



San Bernardino County Homeless Partnership High Desert Regional Steering Committee Meeting

Tuesday, November 18, 2025, 2:00 p.m. to 4:00 p.m.
Life Church 12199 Industrial Blvd. Victorville, CA 92395

To address the High Desert Regional Steering Committee (Committee) regarding an item on the agenda, or an item within its jurisdiction but not on the agenda, please complete and submit a Public Comment Request form. Requests must be submitted before the item is called for consideration. Speakers may address the committee for up to three (3) minutes on Public Comment, up to three (3) minutes on each item on the Discussion agenda, and up to three (3) minutes on the consent agenda.

DESERT REGIONAL STEERING COMMITTEE SPECIAL MEETING

OPENING REMARKS	PRESENTER
A. Call to Order (3 minutes) B. Pledge of Allegiance/Invocation C. Roll Call D. Welcome and Introductions (10 minutes) E. Protocols	Jaelen Spencer / Dawn Quigg
F. Individual Committee Member Comments (3 mins. each) or at the end of the agenda under closing. a. City of Hesperia Representative b. City of Barstow Representative c. Town of Apple Valley Representative d. Symba Center e. City of Adelanto f. Assemblymember Carrillo Representative g. Sheriff's HOPE Team h. GoGo Barstow i. High Desert Homeless Services j. Family Assistance Program k. Victor Valley Family Resource Center VVFRCC l. Community Member	a. Melinda S/D b. Maribel H/D c. Kanisha W./D d. Antoinette J./D e. Council Member Steevonna E./D f. Jaelen S./D g. Michael C. /D h. Elizabeth G./D i. Michael G./D j. Shannon W./D k. Sharon G./D l. Dawn Q./D
PUBLIC COMMENTS	
G. Any member of the public may address the Committee on any matter not on the agenda that is within the subject matter jurisdiction of the Committee.	
CONSENT CALENDAR (5 mins)	
E. Approved Minutes of October 14,2025	Jaelen/ Dawn
UPDATES / PRESENTATIONS (30 mins)	
F. Receive update on HHAP 3 G. Receive update on HHAP 5 Priorities, Needs and Intentions H. Announcement of the Recognition of Symba Center by the National Institute for Medical Respite Care (NIMRC) I. Receive update from the Inland Equity Community Land Trust on their work in the Region J. Receive update on the Navigation Center Tour and Modular Housing Unit	Jaelen Spencer Kevin M. / Nettie Jeff Green – Associate Director Jaelen Spencer

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THE SAN BERNARDINO COUNTY HOMELESS PARTNERSHIP MEETING FACILITY IS ACCESSIBLE TO PERSONS WITH DISABILITIES. IF ASSISTIVE LISTENING DEVICES OR OTHER AUXILIARY AIDS OR SERVICES ARE NEEDED IN ORDER TO PARTICIPATE IN THE PUBLIC MEETING, REQUESTS SHOULD BE MADE THROUGH THE OFFICE OF HOMELESS SERVICES AT LEAST THREE (3) BUSINESS DAYS PRIOR TO THE PARTNERSHIP MEETING. THE OFFICE OF HOMELESS SERVICES TELEPHONE NUMBER IS (909) 501-0610 AND THE OFFICE IS LOCATED AT 560 E. HOSPITALITY LANE, SUITE 200, SAN BERNARDINO, CA 92408-0044 <https://sbchp.sbcounty.gov/> AGENDA AND SUPPORTING DOCUMENTATION CAN BE OBTAINED AT 560 E. HOSPITALITY LANE, SUITE 200, SAN BERNARDINO, CA 92408-0044 OR BY EMAIL: OHS@hss.sbcounty.gov

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DISCUSSIONS (30 mins)	
K. Discussion regarding the City of Hesperia potential Pop-up Shelter L. Discussion regarding Data-Driven Decision Making with support from San Bernardino County, Office of Homeless Services Staff Support M. Discussion on the need for committee support in submitting requested funding matrix analysis from Homebase.	Jaelen Spencer
CLOSING	
N. Adjournment	Jaelen & Dawn
Next Meeting: Tuesday, December 9, 2025, 2:00pm – 4:00pm Life Church – 12199 Industrial BL. Victorville, CA 92395	

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San Bernardino County Homeless Partnership
High Desert Regional Steering Committee Meeting

Minutes for San Bernardino County Desert Regional Steering Committee Meeting

October 14, 2025, from 2:00 P.M. – 4:00 P.M.

Life Church 12199 Industrial Blvd., Victorville, CA 92395

TOPIC	PRESENTER	OPENING REMARKS
Call to Order Opening Prayer Invocation/Pledge	Jaelen Spencer	▪ The meeting was called to order at 2:00 p.m. ▪ Jaelen Spencer: Meeting Recorder
Welcome/ Introductions	Jaelen Spencer	▪ Attendees were welcomed and Committee Board Members introduced themselves. • Council Member Stevehonna Evans – City of Adelanto: Absent • Elizabeth Givens – GoGo Barstow • Shannon Waldron – Family Assistance Program • Rochelle Clayton – City of Barstow • Antoinnette “Nettie” Jackson – Symba Center • Dawn Quigg – Citizen • Michael Grabhorn – High Desert Homeless Services • Kanisha Withers - Town of Apple Valley • Melinda Sayre – Deputy City Manager, City of Hesperia • Michael Catalano – HOPE- INNROADS Team • Jaelen Spencer – Assemblymember Juan Carillo’s Office • Sharon Green – Victor Valley Family Resource Center Committee members attending achieve a quorum <i>(seven or more in attendance)</i>
Audience Introductions	Attendees	Attendees introduce self, organizations, and communities they represent.

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San Bernardino County Homeless Partnership
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		PUBLIC COMMENT
Public Comment	Darrin Fikstad Desert Manna	Meeting with HUD Secretary. Spigot is off SB County 1\$ to every 3\$ for LA County. Advocated reinstating HHAP 3 allocations to 3 prior recipients, emphasizing readiness in Barstow to convert its Food Bank facility into a Navigation Center with existing infrastructure.
	PRESENTER	REPORTS AND UPDATES
Committee member updates	Committee Members	Council Member Stevevonna Evans – Absent Michael Grabhorn – Family Assistance - Absent Sharon Green – VVFCR 17 – Awarded Rapid Rehousing funding from City of VV. Working with Family Assistance Program. City of VV Grant for 6.3 million to reach out to 400 remaining unsheltered in City. Mike Catalano – HOPE/INNROADS – Challenge Coin Fundraiser. Supporting Youth Programs. Kevin Mahany (For Antoinette Jackson) – Symba Wellness Center – 1 of 20 organizations nationwide to receive National Recuperative Care Program Certification. Melinda Sayre – City of Hesperia – No Report Shannon Waldron – Family Assistance Program – \$900,000. Funding from City of VV for Rapid Rehousing programs under ENVAMPMENT resolution Fund (EFR). Rental assistance with single and shared housing for 6 months. Working with Symba Center on this. Elizabeth Givens – GoGo Barstow - Absent Rochelle Clayton – City of Bartow – No Report Jaelen Spencer – Office of Assembly Member Juan Carillo – 7 bills passed in CA Senate. 7 bills for the next year. Cuts Feds: reducing funds from 87% to 30% for permanent housing placement. Introduction of new COC Member: 111 Hope Foundation represented by Caitlin

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		Jones in partnership with Life Church. Kanisha Withers – Town of Apple Valley – No Report Dawn Quigg – Absent
Office of Homeless Services Update	Claudia Doyle	Absent
	PRESENTER	CONSENT CALENDAR
September 2025 Meeting Minutes approved	Committee	Minutes reviewed by committee. Motion to approve minutes made by Antoinette Jackson with second made by? Motion passed
	PRESENTER	PRESENTATIONS
Membership By-Laws Committee Update	Jaelen Spencer	Reviewed findings from the committee’s October 8 meeting regarding a grievance filed by Victor Valley Family Resource Center. The Committee found no Code of Conduct or Conflict of Interest violations under current by-laws, though members noted inconsistencies in the grievance processes. Sharin Green (VVFRC) expressed disagreement, citing procedural issues and potential violations reported to HUD and the State. Eugene, from Desert Manna, noted the need for clarifying regional elections and review processes to ensure continuity among HDRSC committees. Jaelen Spencer emphasized moving forward with HHAP 3 recommendation to prevent loss of regional funding, while supporting VVFRC’s ongoing grievance review.
Encampment Ordinance Discussion	Jaelen Spencer	Briefing of the County’s new Anti-Camping Ordinance, which includes fines and possible jail time for public camping. Sharon Green and other members raised concerns that the ordinance conflicts with COC’s mission to end homelessness, noting that it passed without regional discussion or transparency. Members agreed to advocate collectively for fair implementation and housing-first alternatives.
	PRESENTER	DISCUSSIONS

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Strategic Plan Update	Jaelen Spencer	Reported the OHS was absent but Homebase facilitated a recent planning meeting discussing countywide goals and survey results: 1. 363 responses collected (162 from individuals with lived experience). 2. Top concerns: affordable housing shortage, land use policy reform, and rising cost of living. 3. Top strengths: collaboration and regional coordination. 4. Next step: October 29 half-day community workshop to finalize regional priorities for HHAP 5.
		ADJOURNMENT
		A motion is made to end the meeting and motion passes. Meeting is adjourned at 3:30 pm The next meeting for the High Desert Regional Steering Committee is Tuesday, November 18, 2025 Life Church 12199 Industrial Blvd., Victorville, CA 92395 2:00 pm – 4:00 pm

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HHAP 5- HIGH DESERT REGION



Eligible Use Categories/Amounts per Category

COC ALLOCATION FUNDING

TOTAL AMOUNT: \$6,032,369.26

Eligible Use Category	CoC Allocation
Rapid Rehousing	\$700,000.00
Prevention and Shelter Diversion	\$700,000.00
Delivery of Permanent Housing and Innovative Housing Solutions	\$1,046,544.00
Operating Subsidies- Permanente Housing	\$700,000.00
Street Outreach	\$600,000.00
Services Coordination	\$600,000.00
System Support	\$6000,000.00
Total	\$494,654.40
YSA	\$603,236.00
HMIS	\$60,324.00
Administrative Cost	\$422,265.26
Total	\$6,032,369.26



Eligible Use Categories/Amounts per Category

HIGH DESERT REGION

TOTAL AMOUNT: \$890,377.92

Eligible Use Category	High Desert Region
Rapid Rehousing	\$126,000.00
Prevention and Shelter Diversion	\$126,000.00
Delivery of Permanent Housing and Innovative Housing Solutions	\$188,377.92
Operating Subsidies- Permanente Housing	\$126,000.00
Street Outreach	\$108,000.00
Services Coordination	\$108,000.00
System Support	\$108,000.00
Total	\$890,377.92



THANK YOU/QUESTIONS?

Christopher Salazar- Administrative Manager

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&

Annette Florez- Administrative Supervisor

Annette.Florez@hss.sbcounty.gov



www.SBCounty.gov



Desert Region Committee and attendee Invitation to Symba Celebration of Service on November 18, 2025 at High Desert Church 5pm-7pm

We are honored to invite you to **Symba's Celebration of Service**, an evening dedicated to recognizing the power of service and the incredible people who make our mission possible. You will join a range of community partners including city and church staff.

Please feel free to include a guest or two. By RSVPing, the head count helps us plan event resources like snacks and tables and chair setup.

 **Date:** Tuesday, November 18, 2025

 **Time:** 5:00 PM – 7:00 PM

 **Location:** High Desert Church – Victorville Campus
[14545 Hook Blvd., Victorville, CA 92394](https://www.google.com/maps/place/14545+Hook+Bvd.,+Victorville,+CA+92394)

This gathering is an opportunity to:

- Celebrate the progress we've made together in serving our community.
- Honor the commitment of our partners, staff, and supporters.
- Share stories of transformation and hope that inspire our vision for the future.

We hope you will join us in honoring the service and commitment that make this work possible. Please RSVP using the link below. Thank you!

Best in health, housing and careers!

[Symba Center Celebration of Service Registration](https://www.symbacenter.org/celebration-of-service)

Kevin Mahany

Community Development Director

909.630.6188

<https://www.symbacenter.org/>

Kmahany@symbacenter.org



FOR IMMEDIATE RELEASE

November 3, 2025

Symba to achieve National Certification for Recuperative Care and Post-Hospitalization Programs at City of Victorville Wellness Campus

California's Department of Health Care Services recertifies health clinic for 2026

Victorville, CA — In recognition of **National Homeless Awareness Month**, Symba Center proudly announces its **recuperative care and short-term post-hospitalization programs** will be nationally **certified by the National Institute for Medical Respite Care (NIMRC)** and its health clinic recertified by the **California Department of Public Health**.

The national certification and Californai's recertification recognizes Symba's excellence in delivering integrated healthcare and housing services to individuals experiencing homelessness and recovering from hospitalization. Symba works closely with San Bernardino County Office of Homeless Services, Medi-Cal health plans including Inland Empire Health Plan, Kaiser and Molina as well as San Bernardino county hospitals.

Operating within the **City of Victorville's 170-bed Wellness Campus**, Symba's programs have supported the City achieving a 57% reduction in its unsheltered homelessness as well as graduating close to 200 adults from the program since its opening in December 2023.

The NIMRC certification places Symba as the **first program in the Inland Empire** to achieve **national recognition** for its commitment to **improving both health and housing outcomes** for homeless patients living with complex and severe chronic conditions.

"This certification reflects our shared mission — one community working together to restore health, dignity, and hope," said **Dr. Shawn Smith, Chief Executive Officer** of Symba. "Our patients deserve high-quality healthcare and a pathway to stability, and this milestone demonstrates what's possible when cities, hospitals, and health plans can coordinate providing health and shelter to vulnerable patients - especially older adults who live on limited incomes"

The **City of Victorville Wellness Campus** serves as a model of collaboration, providing 24-hour shelter, medical respite care, behavioral health services, and housing navigation under one roof. In partnership with local hospitals, health plans, and community organizations, Symba ensures that individuals discharged from area hospitals receive the care and support necessary to recover and transition to stable housing.



As the need for integrated housing and healthcare continues to grow, Symba's nationally certified program represents a model of care — redefining what it means to heal the most vulnerable members of the community with a combination of high quality shelter and healthcare.

About Symba Center

Symba Center is a healthcare and housing nonprofit dedicated to improving the lives of individuals experiencing homelessness through integrated medical care, recuperative services, and pathways to permanent housing. Operating across the Inland Empire, Symba partners with cities, hospitals, and community agencies to advance its vision of *One Mission, One Community*.

For more information about Symba visit: <https://www.symbacenter.org/>

About the National Institute for Respite Care (NIMRC)

The National Institute for Medical Respite Care (NIMRC), an initiative of the National Health Care for the Homeless Council, establishes national standards and best practices for programs providing medical respite and recuperative care to individuals experiencing homelessness. NIMRC certification recognizes programs that meet rigorous criteria for quality, safety, and patient-centered care—ensuring clinical excellence, strong coordination with hospitals and health plans, and effective pathways to stable housing. For more about NIMRC certification visit: <https://nhchc.org/medical-respite/nimrc/certification/>

About City of Victorville Wellness Center

Designed to offer a Route to Wellness, the City's 170 bed campus includes shelters for adults and families and it works to help individuals gain employment if they are healthy enough. In 2025, the City of Victorville reported a 57% decline in its count of homeless residents, one of the largest declines reported in California. The campus is seen as a model of care across the Inland Empire.

For more information about the City of Victorville Wellness Center visit: <https://www.victorvilleca.gov/services/homeless-outreach/homeless-land-page-1027>

Media Contact:

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San Bernardino County CoC: Gaps and Needs Analysis

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Introduction

San Bernardino County’s geography, diverse populations, and significant disparities in access to housing and services require a tailored, regionalized approach to ending homelessness, with support from the County and the Continuum of Care (CoC). This Gaps and Needs Analysis synthesizes data and insights from regional focus groups and other stakeholders to guide a countywide plan for the CoC that recognizes the unique strengths and needs of its various regions.

Methodology

Homebase completed an environmental scan of the CoC by reviewing policies, procedures, bylaws, previous strategic plans and action plans, and other publicly available documents related to homelessness in San Bernardino, including:

- Interagency Council on Homelessness (ICH) Bylaws
- San Bernardino County Consolidated Plan and Analysis of Impediments Project (2019)
- San Bernardino Homeless Action Plan: A Multi-Jurisdiction Approach (2019)
- Homeless Strategic Action Plan: Homeless to Home (2022)
- Housing Authority of the County of San Bernardino (HACSB) Annual Plans

Homebase collected data from the CoC and other publicly available sources from January through April 2025 to identify key needs and issues in San Bernardino County, including:

San Bernardino County CoC: Gaps and Needs Analysis (June 2025)

- Point-in-Time Count (PITC) (2018-2024)
- Housing Inventory Count (HIC) (2018-2024)
- System Performance Measures (SPMs) (FY 2024)
- General Census data from the American Community Survey (2023-2024)
- Comprehensive Housing Affordability Strategy (CHAS) data (2017-2021)
- Homeless Data Integration System (HDIS) (2023-2024)
- HDX Competition Data (2019-2024)

Homebase held in-person focus groups and listening sessions across San Bernardino County in May 2025, including at a CoC-wide meeting and in each of the five CoC regions: Central Valley, Desert, East Desert, Mountain, and West Valley.

Strengths and Gaps by Region

Given the enormous geography and diversity of San Bernardino County, in their 2019 Homeless Action Plan, the County recommended five distinct Regions to function as Service Planning Areas within the CoC: the Central Valley, Desert or High Desert, East Desert, Mountain and West Valley. The 5-region model is also used at the ICH, the CoC Board for San Bernardino County, where service providers may operate throughout the County, but designate one region as their primary service area for CoC governance purposes. To further empower each region to coordinate, advocate and strategize at a local level, five Regional Steering Committees (RSCs) were formed to operate as regional decision-making bodies within the CoC.

This analysis relies on the same regional framing to collect, analyze and present data. We begin with an analysis of each of the regions to capture their unique strengths, resources, gaps and needs. This information is then aggregated and analyzed to make CoC-wide findings.

Central Valley Region

The Central Valley region includes many of the county's most urban and suburban parts, including cities such as San Bernardino, Fontana and Redlands. The area is the population and service hub of the county and contains a high concentration of shelter services, health care facilities, and outreach programs. The region faces a massive housing affordability crisis, especially as people from nearby counties, like Los Angeles, get priced out of their local housing markets.

Strengths

Long-standing provider collaboration: Providers in the Central Valley region have long-standing working relationships, regular communication, and a shared willingness to assist one another across organizational lines. Frontline workers such as social workers and case managers are proactive and resourceful in supporting clients.

Increased client readiness for services: Clients in the region are increasingly motivated and ready to engage with services.

Early success leveraging CalAIM: Central Valley providers, including Inland Housing Solutions, have reported success leveraging CalAIM resources such as Enhanced Care Management and Community Supports to secure housing and health services.

Growing HMIS adoption: While still a bit uneven, several participants noted that regionally the Central Valley has experienced greater buy-in and more universal use of HMIS by its providers. This results in better data quality, which in turn allows the region to more accurately assess and address its needs.

Strong frontline staff: Providers credited frontline workers, including social workers and case managers, with being proactive and resourceful in supporting clients.

Opportunities

Shortage of affordable housing: Severe lack of affordable housing in the region, with long waitlists, income requirements at 2 or 3 times rent, and barriers that make it extremely difficult to secure units even when resources are available.

Rigid eligibility and funding definitions: Harmful gaps and inefficiencies result from overly narrow funding definitions that prevent services from overlapping — families who need multiple supports simultaneously sometimes cannot access them due to policies and concerns about “double-dipping.”

Staffing shortages and training needs: Participants described insufficient staffing capacity, with many local organizations struggling to sustain outreach, data entry, and follow through with adequate infrastructure and support. Providers also reported a lack of built-in systems to help frontline workers or clients troubleshoot and navigate barriers.

Coordinated Entry System (CES) functionality and cross-system coordination challenges: There are barriers to access for underserved groups such as single fathers with children, neurodiverse clients, and foster youth who are aging out of care. CES participants also described a lack of coordination across programs and funding streams, which makes the entire system less effective. Participants stressed the need for CES staff to receive additional training to understand the system and engage effectively with clients. They also recommended that local cities need additional support to troubleshoot their local access issues.

Lack of problem-solving supports: While frontline staff were praised for their resourcefulness and commitment, participants also stressed the importance of developing built-in systems to help these workers troubleshoot and navigate barriers with clients.

Desert Region

The Desert Region, or the High Desert, covers an expansive, largely rural area that also includes cities like Victorville, Barstow, Apple Valley, and Hesperia. Over recent years the population has grown, especially to the region’s more urban parts. The area experiences extreme temperatures and has limited water resources, which presents extreme challenges for people experiencing housing instability and homelessness. The expansiveness of the region also leads to access issues to health care, behavioral health services, housing and other supportive services, especially in its more rural and isolated parts. The High Desert’s vast geography requires mobile and flexible outreach, which local providers do not have the capacity or staff to fully resource.

Strengths

Deep culture of trust and collaboration: “Everyone knows and likes each other.” Participants emphasized how longstanding relationships allow agencies to “just call each other” and resolve issues in real time, even without formal agreements. There’s a willingness among providers to work together to find solutions, and a shared understanding that collaboration — not competition — is what strengthens the region’s ability to respond.

CoC-wide coordination: Stakeholders recognized the value in working “across the entire county at the same time,” with alignment across regions as a major step forward from the past. Participants appreciated that CoC leadership is more consistently engaging with regional partners and creating space for Desert-specific feedback.

Food system infrastructure: The “great food collaborative,” particularly High Desert Second Chance, was praised for keeping people fed during COVID and beyond. Schools have also stepped up in this space, ensuring that food insecurity doesn’t push more people into crisis. Coordination between schools and community organizations was described as “one of the best in the county.”

Homeless Wellness Center in Victorville: The 170-bed shelter is viewed as a flagship investment that provides wraparound support for clients, in addition to beds. The Center can house people for up to 6 months while they stabilize and prepare for permanent housing and plays a central role in the region’s service landscape. Participants expressed hope that this model could be expanded in other parts of the Desert Region, and across the CoC.

Expungement and Shelter Court: Over 160 tickets have been expunged via this special court, which has had a significant impact for participants facing legal barriers to housing. This relief was described as “life-changing” in focus groups for people who were previously locked out of services.

Opportunities

Service gaps for youth homelessness, trafficking risks and behavioral health: Young people are vulnerable to trafficking and exploitation; outreach teams struggle to help them stay healthy and stable due to ongoing distractions and unsafe environments. Youth remain one of the hardest populations to engage and stabilize. There are no detox or stabilization options locally, and the lack of behavioral health infrastructure leaves both youth and adults without appropriate care. Participants flagged lack of behavioral health services as one of the most urgent gaps in the region. Additionally, there are no LPS-certified hospitals in the region and the 5150 process involves long-distance transport to providers outside the region. AMR response times can take two to three hours. The behavioral health services that are available are siloed and poorly integrated into the homeless response system.

Loss of family shelter capacity: A regional family shelter was repurposed to serve TAY during COVID and has not been replaced, leaving a significant gap in options for families with children experiencing homelessness.

Permanent supportive housing (PSH) bottlenecks: Desert Haven is the only PSH provider in the region and operates just 31 units. Clients are often stuck in shelter for over a year due to the lack of next-step housing, especially those with high behavioral health or medical needs.

Housing costs are far too high, and employment opportunities are low: Even in areas considered “more affordable,” local income levels are often too low to support rent without ongoing subsidy. Without access to long-term, gainful employment, residents struggle to maintain housing.

Transportation and utility cost burden contribute to the high cost of living: Even if rent is affordable, high utility costs create ongoing instability, which participants repeatedly mentioned as a driver of housing loss. Additionally, the current bus system is limited, preventing residents from being able to reliably access services, employment, or supportive spaces. Barstow and Needles were named as areas with limited coordination and fewer provider networks compared to Adelanto or Victorville.

East Desert Region

The East Desert, which stretches to the Arizona border, contains Joshua Tree National Park and is comprised of smaller, more remote communities like Twentynine Palms, Joshua Tree, and Yucca Valley. The region faces extreme geographic and resource challenges, which providers sometimes feel is compounded by the County and CoC's lack of understanding and presence in the area. The East Desert lacks sufficient shelters, behavioral health infrastructure, and services. Homelessness in the area is impacted by extreme weather, transportation deserts, and areas of extreme isolation, which make regional collaboration and mobile service delivery critical. These issues are further compounded by the region's booming short-term rental market, which has led to a plummet in housing for long-term rentals, and a sharp increase in the cost to buy a home.

Strengths

Longstanding coordination among nonprofits: Providers have sustained decades-long partnerships and a collaborative culture, often without significant County involvement. The deep trust facilitates informal referrals and resource sharing.

Strong faith-based and volunteer infrastructure: Churches and local volunteers are deeply embedded in service provision, especially in cities like Needles, providing meals, hygiene support, and emergency shelter. While these service providers are meeting the needs of vulnerable people in the community, many are not in HMIS or CES, but through light-touch engagement they could be brought more formally into the regional system.

Ability to "stretch" limited resources: Providers in the East Desert described the region as "scrappy" and highly adaptive — able to do more with less due to necessity and longstanding relationships.

Availability of land: While there is a severe shortage of housing in the region, there is also a surplus of available land. These areas could be developed using modular construction or prefabricated units to provide inexpensive housing for people experiencing homelessness and housing instability.

Opportunities to build on cross-jurisdictional and tribal collaboration: While the East Desert is remote from other parts of San Bernardino, parts of the region have proximity to service hubs in Riverside County, tribal nations, and national parks. This unique geography presents the area with opportunity to coordinate with neighboring jurisdictions in novel and creative ways. Some providers have already successfully partnered with tribal governments and out-of-county institutions to supplement local gaps.

Opportunities

Inadequate behavioral health and shelter infrastructure: Providers reported no local detox or inpatient behavioral health options and described sobering centers as too far to access. There is no local emergency shelter for most subpopulations.

Need for both shelters and transitional housing: There is a lack of available housing in the East Desert period, which was compounded by COVID-19 and the short-term rental market. In particular, participants named a gap in "middle options" that support people for longer than an overnight stay but that are not permanent housing placements.

The region's geographic isolation leads to access and service issues: Extreme travel distances between cities make regional coordination difficult and reduce access to centralized County services. East Desert lacks a meaningful CES presence, making client matching, housing navigation, and service coordination inconsistent and often siloed. This isolation also makes staff retention very difficult, as staff burnout and workforce instability are pronounced across the region. Many providers juggle multiple roles, drive

extensive distances between client, and lack adequate administrative or clinical support and staff often feel unsupported or unheard by the boarder CoC and County systems.

Limited County engagement and support: Participants consistently reported minimal County visibility, with some cities receiving little to no communication or funding despite documented need.

Climate, transportation, and technology barriers: High heat, flooding, and long travel distances without public transit all increase vulnerability and make client follow-up difficult. Data accuracy is severely compromised by the region's expansive geography, limited outreach staffing, fear of enforcement among unhoused residents, and inaccessible or off-grid locations. Some stakeholders noted that unsheltered individuals intentionally avoid being counted due to past negative experiences. Limited access to technology and broadband restricts both client participation in virtual services (e.g., telehealth, remote CES assessments) and provider coordination across the region, which impacts clients disproportionately in remote areas and organizations that do not have tech infrastructure.

Mountain Region

The Mountain Region is made up of the San Bernardino Mountains and its communities, such as Big Bear Lake, Lake Arrowhead, and Running Springs. It is a popular year-round tourist destination where many of the properties are either vacation homes or, increasingly, short-term rentals. The area has a relatively small population of people experiencing homelessness, who are dispersed throughout the geography. Transportation to and from the area is extremely limited, making access difficult, especially during winter storms or wildfire threats.

Strengths

Deep community knowledge and personal commitment from providers: Mountain participants highlighted the deep personal commitment from frontline providers and program leads. They shared that they've experienced consistency in staff despite turnover elsewhere. There is a strong sense of community ownership and mutual support among providers, which leads to informal but effective coordination among local service agencies.

Faith-based and school-led partnerships: Faith-based organizations and churches are consistently active in filling resource gaps, including food, hygiene supplies, and emergency motel placements. School districts are actively engaged and often serve as the first to identify unhoused students and families.

Local champions and political buy-in: Local champions are willing and able advocates for specific populations (e.g., reentry, youth, domestic violence survivors). The region is developing relationships with elected officials, which were cited as a strength by some.

Unique land opportunities: The nature of land in the Mountain Region means that there is a strong potential for collaboration with public land agencies (National Forest, State Parks) to support outreach and PITC visibility. In addition, some private landowners may be open to partnerships around tiny homes, safe parking, or service hubs if liability and code issues are addressed.

Mountain Resource Guide: The Mountain Region maintains a local resource guide to shelter, housing and supportive services in the region, which is available in a printed version for anyone who needs it.

Gaps

Lack of resources based specifically in the Mountain Region: There are few dedicated outreach or shelter resources physically based in the Mountain region and no Mountain-specific housing resources or prioritized placements. The lack of resources means that there are few system-wide safety nets; if a local staff person leaves or a small agency closes, entire parts of the community lose access. The lack of consistent outreach leads to missed opportunities to engage clients before crises occur. Multiple

participants emphasized the need for a locally based peer navigator or outreach worker, potentially hired from within the Mountain community. Another particular concern for participants is the lack of warming/cooling centers or year-round facilities that respond to weather-related needs.

Climate and transportation barriers: Transportation barriers in the region were described as profound, with virtually no options for people without cars. Fire, snow, and weather events pose immediate risks to unsheltered people, with little infrastructure to respond quickly, and emergency response systems do not always include plans for people without housing.

Limited CES integration: Providers described a regional lack of confidence that referrals to CES translated to good housing outcomes for people experiencing homelessness in the Mountain Region. Clients may also experience high levels of fear or mistrust of government systems, particularly if past attempts to get help have failed. As a result, CES use is not uniform and resource access is often dependent on individual relationships, which makes continuity difficult when staff turnover.

Limited countywide planning representation: Mountain Region participants described a lack of representation at many countywide planning tables and a fear that Mountain voices often are overlooked. Additionally, many people experiencing homelessness in the Mountains are not visible in data defined by urban homelessness. People in the Mountain Region are more likely to be camping in forests, living in cars, or couch surfing, experiences that are not accurately reflected in PITC or other measures of homelessness. The differences and the geographic isolation of the region means that residents and public officials outside the Mountains may not understand or prioritize local needs.

Lack of coordinated messaging: Information is inconsistently available, and knowledge of local resources varies among frontline providers. Participants expressed interest in community education to reduce stigma and help housed neighbors better understand what homelessness looks like in their area.

West Valley Region

The West Valley includes some of the most suburban and economically developed parts of the county, including cities like Ontario, Rancho Cucamonga, and Upland. It benefits from its proximity to Los Angeles with access to skilled workforce, a diversified economy, and has a strong logistics, retail, and manufacturing presence. The area has seen rapid growth in recent years, which has brought infrastructure and housing development challenges, along with increasing diversity and the need for more diverse and culturally competent providers.

Strengths

Deep collaboration and partnership: West Valley providers praised the "collaboration of community-based organizations (CBOs), health care partners, and government partners." Participants highlighted a strong spirit of cross-agency problem solving, with a shared belief that "everyone is here for the good of the clients." Relationships across systems were described as a real asset — partners reported being able to "connect with each other quickly to solve problems," even when systems themselves are still evolving. Stakeholders noted that this kind of person-to-person coordination remains one of the region's greatest strengths.

City engagement: Over the last five years, every city in the region has stepped up to support homelessness efforts, though levels of participation still vary. Stakeholders acknowledged growing momentum behind city involvement, with some jurisdictions taking on more planning, funding, and leadership roles. However, engagement is often driven by individual local "champions" — and participants stressed the importance of building structures that can help sustain engagement over time.

Strong County support: The County Office of Homeless Services (OHS) was recognized for playing a central role in training and coordination, especially important given the high rate of staff turnover across

the region. Providers expressed appreciation for the system-level guidance and troubleshooting support OHS offers, particularly in the context of HMIS and Coordinated Entry improvements.

Innovative service models: Stakeholders repeatedly described West Valley service providers as resilient and innovative. Even in the face of limited housing resources, teams continue to “make it work” — finding creative ways to connect people to services and troubleshoot complex cases. Flexibility and responsiveness were called out as defining features of the local system.

Health-housing coordination: The region was recognized for effective partnerships between housing and health care, particularly through the Ryan White and HOPWA programs. Participants pointed to these examples as proof that cross-sector integration is both possible and powerful. Stakeholders also voiced interest in expanding these models under initiatives like CalAIM.

Opportunities

People in need of sobering centers or residential treatment: Limited non-housing options mean that homelessness is sometimes criminalized instead of addressed. Participants flagged the absence of residential programs that allow parents and children to remain housed together during treatment, as well as a general lack of access to detox services — especially in the West Valley. Stakeholders expressed interest in adapting models from other counties or states to fill this gap.

Affordable housing shortages: Despite investments, “lots of new units are going up, but who can afford them?” Rents continue to outpace local incomes — particularly for single mothers and extremely low-income families — making even subsidized housing out of reach. Stakeholders agreed that “having funding doesn’t matter if there are no units.” Long waitlists and limited move-in options were flagged as chronic system barriers. Buy-in from private landlords remains inconsistent. While some cities have piloted landlord fairs or incentive programs, uptake has been low, and many property owners are hesitant to rent to people exiting homelessness. Stakeholders noted that strong local leadership makes a difference — but that these partnerships are fragile without long-term engagement strategies. Nimbyism and community resistance continues to block projects, particularly in suburban neighborhoods.

Uneven HMIS and CES participation: Not all providers use centralized tools, resulting in major coordination and data gaps. Stakeholders noted that without complete system engagement, the region lacks full visibility into need, service utilization, and housing matches. Uploading and tracking documentation in HMIS continues to be a challenge, especially for smaller agencies. Participants expressed strong frustration with the “wild amount of paperwork” required for housing placements, especially when coordinating across systems or onboarding new agencies into HMIS. Excessive documentation slows down the process and contributes to missed opportunities to connect people to housing.

City representation gaps: Not all jurisdictions consistently participate in the West Valley RSC, with at least one City reportedly never sending a representative. This limits cross-jurisdictional planning and makes it difficult to ensure equitable access to funding and program improvements across the area.

Under-utilization of trusted messengers: Participants noted that cities and nonprofit partners already embedded in local communities are under-leveraged in outreach, public education, and narrative work. In moments of pushback or confusion — especially during housing development — these actors could play a key role in shifting public understanding, if resourced and included.

CoC and Systemwide Findings

The five RSCs are part of a regionwide CoC. While each RSC has its own unique strengths and gaps, there are consistent challenges systemwide that impact all areas of the county.

1. Addressing geographic inequities and strengthening system coordination would improve access across the County.

Access to homelessness services across the county is highly inconsistent, with rural and remote areas like the East Desert and parts of the High Desert and Mountain regions reporting significant service gaps and lack of visibility in County planning. Stakeholders described a system that is difficult to navigate, slow to respond, and too reliant on centralized, brick-and-mortar access points. CES participation is perceived as unresponsive, with many clients never receiving follow-up after initial contact. Long 2-1-1 call times, insufficient satellite sites, and the absence of regionally embedded staff further compounds these challenges.

To address the gaps, participants recommended low-cost, high-impact strategies to bring access points to the people who need them via ideas like rotating CES access points at libraries, schools, or nonprofit buildings, mobile outreach and assessment teams equipped with real-time HMIS tools, and expanded use of QR codes and digital directories like Connect IE. Community colleges, churches, and public spaces could serve as localized hubs, supported by onboarding toolkits for new providers and regionally based coordinators. A stronger digital infrastructure paired with printable, multilingual, and tech-free options is also critical for reaching under-connected communities. Stakeholders also called for better mapping of service gaps and public dashboards to guide policy and siting decisions.

2. There is an urgent and growing opportunity to expand the stock of deeply affordable housing and PSH units throughout the CoC.

The region faces a critical shortage of deeply affordable housing and PSH, driven by rising housing costs, gentrification, and displacement. In the Mountain and East Desert Regions, tourism-fueled short-term rentals are pushing out low-income residents, including essential workers. Widespread landlord-driven evictions and unit renovations are reducing the stock of accessible rentals, with few alternatives for displaced tenants. These trends have created bottlenecks in the homelessness response system, particularly for high-barrier populations.

To address housing access challenges, stakeholders emphasized the need for deeper engagement with landlords through stabilization funding, partnerships, and regional landlord outreach efforts, especially targeting reentry and youth populations. They also recommended alternative housing models such as shared housing, modular construction, and limited-profit developments to quickly expand housing supply. Public education campaigns to counter stigma and NIMBYism were seen as key to building local support. Finally, stakeholders highlighted improving service connections — such as providing transportation from detention centers to navigation hubs — as an opportunity to better link vulnerable individuals to housing at critical transition points.

3. Expanding accessible, low-barrier shelter options will strengthen and complete the CoC's crisis response.

Across the region, there are not enough low-barrier, housing-focused shelters that individuals and families can access without preconditions such as sobriety or service participation. NIMBY-driven opposition continues to stall or prevent the siting of shelters and supportive housing throughout the county. The resistance reinforces access gaps for people in urgent need, leaving entire geographic areas underserved.

Stakeholders suggested expanding shelter options through creative models like barracks conversions, tiny home villages, safe parking programs with mobile behavioral health services, and partnerships to repurpose vacant motels, churches, or homes. Specific regional strategies, such as a winterization and emergency shelter plan for the Mountain communities and dedicated shelter pathways with transportation support, were proposed to meet seasonal and geographic needs. Public education

campaigns to combat myths and community resistance remain essential to advancing shelter access across the county.

4. Enhancing HMIS and Coordinated Entry consistency and participation will improve systemwide data.

Limited and uneven participation in the Homeless Management Information System (HMIS) and CES leads to inaccurate data and restricted access to housing resources. Many smaller or faith-based providers, especially in the Mountain and Desert regions, are not connected to the formal homelessness response system, leaving significant gaps in data and service coordination. As a result, PITC underrepresent the true scale of homelessness in these regions, particularly where people live in RVs, overcrowded homes, or other hidden situations.

Participants stressed the need for expanding HMIS access, improving training and technical support, and engaging informal service providers with light-touch approaches. County-led efforts to broaden license distribution are promising, but inconsistent application of CES policies remains a barrier, especially where access to permanent housing is limited to those navigating through emergency shelters. A more inclusive, flexible, and well-supported system is needed to improve data quality and ensure equitable housing access across the region.

5. There is significant potential to grow and better utilize prevention and diversion efforts, offering upstream solutions that could reduce inflow into the homeless response system and supporting long-term stability.

The CoC lacks a strong infrastructure for homelessness prevention and diversion, important elements needed to reduce inflow into the homelessness response system. Stakeholders highlighted the need for upstream strategies to keep individuals housed before they reach a crisis point, like flexible financial assistance, housing stabilization resources, and community-based support. Upstream strategy tools are especially critical in high-cost areas like the Central and West Valley Regions where even minor financial shocks can lead to homelessness.

Participants also emphasized the importance of workforce development as a prevention strategy, particularly for youth and vulnerable adults. Investments in job training, youth employment programs, direct cash transfers, and wraparound supports could offer sustainable pathways out of poverty and housing instability. Overall, there was broad agreement that prevention and diversion are underutilized components of the current system and must be scaled up to reduce long-term system pressure and improve outcomes.

6. By enhancing services for special populations, the CoC could help ensure that all individuals receive appropriate and equitable support.

The needs of certain key populations are especially unmet due to limited outreach capacity, lack of tailored programs, and systemic barriers. Participants in focus groups identified gaps in service particularly for youth, veterans, families, LGBTQ+ individuals, and undocumented residents. Current outreach strategies are often too generalized to engage people with diverse lived experiences, especially unsheltered individuals and youth. Participants called for youth-centered engagement through platforms like TikTok and Discord, and school-adjacent, zero-barrier drop-in centers offering basic resources like food, Wi-Fi, and support services.

Participants also discussed a chilling effect on honest conversations about equity in the past few months. Organizations reported fear of funding loss if they are vocal about serving Black, Latino, LGBTQ+, or undocumented populations, which stifles innovation and transparency in addressing need. This hampers the CoC's ability to strategically address inequities, of which there are many documented.

For example, Black/African American residents are 3.9 times more likely to experience homelessness in San Bernardino County than the general population, which is a core system challenge that shows up in inflow, service access, and housing placement.

7. Increasing funding transparency and simplifying processes to obtain funding would ensure that all providers, including smaller and less-resourced organizations, an effectively leverage all available funding resources.

Stakeholders across the county described barriers to accessing and navigating homelessness funding, especially for smaller and rural organizations. Many grants prioritize direct services while excluding vital investments in staffing, infrastructure, or capacity-building, which leaves newer providers without the tools to grow sustainably. Additionally, complex contract language, rigid timelines, burdensome indemnification clauses, and limited transparency in County RFPs disproportionately exclude those organizations best positioned to serve under-resourced areas. Additionally, there is a sense that population-based allocations fail to account for per-capita need, while philanthropic investment remains virtually absent in many parts of the region.

Participants called for major reforms to make funding more equitable and effective. Recommendations included creating flexible prevention funds with streamlined disbursement, offering small capacity-building grants paired with technical assistance, and building a County-managed rural infrastructure support pool to share grant writing, compliance, and administrative resources. Strengthening partnerships with City governments and leveraging opportunities like CalAIM and Homekey were also seen as essential. Finally, stakeholders emphasized the need for more accessible, plain-language RFPs, transparent timelines, and deeper collaboration with Medi-Cal managed care plans to better align housing and health systems for high-needs clients.

8. Supportive services should be expanded and better coordinated to more fully meet community needs.

Throughout the county, stakeholders highlighted the lack of access to critical supportive services that enable housing stability, including workforce development, transportation, and behavioral health services. Participants highlighted the need for more intentional coordination between housing and employment systems, without which individuals exiting homelessness struggle to access or sustain jobs that could support long-term stability. In more remote and isolated regions, transportation emerged as a major barrier to access for shelter, services, and employment.

Participants advocated for creative solutions to transportation issues such as mileage reimbursement, peer driver programs, or shuttle partnerships. They also discussed expanding supportive service access through trusted community institutions like libraries, schools, and community colleges; locations that could host navigation kiosks or serve as drop-in sites for assessments and referrals, helping bridge the service gap without requiring costly new infrastructure.

9. Strengthening system-wide coordination between the RSCs, CoC and County presents a key opportunity to enhance coordination, improve access, and build overall capacity.

Collaboration across the CoC, County departments, and City governments can be fragmented and uneven, especially across different funding streams, program models, and geographic areas. Stakeholders described a need for intentional coordination efforts, especially in Cities with minimal engagement or trust in the current system. Proposals included piloting embedded liaison roles to bridge City–County silos, offering regular CES and HMIS training to all RSCs, and expanding rural outreach to build awareness and reduce stigma about services.

Capacity challenges further weaken collaboration. Workforce shortages, burnout, and limited onboarding structures leave many providers overstretched, with some programs run by volunteers or a single staff member juggling multiple roles. Stakeholders recommended creating system-wide training and support systems including a "First 90 Days" onboarding kit for new grantees and staff, increasing visibility of tools like 2-1-1, and offering small, targeted capacity-building grants paired with technical assistance. Improved systemwide education, support, and communication, especially in rural areas, are essential to strengthening CoC-wide alignment and ensuring more consistent service delivery across the region.

10. There is a valuable opportunity for the CoC to more fully center the expertise and leadership of people with lived experience to enrich decision-making and system effectiveness.

Stakeholders emphasized the importance of authentically integrating people with lived experience (PWLE) into all aspects of the homelessness response system. There are no designated seats for people with lived experience on the various RSCs, the regional decision-making bodies for the CoC, or the CoC itself. Participants commented on the lack of persons with lived experience at the RSC strategic planning focus groups and asked for greater transparency of the process for people currently experiencing homelessness. Further, while the County's efforts to hire youth with lived experience were widely praised, participants highlighted the need for mentorship, training, and patience to ensure success.

To move beyond tokenism, stakeholders urged the inclusion of PWLE in all decision-making spaces and urged the development of structured, paid roles for PWLE in outreach, planning, and program design. Youth with lived experience should be hired to co-lead peer engagement efforts. There was also a strong interest in creating advisory positions, leadership pipelines, and outreach stipends that recognize PWLE expertise and ensure their ongoing influence over system policies and practices.

11. Engaging cross-sector partners more deeply will help break down silos, enhance information sharing, and increase the overall impact of services.

The homelessness response system is missing key opportunities to partner more effectively with schools, faith-based organizations, health systems, and workforce providers to streamline services for their shared clients. Stronger collaboration with school districts and integration of McKinney-Vento training into school and City outreach could expand early intervention and stability for students. Community colleges could also serve as valuable partners for both service navigation and building the frontline workforce through housing-focused certification programs.

Faith-based groups were identified as ideal partners for expanding "Yes In God's Backyard" (YIGBY) housing and safe parking initiatives, using existing land and community trust. Additionally, cross-sector alignment with Medi-Cal managed care plans, tribal service providers, reentry systems, and behavioral health networks was seen as crucial, especially given the lack of detox, trauma care, and LPS-certified hospitals in rural areas. Trusted messengers like school staff, domestic violence advocates, and church volunteers could also play a stronger role in connecting people to CES. Formalizing these partnerships, launching workforce pipelines, and integrating housing supports into education, reentry, and public health programs would significantly expand system capacity and reach.

Next Steps

Homebase will work with the individual RSCs, and the CoC as a whole to establish a common set of goals, objectives, performance metrics, and outcome measures in line with the findings in this analysis. Together they will decide on a group of shared goals and strategies for the plan, and work to develop

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and prioritize recommendations and strategies for each region and the County based on their unique needs, trends and resources. Homebase will continue to gather and analyze qualitative data via surveys and lived experience focus groups to help refine their recommendations.

Regional Steering Co Nittee Sign-In Sheet - Date and Time

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Regional Steering Committee Sign-In Sheet - Date and Time

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