

Application Narrative Template

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 Large City and County applicants:

1. How do you coordinate with your CoC's CES?
The County, through its Department of Health and Human Services, is responsible for operating the CES.
2. What, if any, are your jurisdiction's current challenges related to CES, and how do you plan to address these challenges?
The CES is operating successfully in our jurisdiction.
3. How do you promote the utilization of your CES?
 - a. Specifically, what outreach do you conduct to ensure all individuals experiencing homelessness in your jurisdiction, 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. We also advertise the CES on our website.

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 are the same. 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 County is working, through the various CoC member organizations including the 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, but not limited to:

- 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 County was awarded a total of \$358,159 in Tier 1. \$263,570 of that is for permanent supportive housing for chronically homeless, highly vulnerable people, split between three projects. We also have a \$69,500/year CoC grant for HMIS, 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.

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.

PHLA- 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. Thus we believe there is a particular need for low-barrier, Housing First-oriented 24-hour 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 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 intends to release an RFP seeking a contractor that will convert a motel or a similar property for use as both permanent and interim housing, with all beds dedicated to people experiencing homelessness, where the household includes at least one member who medically requires long-term services and supports to maintain permanent housing in the community. We will prioritize the most vulnerable people experiencing homelessness in our community for these beds. Interim beds will be strictly reserved for persons who are unable to access any other emergency shelter beds that exist in Humboldt County due to their physical or behavioral health needs. Tenant rents will be capped at a percentage of Area Median Income, and we will make every effort to use our other rental assistance resources to provide either project based or tenant based rental assistance to ensure the units are affordable to everyone in the target population, including people with no income.

DHHS will provide services to the residents through its Mental Health Branch and through Adult Protective Services. A contractor funded through the HHAP CoC allocation will also provide medically necessary services.

8% of the total HHAP award will be set aside to create permanent and interim housing units which will be dedicated to youth experiencing homelessness.

This program will be fully aligned with the "Delivery of permanent housing and innovative housing solutions such as hotel and motel conversions;" eligible use.

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 by increasing the supply of physical units dedicated to highly vulnerable people experiencing homelessness. While our tenant based rental assistance programs have been

successful, it can be difficult to prioritize the highest need individuals for those programs because landlords have many potential tenants to choose from. In this project, the landlord would be obligated to follow Housing First-oriented tenant selection and termination policies, which will allow us to place people in these units, either on an interim or permanent basis, who we cannot place elsewhere in the community.

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. We plan to make these units available to people in need regardless of the disability type, with services funded in part by the CoC's allocation of HHAP funds. 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.

Applicants that did not Submit a Strategic Plan for CESH must:

- Identify clear, measurable goals that HHAP will be expected to achieve in your jurisdiction.

Examples:

- Decrease the percent of our jurisdiction's total homeless population that is unsheltered by 10 percentage points annually (baseline of 65% from 2018).
- Reduce the number of people who become homeless for the first time across our jurisdiction by 20% annually (baseline of 2,000 households from 2018)
- Increase the percent of successful shelter exits into permanent housing by 5 percentage points annually (baseline of 60%).

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.



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

APPLICANT INFORMATION

CoC / Large City / County Name:	County of Humboldt	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)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Systems Support to Create Regional Partnerships	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Delivery of Permanent Housing	\$ 1,727,434.59	\$ -	\$ -	\$ -	\$ -	\$ 1,727,434.59
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%)	\$ 130,021.95	\$ -	\$ -	\$ -	\$ -	\$ 130,021.95
TOTAL FUNDING ALLOCATION						\$ 1,857,456.54
Youth Set-Aside (at least 8%)						
	\$ 148,596.53	\$ -	\$ -	\$ -	\$ -	\$ 148,596.53

*Narrative should reflect details of HHAP funding plan

COMMENTS:

FINAL



Administration
Connie Beck, Director
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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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