



San Bernardino County Homeless Partnership
West Valley Regional Steering Committee

Wednesday, October 8, 2025 • 9:00 a.m. to 11:00 a.m.

Hosted by the City of Rancho Cucamonga - Please Join Us at
RC City Hall – Tri-Communities Conference Room
10500 Civic Center Drive, Rancho Cucamonga 91730
or

The RSC Meeting may be observed online by Zoom Video Conference:
<https://us02web.zoom.us/j/85194946723?pwd=TUh0cHZGM1JEZ0I3S1I3YXFEUnAvQT09>

Meeting ID: 851 9494 6723- Password: 183200

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Note: Public participation at the meeting via Zoom is being offered as a courtesy and may be unavailable if technology fails. In the event of a disruption that prevents the meeting from being broadcast or receiving public comment, the in-person meeting of the West Valley RSC will continue. Should you wish to participate remotely, please remember to MUTE your phones. DO NOT place this call on hold should you get another call. Hang up and then rejoin the meeting.

Per County Counsel: To address the West Valley RSC 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 or if you are joining us virtually, indicate by typing “Public Comment” in the chat box. Requests must be submitted before the item is called for consideration. Speakers may address the West Valley RSC for up to three (3) minutes total on the consent agenda, up to three (3) minutes on each item on the Discussion agenda, and up to three (3) minutes total on Public Comment.

SPECIAL MEETING AGENDA

OPENING REMARKS	PRESENTER
A. Call to Order B. Welcome & Introductions C. Roll Call of Steering Committee Members – RSC Members must be present in-person to constitute a quorum and vote on agenda action items	Don Smith, Co-Chair Erika Lewis-Huntley, Co-Chair
PRESENTATIONS	
“Building A Connected Community of Care in the West Valley Region” D. “The Growing Crisis of Homelessness Among Older Adults” E. The West Valley Regional “Collaboratory on Community Care and Housing Solutions for Aging Adults” (CCAHSAA Collaboratory)	Don Smith, Co-Chair HC2 Strategies California Health Care Foundation
CONSENT ITEMS	
F. Approval of Meeting Minutes from September 10, 2025	Don Smith, Co-Chair
INFORMATION SHARING/PUBLIC COMMENT	
G. Receive updates from Office of Homeless Services on upcoming events H. Receive updates and announcements from RSC Member Representatives * City of Chino * City of Montclair * City of Ontario * City of Rancho Cucamonga * City of Upland * County Department of Behavioral Health * County Sheriff’s HOPE Team * San Antonio Regional Hospital * Catholic Charities * Christian Development Center (CDC) * Foothill AIDS Project * Health Service Alliance * Inland SoCal United Way 211 * Inland Valley Hope Partners * Life Way Church * Pathways to Housing Network I. Public Comment regarding items on the agenda or not on the agenda but within the jurisdiction of the West Valley RSC	Claudia Doyle Kari Franco/Jose Soto, Chino Ronald Goodrich/Denise Ortiz, Montclair Ashley Esquivel/Eric Avila, Ontario Erika Lewis-Huntley, Rancho Cucamonga Jonathan Ingles/Susan Alvarez, Upland Josephine Perez, DBH Dep. Jeffrey Whall, HOPE Team Aileen Dinkjian/Saira Ramachhita, SARH Stephanie Reyes, Catholic Charities Pastors Donald/Ethel Rucker, CDC Leslie Evans, Foothill AIDS Project Dr. Robert Gipson, Health Service Alliance Aziza Manuel, ISCUW Kameron Grosvenor, Hope Partners Andre Bossieux, Life Way Church Don Smith, Pathways Network
CLOSING	
J. Adjournment	Don Smith, Co-Chair
Next Regularly Scheduled Meeting: West Valley Regional Steering Committee Wednesday, November 12 th , 2025, 9:00am-11:00am Rancho Cucamonga City Hall – Tri-Communities Conference Room & by Zoom Video Conference	

Mission Statement

The Mission of the San Bernardino County Homeless Partnership is to provide a system of care that is inclusive, well planned, coordinated and evaluated and is accessible to all who are homeless and those at risk of becoming homeless.

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. <http://www.sbchp.sbcounty.gov/> AGENDA AND SUPPORTING DOCUMENTATION CAN BE OBTAINED AT 560 E. HOSPITALITY LANE SUITE 200 SAN BERNARDINO, CA 92408 OR BY EMAIL: HOMELESSRFP@HSS.SBCOUNTY.GOV.



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The Rise of Homelessness Among California's Older Adults

How Policymakers Can Ensure Older Adults Stay Housed

May 2024 | By [Monica Davalos](#)

KEY TAKEAWAY

California's homeless population is aging rapidly, with adults 50+ making up nearly 40% of those needing shelter. Without swift and intentional policy action, California faces a future with a growing number of unhoused older adults as the state's population ages.

Every Californian deserves an affordable, dignified, and accessible home, regardless of their age, ability, race, gender, or economic status. Yet thousands of Californians — increasingly composed of older adults age 50 and over — continue to fall into homelessness faster than our systems can house them. During the course of the 2022-23 fiscal year, local California homeless service providers made contact with over 215,000 adults without children needing to find a home or search for other life-sustaining services — and

even more were likely served by the end of 2023.¹ Of these, 85,310 — nearly 40% — were adults age 50 and over. While experiencing homelessness at any age is severely destructive to an individual's well-being, older adults are the fastest-growing population experiencing homelessness and the largest share of individuals who are encountering homelessness for the first time in their lives. Without swift and intentional policy action, California faces a future with a growing number of unhoused older adults as the state's population ages.

Understanding the diverse characteristics, circumstances, and tailored interventions unhoused older Californians need is key to effectively addressing their housing needs and solving homelessness across the state.

“Older adults” refers to individuals who are age 50 and over. This determination was made to parallel current research on older adults at risk of or experiencing homelessness. It also acknowledges the increased physical and behavioral health vulnerabilities that are being experienced by unhoused individuals aged 50 and over which have been traditionally seen in older populations and require tailored interventions.

1. Older Californians Are a Large Share of the Unhoused Population

Unhoused Californians age 50 and over comprised 40% of adult-only households who connected with the homelessness response system in the 2022-23 fiscal year. Yet older adults account for only 34% of the state's entire population.

Research identifies two main cohorts that are driving the growth in older adult homelessness:

Individuals who became unhoused earlier in life and have consequently faced heightened vulnerabilities that led to prolonged periods of homelessness.

Early life homelessness episodes significantly raise the chance of facing adverse experiences, such as higher rates of incarceration, chronic medical conditions, behavioral health conditions, adverse childhood experiences, and underemployment compared to those who experience it later in life.

These compounding experiences are recognized upstream factors contributing to homelessness, often resulting in recurrent episodes and increased likelihood over a lifetime.

Individuals who have encountered homelessness for the first time at an older age.

Economic hardship, housing insecurity, and financial, familial, and medical emergencies later in life are the primary drivers that push older adults already struggling to make ends meet into homelessness.

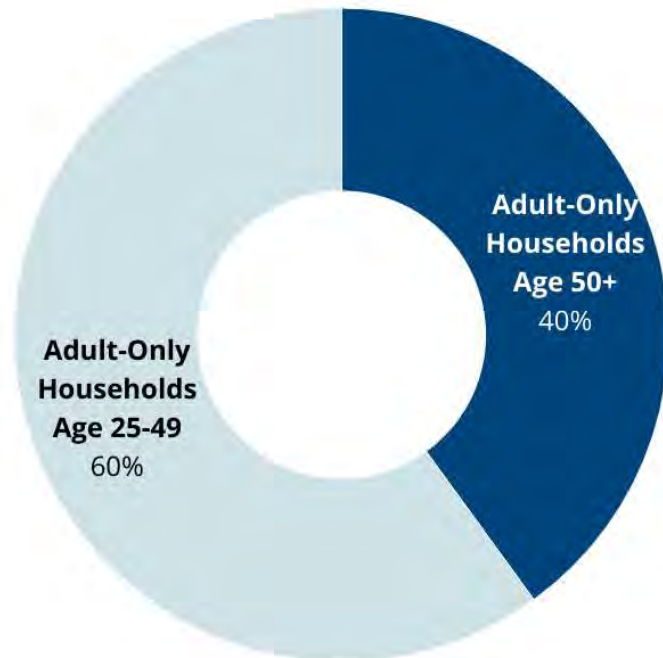
Prolonged economic hardship and insufficient wages have also prevented many from building savings or retirement accounts, leading to economic insecurity among older Californians. Adults without children are also ineligible for many cash-based safety net programs as they typically target people with children.²

Available programs often have minimal benefit amounts that are even lower for adults without dependents. Some program benefits vary by county (particularly for General Assistance/General Relief), have time restrictions, strict asset limits, and may require an age threshold or a physical/developmental disability. Nationally, inadequate rental assistance funding also prevents more than 4 in 5 low-income, non-elderly adult households without children from obtaining the support they qualify for.³ Regardless of the circumstances leading to homelessness for older adults, it is clear that there is an urgent need for amplified, targeted safety net and housing interventions at various points to ensure aging Californians can remain in their homes.

Older Californians Comprise 40% of All Adult-Only Households Experiencing Homelessness

Unhoused Adult-Only Households Who Made Contact with Homeless Service Providers FY 22-23 = 215,955

■ Adult-Only Households Age 50+
■ Adult-Only Households Age 25-49



Note: Total includes a small number of people experiencing homelessness without a reported race/ethnicity. Adult-only households are composed of individuals age 25 and older. This includes noncustodial parents and exclude unaccompanied youth.

Source: Custom tabulations from the California Homeless Data Integration System



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2. Stark Racial Disparities Persist in California's Unhoused Older Adult Population

Older Black, Indigenous, and Pacific Islander Californians disproportionately experience homelessness in California. While Black Californians age 50 and older make up roughly 5.4% of the state's population, they

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comprised over 1 in 4 (26%) older adults who made contact with homeless service providers in the 2022-23 fiscal year. Disparities are also evident within Indigenous and Pacific Islander communities, with Indigenous individuals being almost six times as likely and Pacific Islanders twice as likely to connect with the homelessness response system. Separate data from the state's point-in-time counts reflect [homelessness increased among Latinx Californians](#) across the whole population, which captures older adults as well.

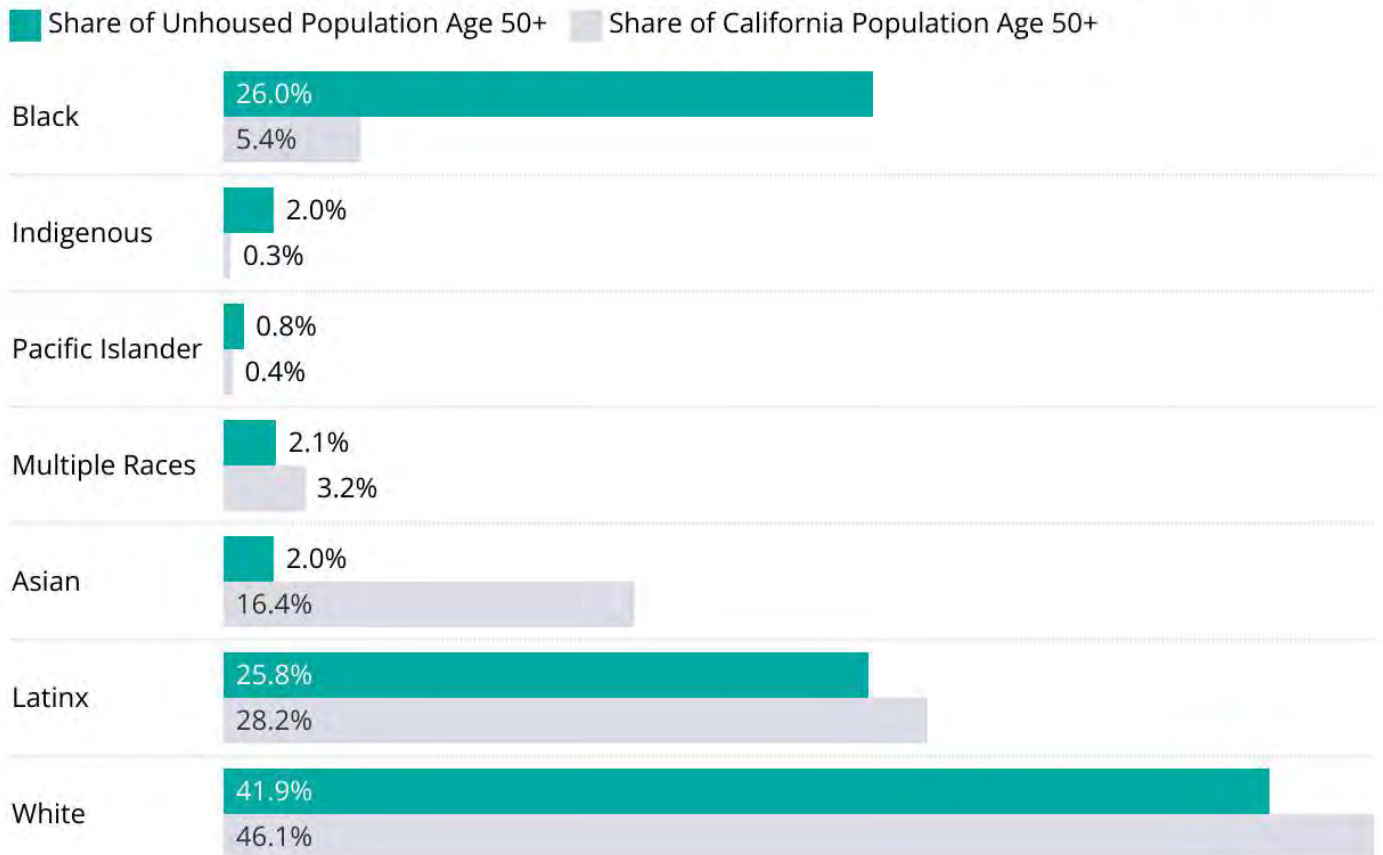
The stark racial disparities parallel the broader racial disparities observed in [California's unhoused population](#), underscoring that people of color bear the disproportionate and harmful impacts of homelessness. These disparities reflect the enduring effects of intentional racist policies that created educational, housing, economic, and health barriers for people of color — all of which directly affect an individual's ability to obtain and sustain stable housing, especially at older ages.

Racist institutionalized practices, such as redlining, government-sanctioned displacement, and predatory practices, have placed generations in positions that make it harder to obtain housing and economic security.⁴

Discriminatory practices have also caused Black and other communities of color to face the highest risk of justice system involvement, familial disruptions, and traumatic experiences which can cause and exacerbate homelessness throughout a lifetime.

Older Black, Indigenous, and Pacific Islander Californians Disproportionately Experience Homelessness

Percent of Unhoused Individuals Assisted by Homeless Service Providers, FY 2022-23



Note: Race/ethnicity are mutually exclusive. State population estimates are for the 2022 calendar year.

Source: Budget Center analysis of US Census Bureau, American Community Survey public-use microdata downloaded from IPUMS-USA and custom tabulations from the California Homeless Data Integration System



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3. Most Unhoused Older Adults Have a Disabling Condition

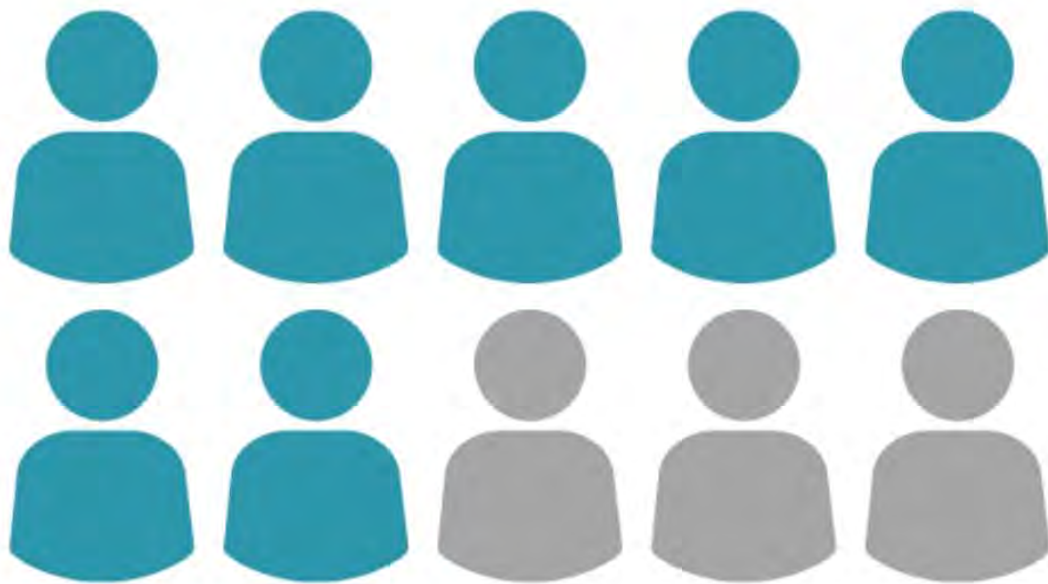
Most older adults experiencing homelessness reported having a disabling condition (72%) in the 2022-23 fiscal year. Disabling conditions include physical, mental, or emotional impairments that are long continuing, significantly impeding an individual's ability to live independently, and could be improved with housing. It also captures people with developmental disabilities. Research demonstrates many unhoused individuals experience [health conditions and mobility limitations](#) prematurely, often decades before housed adults of the same age. The striking differences reflect the detrimental health effects experiencing homelessness has on the lives of Californians, especially as they age. This pivotal factor underscores the need for policy interventions to be both accessible and tailored to the diverse demographic of older adults starting at age 50.

Unhoused Californians face steep barriers to medical access, face daily safety concerns, and often have limited access to basic necessities such as consistent meals, proper medication storage, and sanitation. Even temporary homeless shelters are often not equipped to accommodate older individuals with complex medical or mobility conditions. Combined, the lack of access to care, medical support, and appropriate housing exacerbates negative health outcomes. Experiencing homelessness ultimately limits the opportunity to live a long, healthy life and reach older ages, which is reflected by [higher mortality rates in unhoused populations](#) when compared to their housed counterparts.

Ensuring older unhoused Californians with disabilities have appropriate housing and care is largely achievable through scaling supportive housing. This effective, evidence-based intervention combines robust housing interventions with wraparound supportive services to meet the medical, physical, and behavioral health needs of unhoused Californians with disabling conditions.

Over 70% of Unhoused Older Adults Live With a Disabling Condition

Total Unhoused Older Adults Served by Homeless Service Providers in FY 22-23 = 85,310



Note: Total includes a small number of people experiencing homelessness without a reported race/ethnicity. A disabling condition includes physical, developmental, mental or emotional impairment that limits independent living or ability to work.

Source: Custom tabulations from the California Homeless Data Integration System



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4. Most Unhoused Older Adults Have an Income Source — But It's Not Enough

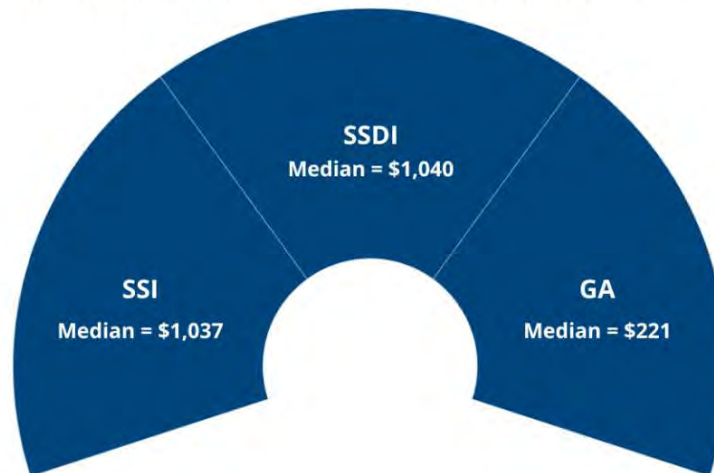
Most unhoused older adults who made contact with homeless service providers in the 2022-23 fiscal year reported having at least one source of income. These older adults had a median total monthly income of \$1,000 — an amount that cannot cover [fair market rent for a studio apartment](#) in nearly 70% of the state's counties, let alone other basic living expenses like food, utilities, and transportation.

The top three reported income sources were Supplemental Security Income (SSI) (median = \$1,037), Social Security Disability Insurance (SSDI) (median = \$1,040), and General Assistance (median = \$221). All of which reflect the very low incomes and high rates of disabling conditions among the unhoused older adult population. Additionally, nearly 25% of individuals with an income source reported having income from work.

The limited state and federal aid available to adults without children, low-income seniors, and people with disabilities cannot cover the high cost of housing and other basic needs in California creating vulnerabilities that can lead to homelessness. [Benefit amounts are insufficient](#) and often have strict asset limits, placing Californians who depend on these supports in severe economic hardship. In 2022, only [24 housing units were affordable and available](#) for every 100 extremely low-income renter households, which older adults on fixed incomes often fall into. The misalignment between safety net income supports and housing costs highlights the urgent need for significant investments in accessible, affordable housing and cash supports to prevent homelessness among older adults.

The Top Three Reported Income Sources for Unhoused Older Adults Were SSI, SSDI, and General Assistance

A Significant Number of Individuals Also Reported Having Income from Work.



Note: SSI = Social Security Income. SSDI = Social Security Disability Insurance. GA = General Assistance.
Source: Custom tabulations from the California Homeless Data Integration System



5. High Housing Costs Drive Homelessness Among Older Californians

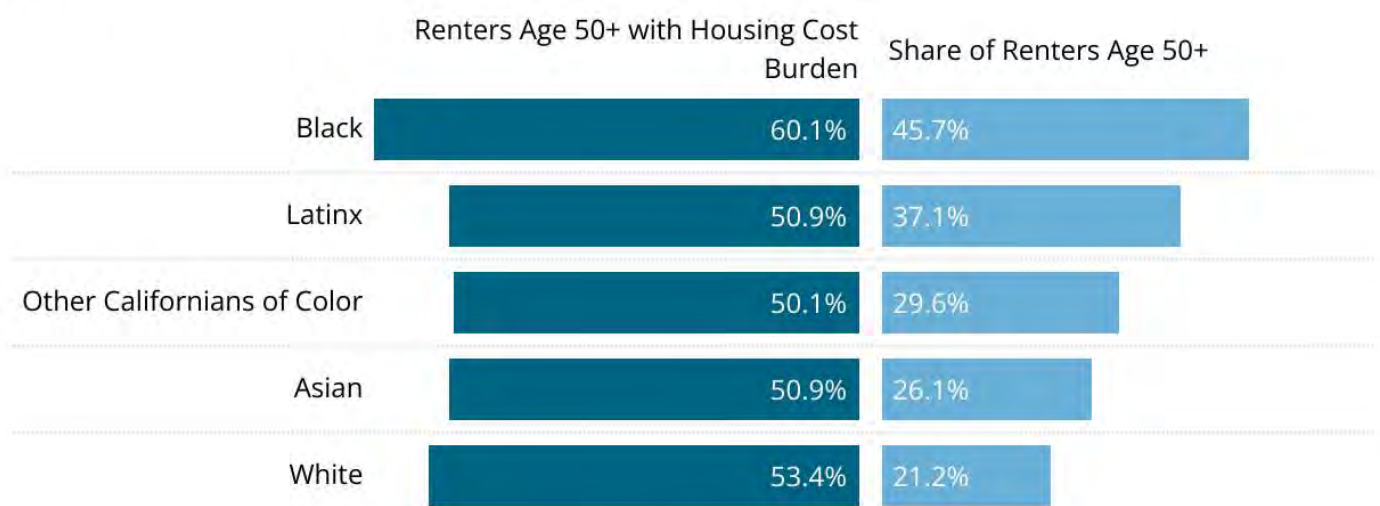
The severe shortage of affordable housing in California, leading to skyrocketing housing costs, is the primary factor pushing older adults into homelessness. In 2022, over half (52%) of all older adult California renters were housing cost-burdened, paying more than 30% of their total income in rent, and nearly 1 in 3 (29%) were severely cost-burdened, paying more than 50% of their income in rent. Older Black California renters faced the highest rates, with over 60% paying unaffordable housing costs. Older Californians of color broadly are especially vulnerable to housing insecurity as they are more likely to be renters and consequently do not have home equity to potentially fall back on. Nearly half (45.7%) of older Black Californians are renters, followed by older Latinx (37.1%), other Californians of color (29.6%), and Asian Californians (26.1%).

The increased share of Californians of color in renter households reflects discriminatory policies that have perpetuated the racial wealth gap and limited access to housing and other opportunities, leading to adverse outcomes in later life. As housing costs comprise a significant portion of their income, older adult renters — especially those with low or fixed incomes — are left with fewer resources for essentials like

transportation, medicine, and food. This precarious situation can be the tipping point into homelessness due to minor financial setbacks, medical expenses, or rent hikes. Ultimately, California's housing shortage places older renters in situations where they have to pay more than they can afford, exacerbating housing and economic insecurity.

Over Half of All Older Adult Renters in California Face Unaffordable Housing Costs

Share of Individuals in Renter Households with Housing Cost Burden by Race/Ethnicity, 2022



Note: "Housing cost burden" is defined by the US Department of Housing and Urban Development as housing costs exceeding 30% of household income. Race/ethnicity categories are mutually exclusive.

Source: Budget Center analysis of US Census Bureau, American Community Survey data



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Policymakers Can Ensure All Older Adults Have a Home

Older Californians are neighbors, parents, grandparents, and invaluable members of our communities who deserve access to an affordable, accessible, and dignified place to call home, regardless of their background or ability. As state and federal policymakers consider choices that will affect California's

unhoused and vulnerable communities, it is important to understand the unique housing, economic, and health conditions older unhoused adults face. By doing so, policymakers can act on proven policies and interventions that can help solve homelessness among older adults, including:

- **Increasing affordable rental housing and supportive housing** to ensure that all Californians have access to an affordable home that is designed to meet the needs of diverse types of households, including older adults, single workers, and people with disabilities.
- **Expanding and targeting additional financial support** for Californians without dependents, low incomes, and disabilities through boosting Supplemental Security Income/State Supplementary Payment, General Assistance, and refundable tax credits.
- **Directing resources for rental assistance and homelessness services**, including emergency and shallow rental subsidies, housing vouchers, and rapid-rehousing efforts to ensure people can remain in their homes during times of financial crisis or quickly exit homelessness.
- **Continuing to strengthen California's aging network and initiatives to connect housing and healthcare systems** by leveraging efforts such as CalAIM housing supports and California's Master Plan on Aging.
- **Protecting renters** through expanding, enforcing, and funding legal aid and eviction protections.

Policymakers can work towards a California where experiencing homelessness is a brief and rare occurrence, and where everyone has a safe and stable home.

^{^1} Adults without children, also referred to as single adults, are categorized by the US Department of Housing and Urban Development as being age 25 and over. This includes sole individuals, adult couples with no children, groups of adults, and may capture noncustodial parents. Sole individuals ages 18 to 24 are considered unaccompanied youth. The terms homeless and unhoused are also used interchangeably.

^{^2} For more on the shortfalls of safety net programs for low-income non-elderly adults see: Joseph Llobrera et al., *A Frayed and Fragmented System of Supports for Low-Income Adults Without Minor Children* (Center on Budget and Policy Priorities, January 28, 2021), <https://www.cbpp.org/research/a-frayed-and-fragmented-system-of-supports-for-low-income-adults-without-minor-children#state-general-assistance-programs-provide-cbpp-anchor>.

^{^3} General Assistance/General Relief which is a state-mandated program that counties must offer to indigent adults. Each California county administers and fully funds its own program and sets their own benefits, payment levels, and eligibility requirements.

^{^4} For more see: Danyelle Solomon, Connor Maxwell, and Abril Castro, *Systemic Inequality: Displacement, Exclusion, and Segregation: How America's Housing System Undermines Wealth Building in Communities of Color* (Center for American Progress, August 7, 2019), <https://www.americanprogress.org/article/systemic-inequality-displacement-exclusion-segregation/> and California Department of Justice, California Task Force to Study and Develop Reparation Proposals for African Americans, *The California Reparations Report* (2023), <https://oag.ca.gov/ab3121/report>.



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In 2025, we celebrate 30 years of advancing equity and opportunity for Californians with low and middle incomes. For three decades, the Budget Center has been a trusted source of budget analysis, shaping policies that reflect our shared values and priorities.

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Toward Dignity

Understanding Older Adult Homelessness

Findings from the California Statewide Study
of People Experiencing Homelessness



MAY 2024

Benioff Homelessness
and Housing Initiative

UCSF

University of California
San Francisco

Executive Summary

THE HOMELESS POPULATION IS AGING; in the past few decades, the proportion of adults experiencing homelessness who are 50 and older has risen faster than other groups. This trend is expected to continue, with the proportion of people age 65 and older experiencing homelessness in the United States expected to triple between 2017 and 2030. The aging of the population experiencing homelessness has consequences for the health and safety of those experiencing homelessness, for how policymakers respond to the crisis, and for society at large. Adults experiencing homelessness in their 50s and 60s have similar health status to people 20 years older in the general population.

In this report, we present findings related to older adults experiencing homelessness from the California Statewide Study of People Experiencing Homelessness, the largest representative study of homelessness since the mid-1990s. Between October 2021 and November 2022, staff from the UCSF Benioff Homelessness and Housing Initiative administered 3,200 questionnaires and conducted 365 in-depth qualitative interviews with adults experiencing homelessness throughout California to better understand who experiences homelessness, pathways to homelessness, experiences during homelessness, and barriers to regaining permanent housing. We present findings for those age 50 and older (“older adults”) to advance evidence-based solutions for preventing and responding to older adult homelessness.

WHO EXPERIENCES HOMELESSNESS AS AN OLDER ADULT

First, we explore who among older adults experiences homelessness. Individuals with certain vulnerabilities, those with a history of trauma, and/or people impacted by racial discrimination and inequality are at higher risk of experiencing homelessness. People who experience homelessness have higher rates of mental health conditions and substance use than the general population. For many, these problems predated their first episode of homelessness.

■ **Nine in ten older homeless adults (91%) in California lost their last stable housing in California.** Three-quarters (77%) were last housed in the same county where they were currently experiencing homelessness.

■ **The homeless population is aging. The median age of all homeless adults in California was 47.** Nearly half (48%) of single homeless adults were age 50 and older (“older adults”). The median age of older adults was 58 years (range 50-89 years).

■ **Forty-one percent of older homeless adults had their first episode of homelessness after age 50.**

■ **Older adults experienced prolonged episodes of homelessness, longer than those of younger homeless adults.** Among all older adults, the median length of the current episode was 25 months, compared to 20 months for those younger than 50. Forty-one percent of older homeless adults met the federal criteria for chronic homelessness; 76% met the temporal criteria alone.

■ **Black Californians are overrepresented in older homeless adult populations.** Thirty-one percent of older adults experiencing homelessness identified as Black, compared to 6% of all Californians age 50 or older. Older adults who identified as multiracial and Native American or Indigenous were also overrepresented.

■ **Stress and trauma throughout the lifecourse increased vulnerability to homelessness.** Those older adults who were first homeless before age 50 (early-onset homelessness) reported a higher prevalence of lifetime trauma, incarceration, and behavioral health concerns than those first homeless after age 50 (late-onset homelessness).

■ **Most older adults (79%) were incarcerated at some point in their lifetime, 77% in jail and 48% in prison.** A higher proportion of older adults with early-onset homelessness reported incarceration than those with late onset (87% vs. 68%). This finding was true for both jail and prison stays.

■ **The majority of older adults had experienced violence in their lifetimes; 67% experienced physical violence and 19% sexual violence.** Older cisgender women reported experiencing sexual violence almost four times more often than older adult cisgender men. Many experienced violence during childhood: 39% of older adults experienced physical violence and 11% sexual violence before age 18.

■ **Most older adults (81%) reported experiencing at least one significant mental health symptom at some point in their lifetime.** Of those with early-onset homelessness, 32% reported a psychiatric hospitalization in their lifetime, compared to 16% with late-onset homelessness.

■ **Substance use was common: 64% reported having used illicit drugs regularly at some point in their lives, and 61% reported regular heavy alcohol use.** Those older adults with early-onset homelessness had a higher prevalence of lifetime history of regular illicit substance use or regular heavy alcohol use than those who first experienced homelessness later in life.

PATHWAYS TO HOMELESSNESS

Second, we describe experiences and challenges older adults faced prior to homelessness. High housing costs and low income left participants vulnerable to homelessness. We explore income and housing costs, experiences prior to losing their housing, and what supports could have prevented their homelessness.

■ In the six months prior to homelessness, the median monthly household income for all older adults was \$920, reflecting their deep poverty. Older homeless adults spent a large proportion of their household income on rent. Most (81%) older adults entered homelessness from housing: 46% from housing arrangements for which they did not have their names on a lease or mortgage (non-leaseholders) and 35% from housing arrangements where they had their name on a lease or mortgage (leaseholders). Many non-leaseholders did not contribute to housing costs, relying on the goodwill of their hosts. The other 19% entered homelessness from institutions, primarily extended jail stays (7%), prison stays (6%), and healthcare settings (5%).

■ Overall, lost or reduced income was the most common primary reason for leaving last housing (9%). Reasons varied between leaseholders and non-leaseholders. Among leaseholders, the most common reason was lost or reduced income (14%). Among non-leaseholders, 12% reported conflict between residents, and 12% reported wanting their own space or not wanting to impose as primary reasons for leaving their last housing.

■ Older adults had little warning prior to losing their last housing, with a median of seven days' notice. Leaseholders reported 14 days' notice, and non-leaseholders reported one day.

■ Only a third (34%) of older adults sought help from any source prior to homelessness. Those who requested help did so most commonly from friends, family, non-profit organizations, and government agencies.

■ Older adults were optimistic that well-timed financial support would have staved off homelessness. Two-thirds (66%) believed receiving \$300-\$500 monthly would have prevented their homelessness; 83% believed a one-time payment of \$5,000-\$10,000 would have; and 89% believed a permanent rental subsidy, equivalent to a Housing Choice Voucher, would have done so.

EXPERIENCES DURING HOMELESSNESS

Next we examine older adults' experiences during homelessness. Their experiences were marked by health challenges, including age-related concerns, frequent use of drugs and alcohol, frequent victimization, interactions with the criminal justice system, and discrimination.

■ Most older adults reported they experienced unsheltered homelessness in the prior six months: 79% spent most nights unsheltered—58% in a non-vehicle unsheltered setting and 21% in a vehicle. Almost all (89%) spent at least one night unsheltered in the prior six months.

■ Older adults experiencing homelessness were in poor health, with a high prevalence of chronic diseases and functional impairments. Over half (53%) reported their health as fair or poor, 68% reported having been diagnosed with at least one chronic illness, and 43% reported having at least one activity of daily living (ADL) limitation.

■ Most older adults (86%) were covered by some form of health insurance (mostly MediCal), and 60% reported having a regular place to get healthcare other than the emergency department (ED). Despite these factors, 25% experienced a time in the prior six months when they were unable to get needed healthcare, and 24% indicated they were unable to obtain needed medication.

■ Older homeless adults had high rates of acute and emergent health use. Over a third (37%) of older adults had received care in the ED in the prior six months; 25% had experienced an inpatient hospitalization for a physical health problem.

■ **While many older adults had mental health symptoms, few had access to treatment.** The majority of older adults (63%) reported having a mental health symptom; anxiety (46%) and depressive (44%) symptoms were the most common. Thirteen percent reported current hallucinations. Older adults who first experienced homelessness earlier in life reported mental health symptoms more frequently than those with late-onset homelessness. Among those who reported having mental health symptoms, 26% had received any treatment in the prior month.

■ **Substance use was common, yet few had access to treatment.** Thirty percent of older adults reported using illicit drugs three times a week or more. Methamphetamine use was the most common (26%). Eight percent reported heavy episodic alcohol use at least weekly. Among those who ever used illicit drugs, 24% reported their use increased during this episode of homelessness. Among those with current, regular illicit substance use or heavy episodic alcohol use, 13% reported currently receiving treatment and 19% reported a time in the prior six months where they wanted treatment but were unable to obtain it.

■ **Many older adults (43%) reported a complex behavioral health need (i.e., a recent psychiatric hospitalization; recent hallucinations; current, regular illicit drug use; or weekly heavy episodic alcohol use).** These older adults would benefit from robust supportive services in housing, such as those available in Permanent Supportive Housing with intensive case management or assertive community treatment service models. Twenty-two percent of older adults had both a complex behavioral health need and an ADL limitation.

■ **Most older adults (82%) received public benefits during homelessness.** Over two-thirds received CalFresh, which was the most common benefit. Few seniors who appeared to have been eligible for income support through SSDI and SSI were enrolled.

■ **Older adults faced traumatic experiences during homelessness: physical violence (28%) or sexual violence (6%), discrimination in their daily lives (78%), a short-term jail stay (24%), or having their belongings confiscated (29%) in the last 6 months.**

BARRIERS AND FACILITATORS OF RETURNS TO PERMANENT HOUSING

Older adults experiencing homelessness faced numerous barriers to exiting homelessness; the high cost of housing was the most common barrier. We review the barriers to exits from homelessness and supports that could facilitate older adults returning to housing.

■ **Most older homeless adults (86%) identified housing costs as a barrier to exiting homelessness.** They discussed the challenge of finding affordable housing when relying on limited income from public benefits or low-wage employment.

■ **Older homeless adults languished on long waitlists for affordable housing; some gave up hope.**

■ **Older homeless adults' prior histories—including poor credit, evictions, and records with the criminal justice system—created barriers to re-entering housing.** In some cases, they faced discrimination that interfered with their efforts to regain housing.

■ **Age-related health problems, including difficulty with function and mobility, created other barriers, as did lacking necessary documentation or having limited access to telephones or the internet.**

■ **About half (52%) of all older adults had received assistance with returning to housing from any professional (such as a case manager or housing navigator) during their episode of homelessness.** Only a third (32%) had received help once a month or more during the prior six months.

■ **Most older adults remained optimistic that financial interventions, such as a shallow subsidy, one-time lump sum payment, or Housing Choice Voucher, could end their homelessness (82%, 95%, and 95%, respectively).**

POLICY RECOMMENDATIONS

Based on these findings, we offer policy recommendations. The full report provides more detail. We summarize the six domains here:

■ **Increase access to affordable housing for older adults making less than 30% of the Area Median Income (extremely low-income or ELI households).**

The severe shortage of housing for ELI households affects older adults disproportionately. Increase access by expanding the supply of affordable housing and increasing subsidies (e.g., federal rental subsidy programs) and eliminating barriers to accessing ELI housing (through housing navigation services, expanding HUD waivers to serve households that need additional time to complete eligibility documentation, and by promoting fair chance housing policies).

■ **Expand targeted homelessness prevention for older adults, including legal and financial assistance.** This strategy includes strengthening eviction protection and identifying and providing timely prevention strategies for those at highest risk including at institutional exits. We recommend embedding prevention strategies within mainstream service providers where older adults at risk of homelessness seek services.

■ **Strengthen services and supports and expand access to meet the needs of older adults, many of whom have behavioral health challenges and the early onset of geriatric conditions.** This approach includes promoting housing stability through permanent rental subsidies and providing high quality services in permanent supportive housing to care for those with complex behavioral health needs and functional, cognitive, and mobility impairments. For instance, by replicating innovative models to contract personal care services using the Medicaid Home and Community Based Services funding to improve implementation of CalAIM (California's 1115 waiver program), these services can be resourced and scaled.

■ **Increase incomes among extremely low-income older adults through reducing barriers to participation in public assistance programs and raising benefit levels, which have not kept up with the increased cost of living.**

■ **Expand outreach to older adults experiencing homelessness, including reducing barriers to shelter access for older adults, creating access to physical and behavioral health services for those experiencing homelessness, expanding and enhancing street outreach (including street medical services), and shifting away from criminal justice system approaches to homelessness.**

■ **Embed racial equity in all aspects of the response, including removing systemic housing barriers that perpetuate racial disparities in homelessness, combating ongoing discrimination in housing systems, addressing racial inequities and disparate outcomes in homelessness services systems, and prioritizing racial equity in coordinated entry systems.**



1

An aerial view of a river flowing through a dense green forest. The river is a vibrant blue, and the surrounding forest is a lush green. A blue semi-transparent box is overlaid on the left side of the image, containing the title 'UNDERSTANDING & GETTING INVOLVED IN THE CCAHSAA COLLABORATORY' in white text.

UNDERSTANDING & GETTING INVOLVED IN THE CCAHSAA COLLABORATORY

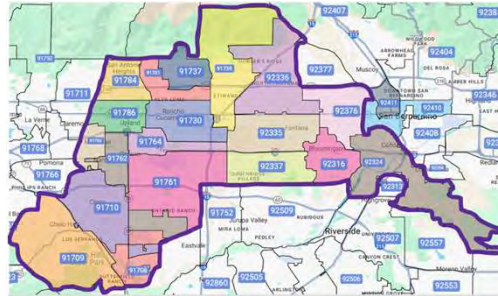
- CCAHSAA Aim & Focus
- How We Started
- Collaboratory Design, including Projects & Associated Workgroups
- Workgroup Participation
- Understanding if the Collaboratory is a good fit for you
- Call to Action: Ways to Get Involved in the Collaboratory



2

CCAHSAA Collaboratory AIM & FOCUS

Create a fully functional and coordinated system of care that serves the needs of older adults experiencing homelessness in western San Bernadino County.



Supported through funding from the California Health Care Foundation (CHCF)



3

HOW WE STARTED

- Launched a multi-sector Design Team in March 2025
- Selected the sub-population of focus: older adults experiencing homelessness
- Set vision and focus for the work ahead
- Prioritized outcomes, measures, strategies, and key partners



4



COLLABORATORY DESIGN

October 2025 – March 2027
(18 months)

- **Action Periods** (workgroups advancing chartered projects with 90-120-day goals)
 - Includes workgroup-specific activities and All-Workgroup Calls every 2-3 months
- **Workshops** (in-person meetings to assess progress and plan ahead)
 - Planned for October 29 2025, March 2026, September 2026, and March 2027



5



CCAHSAA COLLABORATORY: A PORTFOLIO OF WORK TO BUILD A CONNECTED COMMUNITY OF CARE

The **Collaboratory** will be driven by a set of projects, investments, and capacities that together will achieve results for and with the population

Workgroups will advance projects forward



6



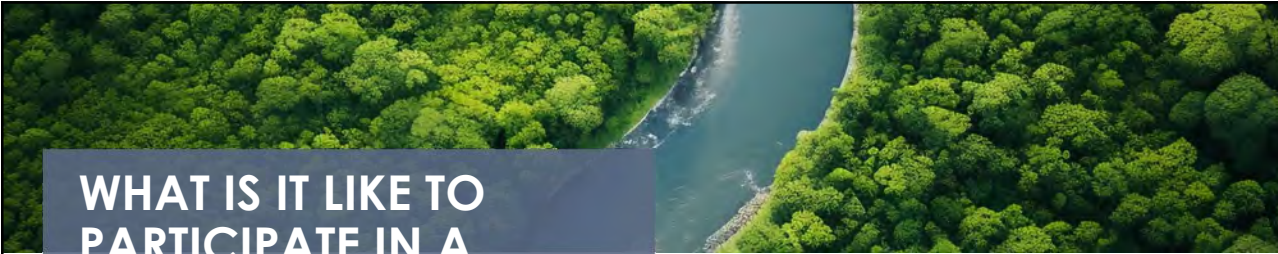
COLLABORATORY PORTFOLIO OF PROJECTS

Data Intelligence & Information Sharing	Case Conferencing
Creative Housing & Stability Solutions	Optimizing Community- Based Care Coordination

- Proposing four main projects that workgroups will advance via chartered 90-120-day goals and work during Action Periods
- The work on each may start and end at different times
- New projects may emerge as the work evolves



7



WHAT IS IT LIKE TO PARTICIPATE IN A WORKGROUP?

- **Workgroup composition and time commitment varies** based on the workgroup and may include calls or offline work to progress the projects
- The **work and timeline is co-designed by each Workgroup upon launching**
- We anticipate that the **workgroup activities will align with the work you are already doing in / work that is relevant to your role**
- Collaboratory participants will **convene for virtual meetings every 2-3 months and in-person Workshops every 4-6 months**



8

IS THE CCAHSAA COLLABORATORY RIGHT FOR YOU & YOUR ORGANIZATION?

Questions to ask to explore if the Collaboratory is a good fit for you:

- Does my organization / do I serve aging adults and/or those experiencing homelessness?
- Can my organization / I contribute to creating a connected community of care for aging adults experiencing homelessness in the West Valley?
- Do the Collaboratory projects align with work that I am doing and/or the assets and strengths my organization can contribute?
- Could my work / the work of my organization benefit from the structure, tempo, connection, and coaching that the Collaboratory will provide?
- Are there others in my organization in addition to myself that might be a good fit for participation in the Collaboratory?



9

CALL TO ACTION: JOIN US!

Are you curious and want to learn more?

- Attend our [optional Information Call](#) on Wednesday, October 8 from 12-12:30 PM where you can learn more and ask questions.

Do you want to join the Collaboratory?

- [Register here](#) to join the Collaboratory!
- Save the date for our first Workshop on October 29.



10

Minutes for the San Bernardino City & County Continuum of Care
West Valley Regional Steering Committee Meeting
 Wednesday, September 10, 2025, 9:00am – 11:00am
 Rancho Cucamonga City Hall – Tri-Communities Conference Room
 10500 Civic Center Dr, Rancho Cucamonga, CA 91730
 & by Zoom Video Conference

Minutes recorded and transcribed by Martin De La Cruz, Service Coordinator, Knowledge Education for Your Success, Inc.

OPENING REMARKS	PRESENTER	ACTION / OUTCOME
Call to Order	Don Smith	<ul style="list-style-type: none"> Meeting was called to order at 9:06 am
Welcome and Introductions	Erika Lewis-Huntley	<ul style="list-style-type: none"> Roll Call for representatives from the West Valley Regional Steering Committee members. Members present in person included representatives from City of Montclair, City of Rancho Cucamonga, City of Upland, County DBH, Catholic Charities, Christian Development Center, Foothill AIDS Project, Inland SoCal United Way, Life Way Church, Pathways to Housing Network. Members present by Zoom included representatives of the City of Chino and San Antonio Regional Hospital. Self-introductions by all other attendees
REPORTS & UPDATES		
SBC&C Continuum of Care	Don Smith	<ul style="list-style-type: none"> Please see attached Meeting Recap and presentation slides
Office of Homeless Services	Erika Lewis-Huntley	
State and Federal Updates	Claudia Doyle	
Regional City & Service Provider Partners	RSC Committee Members	
PRESENTATIONS / DISCUSSION ITEMS		
<i>“The Growing Crisis of Homelessness Among Older Adults”</i> <i>Discussion on Setting Priorities for HHAP 5 Regional Project Funding</i>	Don Smith RSC Committee Members	<ul style="list-style-type: none"> Presentation tabled to the next meeting. Please see attached Meeting Recap and presentation slides for more information on this topic. The West Valley Region has been allocated \$716,754.23 in HHAP 5 Regional Project Funding. Eligible Use Categories based on the CoC's application approved by the State include: Delivery of Permanent Housing, Rapid Rehousing, Operating Subsidies for Permanent Housing, Prevention & Shelter Diversion, Street Outreach, Services Coordination, and Systems Support. The 10 Regional Steering Committee Members present in-person were asked to identify their top 3 choices for prioritizing HHAP project funding in the West Valley Region.

		<ul style="list-style-type: none"> The top 3 choices of the RSC Members were Rapid Rehousing (9), Prevention & Diversion (9) and Permanent Housing (8). RSC Members were asked to vote on whether to prioritize 2 or 3 eligible use categories. By a vote of 6-4, the RSC decided to prioritize 2 categories – Rapid Rehousing and Prevention & Diversion
CLOSING		
Public Comment	All Attendees	<ul style="list-style-type: none"> No additional public comment
Adjournment	Don Smith	<ul style="list-style-type: none"> There being no further business to discuss, the meeting was adjourned at 11:05am.
Next Meeting		<ul style="list-style-type: none"> West Valley Regional Steering Committee Wednesday, October 8, 2025, 9:00am – 11:00am Rancho Cucamonga City Hall – Tri-Communities Room 10500 Civic Center Dr, Rancho Cucamonga, CA 91730 and by Zoom Video Conference

Homeless Housing, Assistance and Prevention Program (HHAP) Round 5

West Valley Regional Project Application Prioritization Tally Sheet

HHAP Eligible Use Categories

Voting Members	Permanent Housing	Rapid Rehousing	Op Subsidies - Street Perm Housing Outreach	Services Coordination	System Support	Prevention/ Diversion
Chino - not present in person						
Montclair		1		1		1
Ontario - not present						
Rancho Cucamonga	1	1				1
Upland		1				1
DBH	1	1				1
HOPE Team - not present						
Catholic Charities	1	1			1	
Christian Dev Center	1	1				1
Foothill AIDS Project	1	1				1
Health Service Alliance - not present						
ISCUW/211	1	1				1
Inland Valley Hope Partners - not present						
Pathways to Housing	1	1				1
San Antonio Regional Hospital - not present in person						
Life Way Church	1					1
	8	9	0	1	1	9

September 10, 2025, Attendees: West Valley Regional Steering Committee Meeting

LAST NAME	FIRST NAME	ORGANIZATION	PHONE NUMBER	EMAIL ADDRESS
De La Cruz	Martin	KEYS	(909) 545-9205	mdelacruz@keysnonprofit.org
Jackson	Antoinette	Symba Center	7609649464	ajackson@symbacenter.org
Ramachhita	Saira	San Antonio Regional Hospital	9095093565	sramachhita@sarh.org
Doyle	Claudia	San Bernardino County Office of Homeless Services	909-501-0617	Claudia.doyle@hss.sbcounty.gov
Tower	Amanda	SB County Community Development and Housing Department	909-501-0611	amanda.tower@cdh.sbcounty.gov
Alvarez	Susan	Upland pd homeless services	909-931-4245	Salvarez@uplandpd.org
Yniguez	Serina	San Antonio Regional Hospital	9099204796	serina.yniguez@sarh.org
Ripley	Jessica	Operation Grace	9093828540	jiripley@operationgrace.com
Ayala	Alejandra	San Antonio Regional Hospital	(909) 920-6153	alejandra.ayala@sarh.org
Cuellar	Rebecca	San Antonio Regional Hospital	4243811307	rebeccacuellar001@gmail.com
Franco	Kari	City of Chino Human Services	9093343537	kfranco@cityofchino.org
Porter	Jennifer	Community Well California	909-419-9278	jporter@communitywelca.com
Martin	Alexzander	Pacific Clinics	4422688414	alexzander.leemartin@pacificclinics.org
Ramos	Nancy	Arrowhead Regional Medical Center	(909)580-1080	Ramosnan@armc.sbcounty.gov
patterson	nashanti	Foothill Aids Project	9098842722	nashantip@fapinfo.org
Peeples	Andre	Foothill AIDS Project	8187303091	praydre@aol.com
Singh	Indira	San Antonio Regional Hospital	909-869-8215	isingh@sarh.org
Spiegel	Rebecca	Inland SoCal United Way	951-817-4098	RebeccaS@iscuw.org
Garcia	Izamar	Children's Fund	9093796039	izamar@childrensfund.org
Dinkjian	Aileen	San Antonio Regional Hospital	9099204829	adinkjian@sarh.org
Sutfin	Annette	DAAS APS West Valley	9092525735	Annette.Sutfin@hss.sbcounty.gov
Mercer	Nancy	Inland Housing Solutions -Community Impact Manager	909 736-5518	Nancy@inlandhousingolutions.org
Castillo-Gonzalez	Emma	San Antonio Regional Hospital	9099204935	ecastillo-gonzalez@sarh.org
Smith	Don	IE Pathways to Housing Network	909-210-0639	DonSmithSolutions@outlook.com

September 10, 2025, Attendees: West Valley Regional Steering Committee Meeting

LAST NAME	FIRST NAME	ORGANIZATION	PHONE NUMBER	EMAIL ADDRESS
Hernandez	Nefertari	Reach Out Jurupa Valley Resource Center	9513816263	nefertari@we-reachout.org
Manzo	Marisela	Inland Housing Solutions	9098453209	Marisela@InlandHousingSolutions.org
Humphrey	Ruth	Childrens Fund	9093796036	ruth@childrensfund.org
Ozier	Leif	Catholic Charities	9098803625	lozier@ccsbriv.org
Miller	Shaneka	Foothill AIDS Project	760-828-2186	Shanekam@fapinfo.org
Mercer	Nancy	Inland Housing Solutions -Community Impact Manager	909 736-5518 or 909 905-6907	Nancy@inlandhousingsolutions.org
Mendoza	Ruben	Carrillo Group CANY	9092585120	ruben@carrillogroupcany.com
Crawford	Tyrese	SBCSS	909-331-5040	Tyrese.crawford@sbcss.net
Reyes	Stephanie	Catholic Charities	9099065980 ex 903	sreyes@ccsbriv.org
Rucker	Donald	Christian Development Center	909-367-9093	pastorrucker@gmail.com
Rucker	Ethel	Christian Development Center	909-319-2240	ruckergen3@gmail.com
Ingles	Jonathan	Upland PD Homeless Services	909-921-1016	Jingles@uplandpd.org
Goodrich	Ronald	City of Montclair	909-721-3481	RGoodrich@cityofmontclair.org
Morris	Darold	LightHouse Social Service Ctrs.	951-954-2608	Daroldm@lighthouse-ssc.org
Bossieux	Andre	Lifeway Church Ministries	909-730-5527	bossieux@charter.net
Bryan	Leandra	211 United Way	909-734-2982	Leandrab@iscuw.org
Ortega	Antoinette	ISCUV	909-938-9419	aortega@iscuw.org
Towns	Allison	City of Rancho Cucamonga	909-774-2032	Allison.Towns@cityofrc.us
Lewis-Huntley	Erika	City of Rancho Cucamonga	909-774-2008	Erika.lewis-huntley@cityofrc.us
Evans	Leslie	Foothill AIDS Project	909-884-2722x224	leslie@fapinfo.org
Takaha	Sharon	Community Well CA	909-492-0078	DrSharon@communitywellca.com
McCreight	Eddie	Rolling Start		emccreight@rollingstart.com
Sanchez	Jose	Rolling Start		JSanchez@rollingstart.com
Aguiera	David	Rolling Start	909-890-9516	daguilera@rollingstart.com

September 10, 2025, Attendees: West Valley Regional Steering Committee Meeting

[illegible]

West Valley Regional Steering Committee Meeting - 9/10/25 recap

Much appreciation to the 60+ partners who joined us for the West Valley Regional Steering Committee Meeting on September 10th, both in person and by Zoom, and for all of the great information and input shared during the meeting.

My apologies to those who attended the meeting to see the featured presentation on "*The Growing Crisis of Homelessness Among Older Adults*", which was pre-empted by the important discussion on Setting Priorities for the HHAP 5 Regional Project Funding. This topic will be the featured presentation at our RSC Meeting on October 8th. In the meantime, below are links to some compelling recent news reports on this topic:

- [The Gray Wave: Rising Homelessness for American Seniors](#) (NBC News, 10 mins)
- [Seniors on the Streets: More older people in Sacramento are on the brink](#) (ABC Sacramento, 6 mins)
- [Why are so many seniors in San Diego aging without a home?](#) (NBC News San Diego, 25 mins)
- [Seniors Displaced by California's Rising Rents](#) (NBC News, 10 mins)
- [78-year-old woman describes living in her car for 2 months](#) (7 News Miami, 4 mins)
- [Seniors dying on the Streets - United States Homeless Crisis](#) (Worldview Frontline, 24 mins)

Announcements –

- **West Valley Regional Collaboratory on Community Care and Housing Solutions for Aging Adults** - We are excited to officially launch our Regional Cross-Sector Integration Pilot Initiative designed to build and strengthen partnerships between healthcare providers, community-based organizations, government service agencies and other stakeholders with the goal of creating a *fully functional and coordinated system of care that serves the needs of older adults experiencing or at-risk of homelessness in western San Bernadino County and beyond*.

Sponsored by the *California Health Care Foundation* (CHCF) and facilitated by *HC2 Strategies*, the *West Valley Regional Collaboratory on Community Care and Housing Solutions for Aging Adults* (CCAHSAA Collaboratory) will provide an open space creative process where cross-sector stakeholder partners will work together to advance cross-sector impact and generate innovative solutions to the complex challenges faced by older adults experiencing homelessness and persistent housing insecurity in San Bernardino County.

Please see the attached flyer for more information and to register to participate in this unique and exciting new *Collaboratory* initiative. Our first in-person Collaboratory Workshop will be held on October 29th.

- **Setting Priorities for HHAP 5 Regional Project Funding** - During the September 10th Meeting, the West Valley Regional Steering Committee voted to prioritize HHAP 5 Regional Funding on projects that will deliver Rapid Rehousing and/or Prevention & Shelter Diversion interventions for people experiencing or at-risk of homelessness within the West Valley Region.
- **West Valley Regional Working Group Meeting - NO MEETING IN SEPTEMBER** - Monthly virtual gathering of our public/private regional stakeholder partners to help "Build A Connected Community of Care" through information-resource sharing, relationship-partnership building, cross-sector referrals, warm-handoffs and care coordination in response to the "real-time" needs of people experiencing or at-risk of homelessness in the West Valley Region. For meeting invite, please contact DonSmithSolutions@outlook.com.
- **San Bernardino Continuum of Care Membership Meeting, Wednesday, September 24th, 9:00-11:30am**, Ecclesia Christian Fellowship, 1314 Date St., San Bernardino, 92404
- **HMIS Monthly Virtual Town Hall Meeting, Wednesday, October 1, 11am-12noon, [Monthly HMIS Town Hall Meeting – Homeless Partnership](#)**

- **SB County Veterans Stand Down & Shelter Court, Wednesday, October 8th, 10am-2pm**, Rialto City Park, 130 San Bernardino Ave, Rialto. See attached flyer with QR Code for Vendor and Client Registration
- **"Public Health on the Go" Health Service Alliance Mobile Clinic** - Available to schedule for consumer service events and client service activities in the West Valley Region. For more information, please reach out to Robert Gipson, 909-464-9675
- **West Valley Regional Steering Committee Meeting - Wednesday, October 8th, 9:00-11:00am**, Rancho Cucamonga City Hall & by Zoom

For your information, please find attached the West Valley RSC Meeting presentation slides that includes information on the following (plus live links to more information):

- San Bernardino Continuum of Care Board Meeting Agenda, Wednesday, August 27, 2025 (slide 3) - [CoC-Board-Meeting-Agenda.8.27.25.pdf](#)
- Local leaders sign data-sharing agreement to support the homeless – Welcome to San Bernardino County (slide 4)
- Board of Supervisors adopt Ordinance relating to camping on public property and obstruction of public right of way (slide 5-6) - [San Bernardino County - File #: 12648](#)
- Setting Priorities for HHAP 5 Regional Project Funding (slides 7-14) - [HHAP-5-Strategic-Plan.pdf](#)
- The Growing Crisis of Homelessness Among Older Adults (slides 15-31)
 - [Paint by Numbers: Older Americans and Homelessness - National Alliance to End Homelessness](#)
 - [9 Facts About the Impending Senior Homelessness Crisis and How We Can Stop It | Housing Matters](#)
 - [Toward Dignity: Understanding Older Adult Homelessness | Benioff Homelessness and Housing Initiative](#)
 - [The Rise of Homelessness Among California's Older Adults - California Budget & Policy Center](#)
 - [CA-Older-Renters-Policy-Brief.pdf](#)
- Inland Empire Master Plan for Aging 2025-2028 (slides 32-33) - [ICA IE-MPA June 2025.pdf](#)
- Building a Connected Community of Care in the West Valley Region (slides 34-35)
- West Valley Regional Collaboratory on Community Care and Housing Solutions for Aging Adults (36-48)
- CoC Strategic Planning Process - Lived Experience Focus Groups (slide 49)
- CoC Capacity Building Training Series-Module 3: Housing-Centered Practice: Supporting Clients from First Contact to Stability (slide 50)
- Life Way Church Community Health Fair (slide 51)
- Health Service Alliance Public Health on the Go (slide 51)
- City of Ontario Housing Services Department Community Resource Fair-RSVP Vendor Link (slide 52) - [RSVP Ontario HSD - Community Resource Fair](#)
- CoC Training - Financial Management Best Practices (slide 53) - September 15 & 16. 2 seats per agency
- Breast Cancer Awareness Seminar (slide 53) - October 11th, Ontario
- SB County Probation-SB Superior Court Shelter Treatment Court (slide 54) - Wednesday, September 24th, Heritage Park, Redlands
- SB County Veterans Stand Down & Shelter Court (slide 54, flyer attached)
- CA 609 San Bernardino City & County Continuum of Care Membership Application (slide 55) - [CoC-Membership-App.pdf](#)
- Office of Homeless Services Contact List (slide 56) - [OHS-Staff-Contact-list.pdf](#)

Additional information -

- [Out of Reach 2025: The High Cost of Housing | National Low Income Housing Coalition](#)
- [The GAP: A Shortage of Affordable Homes 2025 | National Low Income Housing Coalition](#)
- How is California Meeting the Housing Needs of California's Low-Income Renters - [CHP State-Housing-Needs-Report-2025.pdf](#)

- San Bernardino County 2025 Affordable Housing Needs Report - [San-Bernardino Housing Report-2.pdf](#)
- [Black Women and Single Mothers Hit Hardest by Housing Crisis - Davis Vanguard](#)
- [Housing Opportunities: Governor's Reorganization Plan to Create the California Housing and Homelessness Agency - Turner Center; BCSH - Reorganization](#)
- California Affordable Homes At Risk - [CHP 2025-Subsidized-At-Risk-Report.pdf](#); [CHP 2025-Unsubsidized-At-Risk-Report.pdf](#)
- [Who Can Afford to Rent in California's Many Regions in 2024](#)
- California Homelessness Response System Data - [Homeless Data Integration System](#)
- [The State of the Nation's Housing 2025 | Joint Center for Housing Studies](#)
- [Action Plan for Preventing & Ending Homelessness in CA 2025-2027](#)
- [Opinion | America Is Pushing Its Workers Into Homelessness - The New York Times](#)
- CalAIM's Housing Supports & the Housing-Homelessness Incentive Program - [ECM-CS | HB Live Site](#)

Thank you for your partnership!

Don Smith & Erika Lewis-Huntley, Co-Chairs

SB CoC West Valley Regional Steering Committee

"Building A Connected Community of Care in the West Valley Region"

"The Growing Crisis of Homelessness Among Older Adults"

(presentation postponed to September meeting)

Setting Priorities for HHAP 5 Regional Project Funding

Plus,
Updates from City, County & Regional Service Partners
West Valley Regional Collaboratory on
Community Care and Housing Solutions for Aging Adults

West Valley Regional Steering Committee Meeting
September 10, 2025, 9:00am

The Solution to Homelessness is Straightforward: **HOUSING!**

1

San Bernardino County's Homeless Partnership West Valley Regional Steering Committee	
Wednesday, September 10, 2025 • 9:00 a.m. to 10:00 a.m. Hosted by the City of Rancho Cucamonga • Please join us at 801 City Hall • 1st Floor Conference Room or at the City Center Drive, Rancho Cucamonga 91702	
By Zoom Video Conference Meeting ID: 829 899 6742, Password: 088888 Dial in via telephone: 1-800-453-3434 or 1-800-453-3434 (toll-free)	
MEETING AGENDA	
OPENING REMARKS	MEETING
A. Call to Order	Don Smith, Co-Chair
B. Welcome and Introductions	Elisa Lewis-Hartley, Co-Chair
C. Public comment and confirmation is available and welcomed during all agenda items	
ITEMS TO BE DISCUSSED	
D. SBCHC: Continuum of Care	Elisa Lewis-Hartley
E. Office of Homeless Services	Chris Hall
F. Health and Human Services	Don Smith
G. Regional 10-15 Service Provider Partners	SBCHC Committee Members
PRESENTATION BY WEST VALLEY REGION	
H. "Building A Connected Community of Care in the West Valley Region"	
I. "The Growing Crisis of Homelessness Among Older Adults"	Don Smith, Co-Chair
J. "The West Valley Region" Collaboratory on Community Care and Housing Solutions for Aging Adults (CCAHSA Collaboratory)	Elisa Lewis-Hartley, Co-Chair
K. Discussion on Setting Priorities for HHAP 5 Regional Project Funding	
CLOSING	
L. Additional Public Comment & Announcements	Don Smith
M. Adjournment	Elisa Lewis-Hartley
Next Regularly Scheduled Meeting: West Valley Regional Steering Committee Wednesday, October 15, 2025, 9:00 a.m. to 10:00 a.m. Rancho Cucamonga City Hall - 1st Floor Conference Room or at the City Center Drive, Rancho Cucamonga 91702	

2

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H. "Building A Connected Community of Care in the West Valley Region"	
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4

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8

California Interagency Council on Homelessness

HHAP-5: ELIGIBLE USE CATEGORIES

HHAP-5 Statute	HHAP-5 Eligible Use Categories	Explanation of Eligible Uses of HHAP funds; HHAP-5 Changes
Costs that support permanent housing and innovative housing solutions	Delivery of Permanent Housing and Innovative Housing Solutions	Eligible Uses should be categorized here when costs support the provision of permanent housing.
Costs that support rapid rehousing	Rapid Rehousing	Eligible Uses should be categorized here when the costs support spending to rapidly rehousing people experiencing homelessness. This means a short-term, time-limited, permanent housing program, inclusive of wrap-around services. Eligible Uses should be categorized here when costs support eligible populations (people) who are otherwise in shelter and/or remain safety housed at their current residence.
Costs that support prevention and shelter diversion	Prevention and Shelter Diversion	HHAP-5 changes: <ul style="list-style-type: none"> Change of eligible population to include "or all of homelessness," Negative prioritization of households with income of or below 30 percent of the area median income, who pay more than 50 percent of their income in housing costs, and who meet criteria for being at highest risk of homelessness through data informed criteria. See "Eligible Uses Changes under HHAP-5."
Costs that support operating subsidies - permanent housing	Operating Subsidies - Permanent Housing	Eligible Uses should be categorized here when costs support operations in new and existing affordable or supportive housing units serving people experiencing homelessness. Operating subsidies may include operating reserves (funds held in reserve to cover large, unexpected operating expenses). HHAP-5 changes: <ul style="list-style-type: none"> Previously combined with Operating Subsidies - Intermittent Housing. Now a standalone category.

www.calich.ca.gov/calich

12

CAL ICH

9

California Interagency Council on Homelessness

HHAP-5: ELIGIBLE USE CATEGORIES

HHAP-5 Statute	HHAP-5 Eligible Use Categories	Explanation of Eligible Uses of HHAP funds; HHAP-5 Changes
Costs that support interim housing	Operating Subsidies - Intermittent Housing	Eligible Uses should be categorized here when costs support operations in interim housing serving people experiencing homelessness. Operating subsidies may include operating reserves (funds held in reserve to cover large, unexpected operating expenses). HHAP-5 changes: <ul style="list-style-type: none"> Previously combined with Operating Subsidies - Permanent Housing. New standalone category. Eligible Uses should be categorized here when costs support the provision of interim housing.
Costs that support interim housing	Interim Housing	HHAP-5 changes: <ul style="list-style-type: none"> No HHAP-5 resources may be used to fund new interim housing solutions, until both of the following occur: (1) the applicant has demonstrated that the region has dedicated sufficient resources from other sources to long-term permanent housing solutions and (2) the applicant has received written permission from Cal ICH (ICC 1903-M-1). The limitation does not apply to new interim housing solutions for youth under the ten percent youth set aside. For more, see Section 16C in the NCFA, "Stable Use Changes under HHAP-5."
Costs that support interim housing	Improvements to Existing Intermittent Housing	Eligible Uses should be categorized here when costs support renovation of existing interim housing to improve the quality of the life for people experiencing homelessness who are residing in Interim housing.

10

10

California Interagency Council on Homelessness

HHAP-5: ELIGIBLE USE CATEGORIES

HHAP-5 Statute	HHAP-5 Eligible Use Categories	Explanation of Eligible Uses of HHAP funds; HHAP-5 Changes
Costs that support service provision and systems support	Street Outreach	Eligible Uses should be categorized here when costs support Outreach programs.
Costs that support service provision and systems support	Services Coordination	Eligible Uses should be categorized here when costs support wrap-around services not directly provided through another project.
Costs that support service provision and systems support	Systems Support	Eligible Uses should be categorized here when the cost supports homelessness services system infrastructure, regional coordination, and/or improves accessibility and outcomes generally, as opposed to specific client(s).

11

11

San Bernardino County
Office of Homeless Services

CATEGORIES AND BUDGET FOR COC

Eligible Use Category	Coc YSA	Coc Allocation
Rapid Rehousing	\$ 255,178.28	\$700,000.00
Prevention and Shelter Diversion	\$ 51,035.66	\$700,000.00
Delivery of Permanent Housing and Innovative Housing Solutions	\$ 153,106.97	\$1,046,544.00
Operating Subsidies - Permanent Housing	\$ 51,035.66	\$700,000.00
Street Outreach		\$600,000.00
Services Coordination	\$ 92,879.44	\$600,000.00
System Support		\$600,000.00
Total	\$ 603,236.01	\$4,946,544.00
YSA	10%	\$ 603,236.00
HMIS	1%	\$ 60,324.00
Administrative Cost	7%	\$ 422,265.28
		\$6,032,370.28

12

12

San Bernardino County
Office of Homeless Services

COC ALLOCATIONS BASED ON 2025 PITC REPORT

Region	Total PITC	Percentage based on PITC #'s	Total allocation per Region
Central Valley	2450	63.87%	\$3,158,863.00
High Desert	672	17.52%	\$866,139.85
East Desert	91	2.37%	\$117,233.04
Mountain Region	68	1.77%	\$87,553.83
West Valley	556	14.49%	\$716,754.23
\$4,946,544.00			

13

West Valley Regional Steering Committee

Setting Priorities for HHAP 5 Regional Project Funding

1. What are the principal barriers / gaps / service needs for constituents seeking help with resolving their housing/homelessness crisis in the West Valley Region?
2. How can we maximize the use of HHAP 5 Regional Project Funding to have the greatest impact on addressing the barriers/gaps/service needs for constituents seeking help with resolving their housing/homelessness crisis in the West Valley Region?
3. Which HHAP 5 eligible use category(s) should we prioritize for West Valley Regional Project Funding?

14

West Valley Regional Steering Committee

"The Growing Crisis of Homelessness Among Older Adults"

[Is your community ready for the older adult homelessness crisis?](#) (NAEH Learning Series, 1:51)

[The Fastest Growing Group Experiencing Homelessness - Older Adults](#) (Ann Oliva, CEO NAEH 1:10)

[Seniors on the Streets: More older people in Sacramento are on the brink](#) (6:05)

[Why are so many seniors in San Diego aging without a home?](#) (NBC News San Diego, 6/25 mins)

[Why do older adults become homeless?](#) (Dr. Jennifer Molinsky, 2:35)

[Homelessness and Older Adults - Ms. Queenie's Experience](#) (4:15)

[Homelessness and Older Adults - why older adults are experiencing homelessness](#) (Kim Reeder, Advocate, 4:40)

[Homelessness and Older Adults - the dynamics of older adult homelessness](#) (Dr. Margot Kushel, 5:15)

[What older adults need is housing](#) (Dennis Culhane, 5:03)

[Obstacles older adults face when seeking homeless assistance](#) (Dr. Jennifer Molinsky, 3:15)

[How homelessness and healthcare systems can work together](#) (Dr. Margot Kushel, 6:52)

15

At a Glance

WHAT'S DRIVING HOMELESSNESS AMONG OLDER ADULTS

5 million The number of people 65 and older living in the United States

2.35 million The number of people 65 and older living in the United States who are experiencing homelessness

138,098 The number of people 65 and older living in the United States who are experiencing homelessness

\$554 The average monthly rent for a one-bedroom apartment in the United States

\$1,702 The average monthly rent for a one-bedroom apartment in the United States

7.3 million The number of people 65 and older living in the United States who are experiencing homelessness

9 Facts About the Impending Senior Homelessness Crisis and How We Can Stop It

May 26, 2021

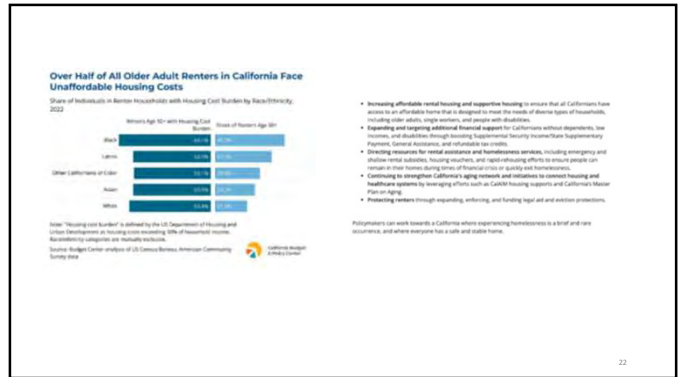
The number of adults ages 65 and older experiencing housing instability and homelessness has rapidly increased in recent years and is expected to accelerate. Homeless seniors are rapidly being released and sent to overcrowded shelters and streets. The impact of the crisis is being felt in every community across the country. The crisis is not just a housing crisis, it is a health crisis. The crisis is not just a housing crisis, it is a health crisis. The crisis is not just a housing crisis, it is a health crisis.

1. Older adults are the fastest growing (70+) age group experiencing homelessness.
2. The number of older adults experiencing homelessness has increased by 100% since 2010.
3. Without proactive policy, the number of older adults experiencing homelessness will triple by 2030.
4. The number of older adults experiencing homelessness is expected to reach 7.3 million by 2030.
5. The number of older adults experiencing homelessness is expected to reach 7.3 million by 2030.
6. The number of older adults experiencing homelessness is expected to reach 7.3 million by 2030.
7. The number of older adults experiencing homelessness is expected to reach 7.3 million by 2030.
8. The number of older adults experiencing homelessness is expected to reach 7.3 million by 2030.
9. The number of older adults experiencing homelessness is expected to reach 7.3 million by 2030.

16



21



22



23



24

What are the particular needs of older adults experiencing homelessness?

Older adults experiencing homelessness face a higher rate of death than younger adults. This is due to a variety of factors, including the fact that older adults are more likely to have chronic health conditions, and they are more likely to be living alone. The need for affordable housing is particularly acute for older adults, as they are more likely to have lower incomes and are more likely to be living in substandard housing. The need for supportive services, such as food assistance, is also high for older adults.

Long-term housing assistance and supports available through the Medi-Cal program

The Medi-Cal program provides a variety of services to older adults, including long-term care services, home care services, and community care services. These services are designed to help older adults live safely and independently in their homes. The Medi-Cal program also provides financial assistance for housing, such as rent subsidies and utility assistance.

Specific Policy Recommendations

- Expand the scope of Medi-Cal long-term care services to include more services for older adults.
- Expand the scope of Medi-Cal home care services to include more services for older adults.
- Expand the scope of Medi-Cal community care services to include more services for older adults.
- Expand the scope of Medi-Cal financial assistance for housing to include more services for older adults.

California

Across California, there is a shortage of rental homes affordable and available to extremely low-income households (ELI), whose incomes are at or below the poverty guideline or 30% of their area median income (AMI). Many of these households are severely cost burdened, spending more than half of their income on housing. Severely cost burdened poor households are more likely than other renters to sacrifice other necessities like healthy food and healthcare to pay the rent, and to experience unstable housing situations like evictions.

1,288,946 or 21% of California's population is ELI

\$35,030 Average income for ELI households

\$103,184 Average income for non-ELI households

78% of ELI households are severely cost burdened

51% of ELI households are extremely low-income

Affordable and Available Homes per 100 Renter Households

Housing Cost Burden by Income Group

Older Adults Served by Homelessness Programs in California

The first report of a study using the California Homelessness Data System (CHDS) to understand how homelessness programs are serving older adults. The study found that older adults are more likely to be living alone, have lower incomes, and have more health conditions than younger adults. The study also found that older adults are more likely to be living in substandard housing and are more likely to be experiencing homelessness.

Outcomes for Older Adults Served by Homelessness Programs

The study found that older adults who were served by homelessness programs had higher rates of housing stability, higher rates of income, and higher rates of health stability than those who were not served by homelessness programs. The study also found that older adults who were served by homelessness programs had higher rates of social support and higher rates of self-efficacy.

Conclusion

The study found that older adults who were served by homelessness programs had better outcomes than those who were not served by homelessness programs. This suggests that homelessness programs are effective in helping older adults achieve housing stability, income, and health stability.

California's Homelessness Response System Acts to Serve those in Need

The California Homelessness Response System (CHRS) is a system of services designed to help people experiencing homelessness. The CHRS includes a variety of services, including housing, food, clothing, and healthcare. The CHRS also provides financial assistance for housing, such as rent subsidies and utility assistance.

People Experiencing Homelessness who California Served

The CHRS served 4,169 people in 2023. Of these, 3,942 were people in families with children, and 1,211 were people in families without children. The CHRS also served 1,211 people in families with children, and 1,211 people in families without children.

San Bernardino County

San Bernardino County served 1,211 people in 2023. Of these, 1,211 were people in families with children, and 1,211 were people in families without children. The CHRS also served 1,211 people in families with children, and 1,211 people in families without children.

2025 San Bernardino Continuum of Care Point-in-Time Count

How Old Are You?

Table 9 offers a breakdown by age for adults according to HUD required age groups.

Approximately half (50.8%) of adults were age 45 or younger: 3.4% were age 18 - 24, 18.3% were age 25 - 34, and 29.1% were age 35 - 44.

Approximately half (48.2%) of adults were age 45 or older: 22.3% were age 45 - 54, 18.3% were age 55 - 64, and 7.9% were age 65+.

Table 9: Breakdown by Age for Adults

Age	Number	Percent
Age 18 - 24	89	3.4
Age 25 - 34	477	18.3
Age 35 - 44	799	29.1
Age 45 - 54	506	22.3
Age 55 - 64	488	18.3
Age 65 +	386	7.9
Total	2,627	100

The following table provides a breakdown by age of the sheltered population of 1,201 adults and children as required by HUD.

Table 10: Sheltered Population by Age

Age	Number	Percent
Under age 12	236	19.7
Age 12-19	85	7.1
Age 20-24	189	15.7
Age 25-34	254	21.1
Age 35-44	183	15.2
Age 45-54	107	8.9
Age 55 +	62	5.2
Total	1,201	100

29

2025 San Bernardino Continuum of Care Point-in-Time Homeless Count

540 (14% of the total) People Were Identified as Experiencing Homelessness in the West Valley Region

	Sheltered	Unsheltered	Total	+/- 2024
Countywide	1,201 (+1)	2,620 (-435)	3,821	-434 (10.2%)
West Valley Region	80 (-13)	460 (+53)	540	+40 (8%)
Chino	0	15	15	-28
Chino Hills	0	3	3	-4
Montclair	0	38	38	-36
Ontario	39	258	297	+100
Rancho Cucamonga	7	113	120	+37
Upland	34	33	67	-29
Fontana	93	271	364	+63

30

2025 San Bernardino CoC Point-in-Time Homeless Count & Survey

Unsheltered Persons by Subpopulation – West Valley Region Cities

Jurisdiction	Unsheltered Adults	Unsheltered Females	Older Adults (55+)	Transitional Aged Youth 18-24	People of Color	Previously in Foster Care	Incarcerated last 12 mos.	Income <\$1000	5+ Time Homeless last 12 mos.	Persons in Households w/Children
County	2,620	780 (30%)	696 (27%)	89 (3%)	1,697 (65%)	189 (14%**)	301 (23%**)	1,236 (88%**)	502 (36%**)	26 (1%)
Chino	15 (14*)	2 (14%)	3 (21%)	1 (7%)	7 (7%)	1 (7%)	4 (29%)	11 (79%)	5 (36%)	???
Chino Hills	3 (0*)	--	--	--	--	--	--	--	--	???
Montclair	38 (2*)	--	--	--	--	--	--	--	--	???
Ontario	258 (111*)	35 (32%)	28 (25%)	7 (6%)	79 (71%)	9 (8%)	37 (33%)	97 (87%)	39 (35%)	???
Rancho Cucamonga	113 (64*)	12 (19%)	19 (30%)	3 (5%)	38 (59%)	6 (9%)	17 (27%)	54 (84%)	18 (28%)	???
Upland	33 (23*)	6 (26%)	10 (43%)	0	13 (57%)	4 (17%)	8 (35%)	20 (78%)	8 (35%)	???
Fontana	270 (148*)	39 (26%)	???	???	120 (81%)	24 (16%)	35 (24%)	124 (84%)	71 (48%)	???

*Survey sample

**Survey sample size 1,397

31

Inland Coalition on Aging

INLAND EMPIRE Master Plan for Aging 2025-2028

Vision
A community where older adults, adults with disabilities, and caregivers age well.

Key Priority Areas

In February 2024, the Inland Coalition on Aging (ICA) established four specialized workgroups led by local experts. For a list of workgroup chairs and participants, refer to Appendix B. These groups spent six months developing concrete actions to transform our vision into reality.

The plan surfaces their work through five key areas, each supported by strategies and objectives to drive action over the next several years.

- Housing as Home & Healthcare**
- Transportation for All Ages, Abilities & Regions**
- Caring for Alzheimer's Disease & Related Dementias**
- Age- and Disability-Friendly Behavioral Health & Social Support**
- Safety, Respect & Equity in Aging**

The five priority areas focus on social determinants of health—non-medical factors influencing health. Social determinants of health are the conditions under which people are born, grow, live, work, and age.

Social determinants of health can include access to:

- Medical care, nutritious food, and functioning abilities
- Education and health literacy
- Ethnicity and cultural orientation
- Family and social support networks
- Gender
- Housing and transportation resources
- Lifelong and communication capabilities
- Access to safe communities and recreational facilities
- Job security
- Social insurance
- Senior services and support

Social determinants of health often occur "upstream" and can be complex social pathways that link health with social disadvantage, risk exposure, and social inequalities. Community determinants of an individual's health, such as health behaviors, do not occur in a vacuum and are also impacted by social determinants of health.

Inland Empire Master Plan for Aging | 18

32



33



34

Building A Connected Community of Care in the West Valley Region

- **Developing an Effective Regional Housing Crisis Response System**
 - An efficient and coordinated process that
 - Diverts people from imminent homelessness whenever possible
 - Moves people from homelessness to housing as quickly as possible
- **System of Care Asset Mapping/Resource Inventory**
 - Developing a “real-time” inventory of shelter & housing-related resources
 - Identifying and filling the gaps in services
- **Care Coordination that Gets Results**
 - Networking / Build relationships / Form partnerships
 - Centralized-coordinated referral system (*Regional Request for Referral Assistance*)
 - Warm handoffs / Closed loop referrals
 - Case Conferencing / Real-time “Master List”
 - Target population strategies/initiatives
- **West Valley Regional Working Group – 3rd Wednesdays of the month, 10:00am**
 - Seeking participation from at least one representative from each city and regional service partners
 - **Next Meeting – No Meeting in September**


35



36

What's that headline?

When asked to envision a headline in 2030 celebrating the outcomes of a collective effort to meet the needs of older adults experiencing homelessness, design team members wrote:




It Takes a Village and I Found Mine
West Valley Restores Hope for Homeless Seniors: Pilot program aims to tackle housing insecurity for older adults
"Housing: A human right, not a privilege."

Mission Accomplished: Welcome Home Seniors
San Bernardino County Reaches Net Zero for Homeless Seniors: Cross-sector partnership creates permanent housing solutions for over 500 homeless seniors in San Bernardino County

Welcome Home Seniors: Success is possible through collaboration. We are our neighbor's keepers.

San Bernardino County Commits to No Senior Left Unsheltered: Cross-sector public-private partnership commits \$100 million to ensure no county resident over 50 will be homeless

Golden Sneakers Stepping into Housing: What began as a call for help became a testimony as a community together to lift a family from despair to destiny
"Step by step leads us HOME"



37

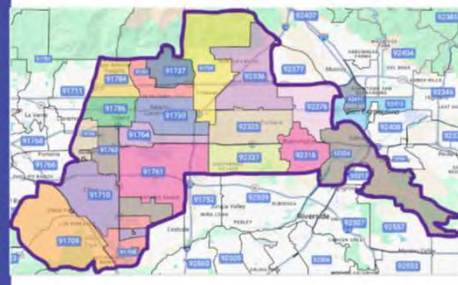
COLLABORATORY NAME PROPOSAL

Community Care and Housing Solutions for Aging Adults (CCAHSAA) "CASA" Collaboratory




38

DEFINING THE WEST VALLEY REGION



Is this the right boundary to define our region for the work?



39

COLLABORATORY DESIGN



Phase 1: Landscape Analysis & Set Up
 July - September 2025
 (3 months)

Phase 2: Collaborative Improvement Work
 October 2025 - March 2027
 (18 months)

Phase 3: Harvesting and Summative Evaluation
 April 2027 - July 2027
 (3 months)



40



COLLABORATORY DESIGN

Phase 1: Landscape Analysis & Set Up
July – September 2025
(3 months)

- Landscape analysis
- Finalize design
- Recruit participants



41



COLLABORATORY DESIGN

Phase 2: Collaborative Improvement Work
October 2025 – March 2027
(18 months)

- Kick-off in September
- Alternating **Action Periods** (workgroups advancing chartered projects with 120-day goals) and **Workshops** (in-person meetings to assess progress and plan ahead)
- Workshops planned for October 2025, March 2026, September 2026, and March 2027



42



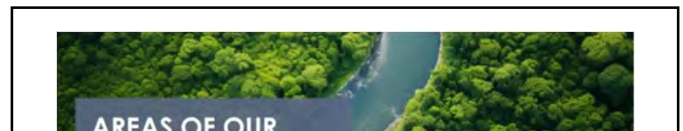
COLLABORATORY DESIGN

Phase 3: Harvesting and Summative Evaluation
April 2027 – July 2027
(3 months)

- Evaluation and harvesting happening throughout
- Plus, dedicated space after the collaborative
- Highlight the work to inform the field



43



AREAS OF OUR WORK TOGETHER


Strategies that help understand the population

Strategies that help understand the system

Interventions to impact the system

Strategies that understand and ensure sustainability

- Workgroups will charter projects and set 90–120-day goals to advance during Action Periods.
- Workgroup time commitment varies based on the workgroup, and may include additional calls or offline work time to advance the projects. The work and timeline is determined by each Workgroup.
- Workgroups will be comprised of people with roles closely tied to the project topic



44



PORTFOLIO OF PROJECTS

Data Intelligence & Information Sharing

Case Conferencing

Creative Housing & Stability Solutions

Optimizing Community-Based Care Coordination

- Proposing four main projects that workgroups will advance via chartered 90-120-day goals and work during Action Periods
- The work on each may start and end at different times
- New projects may emerge as the work evolves



45

Timeline of Phase 2: Collaborative Improvement Work Activities (18 Months)

Collaborative Improvement Activities	2025			2026												2027		
	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Workshop 1 (Formal Kick Off)	X																	
Action Period 1		X	X	X	X													
Workshop 2						X												
Action Period 2							X	X	X	X								
Workshop 3											X							
Action Period 3												X	X	X	X			
Workshop 4																X		
Wrap Up Improvement Work																	X	X

46

Strategies Selected by the Group

Types of Strategies	Strategies Selected by the Group
Strategies that help understand the population	<ul style="list-style-type: none"> Collect and review existing reports and analysis of the Older Adult Homeless Population Key Informant Interviews of those intersecting with the Population and people with lived experience of older adult homelessness 360 Degree Population Data Analysis of Homeless Older Adults
Strategies that help understand the system	<ul style="list-style-type: none"> Complete System of Care Asset Mapping for Homeless Older Adults Build competency in understanding existing health resources across into Homeless Response system Develop a workflow and roll out potential placement options Build a workflow for understanding prognosis and linking to appropriate services for vulnerable homeless older adults Assess use of current CalAIM funding streams and services (Recovery Case, Short Term Post-Hospitalization, etc.) and determine if a workflow is needed to integrate this in community delivery
Interventions to impact the system	<ul style="list-style-type: none"> Pilot with 1-2 CalAIM providers to meet population needs Pilot practice cross sector case conferencing with the hospital for high utilizing homeless older adults Pilot a tailored special response team for complex homeless older adults
Strategies that understand and ensure sustainability	<ul style="list-style-type: none"> Understand how existing financial structures to support this work (including blending and building strategies) Develop leadership and workforce capacity plans to support this work Develop shared ownership of the system



47

Outcomes Prioritized by the Group

Area	Impact	Influence	Leverage	Learning
Definition	Changes in people Individuals, larger populations, and societies – and changes in ecosystems or environment. May be at: Programmatic, Population, and/or Societal levels	Changes in systems Ways in which systems interact and can change	Changes in systems especially funding, staffing, other resources (e.g., new services)	Reflection & Adaptation Practices that create space and muscle for reflection and adaptation, learning, practices and principles, community advisory groups, inclusive language
Potential Measures	<ul style="list-style-type: none"> All overall and stratified by key equity/sociodemographic variables Well-being of older adults experiencing homelessness in West Valley, including roll up to are thriving, struggling, suffering Health care outcomes: Markers of needs conclusively being met (e.g., unnecessary ED utilization, 30-day readmissions, suicide management) Housing-related outcomes: Housing placement, sheltered homelessness See next slide for potential measures 	<ul style="list-style-type: none"> Practice changes (created and sustained) in the way providers work to support older adults experiencing homelessness Triage pathway built for older adults across sectors Competency built to assess prognosis and link to appropriate resources across sectors Length of time from referral to appropriate service connection for older adults Partnerships or collaborations: <ul style="list-style-type: none"> Built/sustained between homeless response system & health care Strengthened in community / community-based organizations / people with lived experience City, County, and elected officials 	<ul style="list-style-type: none"> Financing for sustainability of the approach Leveraging CalAIM Staffing roles and levels in homeless response system/ health care meet the new system design and practice workflow Scaling learning and practices from this system to other sub-populations in this community and to new communities 	<ul style="list-style-type: none"> Meaningful and sustained engagement of those most affected (older adults / their families) in learning and ongoing system design and improvement Sharing and streamlining honors multiple experiences, perspectives, ways of knowing Data and products are clear and inclusive Those most affected feel valued and respected, able to fully partner in the work

48



City of Ontario Housing Services Department is Hosting a Community Resource Fair - RSVP Vendor Link

I'm reaching out to invite you to participate in our upcoming Community Resource Fair. This event is designed to connect and support low-income individuals, veterans, and families who are experiencing homelessness or facing housing instability.

We're bringing together local partners and service providers—like you—who are passionate about making a difference. This is an opportunity to connect with the community, share your valuable resources, and provide direct support to those who need it most. In addition to essential services, we'll be offering family-friendly activities and games to create a welcoming and uplifting environment for all attendees.

Event Details:

-  **Date:** Saturday, November 8, 2025
-  **Time:** 9:00 AM – 2:00 PM
-  **Location:** Anthony Community Center - 1240 W. 4th St., Ontario, CA 91762

Interested in joining us?

Please RSVP using the link below:

 [RSVP Ontario HSD - Community Resource Fair](#)

More details to follow! We appreciate your partnership and support, and we'd be honored to have you be part of our event. Please let us know if you have any questions.

Thank you!
Munoz
Management Analyst
City of Ontario | Housing Services Department
get me: munozm31@cityofontario.ca | munozm31@cityofontario.ca | [909.395.2752](tel:9093952752)
munozm31@cityofontario.ca | www.cityofontario.gov

51



Financial Management Best Practices

1.5 (Power-Packed Day) or 3 (Choose Your Own Path)

Session 1

- 1. Financial Management Fundamentals
- 2. Financial Management Fundamentals
- 3. Financial Management Fundamentals
- 4. Financial Management Fundamentals
- 5. Financial Management Fundamentals

Session 2

- 1. Financial Management Fundamentals
- 2. Financial Management Fundamentals
- 3. Financial Management Fundamentals
- 4. Financial Management Fundamentals
- 5. Financial Management Fundamentals

What You'll Get:

- Increased knowledge of financial grants
- Hands-on experience with financial management
- Tools and tips for creating grant proposals and increasing your ability to access funds
- Master knowledge of key requirements of CFCF

Session 3

- 1. Financial Management Fundamentals
- 2. Financial Management Fundamentals
- 3. Financial Management Fundamentals
- 4. Financial Management Fundamentals
- 5. Financial Management Fundamentals

The WJ.N.G. Foundation Presents

3RD ANNUAL

BREAST CANCER Awareness Seminar

OCTOBER 11, 2025

FREE EVENT

ANTHONY MUNOZ COMMUNITY CENTER
1240 W. FOURTH STREET
ONTARIO, CA 91762

Dinner & Live music

RSVP

<https://shorturl.at/A1z8v>

Registration is free

Celebration Development Center
5000 Ardmore and South Alhambra



**San Bernardino County Probation
Homeless Outreach Unit is hosting
San Bernardino Superior Court
Shelter Treatment Court**

Event Date:
September 24, 2025 from 9 - Noon

Location:
Heritage Park
1905 Orange Ave., Redlands CA

Shelter Court will assist the county's homeless and transient population with outstanding misdemeanor cases, infractions, citations, and past fines and fees. The goal is to assist those in need by bringing the Court to them. Local Community-Based Organizations and County Service Providers will be present to offer services.

A referral must be submitted by September 15, 2025. Call or visit the referenced information to the listed number or address below.

Provide the following to the Homeless Outreach Unit:
Full Legal Name, DOB, and Photo I.D.

Probation Homeless Outreach Unit or (909) 756-0014

**The County of San Bernardino Presents
Veterans Stand Down
& Shelter Court**

We are serving all Veterans, their dependents and the community of San Bernardino County.

SERVICES & RESOURCES AVAILABLE

- Housing Assistance
- Food Assistance
- Employment Information
- County Resources
- Personal Hygiene Kits
- Medical and Dental Exams
- Legal Services
- Veterans Benefits Information
- Mental Health Consultation
- DAV Services
- Shower and Showers
- Clothing (Borrow)
- Unemployment Assistance
- State Disability Information
- Social Security Information
- Mental Health Consultation

**WEDNESDAY
OCT 8, 2025
10 AM - 2 PM**

Rialto City Park

San Bernardino Ave. Rialto

"A hand up, not a handout"

San Bernardino County Probation Homeless Outreach Unit

53

CA-609 San Bernardino City and County Continuum of Care
Membership Application Instructions

Thank you for your interest in participating in the CA-609 San Bernardino City and County Continuum of Care (CoC). The CoC is a regional or local governing body that coordinates housing and service funding for homeless families and individuals. The CoC is designed to provide a community-wide commitment to the goal of ending homelessness and to provide funding for efforts by non-profit providers, cities, and local governments.

The CoC is made up of designated representatives of a "broad range of stakeholders" as defined below. Relevant organizations and individuals within San Bernardino County may apply to be considered for membership in the U.S. Department of Housing and Urban Development (HUD) designated CA-609 San Bernardino City and County CoC.

Membership Eligibility: Section 201.5 of Title 24 of the Federal Regulations defines "broad range of stakeholders" as including: nonprofit housing providers; public housing providers; faith-based organizations; governments; businesses; advocates; public housing authorities; school districts; social service providers; mental health agencies; hospitals; community affordable housing developers; non-profit owners; organizations that serve veterans and homeless and formerly homeless individuals.

Applicants must designate one representative on their application to vote on behalf of their organization. If they are unable to attend a CoC meeting, a voting representative from an organization may authorize another individual from their organization to be their alternate. A roster of voting representatives is maintained and updated at each meeting.

CoC Member Duties Include:

- (1) Attend meetings of the CoC membership, with published agendas, at least twice a year;
- (2) Adopt and follow a written process for voting a ballot by vote on behalf of the CoC, which process must be reviewed, updated, and approved by the CoC at least once every 3 years;
- (3) Prepare and submit recommendations, information, or proposals;
- (4) In consultation with the collaborative applicant and the HUD Lead, develop, follow, and update annually a governance charter, which will include all provisions and policies needed to comply with HUD requirements as prescribed by HUD, and a code of conduct and dispute resolution process for the board, its chair(s), and any person acting on behalf of the board.

To view a full list of CoC duties and responsibilities click [here](#).

You can complete a membership application online at <https://hshb.sheriff.org> or complete a PDF of the application and email it to membership@hshb.sheriff.org or mail it to:

The Office of Homeless Services
300 E. Hospitality Lane, Suite 200
San Bernardino, CA 92410-0044

CA-609 San Bernardino City and County Continuum of Care
Membership Application

Submittals: Please email this form to membership@hshb.sheriff.org or mail it to the Office of Homeless Services, 300 E. Hospitality Lane, Suite 200, San Bernardino, CA 92410-0044.

Organization Name	Date	
Executive Director		
Business Address		
City	State	Zip
Email Address		
Phone Number		
Look in Organization's Website		
Primary CoC Values		
Organization Name		
City		
State		
Zip		
Phone Number		
Email Address		
Signature		
Print Name		
Print Address		
Print City		
Print State		
Print Zip		
Print Phone Number		
Print Email Address		

Check all that apply to your organization's role in the CoC:

Role	Yes	No
1. Local Government		
2. Faith-Based Organization		
3. Nonprofit Housing Provider		
4. Public Housing Authority		
5. Business		
6. Advocate		
7. Public Housing Authority		
8. Social Service Provider		
9. Hospital		
10. Community Affordable Housing Developer		
11. Non-Profit Owner		
12. Other		

By completing this application, the applicant agrees to be bound by the terms and conditions of the CoC, as defined in the CoC's governance charter. The applicant agrees to provide a copy of the CoC's governance charter to the Office of Homeless Services.

Signature: _____ Title: _____

54

Office of Homeless Services Contact List			
Administration			
Thomas O'Brien, Chief thomas.obrien@shsb.org 909-591-5847	Christopher Brown, Administrative Manager christopher.brown@shsb.org 909-591-5812	Keya Brown, Executive Administration Assistant keya.brown@shsb.org 909-591-5812	
Homeless Management Information System (HMIS)			
homeless@shsb.org			
Terrie Williams, Business Systems Analyst II terrie.williams@shsb.org 909-591-5812	Anthony Hines, Administrative Systems Analyst II anthony.hines@shsb.org 909-591-5812	Neeraj Rana, Office Specialist neeraj.rana@shsb.org 909-591-5812	
Molly Davis, Administrative Systems Technician molly.davis@shsb.org 909-591-5812	Neeraj Rana, Office Specialist neeraj.rana@shsb.org 909-591-5812		
Customer Department			
Carla Eilers, Administrative Supervisor I carla.eilers@shsb.org 909-591-5812	Jason Davidson, Staff Analyst II jason.davidson@shsb.org 909-591-5812	Neeraj Rana, Staff Analyst II neeraj.rana@shsb.org 909-591-5812	
Matthew Pearson, Staff Analyst II matthew.pearson@shsb.org 909-591-5812	Neeraj Rana, Staff Analyst II neeraj.rana@shsb.org 909-591-5812		
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Page 1 of 1			

Programs Department			
Amelia Ford, Administrative Supervisor I amelia.ford@shsb.org 909-591-5812	Charles Davis, Program Specialist I charles.davis@shsb.org 909-591-5812	Colleen Hernandez, Program Specialist I colleen.hernandez@shsb.org 909-591-5812	
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Anthony Davis, Office Assistant II anthony.davis@shsb.org 909-591-5812	Neeraj Rana, Office Assistant II neeraj.rana@shsb.org 909-591-5812		
Financial Department			
Lynne Weiss, Budget Officer lynne.weiss@shsb.org 909-591-5812			
Neeraj Rana, Accountant II neeraj.rana@shsb.org 909-591-5812			
Housing and Disability Advocacy Program (HDAP)			
Neeraj Rana, Housing Program neeraj.rana@shsb.org 909-591-5812			
Page 1 of 1			

55