2024/2025
Community Needs Assessment and Community Action Plan

California Department of Community Services and Development

Community Services Block Grant
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Introduction

The Department of Community Services and Development (CSD) has developed the 2024/2025 Community Needs Assessment (CNA) and Community Action Plan (CAP) template for the Community Services Block Grant (CSBG) Service Providers network. Each agency must submit a completed CAP, including a CNA to CSD on or before June 30, 2023. Changes from the previous template are detailed below in the “What’s New for 2024/2025?” section. Provide all narrative responses in 12-point Arial font with 1.15 spacing. When the CNA and CAP are complete, they should not exceed 65 pages, excluding the appendices.

Purpose

Public Law 105-285 (the CSBG Act) and the California Government Code require that CSD secure a CAP, including a CNA from each agency. Section 676(b)(11) of the CSBG Act directs that receipt of a CAP is a condition to receive funding. Section 12747(a) of the California Government Code requires the CAP to assess poverty-related needs, available resources, feasible goals, and strategies that yield program priorities consistent with standards of effectiveness established for the program. Although CSD may prescribe statewide priorities or strategies that shall be considered and addressed at the local level, each agency is authorized to set its own program priorities in conformance to its determination of local needs. The CAP supported by the CNA is a two-year plan that shows how agencies will deliver CSBG services. CSBG funds are by their nature designed to be flexible. They shall be used to support activities that increase the capacity of low-income families and individuals to become self-sufficient.

Federal CSBG Programmatic Assurances and Certification

The Federal CSBG Programmatic Assurances are found in section 676(b) of the CSBG Act. These assurances are an integral part of the information included in the CSBG State Plan. A list of the assurances that are applicable to CSBG agencies has been provided in the Federal Programmatic Assurances section of this template. CSBG agencies should review these assurances and certify that they are complying.

State Assurances and Certification

As required by the CSBG Act, states are required to submit a State Plan as a condition to receive funding. Information provided in agencies’ CAPs will be included in the CSBG State Plan. Alongside Organizational Standards, the state will be reporting on State Accountability Measures in order to ensure accountability and program performance improvement. A list of the applicable State Assurances and the agency certification for them are found in the State Assurances section of this template.
Compliance with CSBG Organizational Standards

As described in the Office of Community Services (OCS) Information Memorandum (IM) #138 dated January 26, 2015, CSBG agencies will comply with implementation of the Organizational Standards. CSD has identified the Organizational Standards that are met through the completion of the CAP and the CNA. A list of Organizational Standards that will be met upon completion of the CAP can be found in the Organizational Standards section of this template. Agencies are encouraged to utilize this list as a resource when reporting on the Organizational Standards annually.

What’s New for 2024/2025?

**Community Action Plan Workgroup (CAPWG).** In summer 2022, CSD organized a workgroup to inform the development of the 2024/2025 CNA and CAP. Workgroup members were selected from the CSBG Service Provider network and the ROMA Coalition. The feedback CSD received from the workgroup has informed not only the 2024/2025 template but also the accompanying CAP training scheduled for mid-December 2022.

**Public Hearings - Additional Guidance.** The public hearing requirement has been modified. Two years ago, we were in an active pandemic due to the COVID-19 virus. The public health guidelines throughout the state advised communities against large gatherings. CSD advised agencies to follow public health protocols and hold public meeting virtually if an in-person meeting was not an option. For the public hearing on the 2024/2025 draft CAP, CSD requests that agencies conduct in-person, virtual, or hybrid public hearings. While transmission rates of COVID-19 remain high in many communities, agencies are requested to follow their local public health guidelines when deciding in which format to conduct the public hearing. For more information, please see the Public Hearing section of this template.

**CNA Helpful Resources.** The Helpful Resources section in Part I: Community Needs Assessment contains additional data sets and resources. On recommendation of the CAPWG, CSD has added data sets from the Massachusetts Institute of Technology, the University of Wisconsin, and a point-in-time data set from the U.S. Department of Housing and Urban Development. We have also added links to the Local Agencies Portal where you can find examples of completed Community Needs Assessments and project timelines from the CSBG Service Providers network.

**Part II: Community Action Plan.** The number of questions in the Tripartite Board of Directors, Service Delivery System, Linkages and Funding Coordination, and Monitoring sections has changed. Questions were removed because it was determined that agencies meet these reporting requirements through other CSBG work products such as monitoring and Organizational Standards. In the Service Delivery System and Linkages and Funding Coordination sections, new questions were added. These questions will be covered during the template training webinar.

**Sunset of COVID-19 Flexibilities.** In the 2022/2023 template, CSD allowed agencies to indicate on selected questions whether there were changes to the response provided in the 2020-2021 CAP or whether agencies would like CSD to accept the 2020-2021 response without adoptions. This option was an effort to reduce administrative burden on agencies during the COVID-19 pandemic. While CSD has retained some of the flexibilities developed in the previous template, the option for agencies to reference responses in their prior CAP has been discontinued.
**Response and Community Awareness.** This section replaces the “Additional Information” section in the previous template. For 2024/2025 CSD has included questions pertaining to Diversity, Equity, and Inclusion (DEI). The questions about disaster preparedness have been retained from the previous template. While none of this information is directly mandated by statute, CSD is requesting the information to gauge where the CSBG Service Provider network is as a whole on these topics. Responses to the questions in this section are mandatory.

**ROMA Certification Requirement.** Under section 676(b)(12) of the CSBG Act, CSD and all CSBG agencies are required to assure that we will participate in a Results Oriented Management and Accountability System “not later than fiscal year 2001.” CSD and the CSBG Service Providers have fulfilled this requirement through various approaches. With respect to the ROMA certification of the network CAPs (Organizational Standard 4.3), CSD has allowed agencies to submit their CAP without the signature of a ROMA trainer or implementer if the agency did not have a ROMA trainer or implementer on staff. CSD staff who had the requisite training would certify those CAPs on behalf of the agencies. This process will still be in place for the 2024/2025 template. However, for the 2026/2027 template, CSD will require that CSBG Service Providers provide their own ROMA certification either by staff who have the required ROMA training or in partnership with another agency or organization. CSBG Service Providers should begin formulating a plan to fulfill this requirement.
Checklist

☐ Cover Page and Certification
☐ Public Hearing(s)

Part I: Community Needs Assessment
☐ Narrative
☐ Results

Part II: Community Action Plan
☐ Vision Statement
☐ Mission Statement
☐ Tripartite Board of Directors
☐ Service Delivery System
☐ Linkages and Funding Coordination
☐ Monitoring
☐ Data Analysis, Evaluation, and ROMA Application
☐ Response and Community Awareness
☐ Federal CSBG Programmatic Assurances and Certification
☐ State Assurances and Certification
☐ Organizational Standards
☐ Appendices
COMMUNITY SERVICES BLOCK GRANT (CSBG)
2024/2025 Community Needs Assessment and Community Action Plan
Cover Page and Certification

Agency Name: San Mateo County Human Services Agency
Name of CAP Contact: Jessica Silverberg
Title: Human Services Manager
Phone: (650) 802-3378
Email: jsilverberg@smcgov.org

CNA Completed MM/DD/YYYY: (Organizational Standard 3.1)

Board and Agency Certification
The undersigned hereby certifies that this agency complies with the Federal CSBG Programmatic, and State Assurances as outlined in the CSBG Act and California Government Code, respectively for services provided under the Federal Fiscal Year 2024/2025 Community Action Plan. The undersigned further certifies the information in this Community Needs Assessment and the Community Action Plan is correct and has been authorized by the governing body of this organization. (Organizational Standard 3.5)

Supervisor Noelia Corzo
Board Chair (printed name) Board Chair (signature) Date
Ken Cole
Executive Director (printed name) Executive Director (signature) Date

Certification of ROMA Trainer/Implementer (If applicable)
The undersigned hereby certifies that this agency’s Community Action Plan and strategic plan documents the continuous use of the Results Oriented Management and Accountability (ROMA) system (assessment, planning, implementation, achievement of results, and evaluation).

NA
NCRT/NCRI (printed name) NCRT/NCRI (signature) Date

CSD Use Only

<table>
<thead>
<tr>
<th>Dates CAP (Parts I &amp; II)</th>
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<tbody>
<tr>
<td>Received</td>
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Public Hearing(s)
California Government Code Section 12747(b)-(d)

State Statute Requirements
As required by California Government Code Section 12747(b)-(d), agencies are required to conduct a public hearing for the purpose of reviewing the draft CAP. All testimony presented by low-income individuals and families during the public hearing shall be identified in the final CAP. Agencies shall indicate whether or not the concerns expressed by low-income individuals and families have been addressed. If an agency determines that any of the concerns have not been addressed in the CAP, the agency shall include in its response document, information about the concerns and comment as to their validity.

Guidelines

Notice of Public Hearing
1. Notice of the public hearing and comment period must be published at least 15 calendar days prior to the public hearing.
2. The notice may be published on the agency’s website, social media channels, and/or in newspaper(s) of local distribution.
3. The notice must include information about the draft CAP; where members of the community may review, or how they may receive a copy of, the draft CAP; the dates of the comment period; where written comments may be sent; date, time, and location of the public hearing; and the agency contact information.
4. The comment period should be open for at least 15 calendar days prior to the public hearing. Agencies may opt to extend the comment period for a selected number of days after the hearing.
5. The draft CAP must be made available for public review and inspection at least 30 days prior to the public hearing. The draft CAP can be posted on the agency’s website, social media channels, and distributed electronically or in paper format.
6. Attach a copy of the Notice(s) of Public Hearing as Appendix A to the final CAP.

Public Hearing
1. Agencies must conduct at least one public hearing on the draft CAP.
2. Public hearing(s) will be held in the designated CSBG service area(s).
3. Low-income testimony presented at the hearing or received during the comment period must be memorialized verbatim in the Low-Income Testimony and Agency’s Response document and appended to the final CAP as Appendix B.
4. The Low-Income Testimony and Agency’s Response document should include the name of low-income individual, his/her verbatim testimony, an indication of whether or not the need was addressed in the draft CAP, and the agency’s response to the testimony if the concern was not addressed in the draft CAP.
**Additional Guidance**

COVID-19 poses unique challenges to fulfilling the public hearing requirement. CSD asks that agencies continue to adhere to state and local public health guidance to slow the spread of the virus and ensure public safety. The health and safety of agency staff and the communities you serve is paramount. Therefore, for the purposes of fulfilling the public hearing requirement on the draft CAP, agencies may conduct the public hearing in-person, remotely, or using a hybrid model (in-person and remotely) based on the public health protocols in place in their communities.

**Public Hearing Report**

<table>
<thead>
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<tr>
<td>Post Draft CAP</td>
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<tr>
<td>Draft CAP needs to be posted 30 days before public hearing</td>
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<td>Dates of the Comment Period(s)</td>
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<td>(15 calendar days before May Meeting)</td>
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<td>Date(s) of Public Hearing(s)</td>
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<td>Location(s) of Public Hearing(s)</td>
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<td>Where was the Notice of Public Hearing published?</td>
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Part I: Community Needs Assessment
CSBG Act Section 676(b)(11)
California Government Code Section 12747(a)

**Helpful Resources**

In 2011, NASCSP published a [Community Action to Comprehensive Community Needs Assessment Tool](#) that supports planning and implementing a comprehensive CNA. The tool lays out design choices, planning steps, implementation practices, analysis, and presentation options.

The National Community Action Partnership has an [Assessment Tool](#) designed specifically for the community needs assessment process. Here you can select from a variety of county-specific data sets.

Examples of Community Needs Assessments and project timelines from agencies within the California CSBG Providers network can be found on the [Local Agencies Portal](#) under the CSBG - Resources tab. If you do not have an account or have not received CSD login credentials, please email CSD at [ExternalAccess@csd.ca.gov](mailto:ExternalAccess@csd.ca.gov).

To provide a comprehensive “picture” of the community needs in your service area(s), agencies will collect and analyze both quantitative and qualitative data. Links to several national and state quantitative data sets are given below. Local and agency data also provide information about the needs of the community.

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<th>Sample Data Sets</th>
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<td>PIT and HIC Data Since 2007</td>
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<td>Living Wage Calculator</td>
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<td><strong>California Department of Finance</strong></td>
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<td><strong>California Health and Human Services</strong></td>
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<td>Data Portal</td>
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<td>Census Tableau</td>
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1. Describe how your agency collected and included current data specific to poverty and its prevalence related to gender, age, and race/ethnicity for your service area. (Organizational Standard 3.2)

The San Mateo County CAA utilized American Community Survey Census data from 2021 5-Year Estimates related to poverty indicators like household income, those living below the poverty line, poverty rate, education level, national origins, and disabilities; and maps how it affects gender, age, and race/ethnicity in our service area.

2. Describe the geographic location(s) that your agency is funded to serve with CSBG. If applicable, include a description of the various pockets, high-need areas, or neighborhoods of poverty that are being served by your agency.

San Mateo County is located on the San Francisco Peninsula, just south of the City of San Francisco and northwest of Santa Clara County. Comprised of 448.6 square miles, San Mateo County ranks 56th out of California's 58 counties in terms of total area. Most residents live in the county's 20 cities (ex: Daly City, Redwood City, San Mateo, and South San Francisco), the majority of which comprise a highly urbanized corridor that stretches along Highway 101. Smaller communities, including some rural communities, such as Pescadero and Half Moon Bay, line the county's 40 miles of coastline west of Highway 280. CAA services are available countywide.

3. Indicate from which sources your agency collected and analyzed quantitative data for the CNA. (Check all that apply.) (Organizational Standard 3.3)

**Federal Government/National Data Sets**
- Census Bureau
- Bureau of Labor Statistics
- Department of Housing & Urban Development
- Department of Health & Human Services
- National Low-Income Housing Coalition
- National Center for Education Statistics
- Academic data resources
- Other online data resources
- Other

**Local Data Sets**
- Local crime statistics
- High school graduation rate
- School district school readiness
- Local employers
- Local labor market
- Childcare providers
- Public benefits usage
- County Public Health Department
- Other
### California State Data Sets
- Employment Development Department
- Department of Education
- Department of Public Health
- Attorney General
- Department of Finance
- State Covid-19 Data
- Other

### Agency Data Sets
- Client demographics
- Service data
- CSBG Annual Report
- Client satisfaction data
- Other

### Surveys
- Clients
- Partners and other service providers
- General public
- Staff
- Board members
- Private sector
- Public sector
- Educational institutions

### Agency Data Sets

4. If you selected “Other” in any of the data sets in Question 3, list the additional sources.

Other data sets utilized for this report include the following: San Mateo County’s 2022 Homeless Point in Count (PIT) data, Homeless Management Information System (HMIS) data, CHP’s San Mateo County Affordable Housing Needs Report, and local hospital districts community needs assessments.

5. Indicate the approaches your agency took to gather qualitative data for the CNA. (Check all that apply.) (Organizational Standard 3.3)

#### Surveys
- Clients
- Partners and other service providers
- General public
- Staff
- Board members
- Private sector
- Public sector
- Educational institutions

#### Focus Groups
- Local leaders
- Elected officials
- Partner organizations’ leadership
- Board members
- New and potential partners
- Clients
- Staff

#### Interviews
- Local leaders
- Elected officials
- Partner organizations’ leadership
- Board members
- New and potential partners
- Clients

#### Community Forums

#### Asset Mapping

### Other
6. If you selected “Other” in Question 5, please list the additional approaches your agency took to gather qualitative data.

In 2022, the Human Services Agency, Center on Homelessness convened four focus groups of people experiencing homelessness to inform the development of San Mateo County’s Strategic Plan on homelessness. Focus group discussions centered on people’s experiences accessing shelter, housing, and other services, as well as how the community can continue to receive input and guidance from people experiencing homelessness.

7. Describe your agency’s analysis of the quantitative and qualitative data collected from low-income individuals and families. (Organizational Standards 1.1, 1.2, 3.3)

To develop the Community Needs Assessment, the Human Services Agency (HSA) relies on quantitative data provided by reports drafted by state and federal public agencies, councils, and research entities to inform about specific areas such as extent of homelessness, rental market conditions, food security, transportation needs, health outcomes, and childcare and education needs. Qualitative information is gathered through focus groups with low-income individuals, key informant interviews, and regular consultations between the Human Services Agency and its community partners. The Human Services Agency also conducted two surveys to gather additional information regarding needs of low-income community members. One survey (known as the Client Survey) was a survey of people accessing safety net services and another survey (known as the Partner Survey) was a survey of community partner organizations who provide direct services to low-income community members.

The Human Services Agency also uses information gathered as part of contract monitoring to help understand community needs and need for service delivery improvement. HSA is responsible for ensuring that the contract agency, Samaritan House, is collecting and tracking the data needed to measure program goals. Samaritan House produces quarterly reports to the CAA on progress in meeting program goals. Samaritan House collects, compiles and analyzes data on all services provided. Samaritan House, the Core Service Agencies, and HSA use data collected through program reports, clients served, follow up surveys, and customer satisfaction indicators. The Human Services Agency, Samaritan House, and other community partners use this data to plan programming and address community trends and ensure that all parts of the community are accessing services and that households are maintaining housing after receiving assistance.

8. Summarize the data gathered from each sector of the community listed below and detail how your agency used the information to assess needs and resources in your agency’s service area(s). Your agency must demonstrate that each sector was included in the needs assessment; A response for each sector is required. (CSBG Act Sections 676(b)(3)(C), 676(b)(9), Organizational Standard 2.2)

A. Community-based organizations: HSA receives a wide variety of data, input and feedback from community-based organizations. The information gathered by community-based partners provides information on needs of community members, existing resources, outcomes of services, and challenges. In addition, the 2023 Partner Survey included data collected from 37 respondents, many of whom were community-based organizations, who indicated high levels of concern regarding housing/rent assistance and homelessness, as well as food.
B. Faith-based organizations: HSA has collaborated with faith-based community organizations that provide safety net and homeless services and has heard the faith-based community’s input on the importance of housing resources for all community members and also the importance of having a wide variety of services, individualized to meet each person’s needs. Faith-based partners reported that housing, rental assistance and homelessness are major concerns in their community. They also expressed concern for the need of increased access to drug and alcohol treatment.

C. Private sector (local utility companies, charitable organizations, local food banks): HSA receives input from various representatives of the private sector at various community meetings and private sector partners responded to the partner survey. Private sector partners pointed to needs for employment services, assistance with paying energy costs in addition to housing and rental assistance.

D. Public sector (social services departments, state agencies): The Human Services Agency regularly consults with partner departments in San Mateo County to understand needs and gaps among the clients they serve - including San Mateo County Health, Department of Housing, Sheriff’s Department, and cities. HSA has received input from all of these partners about the challenges that low-income community members face, including significant challenges regarding locating affordable housing, and how lack of affordable housing and housing instability have many additional impacts, from impacts on health, to long commute times, additional stress, etc.

E. Educational institutions (local school districts, colleges): The County and many local non-profits have close collaborative relationships with local educational partners. As an example, HSA partners with the County Office of Education’s liaison for students experiencing homelessness or housing instability. HSA has received input from the liaison regarding the needs of those students and families for assistance to find and maintain stable housing.

9. “Causes of poverty” are the negative factors that create or foster barriers to self-sufficiency and/or reduce access to resources in communities in which low-income individuals live. After review and analysis of the data, describe the causes of poverty in your agency’s service area(s). (Organizational Standard 3.4)
Income and Poverty
According to the 2021 American Community Survey (ACS) 5-Year estimates, median household income in San Mateo County is $136,837. This is significantly higher than the state-wide median of $84,097. Table below depicts the median income by race in San Mateo County.

However, while overall county income averages are relatively high, many people fall below the poverty level:

- 6.2% of all San Mateo County residents are living below the federal poverty level ($25,100 for a family of four).
- 8.5% of San Mateo County families with children ages 0-18 years old are living below the poverty level.

While the overall poverty rate in the county is 6.2%, poverty is much higher among groups:

- 9.6% for people of Hispanic or Latino origin
- 11.2% for African Americans
- 13.6% American Indian and Alaska Native
- 11.4% Native Hawaiian and Other Pacific Islander alone

Other groups with higher poverty rates include those with disabilities, formerly incarcerated people, and seniors living on fixed incomes. There are also some geographic areas where there are higher percentages of residents whose incomes are below the poverty level, including East Palo Alto, Redwood City, Daly City, Pacifica and Half Moon Bay.

Rental Market Conditions
One of the greatest challenges facing low-income and moderate-income people in San Mateo County is the cost of housing. According to the California Housing Partnership’s recent report, San Mateo County’s Affordable Housing Needs Report (May 2022), renters in San Mateo County need to earn 3.7 times ($59.71/hour) of the City of San Mateo’s minimum wage to afford the average asking rent of $3,105 in the County. The National Low Income Housing Coalition reports in 2022 San Mateo County residents earning minimum wage would need to work 4 full-time jobs to afford two-bedroom housing at the standard of spending 30% of gross income on gross housing costs or work one job earning at least $61.50/hr. This is about twice the state's average hourly housing wage of $39.01 to afford a two-bedroom apartment at fair market rent.

California Housing Partnership’s 2021 San Mateo County Affordable Housing Needs Report, found that San Mateo County had 24,440 low-income renter households that did not have access to an affordable home. Approximately 72% of extremely low-income (ELI) renters were paying more than 50% of their income on rent. This leaves low-income renters with little leftover for other basic need expenses such as food, medical care, and clothing. As the temporary COVID housing security policies come to an end (ex: eviction moratorium, federal COVID rent relief) San Mateo County renters face a housing market that is extremely challenging.

Community Health
Health conditions that are undiagnosed, untreated and/or under treated can lead to negative impacts on an individual’s ability to work which significantly impacts the overall health and well-being of the households they support. According to the Centers for Disease Control and Prevention (CDC), five chronic diseases or risk factors - high blood pressure, diabetes, smoking, physical inactivity, and obesity cause employees to miss days at work to the tune of $36.4 billion per year. San Mateo County Health’s latest Community Health Needs Assessment (2019) found that overall, San Mateo County is...
doing well on a broad range of community health measures. However, an examination of the current San Mateo County Health’s Community Health Dashboards (data presented below) reveals there are multiple areas of health concerns that cause individuals to miss work placing them at risk of falling into poverty:

**Arthritis and rheumatism**
- 25% of all San Mateo Medicare beneficiaries have been treated for rheumatoid arthritis or osteoarthritis

**Adult Asthma**
- 17% of adults report having been told by a health care provider that they have asthma. This value is higher than the national rate of 15%.

**Diabetes Diagnosis**
- 8% of adults in the county report having diabetes, which is lower than the state level (11%). However, for those aged 65+ the percentage increases to 14%

**Drug Use (Age-Adjusted Death Rate)**
- 12.0 deaths/100,000 population in 2020 is a significant increase since 2018 when it was 8.2 deaths/100,000.

**Heart Disease**
- 7.4% adults report having been diagnosed with heart disease and is trending to increase significantly over time. This value is higher than the 6.9% reported for the state.

**Mental Health or Emotional Problems Worsening**
- 60% of adults reported needing care for emotional or mental health or substance abuse issues who stated that they did obtain help for those issues in the past year. This is higher than the state value at 54%.

San Mateo County Health provides a data dashboard call the Health Equity Index which is a measure of how socioeconomic needs are correlated with poor health outcomes. The Health Equity Index indicators are Medicaid enrollment, income, race, employment, language, education, and poverty.

**Persons with public health insurance only**
- 16.6% persons only have who have public health coverage which includes the federal programs Medicare, Medicaid, and VA Health Care, the Children’s Health Insurance Program (CHIP); and individual state health plans.

**Adults without health insurance**
- 9.7% of adults aged 18-64 that do not have any kind of health insurance coverage

**Delayed or difficulty obtaining medical care**
- 20% of adults aged 18 and over who report having delayed or not received other medical care they felt they needed. This value has increased 4% since 2018. A delay of necessary care can lead to an increased risk of complications.

CalFresh and WIC
The onset of the decade saw a worldwide pandemic that led to an economic shutdown creating a large spike in unemployment. In San Mateo County, unemployment rose from 2.1% in February 2020 to 11.4% in April 2020 (California Department of Social Services, (CDSS)).

While the unemployment rate is once again low, indicators related to CalFresh and WIC indicate some ongoing needs. For example, CalFresh, federally known as Supplemental Nutrition Assistance Program
or SNAP, is the largest food program in California helping individuals and families stretch their food budgets. According to the California Department of Social Services’ CalFresh Data Dashboard in March 2020, when San Mateo County’s unemployment rate was 2.8% there were 20,809 individuals from 12,283 households receiving CalFresh. Comparing those figures to January 2023, the unemployment rate was 1.9%, yet 32,936 individuals comprising 20,335 households in San Mateo County were receiving CalFresh.

A similar pattern is also occurring with the Women, Infants and Children (WIC) program, a federally funded health and nutrition program, supporting pregnant women, new mothers, infants and children under age five. In January 2021 there were approximately 4900 families utilizing WIC. By December 2022 that number increased to more than 5600 families (California Department of Public Health, 2023). This demonstrates that many community members need safety net supports to meet their basic needs, due to the high costs of living, even when the unemployment rate is low.

10. “Conditions of poverty” are the negative environmental, safety, health and/or economic conditions that may reduce investment or growth in communities where low-income individuals live. After review and analysis of the data, describe the conditions of poverty in your agency’s service area(s). (Organizational Standard 3.4)

Community members with low and moderate incomes face many challenges related to housing and meeting other needs, given the extremely high cost of housing in San Mateo County. The very high cost of living in San Mateo County creates significant challenges for people to maintain housing. One of the impacts of lack of affordable housing is homelessness.

San Mateo County One Day Homeless Count and Survey 2022

The 2022 San Mateo County One Day Homeless Count and Survey found a total of 1,808 homeless people in San Mateo County on the night of the count, February 23, 2022. This number includes:

- 1,092 people experiencing unsheltered homelessness staying on streets, in cars, in recreational vehicles (RVs), or in tents
- 716 people experiencing sheltered homelessness staying in emergency shelters and transitional housing programs

This finding of 1,808 people experiencing homelessness is higher than the counts in 2015, 2017, and 2019, but lower than the counts in 2011 and 2013. The number of people experiencing unsheltered homelessness in 2022 is an increase of 191 (21%) compared to 2019. The number of people staying in shelters in 2022 is an increase of 105 (17%) compared to 2019.

On the night of the count a survey was administered to people experiencing unsheltered homelessness asking questions about their experiences of homelessness in San Mateo County. Of those surveyed, 84% reported living in San Mateo County prior to becoming homeless, and 60% were experiencing homelessness for the first time. Lengths of current episodes of homelessness varied substantially: 15% had been homeless less than one year, 36% had been homeless for one to three years, and 49% had been homeless for longer than three years.

11. Describe your agency’s approach or system for collecting, analyzing, and reporting customer satisfaction data to the governing board. (Organizational Standard 1.3)
To gauge the effectiveness of services provided, Samaritan House conducts calls to clients six months after services are provided to survey client satisfaction and follow up on housing status. These calls include requesting customer feedback on the information and referrals process, satisfaction with the services received, as well as an update on their housing status 6 months post contact with the Core Service Agency partner. All information is gathered and reported by Samaritan House to the Human Service Agency and the CAA Board.
Community Needs Assessment Results
CSBG Act Section 676(b)(11)
California Government Code Section 12747(a)
State Plan 14.1a

Table 1: Needs Table

Complete the table below. Insert row(s) if additional space is needed.

<table>
<thead>
<tr>
<th>Needs Identified</th>
<th>Level</th>
<th>Agency Mission (Y/N)</th>
<th>Currently Addressing (Y/N)</th>
<th>Agency Priority (Y/N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing/Rental Assistance – Securing and maintaining safe affordable housing in San Mateo County’s expensive housing market</td>
<td>Family</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Energy &amp; Other Utility Costs – Assistance with energy costs</td>
<td>Family</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Transportation &amp; Vehicle Repair</td>
<td>Family</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Food - Access to healthy affordable food</td>
<td>Family</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
</tbody>
</table>

**Needs Identified**: List the needs identified in your most recent CNA.

**Level**: List the need level, i.e., community or family. **Community Level**: Does the issue impact the community, not just clients or potential clients of the agency? For example, a community level employment need is: There is a lack of good paying jobs in our community. **Family Level**: Does the need concern individuals/families who have identified things in their own life that are lacking? An example of a family level employment need would be: Individuals do not have good paying jobs.

**Essential to Agency Mission**: Indicate if the identified need aligns with your agency’s mission.

**Currently Addressing**: Indicate if your agency is already addressing the identified need.

**Agency Priority**: Indicate if the identified need will be addressed either directly or indirectly.

Table 2: Priority Ranking Table

List all needs identified as an agency priority in Table 1. Insert row(s) if additional space is needed.

<table>
<thead>
<tr>
<th>Agency Priorities</th>
<th>Description of programs, services, activities</th>
<th>Indicator(s) or Service(s) Category</th>
<th>Why is the need a priority?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Housing/Rent Assistance</td>
<td>Emergency financial assistance to support maintaining or obtaining affordable housing (i.e., rental assistance, deposit, other one-time costs that</td>
<td>FNPI 4b</td>
<td>Housing in San Mateo County is very expensive and affordable housing options are limited</td>
</tr>
</tbody>
</table>
2. Energy & Other Utility Costs
   Assistance with paying energy bills (ex: assistance paying past due electricity bill)
   FNPI 4z
   Energy costs have been rising over the past few years

3. Transportation & Vehicle Repair
   Assistance with affording transportation services (car repair services when related to housing stability), and referrals to community programs such as Redi-Wheels, taxi voucher services, and bus tickets
   SRV7d
   Transportation is needed to get to work, school, medical appointments, etc.

4. Healthy Food
   Food pantries/grocery programs and hot meal programs, referrals to CalFresh and Second Harvest-supported programs
   (Supported with other funding sources, not Directly supported with CSBG funding)
   Some low-income community members struggle with affording food, given the high cost of housing and other high costs of living

**Agency Priorities:** Rank your agency’s planned programs, services, and activities to address the needs identified in Table 1 as agency priorities.

**Description of programs, services, activities:** Briefly describe the program, services, or activities that your agency will provide to address the need. Identify the number of clients to be served or the number of units offered, including timeframes for each.

**Indicator/Service Category:** List the indicator(s) (CNPI, FNPI) or service(s) (SRV) that will be reported in CSBG Annual Report.

**Why is this need a priority:** Provide a brief explanation about why this need has been identified as a priority. Connect the need with the data. (CSBG Act Section 676(b)(3)(A))

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**Part II: Community Action Plan**

CSBG Act Section 676(b)(11)
California Government Code Sections 12745(e), 12747(a)
California Code of Regulations, Title 22, Division 11, Chapter 1, Sections 100651 and 100655

**Vision and Mission Statement**

1. Provide your agency’s Vision Statement.

The vision of San Mateo County Community Action Agency (SMC CAA) is that all families and individual in San Mateo County have equal access to community resources that lead to and support self-sufficiency.

2. Provide your agency’s Mission Statement.
The mission of the SMC CAA is to eliminate the causes and ameliorate the conditions of poverty, by advancing the self-sufficiency of low-income families and individuals in San Mateo County.

Tripartite Board of Directors
CSBG Act Sections 676B(a) and (b); 676(b)(10)
California Code of Regulations, Title 22, Division 11, Chapter 1, Section 100605

1. Describe your agency’s procedures under which a low-income individual, community organization, religious organization, or representative of low-income individuals that considers its organization or low-income individuals to be inadequately represented on your agency’s board to petition for adequate representation. (CSBG Act Section 676(b)(10))

San Mateo County’s Community Action Agency meetings are open to the public and the public are given time each meeting to provide comment. On the occasion that a low-income individual, community organization, religious organization, or representative of low-income individuals expresses that they have identified an organization or low-income individual(s) are not adequately represented, they would be directed to Human Services Agency staff to further discuss the matter and clarify next steps. Following that meeting, Human Service Agency staff would discuss to provide any additional information and insight gleaned from their meeting with the “petitioner” and determine the appropriate follow-up actions including incorporating this feedback into filling future vacancies on the Board.

Service Delivery System
CSBG Act Section 676(b)(3)(A) State Plan 14.3

1. Describe your agency’s service delivery system. Include a description of your client intake process or system and specify whether services are delivered via direct services or subcontractors, or a combination of both. (CSBG Act Section 676(b)(3)(A), State Plan 14.3)

The Human Services Agency, in partnership with other public agencies and community-based organizations, provide a wide array of safety net services. Specifically, the Human Services Agency contracts with community-based organizations to operate the eight Core Service Agencies that are located across the County which serve as the point of entry into safety net and homeless services. Safety net services provided by the Core Agencies include but not limited to food, housing resources, emergency financial housing assistance, homeless prevention services, utility bill financial assistance, rental assistance, transportation/car repair financial assistance and referrals to homeless services. Core Service Agencies staff are culturally competent and are knowledgeable about community resources and they complement that expertise with positive, welcoming environments to provide high quality, compassionate service to their clients.

The first point of contact for most individuals and families seeking help at our county’s Core Agencies are case managers. Case managers provide individualized and comprehensive assessment to gain a full understanding of their needs. Case managers evaluate a client’s or family’s status regarding their finances, housing, food needs, and other needs and determines what services will help them reach stability. Consistent case management, education, and referrals to enriching community programs
ensure all have access to the full complement of benefits and services available to help them meet their needs. The services provided may include CSBG-funded services and may also include a wide variety of other services, funded by other funding sources.

The Human Services Agency contracts with Samaritan House to oversee CSBG-funded services that are accessed via all eight Core Service Agencies. Core Service Agencies conduct ongoing outreach throughout their respective communities by maintaining collaborative relationships with local partners such as schools, mental health service providers, cities, community-based organizations, and by attending community events.

The Human Services Agency ensures effective use of CSBG resources by utilizing CSBG funding to meet specific needs related to housing of low-income members of the community (ex: emergency financial assistance to help clients maintain their housing, or pay for a deposit for those who need to move and have found a new affordable housing option), as there are many other resources and programs that provide additional services (health care, employment services, childcare, and others). This structure of safety net services enhances services by having a network of community services that work together to provide a wide array of programs and systems.

2. Describe how the poverty data related to gender, age, and race/ethnicity referenced in Part I, Question 1 informs your service delivery and strategies in your service area?

The CAA utilized American Community Survey U.S. Census data from 2022 related to poverty indicators including but not limited to household income, those living below the poverty line, poverty rate, education level, national origins, and disabilities; and maps how it affects gender, age, and race/ethnicity in our service area. Core Service Agencies, which are the entry points for CSBG-funded services and other safety net services, train their staff on cultural competencies and ensure that there are ways for community members who speak languages other than English to receive assistance in their preferred language, either via staff who speak that language and/or interpretation services. Outreach materials for the Core Service Agencies are available in English, Spanish, Chinese, Tagalog and Tongan. The Human Services Agency also reviews demographics of people accessing safety net services compared to demographics of the community as a whole.

Linkages and Funding Coordination
CSBG Act Sections 676(b)(1)(B) and (C); (3)(B), (C) and (D); 676(b)(4), (5), (6), and (9)
California Government Code Sections 12747, 12760
Organizational Standards 2.1, 2.4
State Plan 9.3a, 9.3b, 9.4b, 9.6, 9.7, 14.1b, 14.1c, 14.3d, 14.4

1. Describe how your agency coordinates funding with other providers in your service area. If there is a formalized coalition of social service providers in your service area, list the coalition(s) by name and methods used to coordinate services/funding. (CSBG Act Sections 676(b)(1)(C), 676(b)(3)(C); Organizational Standard 2.1; State Plan 14.1c, 9.6, 9.7)

The SMC CAA coordinates CSBG funds with other existing funding streams that provide services to very low-income households in San Mateo County. The CSBG funds for emergency financial assistance will complement existing funding streams for emergency financial assistance and homeless prevention (e.g., Season of Sharing, SSVF funds for veterans, County funds, and city or private funding) by allowing the
Core Service Agencies to provide financial assistance to additional households.

2. Provide information on any memorandums of understanding and/or service agreements your agency has with other entities regarding coordination of services/funding. (CSBG Act Section 676(b)(9), Organizational Standard 2.1; State Plan 14.1c, 9.6, 9.7)

The Human Services Agency contracts with Samaritan House to administer the CSBG-funded services. The CSBG-funded services can be accessed at any of the 8 Core Service Agencies, in order to ensure access countywide, however all administration of the CSBG-funded services is conducted by Samaritan House to ensure consistency and to streamline administrative activities, including financial and program tracking.

The Human Services Agency contracts with the Core Service Agencies to provide safety net services such as food, emergency housing assistance, homeless prevention services, utility bill financial assistance, and referrals to homeless services. The Human Services Agency also has contracts with many other community-based providers for other services such as emergency food, rapid rehousing, homeless outreach, homeless shelters, and other safety net services.

3. Describe how your agency ensures delivery of services to low-income individuals while avoiding duplication of services in the service area(s). (CSBG Act Section 676(b)(5), State Plan 9.3a, California Government Code 12760)

The network of Core Service Agencies has been designed to serve as the primary point of entry into the service system for low-income households and thereby avoid unnecessary and duplicative intake and assessment processes. Households seeking emergency housing assistance and homelessness prevention assistance, as well as other safety net services, are already directed to their local Core Service Agency.

The CAA Board includes representatives who are familiar with the programs and services provided throughout the community. In addition, the Human Services Agency also collaborates with a range of collaborative committees (e.g., the Continuum of Care Steering Committee, Homeless Service Providers), and providers to ensure the coordination of services and prevent duplication.

4. Describe how your agency will leverage other funding sources and increase programmatic and/or organizational capacity. (California Government Code Section 12747)

HSA leverages funding by utilizing an array of funding sources offered at local, state, and federal levels to support the provision of safety net services. In addition, Samaritan House and other Core Service Agencies also identify, seek and receive additional funding from other philanthropic organization and individual donors.

5. Describe your agency’s contingency plan for potential funding reductions. (California Government Code Section 12747)

In the event of reduced federal funding, the Human Services Agency would continue to offer services like those currently funded using CSBG dollars however, on a smaller scale. Samaritan House and the other Core Service Agencies would continue to provide housing assistance and homelessness prevention services to the extent feasible, using other funding sources (e.g., Season of Sharing, local county funding if available) as well as any CSBG funds that are allocated.
6. Describe how your agency documents the number of volunteers and hours mobilized to support your activities. (Organizational Standard 2.4)

Volunteer hours are tracked by the organization contracted to provide CSBG-funded services, Samaritan House.

7. Describe how your agency will address the needs of youth in low-income communities through youth development programs and promote increased community coordination and collaboration in meeting the needs of youth. (CSBG Act Section 676(b)(1)(B), State Plan 14.1b)

The community has many services that focus on the development and support of children and youth. The Core Service Agencies have relationships with a number of programs and projects serving youth, childcare programs, and other resources for no- or low-cost after-school activities and have the ability to refer clients to these services as needed. One key provider of youth services in the community is StarVista, which provides mental health, housing and other services tailored for children and youth, which has a strong partnership with Samaritan House and all of the Core Service Agencies.

8. Describe how your agency will promote increased community coordination and collaboration in meeting the needs of youth, and support development and expansion of innovative community-based youth development programs such as the establishment of violence-free zones, youth mediation, youth mentoring, life skills training, job creation, entrepreneurship programs, after after-school childcare. (CSBG Act Section 676(b)(1)(B), State Plan 14.1b)

The community has many services that focus on the development and support of children and youth. The eight Core Service Agencies have relationships with multiple programs and projects serving youth, childcare programs, and other resources for no or low-cost after-school activities and can refer clients to these services as needed. One key provider of youth services in the community is StarVista, which provides mental health, housing and other services tailored for children and youth, which has a strong partnership with Samaritan House and with all the Core Service Agencies.

9. Describe the coordination of employment and training activities as defined in Section 3 of the Workforce and Innovation and Opportunity Act [29 U.S.C. 3102]. (CSBG Act Section 676(b)(5); State Plan 9.4b)

The Core Service Agencies refer clients to a range of workforce development opportunities, including those offered by the NOVA job center (NOVA is operated by the Workforce Board for San Mateo County). The Human Services Agency also offers job resources for community members and also operates employment programs for families enrolled in CalWORKs and Vocational Rehabilitation Services for individuals with disabilities and other employment barriers.

The CAA ensures effective use of resources by coordinating with other programs and systems. Since the CAA’s program activities are operated by Samaritan House and the Core Service Agency network that serves as the point of entry into social services throughout the County, the Core Service Agencies assist clients with referrals to all needed services provided by other community programs.
10. Describe how your agency will provide emergency supplies and services, nutritious foods, and related services, as may be necessary, to counteract conditions of starvation and malnutrition among low-income individuals. (CSBG Act Section 676(b)(4), State Plan 14.4)

The Core Service Agencies provide emergency food. They also collaborate closely with the Second Harvest Food Bank programs that provide ongoing food supports via grocery programs and hot meal programs. Community members can also apply for CalFresh (also known as SNAP) and County and non-profit staff can assist them with the application process.

11. Describe how your agency coordinates with other antipoverty programs in your area, including the emergency energy crisis intervention programs under Title XXVI, relating to low-income home energy assistance (LIHEAP) that are conducted in the community. (CSBG Act Section 676(b)(6))

The Core Service Agencies will connect clients to LIHEAP and for those whose needs cannot be met by LIHEAP, they can also provide emergency financial assistance for utility payments when applicable, including utilizing CSBG or other funding sources for emergency financial assistance toward utility payments.

12. Describe how your agency coordinates services with your local LIHEAP service provider?

San Mateo County’s eight Core Agencies coordinate with LIHEAP by offering to assist clients with applying for the LIHEAP assistance. The Core Service Agency staff reviews the client’s household information to determine if the household meets the LIHEAP guidelines, assists with completing the LIHEAP application, and collects any supporting documentation, including the PG&E bill. Once the application is completed, the Core Service Agency submits it to LIHEAP who will either approve or deny the financial assistance. If the client was denied, then the Core Service Agency will explore if there are other resources that may be able to assist the household.

13. Describe how your agency will use funds to support innovative community and neighborhood-based initiatives, which may include fatherhood and other initiatives, with the goal of strengthening families and encouraging effective parenting. (CSBG Act Section 676(b)(3)(D), State Plan 14.3d)

The Core Service Agency network refers clients to a range of organizations whose mission is to strengthen families and encourage effective parenting, including First Five San Mateo County, StarVista’s Healthy Homes program, Edgewood Center for Children and Families, and Peninsula Family Services.

14. Describe how your agency will develop linkages to fill identified gaps in the services, through the provision of information, referrals, case management, and follow-up consultations. (CSBG Act Section 676(b)(3)(B), State Plan 9.3b)

The Human Services Agency regularly consults with partner departments in San Mateo County to understand needs and gaps among the clients they serve – including the County Executive’s Office, County Health, Department of Housing, and cities.

Monitoring

CSBG Act Section 678D(a)(1)(A) and (B)
1. Describe how your agency’s monitoring activities are related to establishing and maintaining the integrity of the CSBG program. Include your process for maintaining high standards of program and fiscal performance.

The Human Services Agency is responsible for ensuring that the agency contracted to provide the CSBG-funded services, Samaritan House, is meeting all contract objectives and maintaining the integrity of the CSBG program. Samaritan House trains all Core Service Agency staff on CSBG regulations and eligibility criteria, and Samaritan House has a detailed process to review each client’s case file prior to approving CSBG-funded services to ensure compliance with all CSGB requirements. Samaritan House produces quarterly reports to the CAA on progress in meeting program goals and the Human Services Agency also conducts monitoring site visits to review program implementation.

2. If your agency utilizes subcontractors, please describe your process for monitoring the subcontractors. Include the frequency, type of monitoring, i.e., onsite, desk review, or both, follow-up on corrective action, and issuance of formal monitoring reports.

The Human Services Agency has one subcontractor for CSBG-funded services, Samaritan House. The Human Services Agency and Samaritan House collaborate to complete extensive data analysis and reporting of all CSBG-funded services. Monitoring of Samaritan House’s progress includes quarterly reports generated by Samaritan House that are provided to the CAA as well as consistent communications via phone and email to address services, data, financial tracking, and other aspects of the CSBG-funded services. The Human Services Agency also conducts monitoring site visits to review program implementation. After onsite reviews, HSA issues a written monitoring report that is shared with Samaritan House. If corrective action were to be needed, HSA issues a Corrective Action Plan with descriptions of the specific items that need improvement and HSA would then monitor the completion of the action plan and conduct bi-monthly follow up monitoring on the Corrective Action Plan until all items are addressed.

Data Analysis, Evaluation, and ROMA Application
CSBG Act Section 676(b)(12)
Organizational Standards 4.2, 4.3

1. Describe your agency’s method for evaluating the effectiveness of programs and services. Include information about the types of measurement tools, the data sources and collection procedures, and the frequency of data collection and reporting. (Organizational Standard 4.3)

As the provider of CSBG-funded services, Samaritan House maintains extensive and high-quality information about clients, their needs, the services provided, and outcomes.

Samaritan House completes two major assessments on an ongoing basis:

1. The Samaritan House Matrix Assessment is a comprehensive tool used to evaluate all the major aspects of a client’s living situation and the related needs that can be addressed through Samaritan House programs. These aspects include access to food, transportation, education/vocation attainment, overall health, financial stability, housing situation, and other critical factors. Case Managers conduct these evaluations when a client first requests services and periodically thereafter as services are provided. These periodic Matrix Assessments enable Case
Managers to track and evaluate individual client progress and allow Program Managers to continuously assess overall program effectiveness and re-align program delivery accordingly. As an example, the evaluation of overall client financial stability led Samaritan House to develop a Financial Empowerment Program to assist clients with savings, budgeting, debt management and other related skills.

2. The second assessment is the Follow-up Interview Assessment. This 3-page questionnaire is administered through phone calls to clients 6 months after the client received services. These interviews are used to evaluate how well program outcomes are sustained on a long-term basis. Questions asked include satisfaction with services received; timeliness of services; and effectiveness of services received. Another question asked is whether anything else could have been done to better serve the client. This longer-term perspective is critical in enabling Samaritan House to adjust services to provide the maximum impact on clients. Furthermore, data collected from this tool is shared with staff to solicit their input for improving service delivery.

Taken together, these two outcomes and evaluation assessments provide Samaritan House with the ability to continuously adjust both its assistance to individual clients as well as its overall program and service delivery to effectively address community needs.

2. Applying the Results Oriented Management and Accountability (ROMA) cycle of assessment, planning, implementation, achievement of results, and evaluation, describe one change your agency made to improve low-income individuals’ and families’ capacity for self-sufficiency. (CSBG Act Section 676(b)(12), Organizational Standard 4.2)

During the COVID-19 pandemic, a new process was established for how families access emergency financial assistance. All the Core Service Agencies have implemented an online application for emergency financial assistance which allows families to access essential support without having to come in person to an office. Offices have reopened and all online applications remain available through the internet. This “hybrid” access to services helps the communities we serve access services in multiple ways, based on what works best for each person and family.

3. Applying the full ROMA cycle, describe one change your agency facilitated to help revitalize the low-income communities in your agency’s service area(s). (CSBG Act Section 676(b)(12), Organizational Standard 4.2)

San Mateo County launched Working Together to End Homelessness, a County initiative calling on local, state, and federal officials, local employers, volunteer organizations, nonprofit groups, faith communities and county residents to support the goal of reaching a functional zero level of homelessness. “Functional zero” means that every county resident experiencing homelessness will be promptly and safely sheltered in an emergency shelter, or in temporary or permanent housing.

The Working Together to End Homelessness includes multiple initiatives:

1. County officials invited all stakeholders to a series of events held throughout 2022 to educate, assess resources and implement an action plan to achieve functional zero.

2. Build a new Navigation Center, a 240-unit non-congregate shelter, to provide both temporary housing and intensive services for individuals and couples.

3. Utilize Homekey funds and other resources to increase housing options and supply. As of March 2023, the County has purchased five former motels/hotels across the county and has converted them into 315 permanent or temporary housing units for individuals who are unsheltered.
4. Formulating new strategies for increasing housing with input from many different community stakeholders

Response and Community Awareness

Diversity, Equity, and Inclusion

1. Does your agency have Diversity, Equity, and Inclusion (DEI) programs in place that promote the representation and participation of different groups of individuals, including people of different ages, races and ethnicities, abilities and disabilities, genders, religions, cultures, and sexual orientations?

☒ Yes
☐ No

2. If yes, please describe.

The County of San Mateo recognizes how both historical and current structural policies and practices harm people of color, LGBTQ+ communities, and those with disabilities. The County understands that that harm endured by one segment of the population ultimately harms the entire population. The vision for equity in San Mateo County is that all San Mateo County residents and staff experience just and fair inclusion into a society in which all can participate, prosper, and reach their full potential.

Actualizing the County’s commitment to equity requires staff to have a foundational understanding of equity issues, as well as opportunities to deepen their understanding of key equity concepts. To achieve this aim, the county created a Core Equity Team, an interdepartmental team with representation from most county departments, including the Human Services Agency, that are charged to:

- Review and provide input into the development and progress of Countywide equity efforts and represent departmental perspectives
- Share departmental efforts to advance equity and seek support as appropriate
- Leverage learnings and experiences of other departments to improve their own departmental equity efforts
- Identify opportunities to partner with other departments on aligned equity interests/efforts
- Provide technical assistance on areas of equity expertise when appropriate
- Share information learned from other departments and countywide efforts with department leadership

Current County strategies linked to increasing equity include:

- All County staff are educated and empowered to foster equity within their work and workplace.
- County staff have access to data and data collection methods to understand and track progress on advancing equity.
- Staff have supportive environments to share experiences and needs and access support from their peers.
Disaster Preparedness

1. Does your agency have a disaster plan in place that includes strategies on how to remain operational and continue providing services to low-income individuals and families during and following a disaster? The term disaster is used in broad terms including, but not limited to, a natural disaster, pandemic, etc.

☒ Yes
☐ No

2. If yes, when was the disaster plan last updated?

In 2019, HSA updated the Continuity of Operations Plan (COOP) which sets out the agency’s procedures for disaster response. Continuity of Government is defined as the preservation, maintenance, or reconstruction of the civil government’s ability to carry out its constitutional responsibilities.

3. Briefly describe your agency’s main strategies to remain operational during and after a disaster.

The Human Services Agency has a COOP Planning Team that developed and maintains the Agency’s COOP. Under the COOP, each branch of the Human Services Agency developed its own plan to maintain essential functions/services during an emergency. The COOP Planning Team has identified and put into place the following continuity requirements in accordance with Federal Department of Homeland Security (DHS) and Federal Emergency Management Agency (FEMA):

- **Essential Functions** - The critical activities performed by organizations, especially after a disruption of normal activities.
- **Orders of Succession** - Provisions for the assumption of senior agency offices during an emergency in the event that any of those officials are unavailable to execute their legal duties.
- **Delegations of Authority** - Identification by position, of the authorities for making policy determinations and decisions at HQ, field levels, and all other organizational locations. Generally, pre-determined delegations of authority will take effect when normal channels of direction have been disrupted and will lapse when these channels have been reestablished.
- **Continuity Facilities** - Locations, other than the primary facility, used to carry out essential functions, particularly in a continuity event. Continuity Facilities, or “Alternate facilities”, refers to not only other locations, but also nontraditional options such as working at home. (“teleworking”), telecommuting, and mobile-office concepts.
- **Continuity Communications** - Communications that provide the capability to perform essential functions, in conjunction with other agencies, under all conditions.
• Vital Records Management – the identification, protection and ready availability of electronic and hard copy documents, references, records, information systems, data management software and equipment needed to support essential functions during a continuity situation.

• Human Capital – during a continuity event, emergency employees and other special categories of employees who are activated by an agency to perform assigned response duties.

• Tests, Training, and Exercises (TT&E) – Measures to ensure that an agency’s continuity plan is capable of supporting the continued execution of the agency’s essential functions throughout the duration of a continuity event.

• Devolution of Control and Direction – capability to transfer statutory authority and responsibility for essential functions from an agency’s primary operating staff and facilities to other agency employees and facilities

• Reconstitution – The process by which surviving and/or replacement agency personnel resume normal agency operations from the original or replacement primary operating facility.

Federal CSBG Programmatic Assurances and Certification
CSBG Act 676(b)

Use of CSBG Funds Supporting Local Activities

676(b)(1)(A): The state will assure “that funds made available through grant or allotment will be used – (A) to support activities that are designed to assist low-income families and individuals, including families and individuals receiving assistance under title IV of the Social Security Act, homeless families and individuals, migrant or seasonal farmworkers, and elderly low-income individuals and families, and a description of how such activities will enable the families and individuals--

i. to remove obstacles and solve problems that block the achievement of self-sufficiency (particularly for families and individuals who are attempting to transition off a State program carried out under part A of title IV of the Social Security Act);

ii. to secure and retain meaningful employment;

iii. to attain an adequate education with particular attention toward improving literacy skills of the low-income families in the community, which may include family literacy initiatives;

iv. to make better use of available income;

v. to obtain and maintain adequate housing and a suitable living environment;

vi. to obtain emergency assistance through loans, grants, or other means to meet immediate and urgent individual and family needs;

vii. to achieve greater participation in the affairs of the communities involved, including the development of public and private grassroots partnerships with local law enforcement agencies, local housing authorities, private foundations, and other public and private partners to

I. document best practices based on successful grassroots intervention in urban areas, to develop methodologies for wide-spread replication; and

II. strengthen and improve relationships with local law enforcement agencies, which may include participation in activities such as neighborhood or community policing efforts;
Needs of Youth

676(b)(1)(B) The state will assure “that funds made available through grant or allotment will be used - (B) to address the needs of youth in low-income communities through youth development programs that support the primary role of the family, give priority to the prevention of youth problems and crime, and promote increased community coordination and collaboration in meeting the needs of youth, and support development and expansion of innovative community-based youth development programs that have demonstrated success in preventing or reducing youth crime, such as--

I. programs for the establishment of violence-free zones that would involve youth development and intervention models (such as models involving youth mediation, youth mentoring, life skills training, job creation, and entrepreneurship programs); and

II. after-school childcare programs.

Coordination of Other Programs

676(b)(1)(C) The state will assure “that funds made available through grant or allotment will be used - (C) to make more effective use of, and to coordinate with, other programs related to the purposes of this subtitle (including state welfare reform efforts)

Eligible Entity Service Delivery System

676(b)(3)(A) Eligible entities will describe “the service delivery system, for services provided or coordinated with funds made available through grants made under 675C(a), targeted to low-income individuals and families in communities within the state;

Eligible Entity Linkages - Approach to Filling Service Gaps

676(b)(3)(B) Eligible entities will describe “how linkages will be developed to fill identified gaps in the services, through the provision of information, referrals, case management, and follow-up consultations.”

Coordination of Eligible Entity Allocation 90 Percent Funds with Public/Private Resources

676(b)(3)(C) Eligible entities will describe how funds made available through grants made under 675C(a) will be coordinated with other public and private resources.”

Eligible Entity Innovative Community and Neighborhood Initiatives, Including Fatherhood/Parental Responsibility

676(b)(3)(D) Eligible entities will describe “how the local entity will use the funds [made available under 675C(a)] to support innovative community and neighborhood-based initiatives related to the purposes of this subtitle, which may include fatherhood initiatives and other initiatives with the goal of strengthening families and encouraging parenting.”

Eligible Entity Emergency Food and Nutrition Services

676(b)(4) An assurance “that eligible entities in the state will provide, on an emergency basis, for the provision of such supplies and services, nutritious foods, and related services, as may be necessary to counteract conditions of starvation and malnutrition among low-income individuals.”

State and Eligible Entity Coordination/linkages and Workforce Innovation and Opportunity Act Employment and Training Activities

676(b)(5) An assurance “that the State and eligible entities in the State will coordinate, and establish linkages between, governmental and other social services programs to assure the effective delivery of such services, and [describe] how the State and the eligible entities will coordinate the provision of employment and training activities, as defined in section 3 of the Workforce Innovation and Opportunity Act, in the State and in communities with entities providing activities through statewide and local workforce development systems under such Act.”
State Coordination/Linkages and Low-income Home Energy Assistance

676(b)(6) “[A]n assurance that the State will ensure coordination between antipoverty programs in each community in the State, and ensure, where appropriate, that emergency energy crisis intervention programs under title XXVI (relating to low-income home energy assistance) are conducted in such community.”

Community Organizations

676(b)(9) An assurance “that the State and eligible entities in the state will, to the maximum extent possible, coordinate programs with and form partnerships with other organizations serving low-income residents of the communities and members of the groups served by the State, including religious organizations, charitable groups, and community organizations.”

Eligible Entity Tripartite Board Representation

676(b)(10) “[T]he State will require each eligible entity in the State to establish procedures under which a low-income individual, community organization, or religious organization, or representative of low-income individuals that considers its organization, or low-income individuals, to be inadequately represented on the board (or other mechanism) of the eligible entity to petition for adequate representation.”

Eligible Entity Community Action Plans and Community Needs Assessments

676(b)(11) “[A]n assurance that the State will secure from each eligible entity in the State, as a condition to receipt of funding by the entity through a community service block grant made under this subtitle for a program, a community action plan (which shall be submitted to the Secretary, at the request of the Secretary, with the State Plan) that includes a community needs assessment for the community serviced, which may be coordinated with the community needs assessment conducted for other programs.”

State and Eligible Entity Performance Measurement: ROMA or Alternate System

676(b)(12) “[A]n assurance that the State and all eligible entities in the State will, not later than fiscal year 2001, participate in the Results Oriented Management and Accountability System, another performance measure system for which the Secretary facilitated development pursuant to section 678E(b), or an alternative system for measuring performance and results that meets the requirements of that section, and [describe] outcome measures to be used to measure eligible entity performance in promoting self-sufficiency, family stability, and community revitalization.”

Fiscal Controls, Audits, and Withholding

678D(a)(1)(B) An assurance that cost and accounting standards of the Office of Management and Budget (OMB) are maintained.

☒ By checking this box and signing the Cover Page and Certification, the agency’s Executive Director and Board Chair are certifying that the agency meets the assurances set out above.
State Assurances and Certification
California Government Code Sections 12747(a), 12760, 12768

For CAA, MSFW, NAI, and LPA Agencies

California Government Code § 12747(a): Community action plans shall provide for the contingency of reduced federal funding.

California Government Code § 12760: CSBG agencies funded under this article shall coordinate their plans and activities with other agencies funded under Articles 7 (commencing with Section 12765) and 8 (commencing with Section 12770) that serve any part of their communities, so that funds are not used to duplicate particular services to the same beneficiaries and plans and policies affecting all grantees under this chapter are shaped, to the extent possible, so as to be equitable and beneficial to all community agencies and the populations they serve.

☒ By checking this box and signing the Cover Page and Certification, the agency’s Executive Director and Board Chair are certifying that the agency meets the assurances set out above.

For MSFW Agencies Only

California Government Code § 12768: Migrant and Seasonal Farmworker (MSFW) entities funded by the department shall coordinate their plans and activities with other agencies funded by the department to avoid duplication of services and to maximize services for all eligible beneficiaries.

☐ By checking this box and signing the Cover Page and Certification, the agency’s Executive Director and Board Chair are certifying that the agency meets the assurances set out above.
Organizational Standards

**Category One: Consumer Input and Involvement**

**Standard 1.1** The organization/department demonstrates low-income individuals’ participation in its activities.

**Standard 1.2** The organization/department analyzes information collected directly from low-income individuals as part of the community assessment.

**Standard 1.3 (Private)** The organization has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the governing board.

**Standard 1.3 (Public)** The department has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the tripartite board/advisory body, which may be met through broader local government processes.

**Category Two: Community Engagement**

**Standard 2.1** The organization/department has documented or demonstrated partnerships across the community, for specifically identified purposes; partnerships include other anti-poverty organizations in the area.

**Standard 2.2** The organization/department utilizes information gathered from key sectors of the community in assessing needs and resources, during the community assessment process or other times. These sectors would include at minimum: community-based organizations, faith-based organizations, private sector, public sector, and educational institutions.

**Standard 2.4** The organization/department documents the number of volunteers and hours mobilized in support of its activities.

**Category Three: Community Assessment**

**Standard 3.1 (Private)** Organization conducted a community assessment and issued a report within the past 3 years.

**Standard 3.1 (Public)** The department conducted or was engaged in a community assessment and issued a report within the past 3-year period, if no other report exists.

**Standard 3.2** As part of the community assessment, the organization/department collects and includes current data specific to poverty and its prevalence related to gender, age, and race/ethnicity for their service area(s).

**Standard 3.3** The organization/department collects and analyzes both qualitative and quantitative data on its geographic service area(s) in the community assessment.

**Standard 3.4** The community assessment includes key findings on the causes and conditions of poverty and the needs of the communities assessed.
Standard 3.5 The governing board or tripartite board/advisory body formally accepts the completed community assessment.

Category Four: Organizational Leadership

Standard 4.1 (Private) The governing board has reviewed the organization’s mission statement within the past 5 years and assured that:
1. The mission addresses poverty; and
2. The organization’s programs and services are in alignment with the mission.

Standard 4.1 (Public) The tripartite board/advisory body has reviewed the department’s mission statement within the past 5 years and assured that:
1. The mission addresses poverty; and
2. The CSBG programs and services are in alignment with the mission.

Standard 4.2 The organization’s/department’s Community Action Plan is outcome-based, anti-poverty focused, and ties directly to the community assessment.

Standard 4.3 The organization’s/department’s Community Action Plan and strategic plan document the continuous use of the full Results Oriented Management and Accountability (ROMA) cycle or comparable system (assessment, planning, implementation, achievement of results, and evaluation). In addition, the organization documents having used the services of a ROMA-certified trainer (or equivalent) to assist in implementation.
Appendices

Please complete the table below by entering the title of the document and its assigned appendix letter. Agencies must provide a copy of the Notice(s) of Public Hearing and the Low-Income Testimony and the Agency’s Response document as appendices A and B, respectively. Other appendices such as the community need assessment, surveys, maps, graphs, executive summaries, analytical summaries are encouraged. All appendices should be labeled as an appendix (e.g., Appendix A: Copy of the Notice of Public Hearing) and submitted with the CAP.

<table>
<thead>
<tr>
<th>Document Title</th>
<th>Appendix Location</th>
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<tbody>
<tr>
<td>Copy of the Notice(s) of Public Hearing</td>
<td>A</td>
</tr>
<tr>
<td>Low-Income Testimony and Agency’s Response</td>
<td>B</td>
</tr>
<tr>
<td>Community Needs Assessment</td>
<td>C</td>
</tr>
<tr>
<td>Client &amp; Partner Survey Results</td>
<td>D</td>
</tr>
</tbody>
</table>

...
San Mateo County Description

San Mateo County is located on the San Francisco Peninsula, just south of the City of San Francisco and north of Santa Clara and Santa Cruz Counties. Comprised of 448.6 square miles, San Mateo County ranks 56th out of California’s 58 counties in terms of total area. Most residents live in the county’s 20 cities (ex: Daly City, Redwood City, San Mateo, and South San Francisco), the majority of which comprise a highly urbanized corridor that stretches along Highway 101. Smaller communities, including some rural communities, such as Pescadero and Half Moon Bay, line the county’s 40 miles of coastline west of Highway 280.

General Demographic Information

According to the American Community Survey (ACS) 2021: ACS 5-Year Estimates Data Profiles, the County has a total population of 762,488 comprising 264,135 households represents a 6.6% increase in population since 2010. This population growth is on par with the state’s population growth during that same timeframe. Basic demographic data from the U.S. Census Bureau 2020 Community Survey comparing San Mateo County to California overall is provided below.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>San Mateo County Population</th>
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<tbody>
<tr>
<td>0-4</td>
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</tr>
<tr>
<td>5-9</td>
<td>6%</td>
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<td>10-14</td>
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<td>65-74</td>
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<tr>
<td>75-84</td>
<td>5%</td>
</tr>
<tr>
<td>85+</td>
<td>2%</td>
</tr>
</tbody>
</table>

Median Age

40.9 Years

Race & Ethnicity

The county’s population overall is slightly older than the State of California average (Table 1), with 16.5% of the population 65 or older (compared to 14.8% statewide) and 22.1% are under age 20 (compared to 25.1% statewide). Approximately 34% of San Mateo County residents are foreign-born which is higher than statewide and nationwide foreign-born populations at 27% and 14% respectively.

Age

The county’s population overall is slightly older than the State of California average (Table 1), with 16.5% of the population 65 or older (compared to 14.8% statewide) and 22.1% are under age 20 (compared to 25.1% statewide). Approximately 34% of San Mateo County residents are foreign-born which is higher than statewide and nationwide foreign-born populations at 27% and 14% respectively.
While San Mateo County is racially and ethnically diverse, some groups are under-represented compared to the State population. For example, 2% of the San Mateo County population is African American (compared to 5.5% statewide) and 22% is Hispanic (compared to 39.4% statewide). The Asian population is proportionally much larger in San Mateo County (27%) than in the state overall (14.6%).

**Income & Poverty**
According to the 2021 American Community Survey (ACS) 5-Year estimates, median household income in San Mateo County is $136,837. This is significantly higher than the state-wide median of $84,097.

However, while overall county income averages are relatively high, many people fall below the poverty level:
- 6.2% of all San Mateo County residents are living below the federal poverty level ($25,100 for a family of four).
- 8.5% of San Mateo County families with children ages 0-18 years old are living below the poverty level

While the overall poverty rate in the county is 6.2%, there are disproportionately higher rates of households under the poverty level among groups including:
- 9.6% for people of Hispanic or Latino origin
- 11.2% for African Americans
- 13.6% American Indian and Alaska Native
- 11.4% Native Hawaiian and Other Pacific Islander alone

Other groups with higher poverty rates include those with disabilities, formerly incarcerated people, and seniors living on fixed incomes. There are also some geographic areas where there are higher percentages of residents whose incomes are below the poverty level, including East Palo Alto, Redwood City, Daly City, Pacifica, and Half Moon Bay.

**Food**
*CalFresh & WIC*
The onset of the decade saw a worldwide pandemic that led to an economic shutdown creating a large spike in unemployment. In San Mateo County, unemployment rose from 2.1% in February 2020 to 11.4% in April 2020 (California Department of Social Services, CDSS).

While the unemployment rate is once again low (about 2% in January 2023), indicators related to CalFresh and WIC show the ongoing needs of community members in need of supports. For example, CalFresh, federally known as Supplemental Nutrition Assistance Program or SNAP, is the largest food program in California helping individuals and families stretch their food budgets. According to the California Department of Social Services’ CalFresh Data Dashboard in March 2020, when San Mateo County’s unemployment rate was 2.8% there were 20,809 individuals from 12,283 households receiving CalFresh. Comparing those figures to January 2023, the unemployment rate was 1.9%, yet 32,936 individuals comprising 20,335 households in San Mateo County were receiving CalFresh.
A similar pattern is also occurring with the Women, Infants and Children (WIC) program. A federally funded health and nutrition program, supporting pregnant women, new mothers, infants, and children under age five. In January 2021 there were approximately 4900 families utilizing WIC. By December 2022 that number increased to more than 5600 families (California Department of Public Health, 2023). This demonstrates that many community members need safety net supports to meet their basic needs, due to the high costs of living, even when the unemployment rate is low.

**Housing**

**Rental Market Conditions**

One of the greatest challenges facing low-income and moderate-income people in San Mateo County is the cost of housing. According to the California Housing Partnership’s recent report, *San Mateo County’s Affordable Housing Needs Report* (May 2022), renters in San Mateo County need to earn 3.7 times ($59.71/hour) of the City of San Mateo’s minimum wage to afford the average asking rent of $3,105 in the County. The National Low Income Housing Coalition reports in 2022 San Mateo County residents earning minimum wage would need to work 4 full-time jobs to afford two-bedroom housing at the standard of spending 30% of gross income on gross housing costs or work one job earning at least $61.50/hr. This is about twice the state’s average hourly housing wage of $39.01 to afford a two-bedroom apartment at fair market rent.

**California Housing Partnership’s 2021 San Mateo County Affordable Housing Needs Report** found that San Mateo County had 24,440 low-income renter households that did not have access to an affordable home. Approximately 72% of extremely low-income (ELI) renters were paying more than 50% of their income on rent. This leaves...
low-income renters with little leftover for other basic need expenses such as food, medical care, and clothing. As the temporary COVID housing security policies come to an end (ex: eviction moratorium, federal COVID rent relief) San Mateo County renters face a housing market that is extremely challenging.

Furthermore, home ownership grows increasingly out of reach with the San Mateo County Association of Realtors reporting that the median sale price for a single-family home was $1.95 million in February 2023 representing a 31.8% increase in price compared to January 2023.

Homelessness

The very high cost of living creates additional challenges for people experiencing homelessness to return to housing. The 2022 San Mateo County One Day Homeless Count and Survey ("count") found a total of 1,808 homeless people in San Mateo County.\(^1\) This included:

- 1,092 people experiencing unsheltered homelessness staying on streets, in cars, in recreational vehicles (RVs), or in tents
- 716 people experiencing sheltered homelessness staying in emergency shelters and transitional housing programs

The 2022 count represents a 20% increase in homelessness since 2019 and is growing closer to numbers the region hasn’t experienced in a decade. The number of people staying in shelters in 2022 is an increase of 105 (17%) compared to 2019. When broken down by jurisdiction, the data on homelessness shows that certain communities have a large percentage of the unsheltered population: East Palo Alto, Pacifica, Redwood City, and unincorporated areas of the county.

As part of the Count, a survey was administered to people experiencing unsheltered homelessness. Of those surveyed, 84% reported living in the county prior to becoming homeless, and 60% were experiencing homelessness for the first time. Lengths of current episodes of homelessness varied substantially: 15% had been homeless less than one year, 36% had been homeless for one to three years, and 49% had been homeless for longer than three years.

It is important to note that the One Day Homeless Count only counts individuals and families who meet the federal definition of homelessness - either unsheltered (living in a place not

\(^1\) The 2022 is the most recent count of unsheltered people.
mean for human habitation such as a vehicle, tent, or other outdoor location) or residing in a homeless shelter on the night of the count. The One Day Homeless Count does not include the many community members who are housed but are struggling to maintain their housing in the very challenging housing market.

Transportation

According to 2021 Census data about 35,000 or 9% of the working population relies on public transportation as their main means of transport. Many of San Mateo County’s low-income households rely on public transit to travel from home to school, work, shopping, and community amenities.

The urbanized areas of San Mateo County are reasonably well-served by public transit through the San Mateo County Transit District (SMCTD), which includes both SamTrans bus service and Caltrain rail service. Bay Area Rapid Transit (BART) also serves the northern portion of the county. However, accessibility of transit is more limited on the Coast and southern areas of the county that are farther from the central 101 corridor. The map titled Means of Transportation to Work – Public Transit illustrates this dynamic with the darker shades of green indicating higher percentages of workers utilizing public transport to get to work. Costs for transportation have been particularly challenging for low-income community members since the economy has reopened after the COVID shutdown. San Mateo County gas prices soared as high as $7/gallon. The American Automobile Association (AAA) reports April 2023, the average cost of gas in California is $4.88 which is $1.28 more than the national average of $3.60. In San Mateo County the average cost of gas is $5.01, $1.41 more per gallon in comparison to the national average. These costs impact public transportation which are reflected in the rising public transportation costs.
Community Health

Health conditions that are undiagnosed, untreated and/or under treated can lead to negative impacts on an individual’s ability to work which significantly impacts the overall health and well-being of the households they support. According to the Centers for Disease Control and Prevention (CDC), five chronic diseases or risk factors - high blood pressure, diabetes, smoking, physical inactivity, and obesity cause employees to miss days at work to the tune of $36.4 billion per year. San Mateo County Health’s latest Community Health Needs Assessment (2019) found that overall, San Mateo County is doing well on a broad range of community health measures. However, an examination of the current San Mateo County Health’s Community Health Dashboards (data presented below) reveals there are multiple areas of health concerns that cause individuals to miss work placing them at risk of falling into poverty:

Arthritis and rheumatism
- 25% of all San Mateo Medicare beneficiaries have been treated for rheumatoid arthritis or osteoarthritis

Adult Asthma
- 17% of adults report having been told by a health care provider that they have asthma. This value is higher than the national rate of 15%.

Diabetes Diagnosis
- 8% of adults in the county report having diabetes, which is lower than the state level (11%). However, for those aged 65+ the percentage increases to 14%

Drug Use (Age-Adjusted Death Rate)
- 12.0 deaths/100,000 population in 2020 is a significant increase since 2018 when it was 8.2 deaths/100,000.

Heart Disease
- 7.4% adults report having been diagnosed with heart disease and is trending to increase significantly over time. This value is higher than the 6.9% reported for the state.

Mental Health or Emotional Problems Worsening
- 60% of adults reported needing care for emotional or mental health or substance abuse issues who stated that they did obtain help for those issues in the past year. This is higher than the state value at 54%.

San Mateo County Health provides a data dashboard call the Health Equity Index which is a measure of how socioeconomic needs are correlated with poor health outcomes. The Health Equity Index indicators are Medicaid enrollment, income, race, employment, language, education, and poverty.

Persons with public health insurance only
- 16.6% persons only have who have public health coverage which includes the federal programs Medicare, Medicaid, and VA Health Care, the Children’s Health Insurance Program (CHIP); and individual state health plans.

Adults without health insurance
- 9.7% of adults aged 18-64 that do not have any kind of health insurance coverage
Delayed or difficulty obtaining medical care

- 20% of adults aged 18 and over who report having delayed or not received other medical care they felt they needed. This value has increased 4% since 2018. A delay of necessary care can lead to an increased risk of complications.

**DATA SOURCES UTILIZED IN THIS ASSESSMENT**

**Demographics**
- US Census: American Community Survey (2021: ACS 5-Year Estimates Subject Tables)
  - S0101AGE AND SEX
  - DP05ACS DEMOGRAPHIC AND HOUSING ESTIMATES

**Economics**
- US Census: American Community Survey (2021: ACS 5-Year Estimates Subject Tables)
  - DP03SELECTED ECONOMIC CHARACTERISTICS
  - S1903MEDIAN INCOME IN THE PAST 12 MONTHS (IN 2021 INFLATION-ADJUSTED DOLLARS)

**Food**
- US Census: American Community Survey (2021: ACS 5-Year Estimates Subject Tables)
  - K202201RECEIPT OF FOOD STAMPS/SNAP IN THE PAST 12 MONTHS BY PRESENCE OF CHILDREN UNDER 18 YEARS FOR HOUSEHOLDS
  - B22003RECEIPT OF FOOD STAMPS/SNAP IN THE PAST 12 MONTHS BY POVERTY STATUS IN THE PAST 12 MONTHS FOR HOUSEHOLDS

- California Health and Human Services

- U.S. Department of Agriculture (USDA)
  - WIC Eligibility and Coverage Rates

**Energy Costs**
- Affordable Home Energy Bills
- AAA County Average Gas Prices

**Homelessness/Housing**
- California Housing Partnership - Housing Needs
- https://homeforallsmc.org/challenge/
- SAN MATEO COUNTY 2022 Affordable Housing Needs Report
- 2022 SAN MATEO COUNTY One Day Homeless Count and Survey Report
- California Federal Rental Assistance Fact Sheet

**Poverty**
APPENDIX C: COMMUNITY NEEDS ASSESSMENT

- US Census: American Community Survey (2021: ACS 5-Year Estimates Subject Tables)
  - S1701 POVERTY STATUS IN THE PAST 12 MONTHS
  - S1901 INCOME IN THE PAST 12 MONTHS (IN 2021 INFLATION-ADJUSTED DOLLARS)

- San Mateo County Census Data Profile
  - County of San Mateo

- Social Services
  - CalHHS Dashboard 2015-2020: Annual Data File

- Transportation
  - US Census: American Community Survey (2021: ACS 5-Year Estimates Subject Tables)
    - B08541 MEANS OF TRANSPORTATION TO WORK BY VEHICLES AVAILABLE FOR WORKPLACE GEOGRAPHY
Client Survey
In March 2023, San Mateo County’s Community Action Agency released a client survey, through the eight Core Service Agencies, designed to elicit feedback about the types of services needed to help them address needs and increase well-being and self-sufficiency as well as their experience accessing those services. The survey was open from March 20, 2023, to March 30, 2023. Over the ten-day period, SMC-CAA received 176 responses. Of the 176 responses, 143 individuals completed the entire survey. Partially completed surveys were included in the data analysis. The survey was offered in five languages: Cantonese, English, Mandarin, Spanish and Tagalog. This was the first time that the SMC CAA client survey was offered in languages other than English and Spanish. The number of responses by language and question are presented in Table 1.

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<thead>
<tr>
<th>TABLE 1</th>
<th>QUESTION NUMBER</th>
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<tbody>
<tr>
<td>LANGUAGE</td>
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<tr>
<td>English</td>
<td>122 Responses</td>
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<tr>
<td>Answered</td>
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<td>Cantonese</td>
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<tr>
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</tbody>
</table>

Answered Total | 173 | 169 | 165 | 175 | 147

Total Responses = 176
Survey responses from each language were consolidated for analysis. Results of the client survey are summarized in the following tables.

Please indicate the number of people living in your household.

```
<table>
<thead>
<tr>
<th>NUMBER OF PEOPLE LIVING IN HOUSEHOLD</th>
<th>% RESPONSES</th>
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</thead>
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<td>1</td>
<td>16%</td>
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<td></td>
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<tr>
<td>10</td>
<td></td>
</tr>
</tbody>
</table>
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Please indicate your total household income:

```
<table>
<thead>
<tr>
<th>TOTAL HOUSEHOLD INCOME</th>
<th>% RESPONSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0-$20,000</td>
<td>42%</td>
</tr>
<tr>
<td>$20,001-$40,000</td>
<td>26%</td>
</tr>
<tr>
<td>$40,001-$60,000</td>
<td>21%</td>
</tr>
<tr>
<td>$60,001 &amp; ABOVE</td>
<td>10%</td>
</tr>
</tbody>
</table>
```
Approximately half of clients surveyed live in a household comprised of four or less individuals who are supported by $20,000 or less per year.

Select the 3 most important concerns for you and/or your family:

<table>
<thead>
<tr>
<th>TOP 3 CONCERNS FOR YOU AND/OR YOUR FAMILY</th>
</tr>
</thead>
<tbody>
<tr>
<td>TRANSPORTATION &amp; VEHICLE REPAIR</td>
</tr>
<tr>
<td>HOMELESSNESS</td>
</tr>
<tr>
<td>FORECLOSURE PREVENTION</td>
</tr>
<tr>
<td>FINANCIAL EDUCATION</td>
</tr>
<tr>
<td>ENERGY &amp; OTHER UTILITY COSTS</td>
</tr>
<tr>
<td>EMPLOYMENT SERVICES</td>
</tr>
<tr>
<td>FOOD</td>
</tr>
<tr>
<td>HOUSING/RENTAL ASSISTANCE</td>
</tr>
<tr>
<td>OTHER (PLEASE SPECIFY)</td>
</tr>
</tbody>
</table>

The top three concerns identified by survey respondents are food, housing/rent assistance and energy and other utility costs. Transportation and vehicle repair was also identified as a significant concern. The 8% specified as “other” expressed concerns related to medical care and expenses, caregiver needs, disaster preparedness, services for the disabled and housing for seniors.
In the following areas, to what extent are the services in the community adequate to meet the needs in the community?

Although food was identified as the top concern at 81%, the majority of respondents, 84%, felt that there are generally adequate or somewhat adequate services available in the community to meet food related needs. In contrast, approximately 55% of respondents felt that there were generally adequate or somewhat adequate services that provide help with housing, 57% for energy/utility costs and 47% for transportation/vehicle repair.
Partner Survey
In March 2023, San Mateo County's Community Action Agency released a partner survey that was sent out electronically by Human Service Agency staff. Community stakeholders who received the survey included a wide variety of stakeholders, including agencies that provide services to community members, related to safety net services, education, faith-based services and other services to assist people, focused on agencies that serve community members with lower incomes. The survey was open from March 23, 2023, until March 31, 2023. SMC-CAA received 37 partner responses and all respondents completed the survey in full.

Respondents of the partner survey identified housing/rental assistance, homelessness, and food as the three most important community needs. The 16% specified as “other” expressed concerns related to behavioral/mental health, drug and alcohol treatment, transitional housing for veterans, senior housing and technology access and education.
SMC-CAA partners provided insight into the extent existing services available to the community are adequate to meet community needs.

1. Affordable Housing/Rental Assistance - 95% of partner agencies responded that housing/rental assistance is one of the most important needs in the community. The majority of partner agencies, 70%, deemed the services available are not adequate to meet community needs with the remaining 30% indicating services available were somewhat adequate to meet the need depending on the specifics of a case.

2. Homeless Services - 84% of partner agencies responded that homelessness is a major concern for the clients they serve which stands in contrast to the 8% of clients who indicated homelessness was one of their top three concerns. This difference may be related to how the survey was structured, as the question to clients was a personal assessment of their/their family’s needs, while the partner agency respondents were asked to assess the community’s overall needs. Furthermore, given the link between lack of affordable housing and homelessness, clients who are concerned about their housing stability may have indicated that concern by selecting the housing response choice, rather than selecting the homelessness response choice.

3. Food - Coming in a distant third, 35% of partner agencies responded that food insecurity is a substantial challenge in the community and over 80% of partner agencies replied that services in the community are generally adequate to somewhat adequate to meet the needs of the community. Again, this result differs from the client survey results. One aspect of this difference may be linked to that many of the client surveys were completed during food distribution events, which may have made food needs especially salient for clients completing surveys.