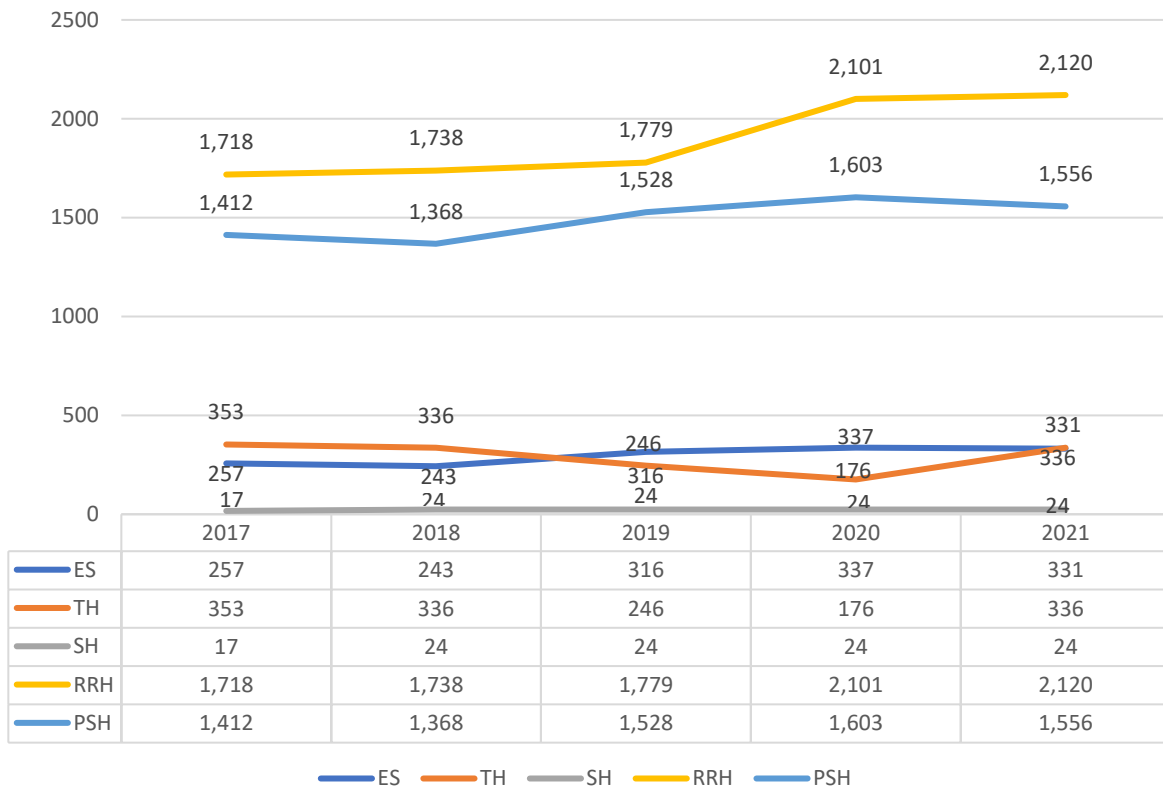
The chart below shows

- An increase in year-round emergency shelter beds—from 257 beds in 2017 to 331 beds in 2021, which represents an increase of 74 beds or 29%;
- An increase in permanent supportive housing beds—from 1,412 beds in 2017 to 1,556 beds in 2021, which represents an increase of 144 beds or 10%; and
- An increase in rapid re-housing beds—from 1,718 beds in 2017 to 2,120 beds in 2021, which represents an increase of 402 beds or 23%.

The chart also shows

- A decrease in transitional housing beds—from 353 beds in 2017 to 336 beds in 2021, which represents a decrease of 17 beds or 5%.

Year Round Beds

	2017	2018	2019	2020	2021
ES	257	243	316	337	331
TH	353	336	246	176	336
SH	17	24	24	24	24
RRH	1,718	1,738	1,779	2,101	2,120
PSH	1,412	1,368	1,528	1,603	1,556

ES — TH — SH — RRH — PSH

Subpopulations

Recommendation 1: Focus on ending homelessness by implementing a subpopulation approach by prioritizing various subpopulations countywide and within jurisdictions

Subpopulation Approach

Ending homelessness for the more than 3,000 unsheltered and sheltered persons counted as homeless in 2020 is a daunting task and seemingly impossible all at once. Ending homelessness for various subpopulations such as seniors, veterans, women, and youth is not as daunting and possible.

For example, the number of seniors age 62+ counted as unsheltered in 2020 was 139. Ending homelessness for the 31 unsheltered seniors age 62+ who were women or the 29 who were veterans is even less daunting and possible. The same is true for the 28 unsheltered seniors age 62+ who were counted in the City of San Bernardino, 14 in Fontana, 11 in Redlands, and 10 in Victorville.

For example, the number of veterans counted as unsheltered in 2020 was 127. Ending homelessness for the 13 unsheltered veterans who were women and the 29 who were age 62+ is even less daunting and possible. The same is true for the 34 unsheltered veterans who were counted in the City of San Bernardino, 22 in Victorville, 8 in Redlands, 7 in Fontana, and the 6 counted in Twentynine Palms and Yucca Valley.

For example, the number of women counted as unsheltered in 2020 was 676. Ending homelessness for the 31 unsheltered women who were seniors age 62+ or the 13 who were veterans is even less daunting and possible. The same is true for the 220 unsheltered women who were counted in the City of San Bernardino, 99 in Victorville, 40 in Rialto, 39 in Fontana, and the 33 counted in Colton.

Recommendation 2: Focus on ending homelessness for the following unsheltered subpopulations: families; seniors age 62+; veterans, women, and youth age 18 - 24.

Subpopulations: Seniors Age 62+

Recommendation 3: Establish a Street Outreach for Seniors (SOS) Team dedicated to ending homelessness among seniors living on the streets county-wide and within jurisdictions

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Efforts to end homelessness among seniors age 62+ will include expanding current street outreach and engagement to include a SOS (Street Outreach for Seniors) Program that will provide crisis intervention, counseling, and advocacy for unsheltered seniors age 62+.

The SOS Program will respond to any calls for service involving seniors age 62+. The Program will include weekly outreach at senior centers and senior meal sites to help identify unsheltered seniors.

Local Data Trends

Three sources of data were used to identify local data trends regarding homeless seniors age 62+--2020 Point-in-Time Count (PITC), Coordinated Entry System (CES), and the Homeless Management Information System (HMIS). The timeframe was 2020.

2020 Point-in-Time Count

The first source of data used was the 2020 PITC. There were 139 seniors age 62+ who were counted as homeless during the 2020 PITC. The table breaks down the number of seniors age 62+ by gender, race/ethnicity, and chronic homelessness.

Table 1. 2020 Point-in-Time Sheltered and Unsheltered Count

	#	%
Total Number/Percent	139	100
Subpopulations:		
Female	31	22.3
Male	107	77.0
Transgender	1	0.7
Chronically Homeless	53	38.1
American Indian or Alaska Native	6	4.3
Asian	1	0.7
Black or African-American	22	15.8
Hispanic/Latino	35	25.2
Native Hawaiian/Pacific Islander	1	0.7

	#	%
Other	14	10.1
White	92	66.2
Unknown	3	2.1

Coordinated Entry System

The second source of data was the CES. The data consisted of every seniors age 62+ that was entered into the CES during 2018 through 2020. There were 181 seniors age 62+.

The next table compares the number of seniors age 62+ counted in 2020 to the number of seniors age 62+ entered into the CES during 2018 through 2020 by gender, race/ethnicity, and chronic homelessness.

Table 2.

	Point-in-Time Sheltered and Unsheltered Count		Coordinated Entry System	
	#	%	#	%
Total Number	139	100	181	100
Subpopulations:				
Female	31	22.3	41	22.7
Male	107	77.0	139	76.8
Transgender	1	0.7	1	0.5
Chronically Homeless	53	38.1	*	*
American Indian or Alaska Native	6	4.3	4	2.2
Asian	1	0.7	0	0.0
Black or African-American	22	15.8	59	32.6
Hispanic/Latino	35	25.2	33	18.2
Native Hawaiian/Pacific Islander	1	0.7	1	0.6
Other	14	10.1	1	0.6
White	92	66.2	114	63.0
Unknown	3	2.1	0	0.0

*Included in HMIS

Subpopulations for which their percentage was notably larger in CES when compared to the 2020 PITC include:

- Blacks or African Americans.

Subpopulations for which their percentage was notably smaller in CES when compared to the 2020 PITC include:

- Hispanic/Latino.

Priority and Acuity Score

The chart below groups the 181 seniors age 62+ in the Coordinated Entry System (CES) in 2020 by intervention. A score of 0 – 3 means no housing intervention; 4 – 7 means an assessment for Rapid Re-Housing; and 8+ means an assessment for Permanent Supportive Housing/Housing First.

Chart 1.

Priority Scoring Summary

	0 - 3	4 - 7	8 - 20	Unknown
Total Number	11	60	110	0
Percent	6%	33%	61%	0%
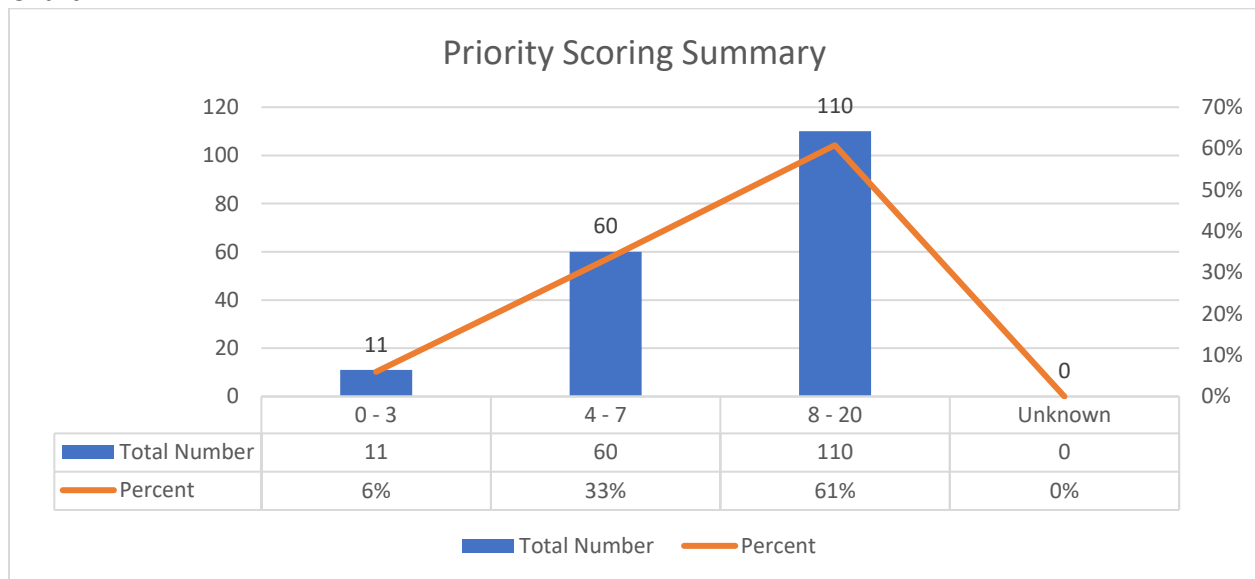
- More than half (61%) or 110 seniors age 62+ were assessed for Permanent Supportive Housing/Housing First;
- One-third (33%) or 60 seniors age 62+ were assessed for rapid re-housing.

Thus, 94% of seniors age 62+ were assessed for permanent housing.

The following table lists each priority score and the related number of seniors age 62+ and percent.

Table 3.

Priority Score	Number of Persons	Percent
1	2	1.1
2	5	2.8
3	4	2.2
4	14	7.7
5	15	8.3

6	16	8.8
7	15	8.3
8	20	11.0
9	21	11.6
10	24	13..3
11	17	9.4
12	8	4.4
13	7	3.9
14	6	3.3
15	3	1.7
16	3	1.7
17	1	0.6
18	0	0.0
19	0	0.0
20	0	0.0
Unknown	0	0.0
Total:	**181**	**100**

Homeless Management Information System

The third source of data was the HMIS. The data consisted of every senior age 62+ that was entered into the HMIS during 2018 through 2020. There were 773 seniors age 62+.

The next table compares the number of seniors age 62+ counted in 2020, the number of seniors age 62+ entered into the CES during 2018 through 2020, and to the number of seniors age 62+ entered into the HMIS during 2018 through 2020 by gender, race/ethnicity, and chronic homelessness.

Table 4. Seniors Age 62+ and Local Data Sources: 2020 Statistics

	Point-in-Time Sheltered and Unsheltered Count		Coordinated Entry System		Homeless Management Information System	
	#	%	#	%	#	%
Total Number	139	100	181	100	773	100
Subpopulations:						
Female	31	22.3	41	22.7	282	36.5
Male	107	77.0	139	76.8	490	63.4
Transgender	1	0.7	1	0.5	0	0.0
Chronically Homeless	53	38.1	*	*	221	28.6
American Indian or Alaska Native	6	4.3	4	2.2	14	1.8

Asian	1	0.7	0	0.0	6	0.8
Black or African-American	22	15.8	59	32.6	221	28.6
Hispanic/Latino	35	25.2	33	18.2	184	23.8
Native Hawaiian/Pacific Islander	1	0.7	1	0.6	7	0.9
Other	14	10.1	1	0.6	6	0.7
White	92	66.2	114	63.0	497	64.3
Unknown	3	2.1	0	0.0	22	2.9

*Included in HMIS

Subpopulations for which their percentage was notably different in one data source when compared to the other data sources include:

- Females
- Males; and
- Chronically homeless.

Prior Residence

Prior to entry into HMIS, as noted in the chart below,

- 43% of seniors age 62+ where living in a place not meant for habitation such as a vehicle, abandoned building, or anywhere outside;

- Nearly one-fourth (24%) of seniors age 62+ where living in temporary housing, which includes emergency shelter; hotel or motel paid for with an emergency shelter voucher; hotel or motel paid for without an emergency shelter voucher; jail, prison, or juvenile detention facility; psychiatric hospital or other psychiatric facility; residential project or halfway house with no homeless criteria; safe haven; staying or living with family, temporary tenure (e.g., room, apartment or house); staying or living with friends, temporary tenure (e.g., room, apartment or house); hospital or other residential non-psychiatric medical facility; substance abuse treatment or detox center; and transitional housing for homeless persons (including homeless youth);

- Nearly one-third (30%) of seniors age 62+ were living in permanent housing including host homes; long-term care facility or nursing home; housing owned by client; rental housing including rapid re-housing and other rental subsidy assistance; staying or living with family, permanent tenure (e.g., room, apartment or house); and staying or living with friends, permanent tenure;

- Other (0%) means seniors age 62+ doesn't know, client refused, data not collected, and no exit interview completed.

- 4% of seniors age 62+ prior residence is unknown.
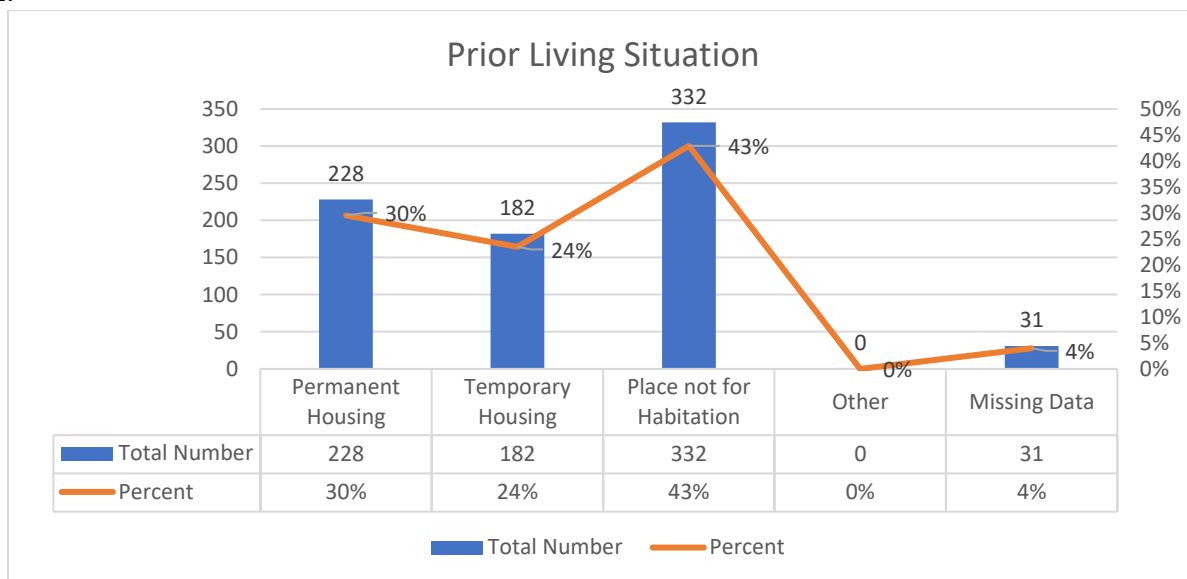
Chart 2.

Prior Living Situation

	Permanent Housing	Temporary Housing	Place not for Habitation	Other	Missing Data
▬ Total Number	228	182	332	0	31
▬ Percent	30%	24%	43%	0%	4%

Destination at Exit

The chart below shows the number and percentage of seniors age 62+ whose destination at exit was

- **Permanent housing for 224 seniors age 62+ or 29%,** which includes host homes; long-term care facility or nursing home; housing owned by client; rental housing including rapid re-housing and other rental subsidy assistance; staying or living with family, permanent tenure (e.g., room, apartment or house); and staying or living with friends, permanent tenure; and
- **Temporary housing for 104 seniors age 62+ or 13%**, which includes emergency shelter; hotel or motel paid for with an emergency shelter voucher; hotel or motel paid for without an emergency shelter voucher; jail, prison, or juvenile detention facility; psychiatric hospital or other psychiatric facility; residential project or halfway house with no homeless criteria; safe haven; staying or living with family, temporary tenure (e.g., room, apartment or house); staying or living with friends, temporary tenure (e.g., room, apartment or house); hospital or other residential non-psychiatric medical facility; substance abuse treatment or detox center; and transitional housing for homeless persons (including homeless youth).
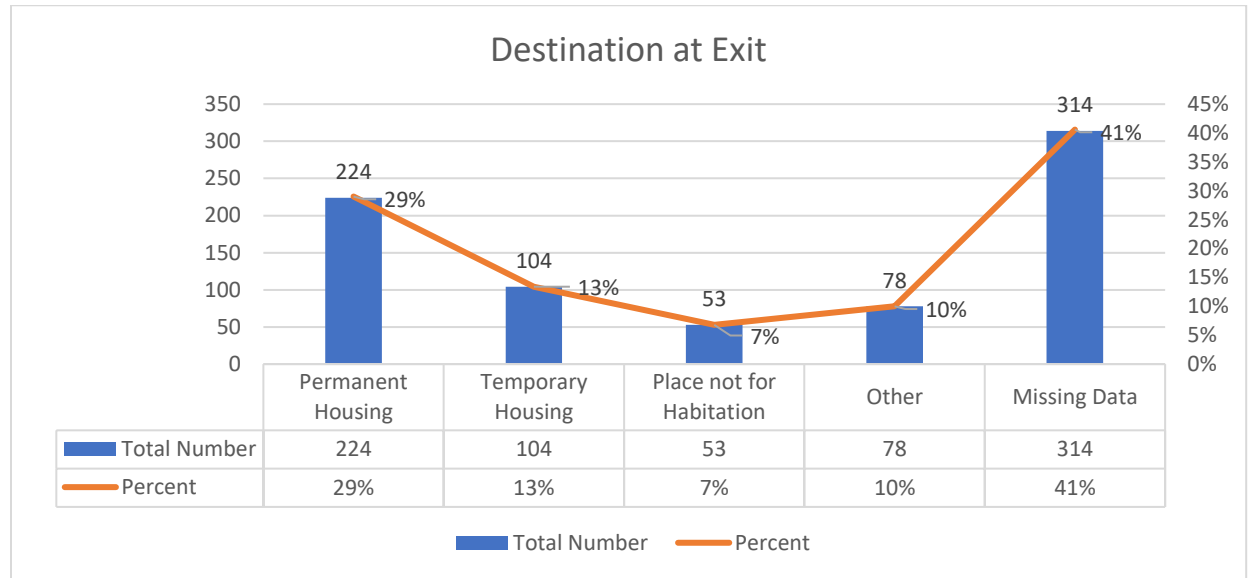
The number and percentage of seniors age 62+ whose destination at exit was a place not meant for habitation such as a vehicle, abandoned building, or anywhere outside was 53 or 7%.

The number and percentage of seniors age 62+ whose destination at exit was noted as Other was 78 or 10%. Other includes client doesn't know, client refused, data not collected, deceased, ad no exit interview completed.

Unknown for Destination at Exit was 41% or 314 seniors age 62+.

Chart 3.

Chart 3. Destination at Exit

	Permanent Housing	Temporary Housing	Place not for Habitation	Other	Missing Data
Total Number	224	104	53	78	314
Percent	29%	13%	7%	10%	41%

Subpopulations: Unaccompanied Women

Recommendation 4: Establish a Homeless Emergency Response (HER) Team dedicated to ending homelessness among women living on the streets throughout the county.

The number of unsheltered women counted during the 2018 – 2020 Point-in-Time homeless counts has increased significantly. The number of unsheltered women counted in 2018 was 368 and 676 in 2020 as noted in the chart below, which represents an increase of 308 unsheltered women or 84%.

Three sources of data were used to identify local data trends regarding homeless women--2020 Point-in-Time Count (PITC), Coordinated Entry System (CES), and the Homeless Management Information System (HMIS). The timeframe was 2020.

2020 Point-in-Time Count

The first source of data used was the 2020 PITC. There were 1,057 women who were counted as homeless during the 2020 PITC. The table breaks down the number of women by race/ethnicity and chronic homelessness.

Table 1. 2020 Point-in-Time Sheltered and Unsheltered Count

	#	%
Total Number/Percent	1,057	100
Subpopulations:		
Chronically Homeless	473	44.8
American Indian or Alaska Native	33	3.1
Asian	12	1.1
Black or African-American	193	18.3
Hispanic/Latino	341	32.3
Native Hawaiian/Pacific Islander	12	1.1
Other	169	16.0
White	593	56.1
Unknown	44	4.2

Coordinated Entry System

The second source of data was the CES. The data consisted of every women that was entered into the CES during 2018 through 2020. There were 511 women.

The next table compares the number of women counted in 2020 to the number of women entered into the CES during 2018 through 2020 by race/ethnicity and chronic homelessness.

Table 2.

	Point-in-Time Sheltered and Unsheltered Count		Coordinated Entry System	
	#	%	#	%
Total Number	1,057	100	511	100
Subpopulations:				
Chronically Homeless	473	44.8	*	*
American Indian or Alaska Native	33	3.1	8	1.6
Asian	12	1.1	1	0.2
Black or African-American	193	18.3	217	42.5
Hispanic/Latino	341	32.3	157	30.7
Native Hawaiian/Pacific Islander	12	1.1	5	1.0
Other	169	16.0	9	1.8
White	593	56.1	262	51.3
Unknown	44	4.2	9	1.8

*Included in HMIS

Subpopulations for which their percentage was notably larger in CES when compared to the 2020 PITC include:

- Blacks or African Americans.

Subpopulations for which their percentage was a little smaller in CES when compared to the 2020 PITC include:

- Hispanic/Latino; and
- White.

Priority and Acuity Score

The chart below groups the 511 women in the Coordinated Entry System (CES) in 2020 by intervention. A score of 0 – 3 means no housing intervention; 4 – 7 means an assessment for Rapid Re-Housing; and 8+ means an assessment for Permanent Supportive Housing/Housing First.

Chart 1.

Priority Scoring Summary

	0 - 3	4 - 7	8 - 20	Unknown
Total Number	22	171	316	2
Percent	4%	34%	62%	0%
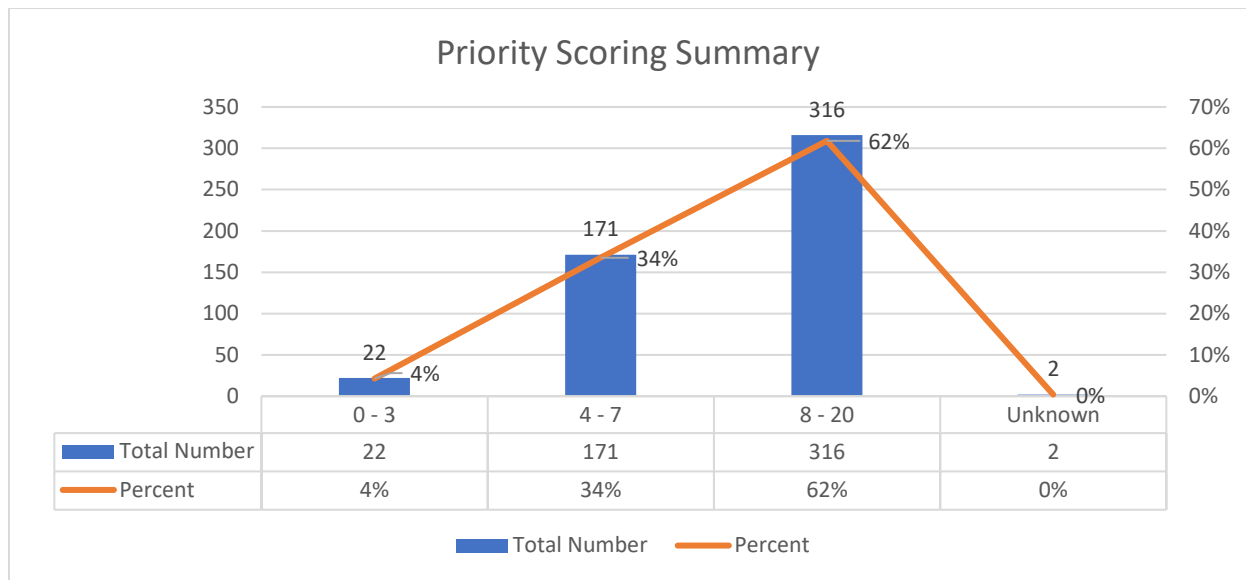
- Nearly two-thirds (62%) or 316 women were assessed for Permanent Supportive Housing/Housing First;
- Approximately one-third (34%) or 171 women were assessed for rapid re-housing.

Thus, 96% of women were assessed for permanent housing.

The following table lists each priority score and the related number of women and percent.

Table 3.

Priority Score	Number of Persons	Percent
1	5	1.0
2	6	1.2
3	11	2.2
4	29	5.7
5	38	7.4
6	49	9.6
7	55	10.8
8	54	10.6
9	59	11.5
10	51	10.0
11	51	10.0
12	35	6.8
13	30	5.9
14	16	3.1
15	7	1.4

16	8	1.6
17	3	0.6
18	1	0.2
19	0	0.0
20	1	0.2
Unknown	2	0.4
Total:	**511**	**100**

Homeless Management Information System

The third source of data was the HMIS. The data consisted of every woman that was entered into the HMIS during 2018 through 2020. There were 3,247 women.

The next table compares the number of women counted in 2020, the number of women entered into the CES during 2018 through 2020, and to the number of women entered into the HMIS during 2018 through 2020 by race/ethnicity and chronic homelessness.

Table 4. Women and Local Data Sources: 2020 Statistics

	Point-in-Time Sheltered and Unsheltered Count		Coordinated Entry System		Homeless Management Information System	
	#	**%**	**#**	**%**	**#**	**%**
Total Number	1,057	100	511	100	3,247	100
Subpopulations:						
Chronically Homeless	473	44.8	*	*	480	14.8
American Indian or Alaska Native	33	3.1	8	1.6	56	1.7
Asian	12	1.1	1	0.2	21	0.6
Black or African-American	193	18.3	217	42.5	1,243	38.3
Hispanic/Latino	341	32.3	157	30.7	1,131	34.8
Native Hawaiian/Pacific Islander	12	1.1	5	1.0	30	0.9
Other	169	16.0	9	1.8	81	2.5
White	593	56.1	262	51.3	1,775	54.7
Unknown	44	4.2	9	1.8	41	1.3

*Included in HMIS

Subpopulations for which their percentage was notably different in one data source when compared to the other data sources include:
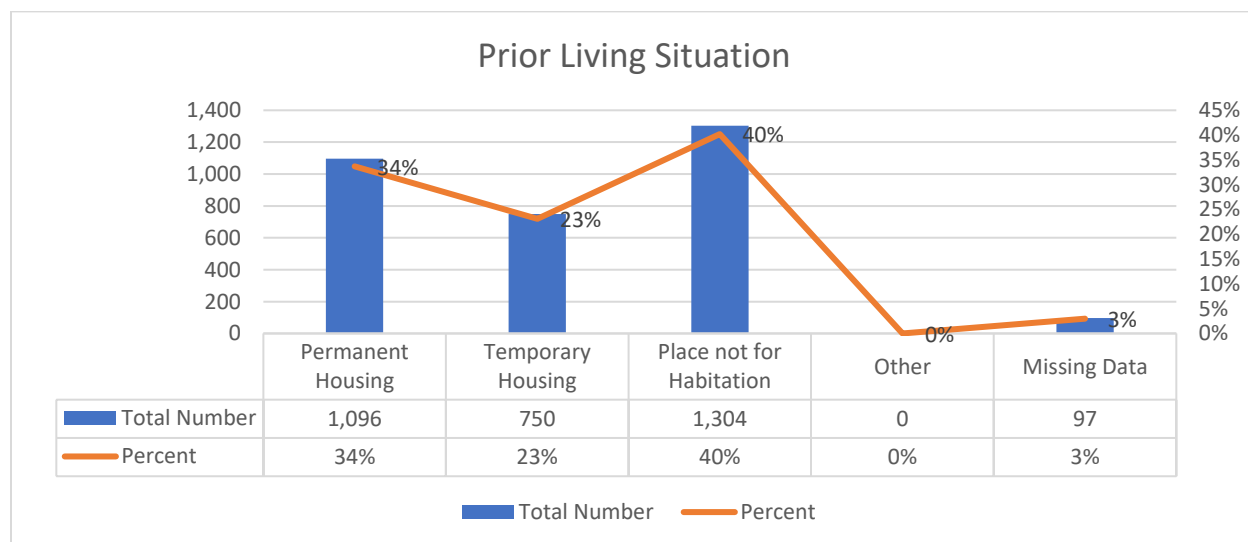
- Chronically homeless; and
- Black of African American.

Prior Residence

Prior to entry into HMIS, as noted in the chart below,

- 40% of women were living in a place not meant for habitation such as a vehicle, abandoned building, or anywhere outside;

- Nearly one-fourth (23%) of women where living in temporary housing, which includes emergency shelter; hotel or motel paid for with an emergency shelter voucher; hotel or motel paid for without an emergency shelter voucher; jail, prison, or juvenile detention facility; psychiatric hospital or other psychiatric facility; residential project or halfway house with no homeless criteria; safe haven; staying or living with family, temporary tenure (e.g., room, apartment or house); staying or living with friends, temporary tenure (e.g., room, apartment or house); hospital or other residential non-psychiatric medical facility; substance abuse treatment or detox center; and transitional housing for homeless persons (including homeless youth);

- Approximately one-third (34%) of women were living in permanent housing including host homes; long-term care facility or nursing home; housing owned by client; rental housing including rapid re-housing and other rental subsidy assistance; staying or living with family, permanent tenure (e.g., room, apartment or house); and staying or living with friends, permanent tenure;

- Other (0%) means women doesn't know, client refused, data not collected, and no exit interview completed.

- 3% of women prior residence is unknown.

Chart 2.

	Permanent Housing	Temporary Housing	Place not for Habitation	Other	Missing Data
Total Number	1,096	750	1,304	0	97
Percent	34%	23%	40%	0%	3%

Destination at Exit

The chart below shows the number and percentage of seniors age 62+ whose destination at exit was
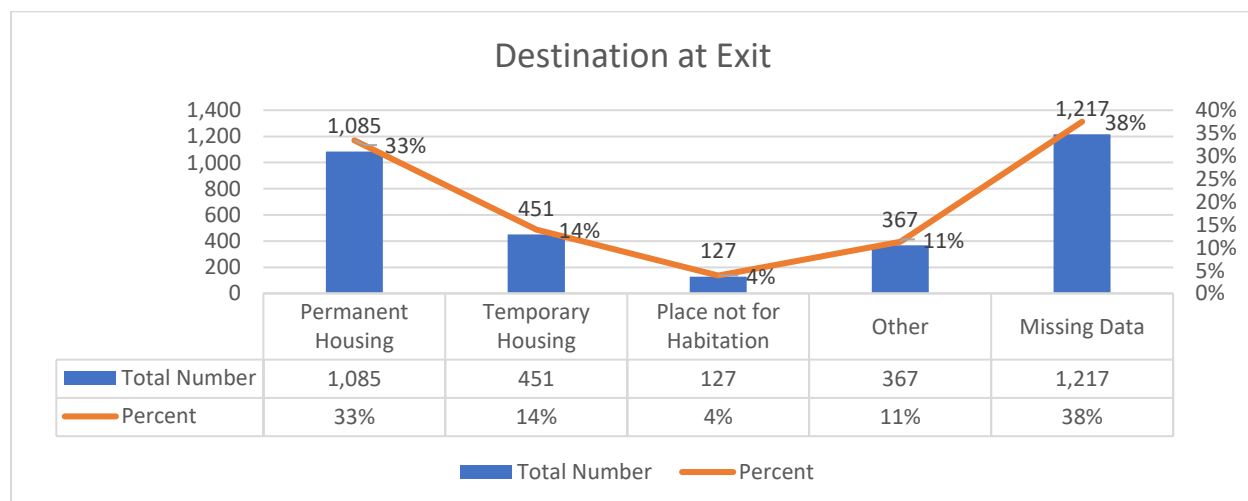
- **Permanent housing for 1,085 women or 33%,** which includes host homes; long-term care facility or nursing home; housing owned by client; rental housing including rapid re-housing and other rental subsidy assistance; staying or living with family, permanent tenure (e.g., room, apartment or house); and staying or living with friends, permanent tenure; and
- **Temporary housing for 451 women or 14%**, which includes emergency shelter; hotel or motel paid for with an emergency shelter voucher; hotel or motel paid for without an emergency shelter voucher; jail, prison, or juvenile detention facility; psychiatric hospital or other psychiatric facility; residential project or halfway house with no homeless criteria; safe haven; staying or living with family, temporary tenure (e.g., room, apartment or house); staying or living with friends, temporary tenure (e.g., room, apartment or house); hospital or other residential non-psychiatric medical facility; substance abuse treatment or detox center; and transitional housing for homeless persons (including homeless youth).

The number and percentage of women whose destination at exit was a place not meant for habitation such as a vehicle, abandoned building, or anywhere outside was 127 or 4%.

The number and percentage of women whose destination at exit was noted as Other was 367 or 11%. Other includes client doesn't know, client refused, data not collected, deceased, ad no exit interview completed.

Unknown for Destination at Exit was 38% or 1,217 women.

Chart 3.

Destination at Exit

	Permanent Housing	Temporary Housing	Place not for Habitation	Other	Missing Data
Total Number	1,085	451	127	367	1,217
Percent	33%	14%	4%	11%	38%

Subpopulations: Veterans

Recommendation 5: Finish the job of ending homelessness among veterans

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Three sources of data were used to identify local data trends regarding homeless veterans—2020 Point-in-Time Count (PITC), Coordinated Entry System (CES), and the Homeless Management Information System (HMIS). The timeframe was 2020.

2020 Point-in-Time Count

The first source of data used was the 2020 PITC. There were 234 veterans who were counted as homeless during the 2020 PITC. The table breaks down the number of veterans by gender, race/ethnicity, youth age 18 – 24, seniors age 62+, and chronic homelessness.

Table 1. 2020 Point-in-Time Sheltered and Unsheltered Count

	#	%
Total Number/Percent	234	100
Subpopulations:		
Female	35	14.9
Male	199	85.1
Transgender	0	0
Age 18 - 24	4	1.7
Age 62+	49	20.9
Chronically Homeless	75	32.0
American Indian or Alaska Native	4	1.7
Asian	3	1.3
Black or African-American	48	20.5
Hispanic/Latino	49	20.9
Native Hawaiian/Pacific Islander	3	1.3
Other	31	13.2
White	145	61.7
Unknown	0	0

Coordinated Entry System

The second source of data was the CES. The data consisted of every veteran that was entered into the CES during 2018 through 2020. There were 194 veterans.

The next table compares the number of veterans counted in 2020 to the number of veterans entered into the CES during 2018 through 2020 by gender, race/ethnicity, youth age 18 – 24, seniors age 62+, and chronic homelessness.

Table 2.

	Point-in-Time Sheltered and Unsheltered Count		Coordinated Entry System	
	#	%	#	%
Total Number	234	100	194	100
Subpopulations:				
Female	35	14.9	18	9.3
Male	199	85.1	175	90.2
Transgender	0	0	1	0.5
Age 18 - 24	4	1.7	6	3.0
Age 62+	49	20.9	72	37.1
Chronically Homeless	75	32.0	*	*
American Indian or Alaska Native	4	1.7	1	0.5
Asian	3	1.3	1	O.5
Black or African-American	48	20.5	59	30.4
Hispanic/Latino	49	20.9	46	23.7
Native Hawaiian/Pacific Islander	3	1.3	5	2.6
Other	31	13.2	4	2.1
White	145	61.7	123	63.4
Unknown	0	0	1	0.5

*Included in HMIS

Subpopulations for which their percentage was notably larger in CES when compared to the 2020 PITC include:

- Seniors age 62+; and
- Blacks or African Americans.

Subpopulations for which their percentage was notably smaller in CES when compared to the 2020 PITC include:

- Females; and
- Others.

Priority and Acuity Score

The chart below groups the 192 veterans in the Coordinated Entry System (CES) in 2020 by intervention. A score of 0 – 3 means no housing intervention; 4 – 7 means an assessment for Rapid Re-Housing; and 8+ means an assessment for Permanent Supportive Housing/Housing First.

Chart 1.

Priority Scoring Summary

	0 - 3	4 - 7	8 - 20	Unknown
Total Number	14	77	103	0
Percent	7%	40%	53%	0%
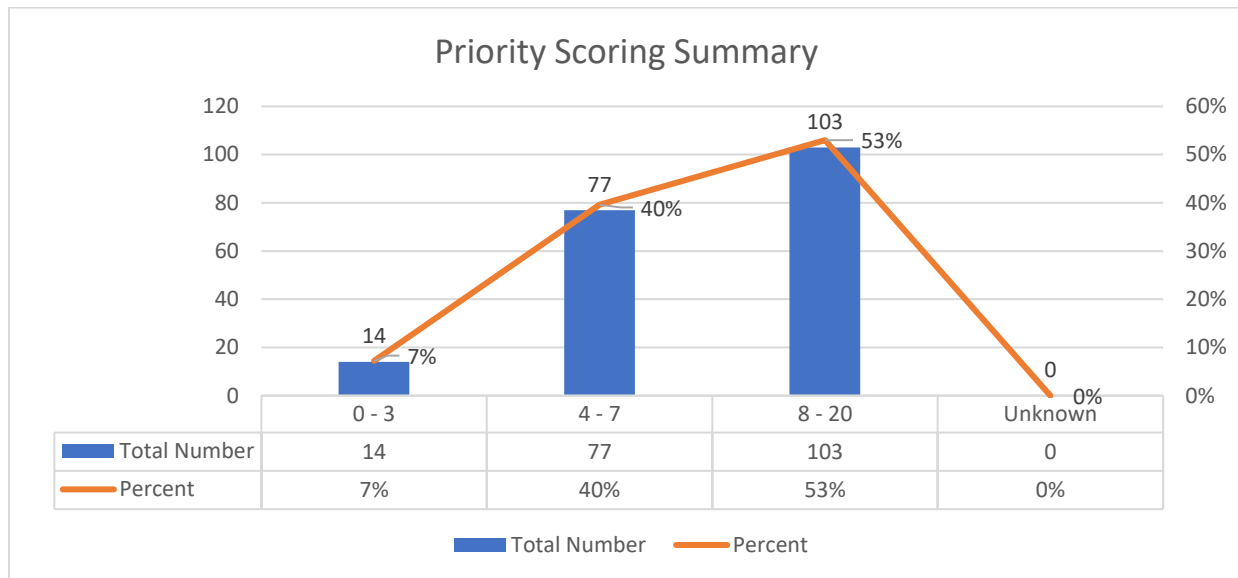
- More than one-half (53%) or 103 veterans were assessed for Permanent Supportive Housing/Housing First;
- More than one-third (40%) or 77 veterans were assessed for Rapid re-housing.

Thus, 93% of veterans were assessed for permanent housing.

The following table lists each priority score and the related number of persons and percent.

Table 3.

Priority Score	Number of Persons	Percent
1	1	0.5
2	4	2.1
3	9	4.6
4	14	7.2
5	18	9.3
6	21	10.8
7	24	12.4
8	27	13.9

9	21	10.8
10	20	10.3
11	15	7.7
12	9	4.6
13	5	2.6
14	2	1.0
15	4	2.1
16	0	0
17	0	0
18	0	0
19	0	0
20	0	0
Unknown	0	0
Total:	**194**	**100**

Homeless Management Information System

The third source of data was the HMIS. The data consisted of every veteran that was entered into the HMIS during 2018 through 2020. There were 728 veterans.

The next table compares the number of veterans counted in 2020, the number of veterans entered into the CES during 2018 through 2020, and to the number of veterans entered into the HMIS during 2018 through 2020 by gender, race/ethnicity, youth age 18 – 24, seniors age 62+, and chronic homelessness.

Table 4. Veterans and Local Data Sources: 2020 Statistics

	Point-in-Time Sheltered and Unsheltered Count		Coordinated Entry System		Homeless Management Information System	
	#	%	#	%	#	%
Total Number	234	100	194	100	728	100
Subpopulations:						
Female	35	14.9	18	9.3	78	10.7
Male	199	85.1	175	90.2	648	89.0
Transgender	0	0	1	0.5	2	0.2
Age 18 - 24	4	1.7	6	3.0	15	2.0
Age 62+	49	20.9	72	37.1	219	30.0
Chronically Homeless	75	32.0	*	*	244	33.5
American Indian or Alaska Native	4	1.7	1	0.5	16	2.2
Asian	3	1.3	1	O.5	6	0.8

Black or African-American	48	20.5	59	30.4	232	31.9
Hispanic/Latino	49	20.9	46	23.7	184	25.3
Native Hawaiian/Pacific Islander	3	1.3	5	2.6	11	1.5
Other	31	13.2	4	2.1	12	1.6
White	145	61.7	123	63.4	449	61.7
Unknown	0	0	1	0.5	2	0.2

Notable percentage comparisons concerning gender, age, and race/ethnicity show:

Gender:

- Percentage of female veterans who were counted (14.9) was a little higher than the percentage of female veterans who were entered into CES (9.3%) and HMIS (10.7%);
- Conversely, the percentage of male veterans who were counted (85.1%) was a little lower that the percentage of male veterans who were entered into CES (90.2%) and HMIS (89%);

Age:

- Whereas the percentage of veterans age 62+ who were
  - counted was less than one-fourth (20.9%);
  - entered into the CES was more than one-third (37.1%);
  - entered into HMIS was less than one-third (30%).

Race/Ethnicity:

- Percentage of veterans counted who were Hispanic/Latino was less than one-fourth (20.9%); entered into CES was nearly one-fourth (23.7%); and entered into HMIS was one-fourth (25.3%);
- Percentage of veterans counted who were White was almost two-thirds (61.7%); entered into CES was almost two-thirds (63.4%); and entered into HMIS was almost two-thirds (61.7%).
- Percentage of veterans counted who were Black or African American was less than one-fourth (20.5%); entered into CES was less than one-third (30.4%); and entered into HMIS was almost one-third (31.9%).

Prior Residence

Prior to entry into HMIS, as noted in the chart below,

- More than half (53%) of veterans where living in a place not meant for habitation such as a vehicle, abandoned building, or anywhere outside;

- Nearly one-third (32%) of veterans where living in temporary housing, which includes emergency shelter; hotel or motel paid for with an emergency shelter voucher; hotel or motel paid for without an emergency shelter voucher; jail, prison, or juvenile detention facility; psychiatric hospital or other psychiatric facility; residential project or halfway house with no homeless criteria; safe haven; staying or living with family, temporary tenure (e.g., room, apartment or house); staying or living with friends, temporary tenure (e.g., room, apartment or house); hospital or other residential non-psychiatric medical facility; substance abuse treatment or detox center; and transitional housing for homeless persons (including homeless youth);

- 12% of veterans were living in permanent housing including host homes; long-term care facility or nursing home; housing owned by client; rental housing including rapid re-housing and other rental subsidy assistance; staying or living with family, permanent tenure (e.g., room, apartment or house); and staying or living with friends, permanent tenure;

- Other (3%) means veteran doesn't know, client refused, data not collected, and no exit interview completed.

- 1% of veteran's prior residence is unknown

Chart 3.
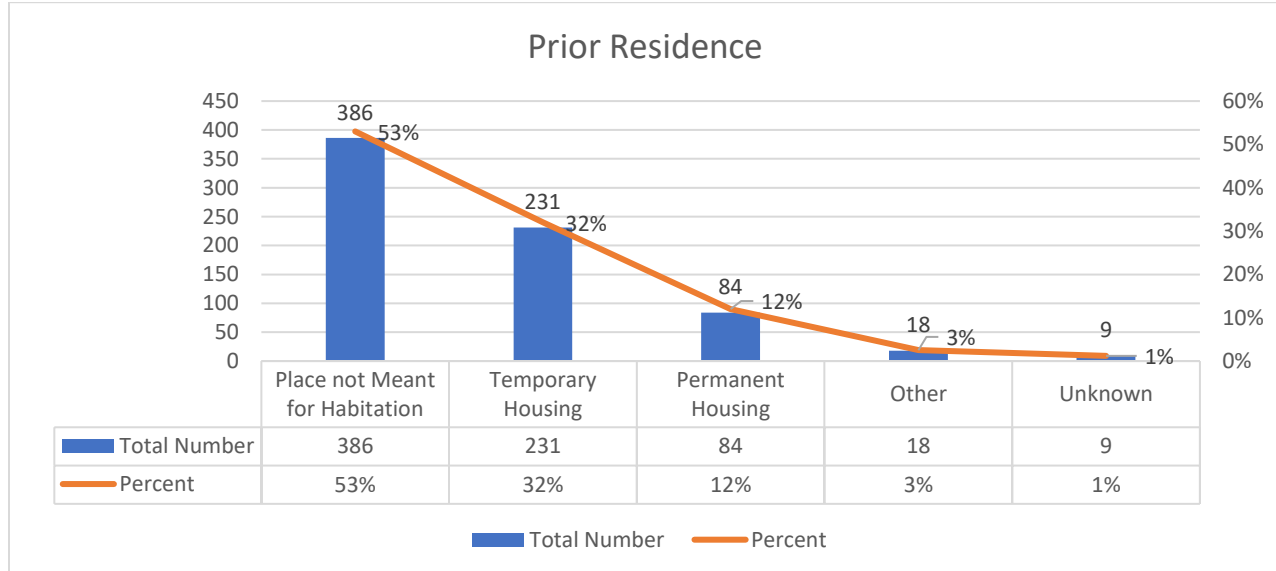
Chart title: Prior Residence

	Place not Meant for Habitation	Temporary Housing	Permanent Housing	Other	Unknown
Total Number	386	231	84	18	9
Percent	53%	32%	12%	3%	1%

Destination at Exit

The chart below shows the number and percentage of persons whose destination at exit was

- **Permanent housing for 217 veterans or 30%,** which includes host homes; long-term care facility or nursing home; housing owned by client; rental housing including rapid re-

housing and other rental subsidy assistance; staying or living with family, permanent tenure (e.g., room, apartment or house); and staying or living with friends, permanent tenure; and
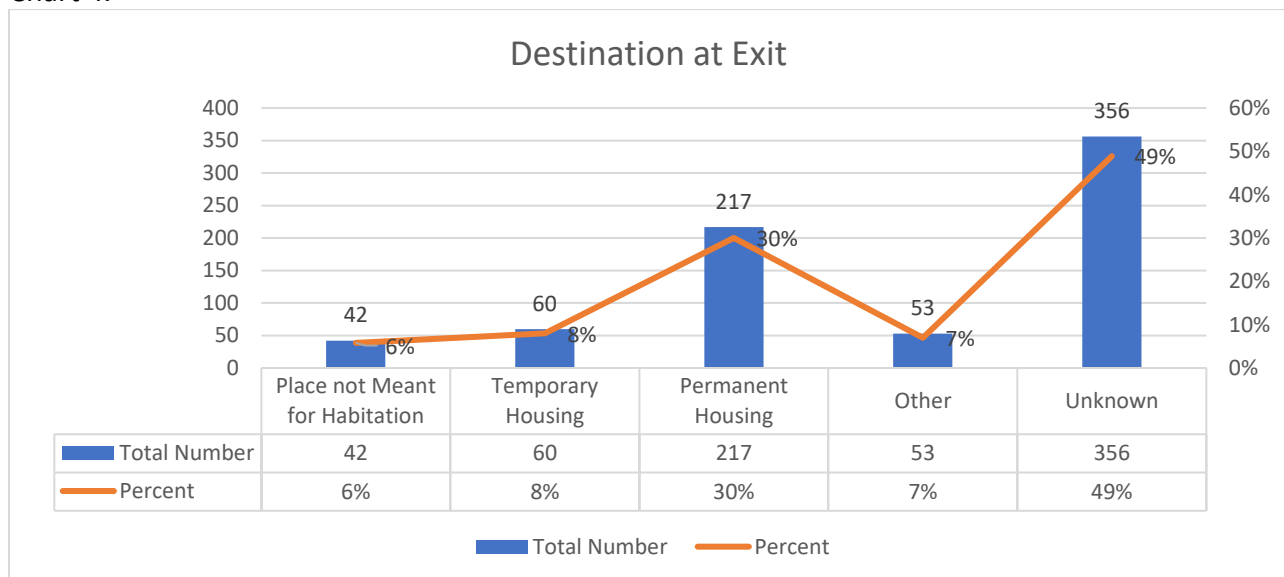
- **Temporary housing for 60 veterans or 8%**, which includes emergency shelter; hotel or motel paid for with an emergency shelter voucher; hotel or motel paid for without an emergency shelter voucher; jail, prison, or juvenile detention facility; psychiatric hospital or other psychiatric facility; residential project or halfway house with no homeless criteria; safe haven; staying or living with family, temporary tenure (e.g., room, apartment or house); staying or living with friends, temporary tenure (e.g., room, apartment or house); hospital or other residential non-psychiatric medical facility; substance abuse treatment or detox center; and transitional housing for homeless persons (including homeless youth).

The number and percentage of veterans whose destination at exit was a place not meant for habitation such as a vehicle, abandoned building, or anywhere outside was 42 or 6%.

The number and percentage of persons whose destination at exit was noted as Other was 53 or 7%. Other includes client doesn't know, client refused, data not collected, deceased, ad no exit interview completed.

Unknown for Destination at Exit was nearly half (49%) or 356 veterans.

Chart 4.

Destination at Exit

	Place not Meant for Habitation	Temporary Housing	Permanent Housing	Other	Unknown
Total Number	42	60	217	53	356
Percent	6%	8%	30%	7%	49%

Subpopulations: Youth 18 – 24

Recommendation 6: Establish a Youth Outreach Unit (YOU) Street Outreach Team dedicated to ending homelessness among youth 18 – 24 living on the streets throughout the county

Three sources of data were used to identify local data trends regarding homeless youth age 18 - 24—2020 Point-in-Time Count (PITC), Coordinated Entry System (CES), and the Homeless Management Information System (HMIS). The timeframe was 2020.

2020 Point-in-Time Count

The first source of data used was the 2020 PITC. There were 119 youth age 18 - 24 who were counted as homeless during the 2020 PITC. The table breaks down the number of youth age 18 - 24 by gender, race/ethnicity, and chronic homelessness.

Table 1. 2020 Point-in-Time Sheltered and Unsheltered Count

	#	%
Total Number/Percent	119	100
Subpopulations:		
Female	39	32.8
Male	80	67.2
Transgender	0	0.0
Chronically Homeless	51	42.9
American Indian or Alaska Native	4	3.4
Asian	0	0.0
Black or African-American	24	20.2
Hispanic/Latino	48	40.3
Native Hawaiian/Pacific Islander	1	0.8
Other	38	31.9
White	46	38.7
Unknown	6	5.1

Coordinated Entry System

The second source of data was the CES. The data consisted of every youth age 18 – 24 that was entered into the CES during 2018 through 2020. There were 47 youth age 18 - 24.

The next table compares the number of youth age 18 - 24 counted in 2020 to the number of youth age 18 - 24 entered into the CES during 2018 through 2020 by gender, race/ethnicity, and chronic homelessness.

Table 2.

	Point-in-Time Sheltered and Unsheltered Count		Coordinated Entry System	
	#	%	#	%
Total Number	119	100	47	100
Subpopulations:				
Female	39	32.8	29	61.7
Male	80	67.2	18	38.3
Transgender	0	0.0	0	0.0
Chronically Homeless	51	42.9	*	*
American Indian or Alaska Native	4	3.4	1	2.1
Asian	0	0.0	0	0.0
Black or African-American	24	20.2	24	51.1
Hispanic/Latino	48	40.3	18	38.3
Native Hawaiian/Pacific Islander	1	0.8	1	2.1
Other	38	31.9	1	2.1
White	46	38.7	20	42.6
Unknown	6	5.1	0	0.0

*Included in HMIS

Subpopulations for which their percentage was notably larger in CES when compared to the 2020 PITC include:

- Females; and
- Blacks or African Americans.

Subpopulations for which their percentage was notably smaller in CES when compared to the 2020 PITC include:

- Males.

Priority and Acuity Score

The chart below groups the 47 youth age 18 – 24 in the Coordinated Entry System (CES) in 2020 by intervention. A score of 0 – 3 means no housing intervention; 4 – 7 means an assessment for Rapid Re-Housing; and 8+ means an assessment for Permanent Supportive Housing/Housing First.

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Chart 1.

Priority Scoring Summary

	0 - 3	4 - 7	8 - 20	Unknown
Total Number	5	15	27	0
Percent	11%	32%	57%	0%
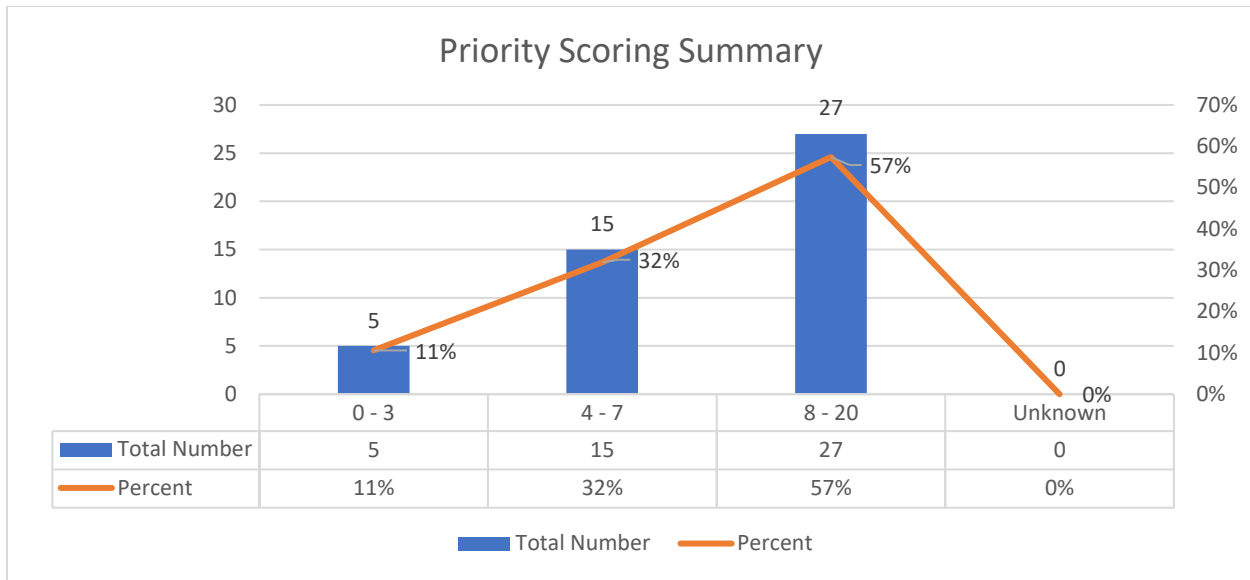
- More than one-half (57%) or 27 youth age 18 - 24 were assessed for Permanent Supportive Housing/Housing First;
- Nearly one-third (32%) or 15 youth age 18 - 24 were assessed for Rapid re-housing.

Thus, 89% of youth age 18 - 24 were assessed for permanent housing.

The following table lists each priority score and the related number of youth age 18 - 24 and percent.

Table 3.

Priority Score	Number of Persons	Percent
1	0	0.0
2	1	2.1
3	4	8.5
4	3	6.4
5	2	4.3
6	8	17.0
7	2	4.3
8	6	12.8
9	5	10.6
10	6	12.8
11	7	14.9
12	2	4.3
13	0	0.0

14	1	2.1
15	0	0.0
16	0	0.0
17	0	0.0
18	0	0.0
19	0	0.0
20	0	0.0
Unknown	0	0.0
Total:	**47**	**100**

Homeless Management Information System

The third source of data was the HMIS. The data consisted of every youth age 18 - 24 that was entered into the HMIS during 2018 through 2020. There were 829 youth age 18 - 24.

The next table compares the number of youth age 18 - 24 counted in 2020, the number of youth age 18 - 24 entered into the CES during 2018 through 2020, and to the number of youth age 18 - 24 entered into the HMIS during 2018 through 2020 by gender, race/ethnicity, and chronic homelessness.

Table 4. Youth Age 18 - 24 and Local Data Sources: 2020 Statistics

	Point-in-Time Sheltered and Unsheltered Count		Coordinated Entry System		Homeless Management Information System	
	#	%	#	%	#	%
Total Number	119	100	47	100	829	100
Subpopulations:						
Female	39	32.8	29	61.7	452	54.5
Male	80	67.2	18	38.3	375	45.2
Transgender	0	0.0	0	0.0	2	0.2
Chronically Homeless	51	42.9	*	*	66	8.0
American Indian or Alaska Native	4	3.4	1	2.1	12	1.4
Asian	0	0.0	0	0.0	8	1.0
Black or African-American	24	20.2	24	51.1	394	47.5
Hispanic/Latino	48	40.3	18	38.3	306	36.9
Native Hawaiian/Pacific Islander	1	0.8	1	2.1	5	0.6
Other	38	31.9	1	2.1	34	4.1
White	46	38.7	20	42.6	361	43.5
Unknown	6	5.1	0	0.0	15	1.8

*Included in HMIS

Subpopulations for which their percentage was notably different in one data source when compared to the other data sources include:

- Females;
- Males; and
- Blacks or African Americans.

Prior Residence

Prior to entry into HMIS, as noted in the chart below,

- 40% of youth age 18 - 24 where living in a place not meant for habitation such as a vehicle, abandoned building, or anywhere outside;

- Nearly one-fourth (23%) of youth age 18 - 24 where living in temporary housing, which includes emergency shelter; hotel or motel paid for with an emergency shelter voucher; hotel or motel paid for without an emergency shelter voucher; jail, prison, or juvenile detention facility; psychiatric hospital or other psychiatric facility; residential project or halfway house with no homeless criteria; safe haven; staying or living with family, temporary tenure (e.g., room, apartment or house); staying or living with friends, temporary tenure (e.g., room, apartment or house); hospital or other residential non-psychiatric medical facility; substance abuse treatment or detox center; and transitional housing for homeless persons (including homeless youth);

- One-third (33%) of youth age 18 - 24 were living in permanent housing including host homes; long-term care facility or nursing home; housing owned by client; rental housing including rapid re-housing and other rental subsidy assistance; staying or living with family, permanent tenure (e.g., room, apartment or house); and staying or living with friends, permanent tenure;

- Other (1%) means youth age 18 - 24 doesn't know, client refused, data not collected, and no exit interview completed.

- 3% of youth age 18 - 24 prior residence is unknown.
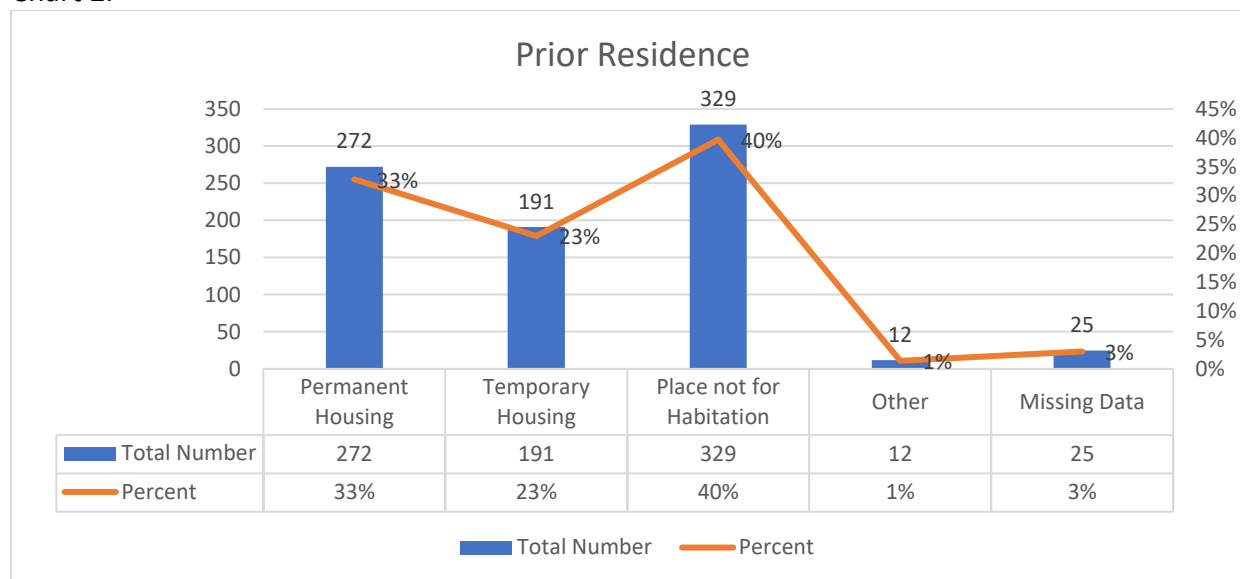
Chart 2.

Prior Residence

	Permanent Housing	Temporary Housing	Place not for Habitation	Other	Missing Data
Total Number	272	191	329	12	25
Percent	33%	23%	40%	1%	3%

Destination at Exit

The chart below shows the number and percentage of youth age 18 - 24 whose destination at exit was

- **Permanent housing for 260 youth age 18 - 24 or 31%,** which includes host homes; long-term care facility or nursing home; housing owned by client; rental housing including rapid re-housing and other rental subsidy assistance; staying or living with family, permanent tenure (e.g., room, apartment or house); and staying or living with friends, permanent tenure; and
- **Temporary housing for 131 youth age 18 - 24 or 16%**, which includes emergency shelter; hotel or motel paid for with an emergency shelter voucher; hotel or motel paid for without an emergency shelter voucher; jail, prison, or juvenile detention facility; psychiatric hospital or other psychiatric facility; residential project or halfway house with no homeless criteria; safe haven; staying or living with family, temporary tenure (e.g., room, apartment or house); staying or living with friends, temporary tenure (e.g., room, apartment or house); hospital or other residential non-psychiatric medical facility; substance abuse treatment or detox center; and transitional housing for homeless persons (including homeless youth).

The number and percentage of youth age 18 - 24 whose destination at exit was a place not meant for habitation such as a vehicle, abandoned building, or anywhere outside was 39 or 5%.

The number and percentage of youth age 18 - 24 whose destination at exit was noted as Other was 75 or 9%. Other includes client doesn't know, client refused, data not collected, deceased, ad no exit interview completed.

Unknown for Destination at Exit was 39% or 324 youth age 18 - 24.

Chart 3.

Destination at Exit

	Permanent Housing	Temporary Housing	Place not for Habitation	Other	Missing Data
Total Number	260	131	39	75	324
Percent	31%	16%	5%	9%	39%
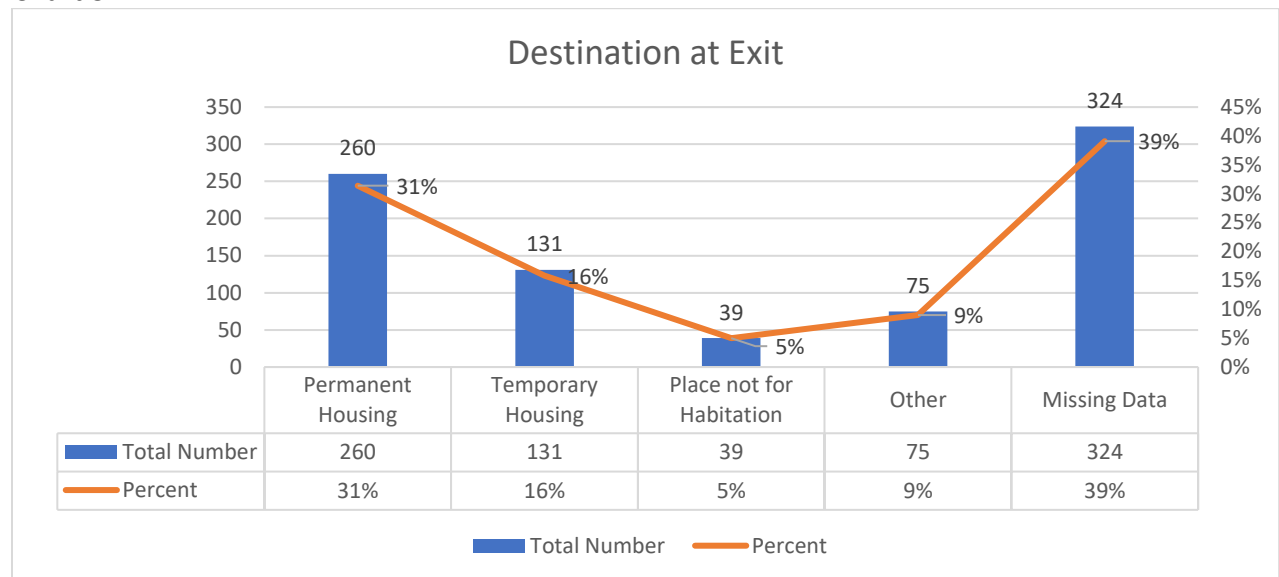
Housing First

Recommendation 1: Require sub-recipients to implement a Housing First approach as a condition of receiving homelessness funding from the County

Housing First is a low barrier approach that consists of the following elements:

- people experiencing homelessness can achieve stability in permanent housing, regardless of their service needs or challenges, if provided with appropriate levels of services.

- barriers are removed that have hindered homeless persons from **obtaining** housing which include

    - too little income or no income;
    - active or history of substance use;
    - criminal record, with exceptions for state-mandated restrictions; and
    - history of having been or currently a victim of domestic violence (e.g., lack of a protective order, period of separation from abuser, or law enforcement involvement).

- barriers are removed that have hindered homeless persons from **maintaining** housing which include

    - Failure to participate in supportive services;
    - Failure to make progress on a service plan;
    - Loss of income or failure to improve income; and
    - Fleeing domestic violence.

In 2016, the California Legislature passed Senate Bill 1380, which requires all state funded programs to adopt the Housing First model. The Legislation defined Housing First consisting of the following core components:

- Tenant screening and selection practices promote accepting applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services.
- Applicants are not rejected on the basis of poor credit or financial history, poor or lack of rental history, criminal convictions unrelated to tenancy, or behaviors that indicate a lack of "housing readiness."
- Housing providers accept referrals directly from shelters, street outreach, drop-in centers, and other parts of crisis response systems frequented by vulnerable people experiencing homelessness.

- Supportive services emphasize engagement and problem solving over therapeutic goals and service plans that are highly tenant-driven without predetermined goals.
- Participation in services or program compliance is not a condition of housing tenancy.
- Tenants have a lease and all the rights and responsibilities of tenancy.
- The use of alcohol or drugs in and of itself, without other lease violations, is not a reason for eviction.
- Funding promotes tenant selection plans for supportive housing that prioritize eligible tenants based on criteria other than "first-come-first-serve," including, but not limited to, the duration or chronicity of homelessness, vulnerability to early mortality, or high utilization of crisis services.
- Case managers and service coordinators are trained in and actively employ evidence-based practices for engagement, including motivational interviewing and client-centered counseling.
- Services are informed by a harm-reduction philosophy that recognizes drug and alcohol use and addiction as a part of tenants' lives, where tenants are engaged in nonjudgmental communication regarding drug and alcohol use, and where tenants are offered education regarding how to avoid risky behaviors and engage in safer practices, as well as connected to evidence-based treatment if the tenant so chooses.
- The project and specific apartment may include special physical features that accommodate disabilities, reduce harm, and promote health and community and independence among tenants.

Implementing a Housing First approach includes acknowledging social services and care coordination as necessary elements of housing stability and quality of life.

Trauma-informed Design and Care

Recommendation 1: Adherence to a trauma-informed design and care approach is strongly encouraged by the County

Recommendation 2: Require the implementation of the best practice, Trauma-informed Design and Care, by sub-recipients as a condition of receiving homelessness funding from the County

Adhering to a trauma-informed design and care approach based on the U.S. Department of Health and Human Services [Substance Abuse and Mental Health Services Administration (SAMHSA) model](#) to implement solutions to prevent and end homelessness will be a requirement as a condition of receiving homelessness funding from the County just like a Housing First approach is required.

The County is strongly encouraging all homelessness service providers to adhere to a trauma-informed design and care approach while implementing solutions to prevent and end homelessness.

The U.S. Department of Health and Human Services [Substance Abuse and Mental Health Services Administration (SAMHSA) model](#) stems from SAMSHA's definition of trauma.

Definition of Trauma

SAMHSA developed a framework for trauma and a trauma-informed approach and noted that

Decades of work in the field of trauma have generated multiple definitions of trauma. Combing through this work, SAMHSA developed an inventory of trauma definitions and recognized that there were subtle nuances and differences in these definitions.

SAMHSA turned to a panel of experts to review the existing definitions to craft a concept of trauma to provide guidelines for a model of trauma-informed design and care. The crafted concept is as follows:

Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being.

Guidelines for Trauma-informed Design

SAMSHA's model provides the following three principles that serve as guidelines for trauma-informed design

- *Realizing* how the physical environment effects [sic] an individual's sense of identity, worth, dignity, and empowerment
- *Recognizing* that the physical environment has an impact on attitude, mood, and behavior, and that there is a strong link between our physiological state, our emotional state, and the physical environment.
- *Responding* by designing and maintaining supportive and healing environments for trauma-experienced residents or clients to resist re-traumatization.

Guidelines for Trauma-informed Care

SAMSHA's guidelines for trauma-informed care includes [six key principles fundamental to a trauma-informed care approach](#), which include

Safety: Throughout the organization, staff and the people they serve, whether children or adults, feel physically and psychologically safe; the physical setting is safe and interpersonal interactions promote a sense of safety. Understanding safety as defined by those served is a high priority.

Trustworthiness and Transparency: Organizational operations and decisions are conducted with transparency with the goal of building and maintaining trust with clients and family members, among staff, and others involved in the organization.

Peer Support: Peer support and mutual self-help are key vehicles for establishing safety and hope, building trust, enhancing collaboration, and utilizing their stories and lived experience to promote recovery and healing. The term "Peers" refers to individuals with lived experiences of trauma, or in the case of children this may be family members of children who have experienced traumatic events and are key caregivers in their recovery. Peers have also been referred to as "trauma survivors."

Collaboration and Mutuality: Importance is placed on partnering and the leveling of power differences between staff and clients and among organizational staff from clerical and housekeeping personnel, to professional staff to administrators, demonstrating that healing happens in relationships and in the meaningful sharing of power and decision-making. The organization recognizes that everyone has a role to play in a trauma-informed approach. As one expert stated: "one does not have to be a therapist to be therapeutic.

Empowerment, Voice and Choice: Organizations understand the importance of power differentials and ways in which clients, historically, have been diminished in voice and choice and are often recipients of coercive treatment. Clients are supported in shared decision-making, choice, and goal setting to determine the plan of action they need to heal and move forward.

They are supported in cultivating self-advocacy skills. Staff are facilitators of recovery rather than controllers of recovery.

Cultural, Historical, and Gender Issues*: The organization actively moves past cultural stereotypes and biases (e.g. based on race, ethnicity, sexual orientation, age, religion, gender-identity, geography, etc.); offers, access to gender responsive services; leverages the healing value of traditional cultural connections; incorporates policies, protocols, and processes that are responsive to the racial, ethnic and cultural needs of individuals served; and recognizes and addresses historical trauma.*

SAMSHA's guidelines for trauma-informed care also include the four "Rs" noted below as key assumptions to further our understanding of a trauma-informed care approach

- ***Realizes*** *the widespread impact of trauma and understands potential paths for recovery;*
- ***Recognizes*** *the signs and symptoms of trauma in clients, families, staff, and others involved with the system;*
- ***Responds*** *by fully integrating knowledge about trauma into policies, procedures, and practices; and*
- ***Seeks*** *to actively resist re-traumatization.*

Recommendation 3: Adherence to a trauma-informed design and care approach is strongly encouraged by the County to all shelter providers and a requirement for sub-recipients as a condition of receiving homelessness funding from the County

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Adherence to a trauma-informed design and care approach by shelter providers is strongly encouraged and a condition to receiving homelessness funding from the County because

- many homeless persons are not willing to live in large open spaces for long periods of time with many people they do not know and some that they may know but do not trust and a few that they fear;
- for a significant number of homeless persons, living on the streets in survival mode is the preferred choice over living in a shelter that is not trauma-informed; and
- the physical and social environment of homeless shelters can contribute to traumatizing and re-traumatizing experiences to shelter residents.

Trauma-informed shelters can eliminate many of the reasons why persons living homeless on the streets refuse to stay in a shelter.

Reasons include:

1. Do not want to live in an open warehouse type setting with little or no privacy day after day;
2. Living in a facility that offers little room for movement;
3. Lack of confidence that another shelter stay will be different from previous stay(s);
4. Will not be able to follow all the early check-in and early wake-up rules because of a disability, illness, work, and appointments;
5. Concern for personal safety once inside the shelter;
6. Feel too vulnerable to potential verbal and physical abuse from others;
7. Fear of potential violence by others to self and others;
8. Do not want to be separated from a partner, friend, or pet;
9. Very limited space with locks to store personal belongings;
10. Having to leave the shelter and possessions behind during the day;
11. Concern that personal possessions will be stolen;
12. Fear of having personal possessions thrown away;
13. Lack of privacy while using restroom and shower;
14. Unsanitary conditions;
15. Fear of other people's infectious diseases;
16. Feelings of shame, blame, guilt, and stigma;
17. Inadequate staffing especially overnight;
18. Living in a shelter may be filled with one confrontational experience after another with staff;
19. Insufficient supportive services to obtain permanent affordable housing; and
20. Shortage of permanent affordable housing.

It is also time to realize that many homeless persons fear being re-traumatized during an intake and assessment at a non-residential homeless services site. Too often they may change the facts while giving their homelessness story when asked or give inaccurate or false answers to intake and assessment questions, which impacts the county's efforts to analyze and provide accurate local data trends needed for to conduct a service gaps and needs assessment.

Too often homeless persons will go from one residential and non-residential program site out of fear of being re-traumatized. They may also change the facts while giving their homelessness story when asked at different locations or give inaccurate or false answers to intake and assessment questions at different locations, which complicates efforts to solve their homelessness through the use of By-Name lists, the Coordinated Entry System (CES), and the Homeless Management Information System (HMIS).

Tenets of trauma-informed design and care have evolved from a greater realization and understanding that trauma in the lives of persons experiencing homelessness may have resulted from incidents experienced in childhood or throughout the lifespan, events leading up to homelessness, and experiences while homeless. Also, there is greater recognition that

homelessness in itself is a traumatic experience and that persons experiencing homelessness are living in a constant state of survival.

The implementation of trauma-informed design and care should be based on the U.S. Department of Health and Human Services [Substance Abuse and Mental Health Services Administration (SAMHSA) model](), which is described above.

San Bernardino County Homeless Partnership

Interagency Council on Homelessness
Administrative Office
215 North D Street, Suite 301, San Bernardino, CA 92415-0044
Office: (909) 501-0610

FROM: Don Smith, West Valley Homeless Provider Network (HPN) Representative
               Tom Hernandez, Chief of Homeless Services

SUBJECT: Adopt the Homeless Housing, Assistance and Prevention (HHAP) Round 3 Interagency
               Council on Homelessness (ICH) Ad Hoc Steering Committee Recommendations

DATE: June 22, 2022

RECOMMENDATION

Adopt the following recommendations from the HHAP Round 3 ICH Ad Hoc Committee:

1. Approve the HHAP Round 3 Initial Disbursement award funding recommendations as follows:
   - $54,626.25 (7% Admin)
   - $78,037.50 (10% Youth Set-Aside)
   - $647,711.21 (balance – System Improvements)
     - $300,000 – Capacity Building/Workforce Development for system service providers
     - $147,711.21 – Commitment to address racial disproportionality in homeless populations and achieve equitable provision of services and outcomes *(HHAP-3 Program Objectives)*
     - $200,000 – Systems support for activities necessary to create regional partnerships and maintain a homeless services & housing delivery system *(HHAP-3 eligible activity)*
2. Approve the HHAP Round 3 Local Homelessness Action Plan and Outcome Goals for inclusion with the CoC HHAP Round 3 Application pursuant to Health and Safety Code Section 50220.7(b)(1)-(3)
3. Authorize the Office of Homeless Services, as the Administrative Entity for the San Bernardino City & County Continuum of Care (SBC&C CoC), to submit to the State of California Interagency Council on Homelessness (Cal ICH) through the Business, Consumer Services and Housing (BCSH) Agency the SBC&C CoC HHAP Round 3 Application in the amount of $3,901,874.80 no later than close of business on June 30, 2022.
4. Authorize the OHS, as the Administrative Entity for the SBC&C CoC, to administer the State of California HHAP Round 3 Grant Funding and authorize the Chief of Homeless Services, along with the ICH Chair and Vice-Chair, to sign HHAP 3 application and contract documents on behalf of the CoC.

BACKGROUND INFORMATION

The HHAP Round 3 grant program is authorized by AB 140 (Health & Safety Code § 50218.6, et seq.), which was signed into law by Governor Gavin Newsom on July 19, 2021. HHAP Round 3 is designed to build on regional coordination developed through previous rounds of Cal ICH Homeless Emergency Aid Program (HEAP), HHAP, and COVID-19 funding. Round 3 funds should be used to continue to build regional coordination and a unified regional response to reduce and end homelessness informed by a best-practices framework focused on moving homeless individuals and families into permanent housing and supporting the efforts of those individuals and families to maintain their permanent housing. Approval of this item will allow the OHS to apply, on behalf of the CoC, for HHAP Round 3 grant funding of up to $3,901,874.80.

Members of the Interagency Council on Homelessness

Members of the Board of Supervisors	City of Rancho Cucamonga	City of San Bernardino
City of Victorville	Town of Yucca Valley	Department of Behavioral Health
Housing Authority of the County of San Bernardino	Community Development and Housing Agency	San Bernardino County Human Services
San Bernardino Law and Justice Group	Mountain Regional City Representative	Homeless Representative
San Bernardino County Superintendent of Schools	Members of the Homeless Provider Network	

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In order to successfully reduce homelessness through this funding, Cal ICH also expects applicants to:

- Strategically pair these funds with other local, state, and federal funds to reduce and end homelessness as laid out in the Putting the Funding Pieces Together: Guide to Strategic Uses of New and Recent State and Federal Funds to Prevent and End Homelessness.
- Demonstrate a commitment to address racial disproportionality in homeless populations and achieve equitable provision of services and outcomes for Black, Native, and Indigenous, Latinx, Asian, Pacific Islanders and other People of Color who are disproportionately impacted by homelessness and COVID-19.
- Establish a mechanism for people with lived experience of homelessness to have meaningful and purposeful opportunities to inform and shape all levels of planning and implementation, including through opportunities to hire people with lived experience.
- Fund projects that provide housing and services that are Housing First compliant, per Health and Safety Code Section 50220.5(g), and delivered in a low barrier, trauma informed, and culturally responsive manner. Individuals and families assisted with these funds must not be required to receive treatment or perform any other prerequisite activities as a condition for receiving shelter, housing, or other services for which these funds are used. Housing First should be adopted within the entire local homelessness response system, including outreach and emergency shelter, short-term interventions like rapid re-housing, and longer-term interventions like supportive housing.

HCFC strongly encourages applicants to prioritize the use of HHAP funds to assist people experiencing literal homelessness move into safe, stable housing, with a particular focus on rehousing individuals currently living in Project Roomkey sites. HHAP funding should be housing-focused, either funding permanent housing interventions directly or, if used for shelter or street outreach, have clear pathways to connect people to permanent housing options.

Eligible applicants who may apply for HHAP program funds are the same as those in previous rounds of HHAP funding, including California's CoCs, as identified by the United States Department of Housing and Urban Development (HUD), large cities (with a population of 300,000 or more as of January 1, 2020), and counties.

For allocations made to the large cities and the counties, those cities and counties are the administrative entities. For allocations made directly to a CoC, the administrative entity means:

- A unit of general-purpose local government (city, county or a city that is also a county), a Joint Powers Authority (JPA), or a nonprofit organization that has (1) previously administered federal HUD CoC funds as the collaborative applicant pursuant to Section 578.3 of Title 24 of the Code of Federal Regulations, and (2) been designated by the CoC to administer program funds.

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The HHAP program requires grantees to expend funds on evidence-based solutions that address and prevent homelessness among eligible populations. As stated in Health and Safety Code (HSC) § 50220.7(e), funds must be expended on one or more of the following eligible uses:

1. Rapid rehousing, including rental subsidies and incentives to landlords, such as security deposits and holding fees.
2. Operating subsidies in new and existing affordable or supportive housing units, emergency shelters, and navigation centers. Operating subsidies may include operating reserves.
3. Street outreach to assist persons experiencing homelessness to access permanent housing and services.
4. Services coordination, which may include access to workforce, education, and training programs, or other services needed to promote housing stability in supportive housing.
5. Systems support for activities necessary to create regional partnerships and maintain a homeless services and housing delivery system, particularly for vulnerable populations, including families and homeless youth.
6. Delivery of permanent housing and innovative housing solutions, such as hotel and motel conversions.
7. Prevention and shelter diversion to permanent housing, including rental subsidies.
8. Interim sheltering, limited to newly developed clinically enhanced congregate shelters, new or existing non-congregate shelters, and operations of existing navigation centers and shelters based on demonstrated need. Demonstrated need for purposes of this paragraph shall be based on the following:
   a. The number of available shelter beds in the city, county, or region served by a continuum of care.
   b. The number of people experiencing unsheltered homelessness in the homeless point-in-time count.
   c. Shelter vacancy rate in the summer and winter months.
   d. Percentage of exits from emergency shelters to permanent housing solutions.
   e. A plan to connect residents to permanent housing.

Homeless Housing, Assistance and Prevention Program – Round 3 – NOFA Page 16 of 23 In addition, HSC § 50218.6(e) states that grantees are required to use at least ten (10) percent of the program allocation for services that meet the specific needs for homeless youth populations.

Also, eligible applicants shall not use more than seven (7) percent of their program allocation for administrative costs incurred to administer its program allocation. This does not include staff costs or other costs directly related to implementing or carrying out activities funded by the program allocation.

HSC § 50220.7(g) states that program recipients shall not use HHAP program funding to supplant existing local funds for homeless housing, assistance, or prevention.

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Use of Initial Disbursement Funding

On March 1, 2022, the San Bernardino County Board of Supervisors approved, and authorized OHS to submit the HHAP Round 3 twenty percent Initial Disbursement Contract for Funds to Cal ICH for the initial disbursement amount of $780,374.96 96 (of the total proposed allocation of 3,901,874.80) for the CoC.

As stipulated in the Initial Disbursement Contract for Funds, recipients may expend the initial disbursement of HHAP Round 3 funds to complete the local homelessness action plan, required by HSC § 50220.7(b)(3)(A), including paying for any technical assistance or contracted entities to support the completion of the homelessness action plan.

For funds not spent on the Grantee's homelessness action plan, priority for those initial funds shall be for systems improvement, including, but not limited to, all of the following:

(a) Capacity building and workforce development for service providers within the jurisdiction, including removing barriers to contracting with culturally specific service providers and building capacity of providers to administer culturally specific services.
(b) Funding existing evidence-based programs serving people experiencing homelessness.
(c) Investing in data systems to meet reporting requirements or strengthen the recipient's Homeless Management Information System.
(d) Improving homeless point-in-time counts.
(e) Improving coordinated entry systems to eliminate racial bias or to create a youth-specific coordinated entry system.

For any remaining initial funds not spent on the recipient's homelessness action plan or systems improvement, the recipient shall expend funds on existing evidence-based programs serving people experiencing homelessness among eligible populations, including any of the eligible uses outlined below under "Use of Remainder Disbursement".

The HHAP Round 3 ICH Ad Hoc Committee is composed of the following members:

Adam Acosta, Don Smith, George Lamb, Kim Knaus, Kimberly Williams, Manuel Zavala, Mike Jones, Natalie Komuro, Sue Walker

The ICH HHAP Round 3 Ad Hoc Committee has met nine (9) times to prepare for the local action plan requirements and to develop recommendations for the initial award.

Members of the Interagency Council on Homelessness

Members of the Board of Supervisors	City of Rancho Cucamonga	City of San Bernardino
City of Victorville	Town of Yucca Valley	Department of Behavioral Health
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The Ad Hoc Committee proposes the following expenditures for the CoC's HHAP Round 3 initial award of 780,374.96:

- o **$54,626.25 (7% Admin)**
- o **$78,037.50 (10% Youth Set-Aside)**
  - ▪ YAB member stipends
  - ▪ Youth CES development
- o **$647,711 (balance – System Improvements)**
  - ▪ **$300,000 - Capacity Building/Workforce Development for system service providers** *(recommended use of HHAP-3 initial disbursement)*
    - • Structured series of Education and Training activities to include:
      - o Racial, Gender, Ethnic Equity & Cultural Competency
      - o Best Practice service delivery strategies and activities
      - o Organizational capacity building, fund development & govt. contract compliance
      - o College student apprenticeship program
  - ▪ **$147,711 – Commitment to address racial disproportionality in homeless populations and achieve equitable provision of services and outcomes** *(HHAP-3 Program Objectives)*
    - • Comprehensive evaluation of racial, ethnic, and gender disproportionality and cultural biases in accessing resources and services within the countywide homeless service system
    - • Recommendations to facilitate system improvements to help achieve equitable provision of services & outcomes
  - ▪ **$200,000 – Systems support for activities necessary to create regional partnerships and maintain a homeless services & housing delivery system** *(HHAP-3 eligible activity)*
    - • Regional Planning activities linked to systemwide coordination and service delivery improvement
    - • Recommendations to facilitate improvements to intra-system and cross-system data collection, analysis & resource alignment

Local Homelessness Action Plan

Per Health and Safety Code Section 50220.7 (b)(3)(A), the local homelessness action plan required to be submitted with the HHAP Round 3 application must include all of the following:

1. A local landscape analysis that assesses the current number of people experiencing homelessness and existing programs and funding which address homelessness within the jurisdiction, utilizing any relevant and available data from the Homeless Data Integration System (HDIS), the HUD's Homeless Point-In-Time Count, CoC housing inventory count (HIC), longitudinal systems analysis (LSA), and Stella tools, as well as any recently conducted local needs assessments.

San Bernardino County Homeless Partnership

Interagency Council on Homelessness
Administrative Office
215 North D Street, Suite 301, San Bernardino, CA 92415-0044
Office: (909) 501-0610

2. Identification of the number of individuals and families served, including demographic information and intervention types provided, and demographic subpopulations that are underserved relative to their proportion of individuals experiencing homelessness in the jurisdiction.

3. Identification of all funds, including state, federal and local funds, currently being used, and budgeted to be used, to provide housing and homelessness-related services to persons experiencing homelessness or at imminent risk of homelessness, how this funding serves subpopulations, and what intervention types are funded through these resources.

Members of the CoC and the County met routinely to discuss the local homelessness action plan and provided details to assist in the development of outcome goals. The HHAP Round 3 ICH Ad Hoc Committee developed the goals for specific target populations through an equity lens and in conjunction with the data provided which incorporated some strategies and goals of the County adopted 2022 Homeless Strategic Plan.

The Budget Allocation amounts were based on regional needs and initial recommendations from the Ad Hoc Committee members. The Cal ICH will allow revisions to the budget if needed based on future directions of the governing board and regions modifying funding based on changing regional needs as identified by the ICH Regional Steering Committee members.

Adoption of these recommendations will allow the OHS to authorize the funding recommendation of the HHAP Round 3 initial award of funding, approve the local homeless assistance plan for submittal to Cal ICH as part of the HHAP Round 3 application, serve as the Administrative Entity on behalf of the CoC, and authorize submittal of the necessary documentation to Cal ICH for the HHAP Round 3 application process.

Members of the Interagency Council on Homelessness

Members of the Board of Supervisors	City of Rancho Cucamonga	City of San Bernardino
City of Victorville	Town of Yucca Valley	Department of Behavioral Health
Housing Authority of the County of San Bernardino	Community Development and Housing Agency	San Bernardino County Human Services
San Bernardino Law and Justice Group	Mountain Regional City Representative	Homeless Representative
San Bernardino County Superintendent of Schools	Members of the Homeless Provider Network	

Agenda: General Meeting of the
Interagency Council on Homelessness (ICH)

Meeting date, time, and place	**THIS MEETING WILL BE CONDUCTED PURSUANT TO CALIFORNIA GOVERNMENT CODE SECTION 54953(e).** Date: **June 22, 2022** Time: **9:00 am – 11:00 am** Place: **WebEx Meeting:** https://hs-sbcounty.webex.com/hs-sbcounty/j.php?MTID=m4c0a5367489493821606b4fd755d229e • **Access #: 1-408-418-9388** • **Access Code: 2493 712 9860** **Note: Please remember to MUTE your phones. DO NOT place this call on hold should you get another call. Hang up and then rejoin the meeting.**

		Time
Call to Order	Chair or Designee will call the meeting to order	9:00 – 9:01 am
Invocation/Pledge	Chair or Designee will lead the Invocation and Pledge of Allegiance	9:01 – 9:05 am
Introductions	Chair or Designee will lead the Introductions of the ICH Members by roll call.	9:05 – 9:10 am

Agenda Items: The following items are presented for informational, consent, and discussion purposes.

_____

Public Comment	Open to the public for comments. Members of the public wishing to address the council will need to submit a request to speak prior to the time the Chair calls for public comment by typing in the chat box that you have a public comment. The Chair will call on you in the order the requests are received. Once your name has been called, please unmute yourself and you will then have up to 3 minutes to speak.

Consent		
1	Approve Minutes of the June 1, 2022, Special ICH Meeting.	
2	Ratify the action of the chair to approve the ESG Solicitation of Interest Continuum of Care (CoC) 2022 for Community Development and Housing.	9:20 – 9:25 am
Introduction		
3	Introduction of new ICH Member, Stephanie Bruce, Community Revitalization Chief of Operations – Maria Razo, Chair	9:25 – 9:30 am
Discussion		

4	Approve the recommendation from the ICH Bylaws and Membership Committee to appoint Meghan Lloyd for the Youth with Lived Experience of Homelessness Representative – Jessica Alexander, Vice Chair	9:30 – 9:40 am
5	Adopt the following recommended Youth Services distribution for the Homeless Housing, Assistance and Prevention (HHAP) Round 2 funding and authorize the Office of Homeless Services (OHS) to initiate and administer the HHAP-2 funded contract award amount through the County of San Bernardino: 　1. Family Assistance Program - $116,249 Presented by - Tom Hernandez, Chief of Homeless Services	9:40 – 9:50 am
6	Authorize the OHS to submit the Homeless Youth Demonstration Grant application on behalf of the CoC– Tom Hernandez, Chief of Homeless Services, Office of Homeless Services	9:50 – 10:00 am
7	Present the HHAP Round 3 Local Homelessness Action Plan and Outcome Goals to the ICH for review and public comment – Don Smith, West Valley Homeless Provider Network Representative and Tom Hernandez, Chief of Homeless Services	10:00 – 10:15 am
8	Adopt the following recommendations from the HHAP Round 3 ICH Ad Hoc Committee: 　1. Approve the HHAP Round 3 Initial Disbursement award funding recommendations as follows: 　　• $54,626.25 (7% Admin) 　　• $78,037.50 (10% Youth Set-Aside) 　　• $647,711.21 (balance – System Improvements) 　　　○ $300,000 – Capacity Building/Workforce Development for system service providers 　　　○ $147,711.21 – Commitment to address racial disproportionality in homeless populations and achieve equitable provision of services and outcomes *(HHAP-3 Program Objectives)* 　　　○ $200,000 – Systems support for activities necessary to create regional partnerships and maintain a homeless services & housing delivery system *(HHAP-3 eligible activity)* 　2. Approve the HHAP Round 3 Local Homelessness Action Plan and Outcome Goals for inclusion with the CoC HHAP Round 3 Application pursuant to Health and Safety Code Section 50220.7(b)(1)-(3) 　3. Authorize the Office of Homeless Services, as the Administrative Entity for the San Bernardino City & County Continuum of Care (SBC&C CoC), to submit to the State of California Interagency Council on Homelessness (Cal ICH) through the Business, Consumer	10:15 – 10:45 am

	Services and Housing (BCSH) Agency the SBC&C CoC HHAP Round 3 Application in the amount of $3,901,874.80 no later than close of business on June 30, 2022. 4. Authorize the OHS, as the Administrative Entity for the SBC&C CoC, to administer the State of California HHAP Round 3 Grant Funding and authorize the Chief of Homeless Services, along with the ICH Chair and Vice-Chair, to sign HHAP 3 application and contract documents on behalf of the CoC. Presented by – Don Smith, West Valley Homeless Provider Network Representative and Tom Hernandez, Chief of Homeless Services	
Information Sharing		
9	Update on CES Annual Review Process – Dr. Pat Leslie	10:45 – 10:55 am
Council Roundtable		
	Open to comments by the Council	10:55 – 11:00 am
Adjournment		**11:00 am**

Next ICH Meeting

The next regularly scheduled Interagency Council on Homelessness meeting is scheduled for:

Special ICH Meeting (Tentative)
July 2022, Date and Time To Be Determined
Via Webex

ICH Meeting (Regular)
Wednesday, August 24, 2022
9:00 am – 11:00 am
Via Webex

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.