

## Application Narrative Template

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This section of the toolkit is to assist jurisdictions in thoroughly completing their application narrative document. Below you will find the questions that HHAP program staff will be ensuring are answered in each jurisdiction's narrative document. Applications will not be deemed complete if all the below questions are not addressed in a jurisdiction's narrative attachment. More information on these areas can be found in the [HHAP program guidance](#).

### **1. SUMMARY OF HOMELESSNESS IN THE CoC, LARGE CITY, OR COUNTY**

To successfully complete this section, applicants must:

#### **A. Submit their CoC's complete HUD Longitudinal System Assessment (LSA) from October 1, 2017 – September 30, 2018.**

#### **B. Use the LSA data to provide (as defined by HUD):**

1. Total number of households served in: (1) Emergency Shelter, Safe Haven and Transitional Housing, (2) Rapid Rehousing, and (3) Permanent Supportive Housing.
2. Total number of disabled households served across all interventions.
3. Total number of households experiencing chronic homelessness served across all interventions.
4. Total number of 55+ households served across all interventions.
5. Total number of unaccompanied youth served across all interventions.
6. Total number of veteran households served across all interventions.
7. Number of individuals served across all interventions who were: (1) Female, (2) Male, (3) Transgender, or (4) Gender Non-Conforming.
8. Total number individuals served across all interventions who were: (1) White, Non-Hispanic/Non-Latino (only), (2) White, Hispanic/Latino (only), (3) Black or African American (only), (4) Asian (only), (5) American Indian or Alaska Native (only), (5) Native Hawaiian/Other Pacific Islander (only) or (6) Multiple races

**Please note:**

- Per HHAP program guidance, CoCs are expected to share the LSA with their regional co-applicants (i.e. applicable large cities and counties that overlap the CoC's jurisdiction). Each entity will submit a copy of the LSA for their CoC.
- Acknowledging that there may be differences in demographics and characteristics within a region, large city and county, applicants may also include additional information and data that is specific to the geography they represent.

**2. DEMONSTRATION OF REGIONAL COORDINATION**

To successfully complete this section, applicants must provide:

**A. Coordinated Entry System (CES) Information**

For CoC applicants:

1. Describe how your CES functions, including:
  - a. What entity is responsible for operating your CES? The Humboldt County Department of Health and Human Services (DHHS).
  - b. What is the process for assessment and identification of housing needs for individuals and families that are experiencing or at risk of experiencing homelessness in your community? People experiencing homelessness may enroll in the Coordinated Entry System by calling 2-1-1, or by going to the Arcata House Annex, or by coming into contact with DHHS street outreach workers. Staff work with individuals and families to complete an intake process that collects data on things like how long the individual or family has been living in places not meant for habitation or emergency shelters, income, household composition, veteran status and whether any household members are disabled. Each head of household completes the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT) 2.0.
  - c. How are people referred to available housing through CES? Intake staff use these data collected during the intake process to identify programs that the household may be eligible for which are not attached to the Coordinated Entry System and refers them to those programs. If the head of household appears to be chronically homeless based on their self-reported data and they score at least an eight on the VI-SPDAT, the household is placed on a priority list for CoC-

funded permanent supportive housing, NPLH assisted units, and ESG-funded rapid rehousing. These programs may only select program participants from the priority list.

2. How do you promote the utilization of your CES? Specifically:
  - a. What outreach do you conduct to ensure all individuals experiencing homelessness, including those with multiple barriers, are aware of the CES assessment and referral process? DHHS conducts street outreach in various locations throughout the county, with a focus on identifying people with multiple barriers, and can enroll anyone that's interested wherever they find them. Shelter staff inform residents about the system and help them enroll.
  - b. What is the grievance or appeal process for customers? Customers may file a grievance or appeal verbally or in writing through any coordinated entry access point, or with the CES Coordinator. Access points email all grievances and appeals to the CES Coordinator. The CES Coordinator will review the grievance or appeal, verify the grievance process is the appropriate place for the complaint, and complete an investigation. The CES Coordinator will respond to the complaint with recommended solutions within 10 days of receiving the complaint.
  - c. How do you provide culturally responsive services to people experiencing homelessness? Staff are trained to be respectful of, and to provide services that are relevant to, the beliefs, practices, culture and linguistic needs of diverse customer populations and communities whose members identify as having particular cultural or linguistic affiliations by virtue of their place of birth, ancestry or ethnic origin, religion, preferred language or language spoken at home. Interpretation and translation services are provided in-person for ASL and Spanish. A combination of in-person and Language Line services is provided for other languages.
3. What, if any, are the current challenges preventing successful CES operation in your jurisdiction, and how do you plan to address these challenges? The CES is operating successfully in our jurisdiction.

## **B. Prioritization Criteria**

1. What are the criteria used to prioritize assistance for people experiencing homelessness in your jurisdiction? Our prioritization criteria include length of time homeless and vulnerability. Vulnerability is assessed through the VI-SPDAT and assists us in

making decisions based on a combination of the following factors:

- a. significant challenges or functional impairments, including any physical, mental, developmental or behavioral health disabilities regardless of the type of disability, which require a significant level of support in order to maintain permanent housing (this factor focuses on the level of support needed and is not based on disability type);
- b. high utilization of crisis or emergency services to meet basic needs, including but not limited to emergency rooms, jails, and psychiatric facilities;
- c. the extent to which people, especially youth and children, are unsheltered;
- d. vulnerability to illness or death;
- e. risk of continued homelessness;
- f. vulnerability to victimization, including physical assault, trafficking or sex work

How is CES, pursuant to 24 CFR 578.8(a)(8) used for this process?  
We use the CES intake process to collect the data we need in order to make prioritization decisions based on length of time homeless and vulnerability.

### **C. Coordination of Regional Needs**

1. How have you coordinated with your partnering CoC, large city (if applicable), and/or county to identify your share of the regional need to address homelessness? Humboldt County includes no large cities. The County and the CoC do not have separate shares of the regional need to address homelessness- the share that belongs to the County and the share that belongs to the CoC. The County works very closely with the CoC, as evidenced by the fact that the County of Humboldt serves as the collaborative applicant for the CoC.
2. What is your identified share of this need, and how will the requested funds help your jurisdiction meet it? The County and the CoC do not have separate shares. We intend to use these funds to prioritize the most vulnerable people in our community who are least likely to exit homelessness, or to avoid becoming homeless, without intervention.

### **D. Creating Sustainable, Long Term Housing Solutions**

1. How is your jurisdiction involved in the efforts to create sustainable, long-term housing solutions for people experiencing homelessness across your region?

Examples could include, but are not limited to:

- a. Partnering with agencies responsible for city planning and zoning, housing developers, and financial and legal service providers.
- b. Developing or strengthening data and information sharing across and within jurisdictions.
- c. Coordinating with other regional jurisdictions to ensure systems are aligned and all available funding is being used efficiently and effectively.

The CoC is working, through the various member organizations including the County and nonprofit homeless service providers, to increase the capacity of the homeless assistance system to connect people experiencing homelessness to permanent housing as rapidly as possible. We are using several strategies, including building new housing that's dedicated to people experiencing homelessness, converting existing buildings to housing units that are dedicated to people experiencing homelessness, and expanding the supply of both time-limited and long term tenant based rental assistance and master leasing programs with services to help people lease up a unit and to help them stay housed.

### **3. RESOURCES ADDRESSING HOMELESSNESS**

To successfully complete this section, all applicants must answer the following questions:

#### **A. Existing Programs and Resources**

1. Provide an exhaustive list of all funds (including the program and dollar amount) that your jurisdiction currently uses to provide housing and homeless services for homeless populations.

This list should include (where applicable), but not be limited to:

- a. Federal Funding (Examples: [YHDP](#), [ESG](#), [CoC](#), [CSBG](#), [HOME-TBRA](#), [CBDG](#))

ESG- The CoC has been receiving ESG funds for RRH for chronically homeless persons prioritized through our CES for several years. Arcata House Partnership was awarded \$134,734 for this purpose as a result of the 2018 ESG competition. We are currently waiting for HCD to announce 2019 ESG awards. The CoC has submitted

competitive ESG applications for emergency shelter projects every year but have not been successful since the 2016 competition.

CoC- We are currently waiting for HUD to announce the Tier 2 CoC awards resulting from the 2019 CoC competition, but the CoC was awarded a total of \$910,703 in Tier 1. \$716,840 of that is for permanent supportive housing for chronically homeless, highly vulnerable people, split between five projects. HUD also awarded \$67,725 for a new RRH project for survivors of domestic violence. We also have a \$69,500/year CoC grant for HMIS, a \$31,549/year CES grant and a \$25,089/year planning grant. If any of our Tier 2 projects are awarded funds they will provide additional PSH for chronically homeless persons.

The City of Arcata has a HOME-TBRA project but it is not dedicated to people experiencing homelessness. We have no CDBG or CSBG projects dedicated to people experiencing homelessness at this time, and we do not have YHDP funding.

- b. State Funding (Examples: [HEAP](#), [CESH](#), [CalWORKs HSP](#), [NPLH](#), [VHHP](#), [PHLA](#), [HHC](#), [Whole Person Care](#), [HDAP](#), [BFH](#))
- HEAP- The CoC's HEAP allocation was \$2,565,245.24. The CoC designated the County as the administrative entity for these funds. Those funds were allocated as follows:
1. \$400,000 to the City of Arcata - Purchase of 5 1-bedroom manufactured homes in the Arcata Mobile Home Park that will be used to increase the supply of physical units dedicated to PSH program participants.
  2. \$130,800 to the Housing Authority of the County of Humboldt to provide assistance with move in costs that are not covered by the Section 8 program, such as security deposits, for people experiencing homelessness.
  3. \$477,400 to Arcata House Partnership to acquire and rehabilitate a facility for use as a new emergency shelter
  4. \$185,563 to the County's Dept. of Health and Human Services to provide rapid rehousing rental assistance and services to people with serious mental illness who are experiencing homelessness.
  5. \$99,850 to Affordable Homeless Housing Alternatives to purchase a vehicle and equipment that they are using to provide showers and bathroom facilities to unsheltered people

6. \$323,529 to the Humboldt Senior Resource Center to provide homelessness prevention assistance and rapid rehousing to seniors and non-elderly adults with disabilities who are experiencing homelessness (or at imminent risk)
7. \$274,599 to the Humboldt County Public Defender to provide rapid rehousing rental assistance and services to criminal justice-involved persons experiencing homelessness.
8. \$20,890 to the Humboldt County Dept. of Health and Human Services' Transition Age Youth Division to add laundry and shower facilities to a drop in center for youth experiencing homelessness.
9. \$106,852 to Redwood Community Action Agency to provide RRH rental assistance and services to youth experiencing homelessness.
10. \$192,500 to Arcata House Partnership to pay for operating expenses at an existing emergency shelter.
11. \$225,000 to the City of Eureka to provide RRH rental assistance and services to people experiencing homelessness.
12. \$128,262 were allocated for administrative costs.

CESH- The CoC's total CESH allocation was \$1,463,802. The CoC designated the County as the administrative entity for these funds. \$73,190 was allocated for administrative costs. The remainder was allocated to the following projects:

1. \$399,701 to Arcata House Partnership for emergency shelter operations
2. \$333,470 to Arcata House Partnership to operate a drop-in center that will provide emergency housing interventions and rapid rehousing rental assistance and services to people experiencing homelessness
3. \$201,225 to the City of Eureka to operate a rapid rehousing program for people experiencing homelessness
4. \$280,375 to the County's Department of Health and Human Services for RRH for people with serious mental illness who are experiencing homelessness
5. \$175,841 to Redwood Community Action Agency to provide a RRH program for youth.

CalWORKs HSP- The County's allocation for FY 19-20 is \$1,001,100.

NPLH- The County was awarded \$4,953,605 in NPLH funds which will be used in partnership with our development sponsor to subsidize 19 NPLH assisted units at a new apartment building that is currently under construction in Eureka. The County also submitted an application for NPLH Round 2 but HCD has not announced awards yet.

VHHP- Danco Communities, a local affordable housing developer that is also the development sponsor for NPLH, was awarded \$1,125,000 in VHHP funds to subsidize 25 units for veterans at an apartment building that is currently under construction in Eureka.

PLHA- We are expecting the first PLHA formula allocation NOFA to be released in February 2020 according to HCD's 10/14/2019 Notice of Funding Availability Calendar. The County's preliminary allocation is \$272,931.

Whole Person Care- There is no Whole Person Care pilot in Humboldt County, but in October, DHCS issued a letter notifying counties that it would provide one-time start-up funding to counties that were not participating in the State's Whole Person Care Pilot program. Humboldt County's allocation was \$744,418.66 and submitted a letter of interest. DHCS approved the County's request in December.

HDAP- The County was awarded \$296,003 in one time funding to operate an HDAP program through 6/30/2020.

BFH- CDSS awarded \$700,000 in one time funding to be divided between the County and the Yurok Tribe  
HMIOT- \$200,000 in one time funding.

Home Safe- CDSS awarded \$335,848 on 12/28/18. This program funds time limited rental assistance, interim housing and services for Adult Protective Services clients who are homeless or at imminent risk of homelessness.

c. Local Funding

Measure Z- \$128,750 for rapid rehousing and residential substance use disorder treatment for persons experiencing homelessness in FY 19-20

Measure Z- \$290,500 to the City of Eureka for 1 FTE Police officer to work with DHHS street outreach, 1 FTE Parks-Waterfront Ranger to patrol City's recreational open space areas, part-time Homeless/Mental Health Liaison, and part-time Mobile Intervention Services Team (MIST) officer position. New funding for civilian part-time Homeless Services Programs Services Supervisor and part-time Homeless Outreach Worker; funding for emergency homeless support services; funding for Phone App Resource Management Guide; funding for miscellaneous equipment needs; funding for staff training

2. How are these resources integrated or coordinated with applicants from overlapping jurisdictions (i.e. CoC, large city, and/or county)?

The County oversees and coordinates all of these resources through programs the County administers itself through its Dept. of Health and Human Services, and through contracts with cities, nonprofit homeless assistance providers and developers.

3. What gaps currently exist in housing and homeless services for homeless populations in your jurisdiction?

According to the 2019 PIT Count, there were 1,702 people that met the definition of homelessness that HUD uses for the PIT count, with 1402 of them being unsheltered. 1,385 of the unsheltered persons, or 98.8%, were adults without children. 1,238 of those unsheltered persons were adult men. We have a severe shortage of shelter, RRH and PSH for unsheltered adults without children. The largest shelter in the County- the Eureka Rescue Mission men's side- has 120 beds and only 80 of them were occupied. We don't know why that was, but this shelter is operated by a religious organization, it does not allow for the presence of partners, pets, storage for possessions or privacy, and it provides extremely limited services that are designed to move people out of the shelter as rapidly as possible using evidence based practices, so we believe there is a particular need for low-barrier, Housing First-oriented shelter and navigation center beds. We would also need a massive increase in both PSH and RRH for adults without children to ensure that people can move out of the shelters and navigation centers and into

permanent housing in a reasonable amount of time in order to truly close the gap.

## **B. HHAP Funding Plans**

1. Explain, in detail, how your jurisdiction plans to use the full amount of HHAP funds (including the youth set-aside) and how it will complement existing funds to close the identified gaps in housing and homeless services for the homeless population in your jurisdiction.

The County, in its capacity as the administrative entity for the CoC, intends to release an RFP seeking a contractor that will provide the following services for individuals with disabilities and older adults needing long term services and supports who meet eligibility criteria for HHAP assistance, including:

- A. Individual Housing Transition Services- services that support an individual's ability to prepare for and transition to housing.

These services are:

- Conducting a tenant screening and housing assessment that identifies the participant's preferences and barriers related to successful tenancy. The assessment may include collecting information on potential housing transition barriers, and identification of housing retention barriers.
- Developing an individualized housing support plan based upon the housing assessment that addresses identified barriers, includes short and long-term measurable goals for each issue, establishes the participant's approach to meeting the goal, and identifies when other providers or services may be required to meet the goal.
- Assisting with the housing application process. Assisting with the housing search process.
- Identifying resources to cover expenses such as security deposit, moving costs, furnishings, adaptive aids, environmental modifications, moving costs and other one-time expenses.
- Ensuring that the living environment is safe and ready for move-in.
- Assisting in arranging for and supporting the details of the move.

- Developing a housing support crisis plan that includes prevention and early intervention services when housing is jeopardized.
- B. Individual Housing & Tenancy Sustaining Services – services that support the individual in being a successful tenant in his/her housing arrangement and thus able to sustain tenancy. These tenancy support services are:
- Providing early identification and intervention for behaviors that may jeopardize housing, such as late rental payment and other lease violations.
  - Education and training on the role, rights and responsibilities of the tenant and landlord.
  - Coaching on developing and maintaining key relationships with landlords/property managers with a goal of fostering successful tenancy.
  - Assistance in resolving disputes with landlords and/or neighbors to reduce risk of eviction or other adverse action.
  - Advocacy and linkage with community resources to prevent eviction when housing is, or may potentially become jeopardized.
  - Assistance with the housing recertification process.
  - Coordinating with the tenant to review, update and modify their housing support and crisis plan on a regular basis to reflect current needs and address existing or recurring housing retention barriers.
  - Continuing training in being a good tenant and lease compliance, including ongoing support with activities related to household management.

8% of the total HHAP award will be set aside for the contractor to provide the services listed above to eligible youth. This program will be fully aligned with the “Outreach and Coordination” eligible use, because all of the services described above are designed to assist vulnerable populations in accessing permanent housing and to promote housing stability in supportive housing.

This program will help us close our identified gaps by helping people move off of the streets and shelters and into permanent housing as rapidly as possible, which will help stimulate flow through the shelters. This will have the effect of decreasing the shelter gap, both by reducing the number of people on the streets who lack shelter, by shortening the length of stay in shelters, and increasing the number and percentage of exits to permanent housing. This will

effectively increase shelter capacity without increasing the number of shelter beds.

The program will also improve the capacity of the system to provide supportive housing. The funding that is currently available to provide supportive services to persons without serious mental illness is extremely limited, which means a large portion of the population that requires supportive housing to live successfully in the community is unable to access it because they do not have the right type of disability. While the situation is somewhat better for people with serious mental illness, Medi-Cal reimbursement rates are far too low to cover the cost of providing adequate services in supportive housing, so this program will also increase our capacity to provide high quality services to that population.

2. How will you ensure that HHAP funded projects will align and comply with the core components of Housing First as defined in Welfare and Institutions Code § 8255(b)?
  - The program will implement screening and selection practices that promote accepting applicants regardless of their sobriety or use of substances, or of completion of treatment.
  - All services will be voluntary.
  - Participants will never be rejected on the basis of poor credit, poor or lack of rental history, criminal convictions unrelated to tenancy, or behaviors that indicate a lack of housing readiness.
  - The program will not use a first-come-first-serve system for participant selection- rather it will prioritize people for services based on several factors, including, but not limited to, the duration or chronicity of homelessness, vulnerability to early mortality, and high utilization of crisis services.
  - The program will accept referrals directly from shelters, street outreach, drop-in centers and other parts of the crisis response systems frequented by vulnerable people experiencing homelessness.
  - All services will emphasize engagement and problem solving over therapeutic goals. Services plans will be highly participant driven without predetermined goals.
  - This program will seek to connect participants to permanent housing where they have a lease and all the rights and responsibilities of tenancy, as outlined California's Civil, Health and Safety, and Government codes.

- The use of alcohol or drugs will never be a reason for termination of services. Staff will be trained in, and will actively employ, evidence-based practices for client engagement, including, but not limited to, motivational interviewing and client-centered counseling.
- All services will be 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 participants will be offered education regarding how to avoid risky behaviors and engage in safer practices, as well as connected to evidence-based treatment if the participant so chooses.
- Staff will seek to connect participants with housing that has special physical features that accommodate the needs of those participants that need those accommodations.

#### **4. PARTNERS ADDRESSING HOMELESSNESS**

To successfully complete this section, all applicants must answer the following questions:

##### **A. Collaborating Partner Efforts**

Please note: per [Program Guidance](#), page 9, collaborative partners, at a minimum, should include representatives of local homeless service providers, homeless youth programs, law enforcement, behavioral health, county welfare departments, city and county public officials, educators, workforce development, community clinics, health care providers, public housing authorities, and people with lived experience. If any of these partnerships are not currently active in your jurisdiction, please address in question #3 below.

1. Describe, in detail, the collaborative partners who will be working with you on identified HHAP projects and how you will be partnering with them.  
We will seek to identify appropriate collaborative partners through our Request for Proposals process. We do have effective partnerships with local homeless service providers, homeless youth programs, law enforcement, city officials, educators, workforce development, community clinics, health care providers, the public housing authorities and people with lived experience. All of these sectors are represented in the CoC, but

the specific partners that we will be partnering with on this project are to be determined.

2. Describe any barriers that you experience in partnering, and how you plan to address them.

Examples could include: lack of key stakeholders or service providers, political bureaucracy, approval methods, lack of community input, etc.

Since we have not yet identified collaborative partners for this project, we have not experienced any barriers in partnering.

3. *If no collaborative partners have been identified at time of application*, describe the collaborative process of how you intend to include new and existing partners on HHAP projects.

We will follow the Request for Proposals (RFP) process, as described in the County of Humboldt Purchasing Policy. The RFP is a document used in a sealed proposal process, which states the scope of work, terms and conditions, instructions for preparation, evaluation criteria, cost proposals, specifications, timelines, and contract type. An RFP is publicly advertised and is awarded based on defined criteria. Award results in execution of a contract.

## 5. **SOLUTIONS TO ADDRESS HOMELESSNESS**

To successfully complete this section:

Applicants that Submitted a Strategic Plan for CESH must:

- Identify the measurable goals set in your CESH Strategic Plan and explain, in detail, which of these goals HHAP funding will directly impact and by how much.

**Please note:** Per HSC § 50219(a)(6), all applicants' measurable goals must include the number of individuals they intend to serve, and the number of individuals they intend to successfully place in permanent housing with HHAP funding.

Our Strategic Plan for CESH included the goal of increasing the availability of PSH for individuals experiencing chronic homelessness and special needs populations. County-operated PSH is currently restricted to persons with serious mental illness and persons with HIV/AIDS because our funding streams for long-term services are only for those types of disabilities. This funding will allow us to expand supportive housing to persons without these disability types. We anticipate that we will serve 50 individuals with this funding, and that we will successfully place all of them in permanent housing. We will pair the supportive services funded by HHAP with a variety of rental assistance funding sources in order to achieve these goals.



## HOMELESS HOUSING, ASSISTANCE AND PREVENTION PROGRAM (HHAP) ANNUAL BUDGET TEMPLATE

### APPLICANT INFORMATION

CoC / Large City / County Name:	COC-522	Receiving Redirected Funds? Y/N	No
Administrative Entity Name:	County of Humboldt	Total Redirected Funding	\$ -

### HHAP FUNDING EXPENDITURE PLAN\*

ELIGIBLE USE CATEGORY	FY20/21	FY21/22	FY22/23	FY23/24	FY24/25	TOTAL
Rental Assistance and Rapid Rehousing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Operating Subsidies and Reserves	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Landlord Incentives	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Outreach and Coordination (including employment)	\$ 372,923.48	\$ 372,923.48	\$ 372,923.48	\$ 372,923.48	\$ 372,923.47	\$ 1,864,617.39
Systems Support to Create Regional Partnerships	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Delivery of Permanent Housing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Prevention and Shelter Diversion to Permanent Housing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
New Navigation Centers and Emergency Shelters	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Strategic Homelessness Planning, Infrastructure Development, CES, and HMIS (up to 5%)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Administrative (up to 7%)	\$ 28,069.51	\$ 28,069.51	\$ 28,069.51	\$ 28,069.51	\$ 28,069.50	\$ 140,347.54
						\$ 2,004,964.93
						<b>TOTAL FUNDING ALLOCATION</b>
	<b>FY20/21</b>	<b>FY21/22</b>	<b>FY22/23</b>	<b>FY23/24</b>	<b>FY24/25</b>	<b>TOTAL</b>
Youth Set-Aside (at least 8%)	\$ 32,079.44	\$ 32,079.44	\$ 32,079.44	\$ 32,079.44	\$ 32,079.44	\$ 160,397.20

\*Narrative should reflect details of HHAP funding plan

**COMMENTS:**

FINAL



Administration  
Connie Beck, Director  
507 F Street, Eureka, CA 95501  
phone: (707) 441-5400 | fax: (707) 441-5412

February 10, 2020

RE: HHAP Demonstration of Coordination

Dear BCSH,

The Humboldt County CoC and the County of Humboldt have agreed that because the territory of the CoC and the County are the same, we shall not have separate shares of the regional need to address homelessness- rather there is a single share.

The County, through its Dept. of Health and Human Services, is a core member of the CoC, and has been since the CoC formed in 2004. The County serves as the Collaborative Applicant in the annual CoC Competition, and as the HMIS Lead, and it provides a coordinator for the CoC at no cost to the CoC. The County has one vote out of eleven on the CoC Board, and the County works very closely with the other member organizations to address our collective need to address homelessness.

Sincerely,

Connie Beck, Director



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