

**County of Lake
&
Lake County Continuum of Care**

**LOCAL HOMELESSNESS
ACTION PLAN**

**Review Draft
June 2022**

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Acknowledgements

The Local Homelessness Action Plan was developed under the leadership of the Lake County Behavioral Health Services Department with the extensive cooperation of the membership of the Lake County Continuum of Care. They wish to thank all participating entities and individuals, particularly the elected county supervisors and its Administrative Officer who have supported this process as another step towards solving Lake County's homelessness problem.

SUMMARY

Purpose

This Action Plan is intended to provide the County of Lake and the Lake County Continuum of Care, respectively, with the data on what homelessness looks like in Lake County, information on available local resources, and the strategies identified locally to move all people needing assistance into permanent housing that is safe, decent and affordable.

Plan History

In 2004, California voters approved Proposition 63, also known as the Mental Health Services Act (MHSA). The act provides funding for various county mental health services by increasing the tax paid by those with incomes above \$1 million. This income tax increase raises \$1.5 billion to \$2.5 billion per year, over \$14 billion since its inception. The MHSA program as subsequently amended can additionally provide Permanent Supportive Housing to homeless persons who have serious mental health disorders.

In 2016, the Legislature created the No Place Like Home program to further fulfill what is believed was an original intent of the MHSA program: to build and rehabilitate housing for those with mental illness who are homeless or at-risk of becoming homeless. The Legislature tried to appropriate money from the MHSA two years ago to fund this program, but that effort was challenged in court. The voter approval of Proposition 2 on the November 2018 California ballot allows the NPLH program to continue in two ways:

- Approved the use of MHSA Funds for the NPLH program. No more than \$140 million of MHSA funds can be used for NPLH in any year.
- Authorized \$2 billion in borrowing - The measure allows the state to sell up to \$2 billion in bonds to pay for NPLH. Bonds would be repaid over many years with MHSA funds.

The NPLH funds are to serve adults with serious mental illness, children with severe emotional disorders and their families, persons who require or are at risk of requiring acute psychiatric inpatient care, residential treatment, or outpatient crisis intervention because of a mental disorder with symptoms of psychosis, suicidality or violence AND who are homeless, chronically homeless, or at risk of chronic homelessness.

“At risk of chronic homelessness” includes persons who are at high risk of long-term or intermittent homelessness, including persons with mental illness exiting institutionalized settings with a history of homelessness prior to institutionalization, and transition age youth experiencing homelessness or with significant barriers to housing stability.

Current NPLH Program Status

The NPLH Program regulations are codified in the California Welfare and Institutions Code. The California Department of Housing and Community Development (HCD) will manage the program, in consultation with the Mental Health Services Oversight and Accountability Commission and the No Place Like Home Program Advisory Committee which includes legislative, other state and local representatives and political appointees. NPLH funding will be distributed among eligible counties both by a noncompetitive allocation and through a competitive process over several rounds among similarly-sized counties. Lake County's noncompetitive allocation in 2018 was \$557,845. That funding was recently formally allocated to the proposed Collier Avenue project, a permanent supportive housing project to be constructed on a county-owned parcel in Nice. About one-half of the units will be reserved for the chronically homeless mentally ill. Remaining units will be occupied by developmentally disabled adults. The NPLH funding is allocated towards the chronically homeless mentally ill portion of the project.

HHAP Program

The Homeless Housing, Assistance and Prevention (HHAP) grant program was established with California's Governor Gavin Newsom's signing of Assembly Bill 101 into law in 2019. The bill, which also authorized the local establishment of low-barrier homeless navigation centers, provided noncompetitive and competitive funding to local jurisdictions and Continuums of Care for use towards solving homelessness.

Round 1 of HHAP funding approved in 2020 provided \$445,266 and \$500,000, respectively, to the County of Lake and the Lake County Continuum of Care. The bulk of funding for both entities was allocated towards the establishment of Lake County's first year-round homeless shelter and navigation center at Clearlake at the county's southeast end which experiences the greatest identified homeless concentration. Eight percent of each allocation was dedicated towards youth homelessness as required. Round 2 funding approved in 2021 provided the county and its CoC with \$203,550 and \$250,000, respectively, allocated again towards the continuing operation of the homeless shelter successfully established with HHAP Round 1. Another eight percent as required was directed towards youth homelessness.

Round 3 HHAP's NOFA dated December 2021 states the following: "HHAP Round 3 is designed to build on regional coordination developed through previous rounds of HCFC 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." The County of Lake and Lake County CoC allocations in Round 3, respectively, are \$569,940 and \$610,650. The required youth setaside this round is increased to ten percent.

NEED for HOMELESSNESS ACTION PLAN

One of the threshold requirements counties must meet to access funding under the No Place Like Home program through the Ca Department of Housing and Community Development (HCD) is to submit a plan specifying goals, strategies and activities both in process or to be initiated to reduce homelessness and make it non-recurring. Projects counties propose under NPLH must be connected to the goals and strategies counties identify in these plans. Therefore, the original Housing Plan was developed in cooperation with all local entities and individuals engaging with the targeted populations. After public review and comment the Board of Supervisors adopted that plan in August 2019.

This Local Homelessness Action Plan for both the County of Lake and the Lake County CoC builds upon the original NPLH Housing Plan and is designed to meet both the regulatory requirements and the intent of the NPLH program along with the expanded requirements of the Homeless Housing, Assistance and Prevention Grant Program (HHAP). Local and tribal governments and Continuums of Care may access noncompetitive and/or competitive HHAP funding allocations through the CA Interagency Council on Homelessness (Cal ICH). The revised plan must be adopted by the Lake County Board of Supervisors and the Lake County Continuum of Care, respectively, as part of its applications for its noncompetitive allocations currently available. The HHAP program is on its third round of local allocations, and a fourth round is anticipated in the near future.

The state's Health and Safety Code requires that this Homelessness Action Plan include three components:

1. A local landscape analysis that assesses the current number of homeless along with existing programs and funding addressing homelessness within the jurisdiction;
2. Demographic information for the homeless, including underserved populations and subpopulations, and type of provided interventions; and
3. Identification of funds being used or planned for use to provide housing and homelessness-related services, those funded intervention types, and how they are serving identified subpopulations.

Those components are addressed in this plan. This document also includes information from and incorporates by reference other locally adopted documents that deal with homelessness and its prevention. These documents include the Lake County Housing Element of the General Plan adopted June 16, 2020 by the Board of Supervisors, the 2020 Lake County Continuum of Care Strategic Plan, its 2021 Community Survey which gathered information on desired services, and its 2021 Gap Analysis. The 2020 City of Lakeport Housing Element and the 2019 City of Clearlake Housing Element were also reviewed and are incorporated by reference as well. Further, this Action Plan contains information that can satisfy the requirements of other homelessness assistance and prevention programs offered through HCD, the U.S. Department of Housing and Urban Development (HUD) and other governmental agencies and private entities. It is the

intent of this plan to facilitate the provision of projects and programs within Lake County that will benefit its homeless and at-risk residents. The provided information also may serve as the starting point for other entities, particularly nonprofit groups working with special needs groups such as veterans, disabled and youth, to launch further detailed, targeted needs assessments that can result in new and successful funding pursuits and subsequent projects.

DEFINITION OF HOMELESSNESS

HUD Definition

The federal definition of “homelessness” originated with the McKinney-Vento Homeless Assistance Act of 1987, codified in 42 USC section 11371 et seq., the Public Health and Welfare Code. Although the various federal and state-funded programs can specify narrowed eligibility depending on the program’s intent or targeted population, the definition of “homeless” as imposed by the U.S Department of Housing and Urban Development (HUD) and detailed in the Code of Federal Regulations (24 CFR section 578.3) provides for four categories of individuals and households:

Category 1-

Individuals and families who lack a fixed, regular and adequate nighttime residence, which includes one of the following:

- *Place not meant for human habitation*
- *Living in a shelter (emergency shelter, hotel/motel paid by government or charitable organization)*
- *Exiting an institution (where they resided for 90 days and less AND were residing in emergency shelter or place not meant for human habitation immediately before entering institution)*

Category 2-

Individuals and families who will imminently (within 14 days) lose their primary nighttime residence, which includes ALL of the following:

- *Have no subsequent residence identified AND*
- *Lack the resources or support networks needed to obtain other permanent housing*

Category 3-

Unaccompanied youth (under 25 years of age) or families with children/youth who meet the homeless definition under another federal stature and includes all of the following:

- *Have not had lease, ownership interest, or occupancy agreement in permanent housing at any time during last 60 days*
- *Have experienced two or more moves during last 60 days*

- *Can be expected to continue in such status for an extended period of time because of: chronic disabilities, OR chronic physical health or mental health conditions, OR substance addiction, OR histories of domestic violence or childhood abuse (including neglect) OR presence of a child or youth with a disability, OR two or more barriers to employment*

Category 4-

Individuals/families fleeing or attempting to flee domestic violence, dating violence, violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or family member and includes ALL of the following:

- *Have no identified residence, resources or support networks*
- *Lack the resources and support networks needed to obtain other permanent housing*

State of California Definition

The state’s HHAP program has adopted the federal homelessness definition for its eligible service population. It currently uses the local Continuum of Care’s 2019 Point in Time (PIT) count in determining local need for the HHAP and other program allocations, although the PIT count is restricted to using a HUD definition of “unsheltered.” That definition is defined in the PIT Count section below.

The California state legislature is considering adoption of an official definition of the homeless. One such recent definition was originally contained in 2019’s AB 67: *An individual or family who lacks a fixed, regular and adequate nighttime residence or an individual who resided in a shelter or place not meant for human habitation and who is exiting an institution where the individual temporarily resided.*

The HHAP homelessness definition, as specified by the CA Health and Safety Code, is defined in Section 578.3 of Title 24 of the Code of Federal Regulations. The section incorporates by reference the federal McKinney-Vento Homeless Assistance Act (as amended). It further includes a definition for those at risk of homelessness:

(1) An individual or family who:

(i) Has an annual income below 30 percent of median family income for the area, as determined by HUD;

(ii) Does not have sufficient resources or support networks, e.g., family, friends, faith-based or other social networks, immediately available to prevent them from moving to an emergency shelter or another place described in paragraph (1) of the “Homeless” definition in this section; and

(iii) Meets one of the following conditions:

(A) Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance;

(B) Is living in the home of another because of economic hardship;

(C) Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days of the date of application for assistance;

(D) Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by federal, State, or local government programs for low-income individuals;

(E) Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons, or lives in a larger housing unit in which there reside more than 1.5 people per room, as defined by the U.S. Census Bureau;

(F) Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution); or

(G) Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in recipient's approved Consolidated Plan;

(2) A child or youth who does not qualify as "homeless" under this section, but qualifies as "homeless" under section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(m) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(m)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15)); or

(3) A child or youth who does not qualify as "homeless" under this section, but qualifies as "homeless" under section 725(2) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), and the parent(s) or guardian(s) of that child or youth if living with her or him.

This code section further defines those chronically homeless:

(1) A "homeless individual with a disability," as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:

(i) Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and

(ii) Has been homeless and living as described in paragraph (1)(i) of this definition continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (1)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a

place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering the institutional care facility;

(2) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or

(3) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

CA Health and Safety Code section 50216(k) defines homeless youth as an unaccompanied youth between 12 and 24 years of age, inclusive, who is experiencing homelessness. The term “homeless children and youth for the HHAP program is defined as:

(A) means individuals who lack a fixed, regular, and adequate nighttime residence; and

(B) includes —

(i) children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement;

(ii) children and youths who have 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;

(iii) children and youths who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and

(iv) migratory children who qualify as homeless.

Local budgeting of the HHAP allocation must designate a minimum of 10 percent for uses benefitting unaccompanied youth through age 24.

HUD CoC PIT and HIC Counts; Sheltered and Unsheltered Homeless

Since 2003 the U.S. Department of Housing and Urban Development (HUD) has required that each Continuum of Care conduct a PIT count, now on a locally chosen January day (exemptions may be granted for specific emergencies) each uneven numbered year. Lake County’s CoC, established in 2014, conducted its first PIT count in 2015 and since has opted to conduct a PIT count annually. It therefore conducted a count in 2022; those results are included in this Action Plan. HUD also requires that

each CoC conduct an annual Housing Inventory Count (or HIC) which also is a point-in-time inventory of provider programs providing beds and units dedicated to people experiencing homelessness (including permanent housing projects where residents were homeless at entry). Those provider programs are categorized by five types: Emergency Shelter, Transitional Housing, Rapid Rehousing, Safe Haven, and Permanent Supportive Housing.

The PIT count was established by HUD to estimate the number of chronically homeless, or those individuals who for whatever reason did not use established emergency shelters. HUD specifies that the definition of “unsheltered homeless” for purposes of the local PIT count is as specified in 24 CFR 578.3 paragraph (1)(i):

(1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

(i) 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.

This definition excludes those doubling-up or couch surfers, or those residing in institutions at the time of the PIT count, although they otherwise would qualify under the broader HUD homelessness definition. The definition, however, does include those living in tents or recreational vehicles since those shelters are not defined by code as meant for regular human habitation.

Student Homelessness

Public schools by federal regulation collect data on homeless students. In this instance, the McKinney-Vento Homeless Assistance Act provides a more inclusive definition of homelessness for students and their families than what is permitted CoCs when conducting PIT counts for unsheltered individuals. For this special population, the term “homeless children and youths”

(A) means individuals who lack a fixed, regular, and adequate nighttime residence (within the meaning of section 103(a)(1)); and

(B) includes--

*(i) children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; or are abandoned in hospitals;**

(ii) children and youths who have 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 (within the meaning of section 103(a)(2)(C));

(iii) children and youths who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and

(iv) migratory children (as such term is defined in section 1309 of the Elementary and Secondary Education Act of 1965) who qualify as homeless for the purposes of this subtitle because the children are living in circumstances described in clauses (i) through (iii).

Summary

In summary, therefore, a homeless individual (or household) is defined as “an individual who lacks housing (without regard to whether the individual is a member of a family), including an individual whose primary residence during the night is a supervised public or private facility (e.g., shelters) that provides temporary living accommodations, and an individual who is a resident in transitional housing.” A homeless person is an individual without permanent housing who may live on the streets or in the fields, be staying in a shelter, mission, single room occupancy facilities, abandoned building or vehicle, or be in any other unstable or non-permanent situation. An individual may be considered to be homeless if that person is “doubled up” or “couch surfing,” terms that refer to a situation where individuals are unable to maintain their housing situation and are forced to stay with a series of friends and/or extended family members. In addition, previously homeless individuals who are to be released from a prison or a hospital may be considered homeless if they do not have a stable housing situation to which they can return. Migrant workers and their families who are temporarily without adequate housing are also considered homeless during that displaced period. A recognition of the instability of an individual’s living arrangements is critical to the definition of homelessness.

LOCAL LANDSCAPE ANALYSIS

Lake County, California

Lake County, home to the largest natural freshwater lake in California, is a geographically large but isolated rural county accessed only by two-lane roads over intercoastal mountain ranges, about 110 miles both northwest of Sacramento and northeast of San Francisco. Approximately 6,033 square miles in area, the county has an estimated 2021 population of almost 69,000 persons, of which about 9,500 are school-aged children. Its economy is based mostly on agriculture, tourism and recreation, although the largest employers are local government, school districts and two critical access hospitals. Its two incorporated cities, Lakeport and Clearlake, are situated on Clear Lake’s northwestern and southeastern shores, respectively. Although Lakeport is the county seat, Clearlake’s population of about 16,777 persons substantially exceeds that of Lakeport’s 5,135 residents.

Lake County has some of the poorest, most unhealthy citizens in the state. The 2019 County Health Rankings and Road Maps, a report annually produced by the Robert Wood Johnson Foundation (RWJF) in collaboration with the University of Wisconsin Population Health Institute (UWPHI), concluded that Lake County is the unhealthiest of the state's 58 counties based on a variety of mental and physical outcomes. One huge factor cited is that almost 30 percent of households with minor children live below the poverty line.

Further, over the past several years a number of natural disasters have severely impacted Lake County and its residents. The 2015 Valley, Jerusalem and Rocky Fires resulted in the loss of almost 1,600 homes and devastated the communities of Middletown, Cobb, and Whispering Pines. Clayton Fire in 2016 resulted in the loss of an additional 250 homes in and around the Clear Lake/Lower Lake area. Again in 2017, the Sulphur Fire took another 158 homes in the Clearlake Oaks and Clearlake Park areas. Winter storms in 2018 pushed Clear Lake to its highest level since 1998, inundating homes, flooding streets and bringing some aspects of life in Lake County to a halt. In the City of Lakeport, a recreational vehicle/mobile home park that included about 35 units occupied mainly by Latino farm worker households, was destroyed and the residents were temporarily relocated to a formerly closed resort. Again in 2021 the Cache Creek Fire destroyed a portion of the unincorporated town of Lower Lake. That fire destroyed 56 homes, mostly mobile homes in a park occupied by low-income households. In all, approximately seven percent or 2,100 units of the county's housing stock have been lost over the past seven years. Many families were already living in poverty and the long term effects of losing their homes and property will continue to present the community with additional challenges, including homelessness.

Lake County Demographics

The U.S. Census Bureau provides the following estimates for July 2021:

Lake County total population 68,766

Unincorporated 46,854

City of Lakeport 5,135

City of Clearlake 16,777

Age and sex

Persons under 5 4,057 (5.9%)

Persons under 18 14,578 (21.2%)

Persons 65 and over 15,885 (23.1%)

Female persons 34,383 (50.0%)

Race and Hispanic Origin

White (not Hispanic or Latino) 47,380 (68.9%)

Black 1,444 (2.1%)

American Indian, Alaska Native 3,094 (4.5%)

Asian 963 (1.4%)

Native Hawaiian, Pacific Islander 206 (0.3%)

Two or more races	3,232 (4.7%)
Hispanic or Latino (any race)	15,129 (22.0%)
Veterans	4,919
Number of Households	25,508 (2.48 persons/household)
Income and Poverty	
Median household income	\$49,254
Per capita income	\$29,714
Persons in poverty	10,934
Children in poverty	4,370 (29.9%)
Health	
Persons under 65 with disability	9,352 (13.6%)
Persons under 65 without health insurance	6,464 (9.4%)
Education	
Persons 25+ with high school degree	59,276 (86.2%)
Persons with bachelor's degree or higher	11,484 (16.7%)
Housing	
Number of units	34,274
Non-owner occupied units	11,071 (32.3%)
Median gross rent	\$1,028

Homelessness in Lake County

Local governments data

As required by California law, all three governmental agencies have adopted a 2019-2027 Housing Element as part of their respective General Plans, long-term planning documents covering a range of mandatory and discretionary focus areas. According to HCD, the agency responsible for certifying housing elements with state law, the two cities plus County of Lake have submitted compliant elements.

Both Lakeport and Clearlake cite the Continuum of Care's HUD 2014 Point in Time (PIT) count when attempting to quantify its respective jurisdiction's homeless population. The problem, however, is that in 2014 the CoC included five counties, of which Lake was one (Colusa, Glenn, Trinity and Tehama were the others). Therefore the homeless numbers were combined and could not reliably be extracted for any one county. Clearlake makes a particular point that domestic violence victims, most often single women with minor children, need more emergency shelter options but that the county's single facility serving that special group is located in the unincorporated county. All three governmental entities do a good job identifying the particularly vulnerable groups, such as single parent households with children, the elderly and the disabled, by numbers and by income groupings, but most of the information was based on now-dated 2000 US Census tables. The recently-revised 2019 Lake County housing element did the best job of trying to document homelessness needs, providing data from both the new Lake County Continuum of Care (first HUD PIT count 2015) and a local faith-based homeless advocacy group that in 2008 utilized the HUD estimate that at, on

average, communities had one to 1.5 percent of its population homeless at any given time. That amounted to 639-959 homeless persons within Lake County in 2008.

Lake County Continuum of Care Point-in-Time Count 2022

The CoC's January 27, 2022 PIT count documented 259 individuals in 242 households were unsheltered on that date. About one-third had a serious mental illness or substance use disorder. Fifteen persons were adult domestic violence survivors. Males outnumbered females by almost two to one. Only one person self-identified as transgender; no other persons self-identified as other LGBTQ. Only 50 percent of unsheltered persons were White non-Hispanic, although 12 percent classified themselves as Latino and a surprising 48 percent identified as Native American. Twenty-two percent of individuals described themselves as chronically homeless.

Nineteen of those 259 unsheltered individuals were minors, with 5 unaccompanied minors. Another 18 persons were unaccompanied youth ages 18 to 24. Of the 23 unaccompanied minors, 13 were male and 10 were female. None identified as LGBTQ. Two of these youth identified as Latino and 16, or 70 percent, identified as Native American. The remaining unaccompanied youth were White/non-Hispanic. None of these youth were identified to be chronically homeless.

Fourteen unsheltered veterans, all in single-person households, claimed to be U.S. veterans. Eleven of those were male. All were White/non-Hispanic except for two Native Americans. Nine veterans identified themselves as chronically homeless; none self-identified as LGBTQ.

The entire PIT count, plus HIC count, for 2022 is attached as Appendix ____ .

Other Homeless Estimates

Overall community homelessness:

In general, HUD and other homeless assistance sources allow the use of certain assumptions and extrapolations when quantifying special needs groups, especially when resources, local expertise and assistance, and physical constraints such as rural locations warrant. HUD itself estimates in its publication, A Guide to Counting Unsheltered Homeless People, that at any given point in time the PIT count only captures as many as one-quarter to one-third of adults who are unsheltered homeless.

The affordable housing industry's accepted standard is that a community will have one to 1.5 percent of its population homeless at any given time. Based on Lake County's estimated 2021 population of 68,766, a conservative one percent, or an estimate of 688 homeless persons, can be used. This homeless number also corresponds closely with the 2018 CoC PIT count data and therefore appears reliable.

Veterans:

Another often-used estimate comes from the US Department of Veterans Affairs (VA). According to the VA, generally about one-fourth of the local homeless are veterans. This translates to 172 persons in Lake County if using the 688 homeless persons benchmark. About one-half, or 86, are Vietnam-era veterans, categorizing them as elderly. According to the US Interagency Council on Homelessness, about half of homeless veterans also have a mental illness, typically PTSD or bi-polar disorder. Three-fourths, or an estimated 129 homeless vets, have problems with alcohol, drugs and/or mental health. Therefore a reasonable assumption is that one-half of the county's homeless veterans likely have co-occurring disabilities or disorders.

Mentally Ill:

According to the US Interagency Council on Homelessness, about one-third of the homeless have untreated psychiatric illnesses. Using the 688 homeless persons estimate, Lake County may have about 229 mentally ill individuals who are homeless and not accessing services. As part of its mission, Lake County Behavioral Health Services provides recovery-oriented services that include assistance with establishing stable housing. Its 2020-2021 Mental Health Services Act Annual Update and Three-Year Program and Expenditure Plan specifies strategic actions in assisting county residents with mental illness, including those with co-occurring (mental health and substance use) disorders. It is also the lead agency for this Action Plan as well as the administrator for the Lake County Continuum of Care.

Chronically Homeless:

Although the VA estimates that at least one-third of homeless veterans meet the definition of chronically homeless, housing advocates use 25 percent as a rule of thumb for the number of chronically homeless among the homeless population. Using the same homeless number of 688 persons, therefore, provides an estimate of 172 persons who are chronically homeless. They are disabled by a mental or physical disorder, and they have been either homeless for a year or more or have had at least four episodes of homelessness in the previous three years. Of this subgroup, at least one-third are generally found to be severely mentally ill. Again, this translates to a current Lake County estimate of 57 persons who meet the NPLH target clientele of the chronically homeless mentally ill. This number is consistent with the 2022 CoC PIT count; data collected are just categorized differently.

Homeless Youth:

The Lake County CoC 2022 PIT count identified several unspecified households with a total of 19 minor children and five unaccompanied minor children as homeless. But according to the 2018 KidsData.org annual report from the Lucille Packard Foundation for Children's Health, Lake County in 2016 was fifth in the state with 10 percent of its

public school students meeting the McKinney-Vento definition of homeless; California as a whole had a homeless student rate of 4.4 percent. The Lake County Office of Education listed a 2020-2021 enrollment of 9,883 for its public schools. Of that total, 442 students were classified as “homeless youth.” Another 358 students were classified as “migrant youth” also meeting at times the McKinney-Vento homelessness definition. Lake County’s 2020-2021 dropout rate for students enrolled in grades 9-12 was over 14 percent (California overall was 9 percent), another risk factor for youth homelessness.

According to the Substance Abuse and Mental Health Services Administration of the U.S. Department of Health and Human Services, the majority of homeless youth are 13 or older and have higher rates of mental health problems and substance abuse than their peers. Up to 50 percent or more have been involved in the foster care system as well, and 20 to 35 percent of homeless youth identify as LGBTQ+.

PLAN DEVELOPMENT

Public and Agencies Input

The NPLH and HHAP regulations require the county housing plan/homelessness action plan be developed with public input; entities and individuals that were consulted specifically included the following:

- County representatives with expertise from behavioral health, public health, probation and criminal justice, social services, and housing;
- The local Continuum of Care (CoC);
- Housing and homeless service providers, especially those with experience providing housing or services to the chronically homeless;
- County health plans and health care providers, especially those implementing pilot or other programs that would allow the county to use Medi-Cal or other non-MHSA funding to provide or enhance services provided to NPLH tenants, or to improve the tracking of health outcomes in housing;
- The public housing authority; and
- Representatives of family caregivers of persons living with serious mental illness.

In Summer 2018, Lake County Behavioral Health Services contracted with Paragons, LLC, a consulting firm with a long presence in Lake County, to prepare the No Place Like Home housing plan. Paragons’ principal consultant and her team had originally prepared the county’s first MHSA housing plan ten years ago. A process meeting all NPLH requirements was designed and approved by Behavioral Health Services Department, then work began. The Lake County CoC became an ad hoc committee for the process and therefore was directly and continuously engaged with this plan.

Two surveys were designed and launched. The first survey was for persons in government service, public agencies, private organizations and healthcare working with the homeless, at-risk of homelessness, and the mentally ill, either directly as part of

their assignments or through contact during the course of their work. The second survey was directed to the consumer; this survey was completed by consumers/clients with or without the assistance of a provider. A copy of the two distributed surveys is contained in the appendix to this report.

The first survey was emailed to all contacts by the head of the county's Behavioral Health Services Department. The consultant later followed up with non-responders. Although not all agencies responded to the survey request, input in the NPLH plan was obtained from all the following over the course of development:

- Representatives from Lakeport and Clearlake governments
- Lake County Board of Supervisors
- Lake County Behavioral Health Services Department
- Lake County Department of Social Services
- Lake County Housing Commission (public housing authority)
- Lake County Public Health
- Lake County Probation Department
- Lake County Superior Courts
- Clearlake and Lakeport Police Departments
- Lake County Sheriff's Office
- Lake County Office of Education
- US Department of Veterans Affairs
- Local affordable housing managers
- Supportive Services for Persons with Disabilities
- Lake County Continuum of Care
- Housing and homeless service providers
- Ford Street Detox and Emergency Housing
- Hilltop Sober Living
- North Coast Opportunities
- Lake County Interfaith Council
- Redwood Coast Regional Services
- Lake County food banks (Clear Lake Gleaners, etc.)
- St. Vincent de Paul Society
- Salvation Army
- Catholic Charities of Sonoma, Napa and Lake counties
- Lake Family Resource Center (domestic violence shelter)
- Lake Ministerial Association warming center (winter shelter)
- Sutter Lakeside Hospital
- Adventist Health Clearlake Hospital
- Lake County Tribal Health Consortium
- Lakeside Community Clinic
- Clearlake VA Clinic
- Representatives of family caregivers of persons living with serious mental illness
- Senior Centers

- Senior caregivers
- Providers with experiencing providing housing or services to those who are chronically homeless
- Individuals self-identifying as mental health consumers

Client surveys were completed by 131 individual participants; some homeless encampment occupants were interviewed as well. The complete report dated November 2018 can be found as an appendix. This report contains data as well on the responders, including homelessness status. Client comments were further utilized to develop the goals and strategies of this housing plan. Please see the section on Quantifying the Homeless for a description of the client survey findings.

The consultant team also hosted a focus group in February 2019 for local governments, agencies and individuals particularly interested in the development of housing for the targeted clientele. Approximately 25 persons representing 20 entities attended. Their collective recommendations on potential housing projects and supportive programs are incorporated in this plan as well. The minutes, with participant input, are attached in the appendix section.

Over the past seven years, Lake County Behavioral Health Services, along with other public and private partners, has been conducting multiple planning activities concerning homelessness and housing needs. During each of these planning processes, outreach was done through community-wide annual *Soberest* events sponsored by Lake County Behavioral Health Services. Providers of homeless services in mental health/substance abuse along with consumers and staff of homeless services were interviewed. Findings were incorporated into the current 2021-2022 Mental Health Services Act Three Year Program and Expenditure Plan. This homelessness plan continues to build off these earlier MHSa activities.

The Lake County Continuum of Care, comprised of representatives from all segments of federal, state and local governments, nonprofit and healthcare agencies, faith-based groups and concerned individuals who work with the homeless and at-risk populations or were themselves homeless at some point, served as an ad hoc planning committee for this process. This entity has existed in its present form only since 2014, conducting its own first HUD Point-in-Time homeless count in 2015. Prior to that, Lake County had been a part of two different multi-county consortiums after an early version of the county CoC, first formed in the 1990s, had become inactive. The CoC was regularly updated on the NPLH plan development process, with members participating in filling information gaps or making further outreach attempts when necessary. The result was a NPLH housing plan that was comprehensive. The same process was utilized to develop this homelessness action plan and therefore it is a good reflection of Lake County's current homelessness picture and its collective efforts to tackle the problem.

Client Outreach Survey 2019

The following is an analysis of completed client surveys:

Overall client survey findings:

The overall findings show variations primarily by age, location, education, housing situations, needs for stability, services used and length of time without stable housing.

The specific key attributes of the population studied are:

- The majority of the respondents were 18 to 64 years of age (n=118, 90%); the largest age group was 45 to 54 years of age (n=29, 22%),
- Slightly more than half are male (n=71, 54.2%) with only one person being transgender/non binary,
- The zip code where the greatest number of respondents reside is Clearlake (n=52, 40%),
- Most respondents were white/Caucasian (n=90, 69%),
- The majority had not graduated high school or had a high school degree as their highest level of education (n=85, 65%).
- Almost one-quarter (n=32, 24%) were homeless.
- Finances (n=89, 67%) and sustainable income (n=71, 54%) were the biggest obstacles to obtaining a stable living environment and ideal housing situation respectively.
- Almost half (n=63, 48%) lived alone with 54 respondents (41%) living in a family household.
- The most commonly used agencies and services were those provided by the Department of Social Services (n=59, 45%) and many respondents used services from multiple agencies; 21 (16%) respondents reported using no services.
- The preferred living environments varied with no one type being a strong preference.
- More than three-quarters of respondents (n=107, 82%) were **not** veterans.

Specific attributes:

The variations noted below could be used to target interventions.

Age. There is a significant number of respondents who are homeless in Clearlake. This group is primarily between the ages of 18 and 24 with limited education. They are in need of transportation and stable employment.

Substance abuse. People who have used services for alcohol and other drugs are from a variety of ages, more likely to be male and have higher levels of education when compared to all of the respondents, and have a wide variety of assistance needs.

Victims. People who receive victim services are primarily female, have a variety of race/ethnic backgrounds, do not seek out substance abuse assistance, have limited education, and need assistance with finances, transportation and physical health. All of

the people who sought out assistance for domestic violence were women; they need financial and social services assistance.

Veterans. Veterans are primarily male, have higher levels of education, use a variety of service agencies, and have slightly higher mental health and drug issues than non-veterans.

Education. People who did not graduate high school tend to have long-term homelessness.

Service agencies. Lake County Behavioral Health Services sees a diverse population with varied needs. A large percentage of their clients who participated in the study have been without permanent housing more than three times (n=15, 40%) and for over three years (n=12, 32%).

Length and frequency of time without permanent housing. People who are frequently without permanent housing and for longer periods of time have needs related to finances/stable income, transportation, and social services. This population has varied preferences for housing types and tends to be single.

PLAN ELEMENTS

Challenges and Barriers to Serving the Homeless

Working to identify a population that often does not want to be found is a challenge. Larger cities and counties with vast more experience than Lake County in tackling the challenges and barriers when working with the homeless have discussed these problems through the years, with many published documents sharing their insights available to those in the industry. But Lake County has unique challenges. These were all identified, and repeatedly emphasized in many instances, during the outreach process for this NPLH plan.

Lake County-specific challenges and barriers:

- Lagging local economy

Lake County's unemployment rate, at about 8 percent, is higher than the state's 5 percent average. But that provides an incomplete picture. The county has one of the highest concentrations of elderly, with 25 percent ages 65+. Forty percent of these seniors qualify as low income, with 10 percent falling below the poverty level. In some areas of the county, including the City of Clearlake, up to 50 percent of the working age adults describe themselves as disabled and unable to work. One-fourth of all county households, and over one-third of households with minor children, also live below the poverty line.

- Lack of affordable housing

Over the past six years, devastating wildfires and severe Clear Lake flooding resulted in the loss of about 2,200 housing units, many of them occupied by low income households. These losses accounted for about seven percent of the county's year-round housing stock. Remaining units, further, often were snapped up by former residents of the wealthier adjacent Sonoma and Napa counties who also were displaced by their own respective wildfires. Emergency housing is almost nonexistent but is discussed in detail in the Local Resources section. Lake County needs active, knowledgeable affordable housing advocates and developers.

Since 75 percent of the county's very low-income households pay more than 50 percent of monthly income towards housing, it is apparent that new housing units must include rent subsidies. Additional HUD Section 8 vouchers are not available, and HUD-VASH (Veterans Affairs Supportive Housing) vouchers are limited and difficult to competitively access for local use. Programs like Rapid Re-Housing and Emergency Solutions Grants that can provide move-in costs and other financial support can greatly assist, particularly as a gap filler while new housing units are being developed.

- Aging population

Lake County already has one of the oldest populations in the state. The previously-cited 2019 County Health Rankings and Road Maps also concluded that the county's already-aging and unhealthy citizens will continue to increase in number. This age group typically lives on a fixed income and is unable to cope with any household emergency. Mental health and alcohol use issues further exacerbate this state, creating an at-risk for homelessness situation.

- Lack of youth opportunities

Outside of school activities, little is available to youth isolated from the rest of the world in a rural county with minimal public transportation. The county's rates for teen smoking, drug use, pregnancy and dropping out of school and other risky behaviors that increase the likelihood of depression and homelessness exceed California rates. More programs such as the 6-bed teen emergency shelter in the Clearlake area and the youth drop-in centers in both Clearlake and Lakeport, provide teens a temporary respite but allows them to access services they might not seek out on their own.

- Limited public transportation

Lake County is geographically huge. It can only be accessed by the outside world via two-lane roads over mountains. Within the county, car travel from the northwest town of Upper Lake not far from the Mendocino County line to the southeast town of Middletown not far from the Napa County line will take a full hour. California's largest natural lake, Clear Lake, sits in the middle of the county, with the cities of Lakeport and Clearlake

along with several unincorporated towns along its shores. With 100 miles of shoreline, people must drive around the lake via shoreline highways even though one town may be less than one air mile from another across the lake. Although the county has a public transportation system, the routes are infrequent due to funding and ridership constraints.

- Lack of services and service providers

With a small tax base, the county's local governments do not have the financial resources larger, more urban communities enjoy, yet the local demand for services is great because of the economy and demographics. Even when funding is available, recruitment of qualified persons for necessary programs can be difficult. Higher educational and technical training opportunities are not available (two outside community colleges do have campuses here with limited class selections), and adjacent counties with more attractive wages often hire away trained personnel.

- Seasonal and invisible homeless

Lake County's economy outside of education and government services is largely agricultural- and tourism-based. Both are seasonal, typically low-paying sources of employment. The county does see during harvest periods a significant influx of migrant and other non-local seasonal workers who come for work, especially the intensive work in the fields and packing sheds where long six days/week, 12 hours/day shifts provide a substantial portion of these workers' household incomes. Yet Lake County has a severe shortage of licensed farmworker housing units and the fires and floods have further reduced the number of affordable units, if any were available for short-term rent. These seasonal workers more than often end up living in unpermitted campgrounds without proper sanitation or in homeless encampments along creeks or in fields in the county's agricultural areas. They meet most homeless definitions but do not access services, often because they are undocumented and monolingual. These unhealthy living conditions can result in local problems; local officials would also be surprised how many of these migrants include minor children who travel with their parents as they follow the row and citrus crops from the Central Valley into Lake County for its pear and grape harvests then on to Oregon or Washington for the apples and cherries.

- Not understanding the need and issues

"If we build it, they will come." Unfortunately, many persons in Lake County believe that withholding services to those they consider are degrading the local economy will result in those persons relocating to places with services. Not providing services to the homeless and those at-risk only keeps them homeless. Education on these issues is key, particularly for first responders, and is also an important strategy of the Lake County CoC. Please also see the discussion below on local efforts to educate the community on homelessness issues.

Local efforts to decriminalize homelessness:

Lake County does not currently have a specific program to prevent criminalization of the homeless. But several recent informal discussions between law enforcement and Lake County Behavioral Health Services have focused on preventing criminalization of homelessness through local implementation of programs being tried elsewhere. The aim is to provide an alternative to involvement in the criminal justice system for people experiencing homelessness and to offer additional opportunities for supportive service intervention and care for this population.

Forensics Team

The Forensics Team is a program operated by Lake County's Behavioral Health Services and funded by MHSA. This team operates within the county's Mental Health Adult System of Care and works closely with Adult Probation. It provides mental health services, alcohol and drug treatment, and housing services to seriously and persistently mentally ill individuals who are on probation and at risk of re-offending and incarceration. This team works very closely with the criminal justice system to assess referrals for serious mental illness and provide rapid access to a treatment plan with the appropriate mental health, substance abuse and housing services needed.

Outreach Program

The proposed Outreach Program will work to engage and stabilize homeless individuals living outside through consistent contact to facilitate and deliver health and basic needs services and secure permanent housing. This program, using California Emergency Solutions and Housing (CESH) Program funding passed through the Lake County CoC, will operate as an entry point into the coordinated entry system for unsheltered persons and works to locate, engage, stabilize and house chronically homeless individuals and families. The outreach team will identify individuals living on the streets, assess their housing and service needs, and facilitate connections to shelter, resources and services. The program includes a relationship with the local governments' code enforcement officials, helping to ensure that violations of local codes due to homeless persons seeking alternative methods of survival (such as encampments and unsafe housing conditions) are not criminalized, or that their criminal justice status is not jeopardized due to minor infractions.

Law Enforcement Education & Representation on the Continuum of Care

Lake County's Continuum of Care includes representation from the county sheriff's and two cities' police departments. It continues to provide law enforcement with information and training to ensure local law enforcement is knowledgeable about issues relating to homelessness. The goal is to promote positive law enforcement policy and practice, reduce criminalization of homelessness, promote support for homeless services, and create empathy and understanding for persons experiencing homelessness within Lake County.

The Lakeport Police Department, in cooperation with the nonprofit Lake Family Resources Center, also recently added a Crisis Responder to its team. This person responds in the field to emergencies such as homelessness or domestic violence. The goal is to safely intervene without the use of force and to refer persons in crisis to community service providers or other resources to resolve, in the short and long-term, that emergency.

Partnership with Probation Department

On October 7, 2017, Governor Jerry Brown signed Assembly Bill No. 210 (AB 210) into law. AB 210 allows counties to create a multidisciplinary team of services providers who can share confidential information in order to better and more quickly serve homeless households. In response, the CoC is in the process of developing protocols with the county Probation Department and other affected agencies to expedite identification, assessment, and linkage of county services to homeless households with criminal backgrounds. The goal of this new program will be to prevent the further criminalization of these households as they navigate community reentry and to reduce the collateral consequences of their previous and ongoing criminal justice involvement.

The Lake County Probation Department's juvenile division operates a "wrap-around" program that works with the entire family when dealing with a minor in the justice system. The program's purpose is to ensure each youth has a path to success, particularly once that youth is released from juvenile hall placement. Lake County juveniles currently are placed into a Tehama County facility; Lake County neither has the facility nor the capacity to locally handle juveniles in detention. But the Probation Department currently has three deputy probation officers that work with the wrap-around program so that youths once released, including those returning to foster care, have a safe environment, including housing, to which they can return. County agencies and nonprofits actively coordinate with this program.

Homeless Court

Lake County Behavioral Health Services is in discussion with the District Attorney's Office to determine the feasibility of establishing a Homeless Court. Homeless Court is an alternative to the traditional criminal justice court system. The court session is focused on homeless and formerly homeless individuals and assembles every other month to resolve traffic, infractions and non-violent minor misdemeanor cases. Clients are referred to the Homeless Court in a variety of ways, including through homeless service providers, and must apply for the program well in advance of the court date. On the scheduled court date, an assigned Public Defender appears with each participant and makes a presentation to the court showing how the participant has progressed and how circumstances have changed since the participant was originally charged with the offense, ticket or fine to facilitate resolution outside of the criminal justice system.

Coordinated Entry System:

Coordinated entry systems (CES) are intended to help communities share vital information on available resources among all agencies and entities serving the same population, in this case the homeless and those at risk of homelessness. The system also allows data, including client information, to be shared as necessary so that each client can receive services from a variety of entities that meet his or her particular needs. Since the lack of funding and resources are always a concern, especially in small rural counties such as Lake County, the CES allows the prioritization of people who are most in need of assistance. On a broader scale, the CES can provide information to CoCs and other stakeholders about program needs and gaps to help communities strategically allocate their current resources and identify the need for additional resources.

Lake County Behavioral Health Services additionally operate five community peer support centers. These are the Big Oak Center in Clearlake Oaks (northshore), the Circle of Native Minds in Lakeport (Native American-centric, northwest), the Harbor on Main in Lakeport (youth services contracted to Redwood Community Services), La Voz de la Esperanza Centro Latino in Clearlake (Spanish/English services, northeast), and the Family Support Center in Middletown (southeast county). All centers act as access points to Lake County CoC's coordinated entry system and have trained staff who already refer possibly eligible families to programs for additional assistance. Additional coordinated access points are the shelters and the Lake County Office of Education, which have the ability to connect with families through its identified unhoused youth.

For the past several years, Behavioral Health Services has been working on establishing a coordinated entry system as funded under a CA Department of Health Care Services' Whole Person Care grant program. That state program was originally designed to coordinate health, behavioral health and social services in order to improve the health outcomes of Medi-Cal beneficiaries who are high utilizers of the health care system. Through collaboration and coordination among county agencies, health plans, providers and other entities, the grantees were to design then develop the infrastructure and processes necessary to integrate and improve care for vulnerable local populations. At the end of 2021 Behavioral Health Services, as both County of Lake and the administrator for the Lake County Continuum of Care, contracted with Adventist Health Clear Lake to establish the HUB, an administrative center for the conceived community-wide coordination network modeled after the Pathways Community HUB vision. The HUB will provide the infrastructure that will continuously support and monitor local care coordination services as well as to provide community based organizations and health care providers with a single point of contact system. The HUB will then assign referred high-risk community members a specific "pathway" that addresses their individual risk factors and connects them to other appropriate agencies or programs that have the expertise and best practice services, supports and capacity to further serve them. In addition, the HUB will utilize the CoC's current HMIS to track served individuals and report outcomes. Behavioral Health Services anticipates the HUB will be functioning in the very near future

Homeless Management Information System:

In 2017, Lake County Department of Social Services and North Coast Opportunities, a nonprofit agency serving Lake County as its community action agency, jointly invested in housing navigation software to support, coordinate and locate housing for homeless or at-risk of homelessness persons. Client support included case management, housing location services, and assistance in completing rental applications to move into housing and out of homelessness. This software has not been fully utilized as of this date due to limited staff and the funding to purchase additional components. Current users also complain that the maintenance of client confidentiality is a concern with this software. Therefore, its use across governmental and nongovernmental agencies has proven to be a problem. According to the 2017-2020 MHSA Three Year Program and Expenditure Plan, CES data indicate that services are not supporting households with behavioral health concerns to the same extent as other households not facing those challenges of serious mental illness. This certainly can be due to a variety of factors, including outreach efforts to this hard-to-reach special needs group.

On August 1, 2019 the CoC voted to upgrade its current software system which, although comprehensive in data gathering, maintains client confidentiality even while being accessed by many service providers within and outside Lake County. Lake County Behavioral Health Services continues to oversee the maintenance and distribution of this software, called Clarity. Lake County and the CoC require that this Housing Management Information System (HMIS) be used **across all county agencies, providers and programs serving the homeless and those at-risk of homelessness**. Therefore, Behavioral Health Services oversees, through its consultant, the training of all entities in the use of HMIS so it will continue as a comprehensive and nondiscriminatory data collection tool. Outside agencies indirectly affected by this special population, such as Lake County's two hospitals, two community clinics and local law enforcement agencies (Lake County Sheriff's Department, Lakeport and Clearlake police departments, etc.) have been invited to the trainings as well. Even though these healthcare and law enforcement entities may not participate in the use of HMIS at this time, Lake County will educate those entities on the value of certain data collection, such as psychiatric facility admissions and arrests of clients being served by the other agencies, that can assist in reducing homelessness in Lake County. Since these entities were partners in the drafting of the original NPLH housing plan, they already have shown their collective commitment to assisting in this important county effort where they can.

Lake County Resources to Address Homelessness

Local government:

The county and its two cities all agree they do not have the resources to fully tackle the homelessness problem. Lake County Behavioral Health Services, in great part thanks to both the availability of MHSA funding and forward-thinking leadership, has taken the lead on behalf of the entire county to pursue the No Place Like Home funding and

develop much-needed permanent supportive housing for the chronically homeless mentally ill. All three governments have provided in their respective Housing Elements policies and goals to facilitate affordable housing, including emergency shelters, in cooperation with outside for-profit and nonprofit developers, by fast-tracking permits, allowing ministerial (over-the-counter) approvals of small board and care homes, and providing government surplus properties when suitable and available for affordable housing. Ministerial projects also skip public hearings where the “not in my back yard” affordable housing opponents have the opportunity to politically kill these projects. Therefore these governmental efforts can translate into huge financial contributions, often qualifying as required local match for some funding sources, towards housing projects that will make them feasible to develop.

Tribal governments:

Lake County has seven federally-recognized Native American tribes within its borders; six of those provide some housing to tribal members either on trust land or fee simple properties. These units are provided either free or at deep rental subsidy. Although homelessness among tribal members exists, Lake County has no data on numbers. But the tribes do receive annually funding formula allocations through the federal Native American Housing Assistance and Self-Determination Act (NAHASDA), and these funds can be used to address tribal homelessness problems. Additionally, at least two local tribal governments have accessed Homekey funding through the CA Department of Housing and Community Development (HCD) to develop housing for homeless tribal members and other Native Americans in the county.

Other State, Federal Agencies:

Federal and state programs can fill local needs unmet because of the local economy. Lake County utilizes federal funding for HUD Section 8 and HUD-VASH (Veterans Affairs Supportive Housing) vouchers to provide monthly rent subsidies to qualified households, although both programs are limited in capacity and cannot meet local demand. The county Social Services Department can also assist households in emergency situations with temporary housing assistance using these outside funds.

Nonprofits:

Local governments look to the nonprofit community to provide projects and programs the governments cannot provide because of limited staffing and funds. Another huge advantage in California is that nonprofit housing developers are generally exempt from the Article 34 referendum requirements. Article 34 was a 1950 voter-approved California constitutional amendment that states that no local government may “develop, construct or acquire” any “low-rent” housing “unless approved by a majority of qualified electors of the city, town or county” at the ballot box. By utilizing nonprofits as affordable housing developers, local governments can work towards meeting their state-mandated housing unit development goals without the trouble, and often impossible, task of convincing the local voters that housing is necessary, even when it’s for the chronically homeless

mentally ill targeted by the NPLH program. Luckily for Lake County, the Rural Communities Housing Development Corporation (RCHDC), based in nearby Mendocino County, is a very experienced affordable housing developer with several Lake County projects in its extensive portfolio. The County of Lake has selected RCHDC to develop its first supportive housing project; almost half of the units will be funded through its No Place Like Home allocation for residency by chronically homeless mentally ill individuals and their families. The other units will be occupied by developmentally disabled adults.

Hospitals and Health Care Facilities:

Health facilities, particularly hospital emergency rooms, are often the first access point for the mentally ill homeless who otherwise are unwilling to utilize other available programs and interventions. The county's two critical access hospitals and its healthcare partners, known as the Lake County Collaborative of Health and Community-Based Organizations, also do a great job with their required health needs assessments. Data produced can then be used by other providers to develop goals and strategies for their own programs. On July 1, 2019 a new California law regulating homeless patient discharges will turn hospitals into local housing partners. The following are the key provisions:

- 1) The law requires general acute care hospitals, acute psychiatric hospitals and special hospitals to "include a written homeless patient discharge planning policy and process within the hospital discharge policy."
- 2) Hospitals must also log all homeless patient discharges and offer patients a meal, clothing, necessary medications and transportation upon discharge. In addition, local governments may pass ordinances for stricter requirements on discharges.
- 3) The law seeks to prevent improper discharges — sometimes referred to as patient dumping — in which homeless patients are sent to shelters that cannot take them in or are left to recover on the streets.
- 4) The legislation does not outline specific penalties for hospitals that fail to follow these protocols, but facilities could face consequences from the California Department of Public Health and the federal government.

Faith-Based Organizations:

Until two years ago thanks to HHAP Round 1, Lake County had no open, year-round homeless shelters. The special needs shelter programs are listed later in this plan. But for three years prior to that, the local ministerial association established a warming center during the coldest part of winter, providing a hot meal and warm bed to those who otherwise would be sleeping in the cold. The warming center was operated out of a local church in Lakeport. This same group established a mobile shower program to serve areas frequented by the homeless, including churches that regularly distribute food bags to those who need them.

Current housing projects and programs addressing homelessness

The following nonprofit housing projects and programs, while not permanent supportive housing except for NCO's New Digs Program, provide shelter with services to some of the county's most vulnerable homeless:

Rural Communities Housing Development Corporation, Ukiah

Bevins Court Apartments

10 1-bedroom subsidized rental units for low-income persons with mental illness

Adventist Health Clearlake

Restoration House/Project Restoration, Clearlake

10-bed transitional housing respite facility for high-risk individuals

Lake Ministerial Association

Hope Harbor Warming Center, Lakeport (church facility)

24 beds, December-February only; dinner plus to-go breakfast and bus tickets

Lake Family Resource Center

Rape, trafficking and domestic violence emergency shelter, Kelseyville

38 beds for adults, adults with children

Domestic Violence Housing First

Victims are stabilized with housing then provided additional supportive services

Transitional Housing Program

Financial and supportive services to domestic violence, sexual assault, dating violence, and/or stalking victims for up to 12 months

Lake Community Pride Foundation

The Safe House, Clearlake

6-bed homeless youth emergency shelter

Redwood Community Services

The NEST (Nurturing, Education & Skills Training), Lower Lake

13-bed pregnant and parenting teen homeless shelter

Tule House

Residential rehabilitative facility for individuals recovering from drugs or alcohol abuse

North Coast Opportunities

New Digs Rapid Rehousing Program

Move-in costs, monthly subsidies, direct client assistance and referral

Homelessness Action Plan Goals and Strategies

Programs such as No Place Like Home that provide qualifying individuals and/or families with the rights of tenancy in a long term housing unit of their own are referred to as Housing First or Permanent Supportive Housing (PSH). The tenants are free to stay as long as they want if they are able to fulfill the terms of their lease. The program includes supportive services that are voluntary and typically offered on site. This is a “housing first” approach which delineates itself from other programs that offer support services but do not offer housing. A housing first approach is defined as “an approach that centers on providing homeless people with housing quickly and then providing services as needed.”

The greatest challenge to a “housing first” approach is the lack of available supportive housing units. In Lake County, RCHDS’s 10-unit apartment project in Lakeport for persons with mental health issues is the closest, and only, project that might be considered a supportive housing project. Therefore, Lake County has the unique opportunity to literally build from the ground up.

The adopted 2020-2027 Housing Elements for the county and two cities all contain goals and strategies to address homelessness and the need for additional affordable housing. This plan’s outreach process also identified several goals and strategies to provide housing in particular to the chronically homeless mentally ill. The following consolidates those ideas.

Goals:

- To better identify and quantify all segments of the homeless population (veterans, unaccompanied and parenting youth, individuals, including youth, who identify as LGBTQ+, domestic violence victims, etc.);
- To provide cultural and age-appropriate, effective and coordinated services to each identified group;
- To develop partnerships with affordable housing developers and service providers experienced in supportive housing for the targeted clientele;
- To dedicate Lake County and CoC resources in support of service to ending homelessness in the county, particularly for the chronically homeless; and
- To make homelessness in Lake County rare, brief and one-time.

Strategies:

- Expand the CoC’s role to include service as a Housing Task Force.
- Through the CoC, conduct regular and improved HUD-mandated Point-in-Time counts that thoroughly assess all homeless needs through extensive, bilingual

English/Spanish outreach to all population segments, particularly those suspected of being undercounted due to location, language, age, fear of law enforcement or domestic violence, immigration status or identification as LGBTQ+.

- Conduct specific studies to definitively quantify the local number of homeless and at-risk of homeless special needs populations (i.e. veterans, LGBTQ+ adults and youth, domestic violence and trafficking victims, migrant workers, households with minor children including parenting youth, unaccompanied youth, the disabled and Native Americans not enrolled with a local tribe).
- Fully launch and implement the county's Coordinated Entry System to reduce service gaps and facilitate client access, particularly for special needs groups such as youth and non-English speaking households.
- Continue to require and improve the quality of use of its Homelessness Management Information System (HMIS) for all funded programs.
- Support the development of housing projects and programs that adopt the Housing First model and remove access barriers for special needs groups, particularly the chronically homeless and those exiting institutional settings or the foster care system.
- Support projects that meet all required federal, state and local habitability standards related to safety, sanitation, and privacy and have the highest likelihood of tenant access to and use of appropriate supportive services.
- Solicit and incorporate the input of the homeless and formerly homeless, including youth, especially in the design of programs and projects.
- Prioritize projects competing for finite funds by:
 - 1) their assistance to people with the most urgent and severe needs;
 - 2) developer's capacity to own and operate a permanent supportive housing project for the targeted tenants;
 - 3) the feasibility of the proposed supportive services plan, including coordination with the county and its partners (including CoC membership); and
 - 4) the developer proposes a financially feasible project with reasonable development and sustainable management costs.
- Assist as requested with the development of smaller board and care homes for specific target populations.

Homelessness Solutions

The CoC's 2020 Strategic Plan lists the following priorities:

- Establishment of a family-oriented emergency shelter;
- Establishment of additional supportive housing for unaccompanied and parenting youth;
- Increasing available rental assistance for homeless and at-risk families and individuals;
- Improving culturally and age-appropriate outreach and services/programs for all population segments;
- Further developing local capacity for housing programs' and projects' development and management.

Its subsequent 2021 Gap Analysis also identifies local capacity development as a pressing need.

Lake County Behavioral Health Services' Mental Health Services Act current housing plan documents the need for supportive housing for the mentally ill, including those who are chronically homeless. The following project types are examples of common permanent supportive housing models. They are not listed in any preferential order:

- Multifamily housing project with on-site supportive services
- Multifamily housing project with off-site services within walking distance (less than 1 mile)
- Single-room occupancy (SRO) units with on or off-site services
- Shared housing, scattered site; services off-site with transportation if necessary
- Cooperative or limited-equity housing with rental subsidy; services on or off-site
- Co-housing project; services on or off-site
- Mobile home park with individual household units; on or off-site services
- Privately-operated board and care homes with transportation to service providers
- Residential second units on private properties; services off-site