Before Starting the CoC Application

You must submit all three of the following parts in order for us to consider your Consolidated Application complete:

1. the CoC Application,
2. the CoC Priority Listing, and
3. all the CoC’s project applications that were either approved and ranked, or rejected.

As the Collaborative Applicant, you are responsible for reviewing the following:

1. The FY 2023 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2023 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2023 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions
Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

Attachments
Questions requiring attachments to receive points state, “You Must Upload an Attachment to the 4B. Attachments Screen.” Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.
- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD’s funding determination.
- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).
1A. Continuum of Care (CoC) Identification

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1A-1. CoC Name and Number: CA-505 - Contra Costa County CoC

1A-2. Collaborative Applicant Name: Contra Costa Health Services

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Contra Costa Health Services
HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

In the chart below for the period from May 1, 2022 to April 30, 2023:

1. select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or

2. select Nonexistent if the organization does not exist in your CoC’s geographic area:

<table>
<thead>
<tr>
<th>Organization/Person</th>
<th>Participated in CoC Meetings</th>
<th>Voted, Including Electing CoC Board Members</th>
<th>Participated in CoC's Coordinated Entry System</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Affordable Housing Developer(s)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>2. CDBG/HOME/ESG Entitlement Jurisdiction</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>3. Disability Advocates</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>4. Disability Service Organizations</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>5. EMS/Crisis Response Team(s)</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>6. Homeless or Formerly Homeless Persons</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>7. Hospital(s)</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>8. Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)</td>
<td>Nonexistent</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>9. Law Enforcement</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>10. Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>11. LGBTQ+ Service Organizations</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>12. Local Government Staff/Officials</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>13. Local Jail(s)</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>14. Mental Health Service Organizations</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>15. Mental Illness Advocates</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Description</td>
<td>Yes/No</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>-----------------------------------------------------------------------------</td>
<td>---------</td>
<td></td>
</tr>
<tr>
<td>16.</td>
<td>Organizations led by and serving Black, Brown, Indigenous and other People of Color</td>
<td>Yes/Yes/Yes</td>
<td></td>
</tr>
<tr>
<td>17.</td>
<td>Organizations led by and serving LGBTQ+ persons</td>
<td>Yes/Yes/Yes</td>
<td></td>
</tr>
<tr>
<td>18.</td>
<td>Organizations led by and serving people with disabilities</td>
<td>Yes/No/Yes</td>
<td></td>
</tr>
<tr>
<td>19.</td>
<td>Other homeless subpopulation advocates</td>
<td>Yes/Yes/Yes</td>
<td></td>
</tr>
<tr>
<td>20.</td>
<td>Public Housing Authorities</td>
<td>Yes/Yes/Yes</td>
<td></td>
</tr>
<tr>
<td>21.</td>
<td>School Administrators/Homeless Liaisons</td>
<td>Yes/Yes/Yes</td>
<td></td>
</tr>
<tr>
<td>22.</td>
<td>Street Outreach Team(s)</td>
<td>Yes/Yes/Yes</td>
<td></td>
</tr>
<tr>
<td>23.</td>
<td>Substance Abuse Advocates</td>
<td>Yes/Yes/Yes</td>
<td></td>
</tr>
<tr>
<td>24.</td>
<td>Substance Abuse Service Organizations</td>
<td>Yes/Yes/Yes</td>
<td></td>
</tr>
<tr>
<td>25.</td>
<td>Agencies Serving Survivors of Human Trafficking</td>
<td>Yes/Yes/Yes</td>
<td></td>
</tr>
<tr>
<td>26.</td>
<td>Victim Service Providers</td>
<td>Yes/No/Yes</td>
<td></td>
</tr>
<tr>
<td>27.</td>
<td>Domestic Violence Advocates</td>
<td>Yes/No/Yes</td>
<td></td>
</tr>
<tr>
<td>28.</td>
<td>Other Victim Service Organizations</td>
<td>Yes/No/No</td>
<td></td>
</tr>
<tr>
<td>29.</td>
<td>State Domestic Violence Coalition</td>
<td>Yes/No/No</td>
<td></td>
</tr>
<tr>
<td>30.</td>
<td>State Sexual Assault Coalition</td>
<td>No/No/No</td>
<td></td>
</tr>
<tr>
<td>31.</td>
<td>Youth Advocates</td>
<td>Yes/Yes/Yes</td>
<td></td>
</tr>
<tr>
<td>32.</td>
<td>Youth Homeless Organizations</td>
<td>Yes/Yes/Yes</td>
<td></td>
</tr>
<tr>
<td>33.</td>
<td>Youth Service Providers</td>
<td>Yes/Yes/Yes</td>
<td></td>
</tr>
</tbody>
</table>

**Other: (limit 50 characters)**

By selecting "other" you must identify what "other" is.

---

1B-2. Open Invitation for New Members.  

NOFO Section V.B.1.a.(2)

Describe in the field below how your CoC:

1. communicated a transparent invitation process annually (e.g., communicated to the public on the CoC's website) to solicit new members to join the CoC;
2. ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
3. invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities).

(limit 2,500 characters)
1. TRANSPARENT INVITATION: CoC encourages new members & communicates process to join at least MONTHLY at CoC mtgs. Monthly CoC Bd mtgs are public & announced via CoC listserv (2300+ emails), CoC WEBSITE & other community mtgs. Sign-in/Zoom registrations capture contact info for follow-up. All CoC mtgs hold space for attendees to express interest in membership, suggest ideas for future mtgs, & recommend add’l partners to invite. All are encouraged to attend mtgs, offer input & join the CoC. CoC lead offers TA sessions to assist w/ CoC board applications.

2. ACCESSIBILITY: Accessible PDF versions of materials are avail. on CoC WEBSITE. Info at CoC mtgs, including joining info, is presented written & orally. All CoC meetings have IN-PERSON & VIRTUAL options. In person mtgs held at ADA accessible facilities. VIRTUAL live transcripts w/ recordings posted on CoC website w/ closed caps. Interp. & disability svcs avail. In Sept 2022, CoC Board application was translated into 4 LANGUAGES and the CoC hosted an online support session for prospective members to understand & complete the application process.

3. INVITATION & EQUITY: CoC reaches out to people currently or formerly exp. hmlsns to encourage joining the CoC through paid lived experience advisory work, PIT Count volunteer opps, Homeless Awareness Month events & the Youth Advisory Council (YAC). The CoC also maintains a list of ppl who have participated in the CoC and ID as having LE so the CoC can continue to reach out and engage them. 7 people with lived experience of homelessness, incl one youth, serve on the CoC Bd, encouraging others with LE to get involved with the CoC. 2022 CoC bylaws revisions increased designated LE seats on CoC Board. CoC Director invites new partners & orgs to join CoC, focusing on underrep’ed agencies & culturally spec. demographics, including BIPOC, LGBTQ+ (incl Rainbow Community Center) and ppl with disabilities & orients them to CoC’s Written Standards, CE, & HMIS systems. CoC lead agency H3 provided direct TA to BIPOC-led orgs that expressed interest in CoC-funding. The CoC wrk’d with the YAC, County Cmty Advisory Bd on Reentry, Adult Protect Services, and Employment & Human Services’ Elderly Services & others to solicit new members who reflect needs & cmmty demographics. Mnthly & Qrtly CoC mtgs on special topics & pops (education, crim justice) also brought new partners to CoC.

<table>
<thead>
<tr>
<th>1B-3. CoC’s Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.</th>
</tr>
</thead>
<tbody>
<tr>
<td>NOFO Section V.B.1.a.(3)</td>
</tr>
</tbody>
</table>

Describe in the field below how your CoC:

1. solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;

2. communicated information during public meetings or other forums your CoC uses to solicit public information;

3. ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and

4. took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.
1. SOLICITED & CONSIDERED BROAD OPINIONS: Monthly provider mtgs create opportunities for service providers to share feedback on systemic issues. Monthly public CoC Bd & Cmte mtgs are shared via CoC listserv (2300+ emails), newsletter, website, County bulletin bds & public mtg announcements. All mtg. agendas allow time for public comments & questions. CoC engages w/City Councils, police chiefs, City Homeless Taskforces & participate on Cnty Advisory Cncl dedicated to hsg & hmlsns. CoC holds stkhldr mtgs 2x year to seek community feedback, & CoC hlds open events during annual Hmls Awareness Month where general public discusses sys of care, resources & cmmty needs, & people with lived experience (PWLE) speak about their exp of homelessness in the CoC. Youth Action Council supports CoC in identifying needs of hmls youth & TAY. Input solicited from Resident Action Panel, comprised of PWLE in adult hmlss prgrms. CoC partner agency Hope Solutions' Resident Empowerment Program & people with LE are also invited to offer input through participation in multiple committees. Lived experience advisors developed satisfaction survey for all CoC provider participants.

2. COMMUNICATION: Info is communicated during CoC mtgs via presentations, handouts on important topics & updates along w/Q&A for Bd members & the public. Info also widely disseminated via CoC website and listserv. CoC provides QUARTERLY REPORTS to Board of Supervisors. The CoC uses an online Data Request portal to facilitate community access to HMIS & other local data related to homelessness.

3. ACCESSIBILITY: Accessible PDF versions of CoC materials are avail. on CoC WEBSITE. Info at CoC mtgs, including joining info, is presented written & orally. All CoC meetings have IN-PERSON & VIRTUAL options. In person mtgs held at ADA accessible facilities. VIRTUAL live transcripts w/ recordings posted on CoC website w/ closed caps. Interp. & disability svcs avail.

4. INFO GATHERING/CONSIDERATION: CoC & Collab App bring info gathered from surveys, focus groups, public meetings, stkholder convenings & all other forums to CoC Bd & Cmtes for fdbk on planning & action recs, incl. annual compliance monitoring process, CoC Board nominating process & bylaws revisions. CoC Bd reports decisions to CoC & public to close feedback loops. PWLE led review & rank process for Special NOFO, designed a client satisfaction survey for CoC providers, and drafted a workplan for CE prioritization & assessment redesign.

<table>
<thead>
<tr>
<th>1B-4. Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.</th>
<th>NOFO Section V.B.1.a.(4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe in the field below how your CoC notified the public:</td>
<td></td>
</tr>
<tr>
<td>1. that your CoC will consider project applications from organizations that have not previously received CoC Program funding;</td>
<td></td>
</tr>
<tr>
<td>2. about how project applicants must submit their project applications–the process;</td>
<td></td>
</tr>
<tr>
<td>3. about how your CoC would determine which project applications it would submit to HUD for funding; and</td>
<td></td>
</tr>
<tr>
<td>4. ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats.</td>
<td></td>
</tr>
</tbody>
</table>
CoC provided PUBLIC NOTIFICATION FOR PROPOSALS through posting on CoC WEBSITE & ANNOUNCING ALL PUBLIC FORUMS ONLINE. 1. ORGS NOT PREV FUNDED: CoC encourages & considers apps from orgs not prev. funded. 2023 Funding Committee convened monthly starting Feb 2023 (MEETINGS POSTED ON CoC WEBSITE & OPEN TO PUBLIC), w/ focus on ENCHANCING CLARITY OF NOFO PROCESS FOR NEW PROVIDERS using FEEDBACK COLLECTED from providers, Review & Rank panelists, applicants & staff after 2022 competition. CoC hosted PUBLIC NOFO 101 TRAINING on 6/9/23 to inform potential applicants about NOFO process & eligible uses of funding –designed specifically for orgs new to CoC funding. CoC encouraged new orgs to seek CoC funds through the 7/10/23 PUBLIC SOLICITATION POSTED ON CoC WEBSITE & sent to CoC listserv (2300+ emails) notifying public that local competition was open and accepting project apps. Solicitation included an invitation to the 7/26/23 TA wrkshp & encouraged broad sharing w/new & previously unfunded orgs. TA wrkshp & new project funding opps also announced at CoC Bd mtg. At least 2 new orgs submitted letter of interest & 3 orgs submitted new apps for funding.

2. SUBMISSION: NOFO & local process for submitting apps was posted to CoC WEBSITE, discussed at OPEN CoC/ESG providers mtg, CoC Bd mtgs & TA wrkshp - ALL MEETINGS ANNOUNCED ON CoC WEBSITE & Qs from new orgs were answered. TA offered to anyone new to NOFO process. Method for submitting apps discussed in PUBLIC SOLICITATION & DISCUSSED AT TA WRKSHP, CoC MTGS.

3. PROCESS: CoC Bd voted at public mtg to set threshold criteria for new/renewal project apps informed by cmmty feedback & aligned with cmmty standards & priorities. CoC INFORMED APPLICANTS & PUBLIC about process for determining which apps it would submit to HUD through Public Solicitation, TA wrkshp & TA materials posted on CoC website & sent to CoC listserv. Direct TA for new & renewal project apps was offered to all (incl those who opted not to apply) to assist w/mtg threshold requmts & understanding scoring & ranking process, local cmmty data, & priorities.

4. ACCESSIBILITY: Accessible PDF versions of materials were made available on the CoC website. Info at mtgs was presented written & orally. NOFO 101 & TA workshop occurred virtually w/ interpretation & disability svcs avail w/ recordings posted on CoC website for those needing addit'l viewing & review time. Effective 3/23, CoC & committee meetings offered in virtual and in-person format.
1C. Coordination and Engagement

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1C-1. Coordination with Federal, State, Local, Private, and Other Organizations.

NOFO Section V.B.1.b.

In the chart below:

1. select yes or no for entities listed that are included in your CoC’s coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or

2. select Nonexistent if the organization does not exist within your CoC’s geographic area.

<table>
<thead>
<tr>
<th>Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects</th>
<th>Coordinates with the Planning or Operations of Projects?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Funding Collaboratives</td>
<td>Yes</td>
</tr>
<tr>
<td>2. Head Start Program</td>
<td>Yes</td>
</tr>
<tr>
<td>3. Housing and services programs funded through Local Government</td>
<td>Yes</td>
</tr>
<tr>
<td>4. Housing and services programs funded through other Federal Resources (non-CoC)</td>
<td>Yes</td>
</tr>
<tr>
<td>5. Housing and services programs funded through private entities, including Foundations</td>
<td>Yes</td>
</tr>
<tr>
<td>6. Housing and services programs funded through State Government</td>
<td>Yes</td>
</tr>
<tr>
<td>7. Housing and services programs funded through U.S. Department of Health and Human Services (HHS)</td>
<td>Yes</td>
</tr>
<tr>
<td>8. Housing and services programs funded through U.S. Department of Justice (DOJ)</td>
<td>Yes</td>
</tr>
<tr>
<td>9. Housing Opportunities for Persons with AIDS (HOPWA)</td>
<td>Yes</td>
</tr>
<tr>
<td>10. Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)</td>
<td>Nonexistent</td>
</tr>
<tr>
<td>11. Organizations led by and serving Black, Brown, Indigenous and other People of Color</td>
<td>Yes</td>
</tr>
<tr>
<td>12. Organizations led by and serving LGBTQ+ persons</td>
<td>Yes</td>
</tr>
<tr>
<td>13. Organizations led by and serving people with disabilities</td>
<td>Yes</td>
</tr>
<tr>
<td>14. Private Foundations</td>
<td>Yes</td>
</tr>
<tr>
<td>15. Public Housing Authorities</td>
<td>Yes</td>
</tr>
<tr>
<td>16. Runaway and Homeless Youth (RHY)</td>
<td>Yes</td>
</tr>
<tr>
<td>17. Temporary Assistance for Needy Families (TANF)</td>
<td>Yes</td>
</tr>
<tr>
<td>Other:(limit 50 characters)</td>
<td></td>
</tr>
</tbody>
</table>
1C-2. CoC Consultation with ESG Program Recipients.

NOFO Section V.B.1.b.

Describe in the field below how your CoC:

1. consulted with ESG Program recipients in planning and allocating ESG Program funds;
2. participated in evaluating and reporting performance of ESG Program recipients and subrecipients;
3. provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area; and
4. provided information to Consolidated Plan Jurisdictions to address homelessness within your CoC’s geographic area so it could be addressed in the Consolidated Plan update.

(limit 2,500 characters)

1. CONSULTATION: CoC Bd has an ESG rep seat & meets monthly w/ ESG recipients/Con Plan juris. to coordinate efforts, align funding priorities, & assess needs re: PLANNING & ALLOCATION. Most ESG recips are also CoC recips, infusing convos about ESG-funding into all CoC considerations. CoC & ESG providers meet monthly to discuss issues, including leveraging ESG funds. Both State & Entitlement Juris. meet to decide & approve ESG funding priorities for all juris., consistent w/CoC strategic plan & Con Plan priorities & using review & rank process that scores projects on target pop/org capacity. The CoC sought input from ESG recip re: allocation of ESG-CV funds at 3 open mtgs. A CoC Bd. subcommittee took these recommendations, along with data revealing system gaps, underserved populations & utilization trends, to advise CoC Bd., which made final decisions. CoC Bd. is staffed by ESG recipients & ESG prog manager overseeing ESG-CV fund distribution.

2. EVALUATION & REPORTING: County ESG & Entitlement Juris. Reps sit on CoC Bd & participate in System Perf Measures Cmte that evaluates CoC/ESG providers & CES. SPMs across CoC/ESG pgms are aligned to reflect system as a whole. CoC & ESG program outcomes are measured w/ respect to targets & reported to CoC & HUD. ESG Rep & Entitlement Juris. Reps provides regular report outs to CoC Bd on ESG funding, ESG program perf & ESG program news.

3. CON PLAN PIT & HIC: CoC shares data (PIT, HIC, & other) at least annually w/ State & all jurisdictions within the geographic area to inform planning & funding decisions. Data sharing is bidirectional & Coc lead agency provides HMIS data to assist Con Plan jurisdiction w/ completing data requests for submission to ESG program.

4. CON PLAN INFO: The CoC has provided Con Plan jurisdictions w/ local homelessness information to inform Plan updates through regular & ongoing communication, specific data requests, & special town halls & focus groups. Con Plan juris. reps also sit on CoC Bd. & attend CoC meetings regularly to keep abreast of what is happening in CoC.

1C-3. Ensuring Families are not Separated.

NOFO Section V.B.1.c.
Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate family members regardless of each family member's self-reported sexual orientation and gender identity:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.</td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>2. Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.</td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>3. Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.</td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>4. Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC’s geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.</td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>5. Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers.</td>
<td></td>
<td>No</td>
</tr>
</tbody>
</table>

1C-4. CoC Collaboration Related to Children and Youth–SEAs, LEAs, School Districts.

NOFO Section V.B.1.d.

Select yes or no in the chart below to indicate the entities your CoC collaborates with:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Youth Education Provider</td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>2. State Education Agency (SEA)</td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>3. Local Education Agency (LEA)</td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>4. School Districts</td>
<td></td>
<td>Yes</td>
</tr>
</tbody>
</table>

1C-4a. Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.

NOFO Section V.B.1.d.

Describe in the field below the formal partnerships your CoC has with at least one of the entities where you responded yes in question 1C-4.

(limit 2,500 characters)
1. FORMAL P’SHIPS W/ YOUTH ED: CoC Bd Seat for Ed/Vocational Srvcs Rep in CoC bylaws is held by Contra Costa County Office of ED (CCOE) Homeless Education Liaison, who works w/ hmls families across the County & works w/ CoC & CCOE to provide coordinated svcs for hmls youth to support them to finish school or pursue careers. CoC Bd member Homeless Ed Liaison facilitates Foster Youth Services/Homeless Ed Collaborative, a quarterly meeting for districts/svc providers to coordinate svcs & provide support to Foster Youth & McKinney-Vento District Education Liaisons, foster & homeless students & families. CoC prtnrs on dvlpmt/hosting of annual foster & hmls youth symposium w/CCOE. CoC partners w/legal svcs to provide hmls youth w/ ed rights info. For community needs assessment, CoC lead H3 collab w/ CCOE, ILSP, youth ed providers, school districts & community colleges, invited to focus gps & mtgs to seek input on youth needs. Outreach resulted in increased #s of youth & young adult focus gp participants. H3 working w youth devt org RYSE to expand reach & comprehensiveness of youth input through cross-county youth advisory council for CoC.

2. FORMAL PARTNERHIPS WITH SEA: McKinney-Vento (MV)-FUNDED CCOE HAS SEAT ON COC BD, per CoC GOVERNANCE CHARTER & BYLAWS. CoC reps attend LEA or SEA mtgs/planning events; and hsg & svc providers (e.g. RHY providers) attend CoC MTGS/events.

3. FORMAL PARTNERHIPS w/ LEA & SCHOOL DISTRICTS: CoC lead H3 works w/MV-funded District HMLS ED LIAISONS to screen for MV eligibility. Families IDed as possibly exp homelessness receive follow up svc & MV eligibility. Families referred to District Hmls Liaison to address edu needs of hmls families in CoC. Districts share data regularly w/ HMIS Lead. LEA reps attend CoC mtgs, planning events. County school district is county dept-affiliate of Collab App & coordinates directly w/Cnty Headstart program to obtain preschool-aged hmls data.

COLLAB W/ YOUTH ED: CoC’s TAY CORE Outreach team & Youth Action Council work closely w/ CMMTY COLLEGES to engage & provide svcs to students exp. or at-risk of hmlsns. Cmmty Colleges partner w/ CoC during PIT counts. CoC collabs w/youth providers (RYSE Ctr, First Place for Youth & Fred Finch Youth Ctr) that offer access to ed, health/mental health, emplmt, & training prgms.

COLLAB W/ SCHOOL DISTRICTS: Cross org collab occurs w/ School Districts, who REGULARLY ATTEND COC MTGS. TAY CORE Outreach team cross trains w/ school districts & MV liaisons on MV rights.

1C-4b. Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services.

NOFO Section V.B.1.d.

Describe in the field below written policies and procedures your CoC uses to inform individuals and families who become homeless of their eligibility for educational services.

(limit 2,500 characters)
WRITTEN STANDARDS FOR COC- & ESG-FUNDED PROGRAMS REQUIRE that all programs serving families w/children or unaccompanied youth:
1. CONSIDER THE EDUCATION NEEDS OF CHILDREN IN HOUSING DECISIONS, including ensuring that children can remain close to their school.
2. INFORM FAMILIES/CHILDREN & YOUTH OF ED RIGHTS, provide written materials, help w/enrollment & linkage to McKinney Vento (MV) Liaisons.
3. NOT REQUIRE ENRLMNT at NEW SCHOOL to receive svcs.
4. ALLOW PARENTS or YOUTH to make SCHOOL PLCMT DECISIONS.
5. NOT REQUIRE AFTERSCHOOL or ED PRGRMS that would INTERFERE w/regular school day or prohibit them from staying at preferred school.
6. PÔST NOTICES OF STUDENTS' RIGHTS at each homeless pgm site.
7. DESIGNATE STAFF to ENSURE children exp. homelessness are receiving the ed pgms/svcs they are entitled to & COORDINATE between CoC, Dept of Social Srvcs, Office of Ed, MV Coordination, & other providers.
CoC TRAINS providers to ensure awareness & compliance w/ these requirements – 1/9/23 CoC training provided by CCOE on How to Support Families w/ Children & Unaccompanied Minors.
In addition, the CoC offers families w/ children EXTENSIVE SUPPORT to understand their eligibility for educational services & assistance with accessing services:
1. Homeless Services Education Liaison & Street Outreach partners share this information w/ students & families experiencing homelessness during counseling, outreach, & case management sessions.
2. Families are provided this information multiple times w/ reminders & continued assistance to understand eligibility.
3. Districts/Local Ed Agencies screen for MV eligibility at enrollment. Families flagged as possibly experiencing homelessness receive followup regarding current living situation and MV eligibility for support services. Families are referred to District Homeless Liaison for services.
4. LEAs are required to provide outreach for identification (i.e., homeless education rights posters in district & school offices) & to train school and district staff regarding common signs of homelessness.

1C-4c. Written/Formal Agreements or Partnerships with Early Childhood Services Providers.

NOFO Section V.B.1.d.

Select yes or no in the chart below to indicate whether your CoC has written formal agreements or partnerships with the listed providers of early childhood services:

<table>
<thead>
<tr>
<th></th>
<th>MOU/MOA</th>
<th>Other Formal Agreement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Birth to 3 years</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>2. Child Care and Development Fund</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>3. Early Childhood Providers</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>4. Early Head Start</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>5. Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>6. Head Start</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>7. Healthy Start</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>8. Public Pre-K</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>
In the chart below select yes or no for the organizations your CoC collaborates with:

<table>
<thead>
<tr>
<th>Organizations</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. state domestic violence coalitions</td>
<td>Yes</td>
</tr>
<tr>
<td>2. state sexual assault coalitions</td>
<td>No</td>
</tr>
<tr>
<td>3. other organizations that help this population</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:

1. update CoC-wide policies; and
2. ensure all housing and services provided in the CoC’s geographic area are trauma-informed and can meet the needs of survivors.

(limit 2,500 characters)
1. CoC regularly collaborates with victim service provider STAND! and other organizations that provide housing and services to survivors of domestic violence, dating violence, sexual assault, and stalking to update CoC policies. The CoC Board, which updates CoC0-wide policies, includes: (a) homeless service provider Hope Solutions, which serves domestic violence survivors and their children through its Project Home SAFE RRH project w/ VSP provider STAND!; (b) Housing Authority of Contra Costa County, which serves survivors of domestic violence, dating violence, sexual assault or stalking and has expertise in assisting families that have broken up into two households as a result of DV; and (c) a person with lived experience of domestic violence and homelessness. Coc lead agency h3 collaborated with STAND! VSP to create a housing referral process through CES for DV survivors. To ensure equity and equal access for dv survivors, STAND! Makes referrals through the 3 CES access points. STAND! & the CES case manager maintain a live/shared list (w/o personally identifying information) to ensure survivors have access to mainstream housing resources. Additional CoC policy updates to meet the needs of survivors include the CES P&P & the emergency transfer policy outlined in the written standards.

2. CoC regularly collaborates with victim service provider STAND!, which is a member of the California Partnership to End Domestic Violence, & other organizations that provide housing and services to survivors of domestic violence, dating violence, sexual assault, and stalking to ensure housing and services are trauma-informed and can meet the needs of survivors by providing regular CoC trainings to all CoC providers. CoC provides annual trainings with VSP STAND! on VAWA compliance and strategies for serving survivors of domestic violence (provided 3/13/23). The CoC is also partnering with experienced provider SHELTER, Inc. to increase trauma-informed housing that meets the needs of survivors by seeking domestic violence bonus funding through the Planting Roots project & renewal funding for Hope Solutions’ Project Home SAFE project.

<table>
<thead>
<tr>
<th>1C-5b.</th>
<th>Coordinated Annual Training on Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.</th>
</tr>
</thead>
<tbody>
<tr>
<td>NOFO Section V.B.1.e.</td>
<td></td>
</tr>
</tbody>
</table>

Describe in the field below how your CoC coordinates to provide training for:

1. Project staff that addresses best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and

2. Coordinated Entry staff that addresses best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).

(limit 2,500 characters)
1. & 2. CoC PROJECT & CE STAFF TRAINING: All CoC project and CE staff are trained on working with domestic violence, dating violence, sexual assault, stalking, and human trafficking survivors & related best practices. Trainings include:
A. ANNUAL TRAINING. On 3/13/23, the CoC collaborated with VSP STAND! to provide the ANNUAL MANDATORY training on VAWA compliance & strategies for serving survivors of domestic violence, dating violence, human trafficking, stalking, & sexual assault. During this training all CoC providers and CE staff were informed about the requirements of VAWA, CoC & ESG EMERGENCY TRANSFER PLAN provisions, SAFETY PLANNING PROTOCOLS, & were trained on using BEST PRACTICES to serve survivors, including how to address survivor needs using a TRAUMA- INFORMED, SURVIVOR-CENTERED approach that prioritizes client choice and safety.
B. SHARING STANDARDS, POLICIES & PROCEDURES. New providers & program staff are trained on & required to review the CoC/ESG Written Standards and Policies & Procedures on serving survivors. CE Policies & Procedures require CE assessment staff training on TRAUMA INFORMED ASSESSMENTS.
C. DATA PROTOCOL & TRAINING. HMIS governance charter requires confidentiality training for all staff. Updates & new requirements are shared at monthly HMIS Policy Committee meetings.
D. CLOSE COORDINATION W/VSP: Sole CoC VSP STAND! actively participates in the CoC and educates CoC project and CE staff to ensure they know how to connect clients to their services, including supportive services and housing options (ES, TH, and rental assistance) for survivors and their families, as well as their 24/7 crisis line which uses a SURVIVOR--CENTERED, housing first referral model that centers SURVIVOR CHOICE.

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1C-5c. Implemented Safety Planning, Confidentiality Protocols in Your CoC's Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.

NOFO Section V.B.1.e.

Describe in the field below how your CoC’s coordinated entry includes:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td>safety planning protocols; and</td>
</tr>
<tr>
<td>2.</td>
<td>confidentiality protocols.</td>
</tr>
</tbody>
</table>

(limit 2,500 characters)
1. SAFETY PLANNING: Per HUD & Violence Against Women Act (VAWA) guidelines, the CES P&P and CoC Written Standards include EMERGENCY TRANSFER PLANS for survivors of domestic violence, dating violence, sexual assault, trafficking or stalking. Policy revisions are underway to reflect the expanded criteria for homelessness related to domestic violence, trauma, & lack of safety.

An Emergency Transfer Plan provides for emergency transfers for survivors of domestic violence receiving rental assistance or residing in units subsidized under a covered housing program (including CoC- and ESG-funded programs) if the participant is a survivor of domestic violence, dating violence, sexual assault or stalking; the participant expressly requests the transfer; and either: a) The participant reasonably believes there is a threat of imminent harm from further violence if the participant remains in the same dwelling unit; or b) If the participant is a survivor of sexual assault, the sexual assault occurred on the premises during the 90-calendar-day period preceding the date of the request for transfer. Participants may request an internal transfer, an external transfer, or both at the same time to transfer to the next available safe unit in the CoC. Where a family separates as part of the emergency transfer, the family member(s) receiving the emergency transfer will retain the rental assistance when possible. If a participant requests an external emergency transfer, the participant has priority over all other applicants for CoC-funded housing assistance, provided the household meets all eligibility criteria required by HUD and the program.

2. CONFIDENTIALITY PROTOCOLS: In the case of Emergency Transfers, as outlined in the CES P&P and CoC Written Standards, pgms will ensure strict confidentiality measures are in place to prevent disclosure of the location of the participant’s new unit to a person who committed or threatened to commit an act of domestic violence, dating violence, sexual assault, or stalking against the participant. CES P&Ps also note that any data collected from this population must not be entered into HMIS. Instead, the data can be entered into a COMPARABLE DATABASE that is only accessible to users who are trained in responding to domestic violence and who have passed a higher level of background checks and/or investigation.

<table>
<thead>
<tr>
<th>1C-5d.</th>
<th>Used De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.</th>
</tr>
</thead>
<tbody>
<tr>
<td>NOFO Section V.B.1.e.</td>
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</table>

Describe in the field below:

1. the de-identified aggregate data source(s) your CoC used for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and

2. how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.

(limit 2,500 characters)
1. DATA SOURCE: The CoC uses DE-IDENTIFIED, AGGREGATE DATA from VSP STAND!’s Efforts to Outcomes (ETO) COMPARABLE DATABASE to assess the scope of needs, identify system trends & gaps, & determine system planning, priorities, & funding to support survivors of DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, & STALKING. The CoC also looks at HMIS data to determine the needs of DV survivors.

2. SURVIVOR DATA USE: The CoC analyzes such de-identified, aggregate data and reports it to stakeholders and the public through the CoC’s Annual Report, which helps initiate important conversations regarding systems change, increases cross-system partnerships with survivor-serving agencies, & informs decision-making related to allocating assistance for survivors. For example, the CoC’s 2022 Annual Report found that 20% of adults served by the CoC’s crisis response systems had experienced domestic violence, more than 1/3 of those individuals were actively fleeing domestic violence at the time they enrolled into a homeless service, and 79% of survivors were women. This data has informed decisions such as the CoC’s decision to prioritize DV survivors for the Emergency Housing Voucher program and fund VSP STAND! through local Measure X funding.

The CoC also leverages STAND!’s internal data analysis, which involves reviewing monthly, quarterly, and annual data reports on crisis line calls, types of services provided, survivor demographics, survivor interactions with community liaisons, and other key metrics to assess survivor need on an ongoing basis. For example, in FY 2022-23, STAND! received 2,241 calls for assistance to their hotline. STAND! also relies upon qualitative data gleaned from daily interactions with survivors to inform the CoC about survivor needs and whether the system is meeting them.

Analyses such as this demonstrate that the CoC needs far more resources to support survivors. In response, STAND! is partnering with Hope Solutions to seek 2023 NOFO renewal funds for Project Home SAFE and SHELTER, INC. is seeking DV bonus funds to support the Planting Roots project.

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1C-5e. Implemented Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.

NOFO Section V.B.1.e.

Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:

1. whether your CoC has policies and procedures that include an emergency transfer plan;

2. the process for individuals and families to request an emergency transfer; and

3. the process your CoC uses to respond to individuals’ and families’ emergency transfer requests.

(limit 2,500 characters)
1. CoC communicates ET PLAN P&P to all ppl seeking or receiving CoC program assistance by PUBLISHING ONLINE & INFORMING THE PUBLIC through the website, listserv & public mtgs about CoC Written Standards for Providing CoC & ESG Assistance. The CoC maintains Written Standards & P&P for homeless services & hsg projects, CoC providers, & the CoC HMIS database, to ensure coordinated, streamlined, effective, & equitable approaches to homeless svcs & housing for all ppl experiencing homelessness. The policies require targeted, client centered, trauma informed care using a housing first & client choice strategy to prioritize & serve the most vulnerable residents. CoC communicates EMERGENCY TRANSFER REQUEST PROCESS to all individuals and families seeking or receiving CoC program assistance by ensuring that all CoC providers include a NOTICE OF OCCUPANCY RIGHTS UNDER THE VAWA & a VAWA LEASE AGREEMENT ADDENDUM for new & existing participants. As part of its ANNUAL COMPLIANCE MONITORING PROCESS, the CoC checks CoC provider policies and procedures and a sampling of client files to ensure that all lease agreements include the VAWA LEASE ADDENDUM. CoC providers also coordinate with PRIVATE LANDLORDS to ensure they understand the rights of domestic violence survivors and the support that CoC providers will make available to landlords in the event of a transfer.

2&3. Participants can submit ET REQUESTS directly to program staff. Requests are communicated w/ the CES Manager, incl. whether the participant is requesting an internal transfer, ET, or both. The program takes reasonable steps to support the participant in securing a new safe unit asap. If there is an internal emergency transfer request, the program seeks to immediately transfer the participant to a safe unit, with requests given at least the same priority as other transfer requests. If a unit is not available, program staff will explain the options to wait for a safe unit to become available; request an external ET; or pursue both an internal and external ET. If there is an external ET request, the eligible participant has priority over all other applicants for CoC-funded hsg assistance. Programs communicate w/ CES to facilitate referral to the next available unit through CES while retaining their original homeless status for the transfer.

---

<table>
<thead>
<tr>
<th>1C-5f. Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.</th>
</tr>
</thead>
<tbody>
<tr>
<td>NOFO Section V.B.1.e.</td>
</tr>
</tbody>
</table>

**Describe in the field below how your CoC:**

1. ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within the CoC’s geographic area; and

2. proactively identifies systemic barriers within your homeless response system that create barriers to safely house and provide services to survivors of domestic violence, dating violence, sexual assault, or stalking.

*(limit 2,500 characters)*
1. ACCESS: Coordinated Entry system provides access to ALL HOUSING AND SERVICES to anyone in Contra Costa Cnty who is experiencing a housing crisis, including SURVIVORS OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT OR STALKING. Full continuum of homeless housing & services are available through the CES, including: Prevention/Diversion: Financial assistance, case mgt to stay housed; Basic Needs & Services: showers, food, laundry, benefits enrollment, referrals; Emergency Shelter: Short-term place to stay; Housing Navigation Services: Assistance w/ locating, obtaining housing; RRH: Time-limited rental assistance w/ case mgt; PSH: Long-term housing w/ services.

Survivors can access services through all CES Access Points, including:
- CALLING: 2-1-1, operated by Contra Costa Crisis Center, provides phone portal for ppl needing homeless services.
- CARE Centers: Coordinated Assessment and Resource (CARE) Centers provide walk-in option for ppl who need homeless services, incl help w/ basic needs, light case management, housing navigation services & substance use disorder tx & support.
- CORE Outreach: Coordinated Outreach Referral & Engagement (CORE) outreach teams engage homeless individuals living outside, facilitate +/- or deliver health & basic needs svc & connect clients to CARE Centers & svcs

2. CoC PROACTIVELY IDs SYSTEMIC BARRIERS to housing & services for survivors through:
- engagement of survivors on the CoC Board, in CoC Committees, & through CoC partner agencies that serve DV survivors, including HOPE Solutions’ Resident Empowerment program
- PROVIDER SELF ASSESSMENT DASHBOARD, in which homeless service providers, including those SERVING SURVIVORS, assess their performance against CoC Program Models & HUD performance standards
- DATA COLLECTION & ANALYSIS on housing needs and outcomes of survivors, incl CoC Annual Report, to improve services & outcomes
- Working w/ property mgt partners & housing providers to reduce barriers to access housing
- Training RRH providers on Critical Time Intervention (CTI) to ensure participants are not excluded due to income limitations, which disprop. affects survivors
- Annual compliance monitoring, incl review of emergency transfer policies & VAWA info for all participants
- Mandatory, optional trainings on VAWA compliance & trauma-informed care
- Updated written standards to include UPDATED VAWA CONTENT
- Formation of CES Workgroup to develop RFP qs for CE Assess redesign

<table>
<thead>
<tr>
<th>1C-5g.</th>
<th>Ensuring Survivors With a Range of Lived Expertise Participate in Developing CoC-Wide Policy and Programs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>NOFO Section V.B.1.e.</td>
<td></td>
</tr>
</tbody>
</table>

Describe in the field below how your CoC:

1. ensured survivors with a range of lived expertise are involved in the development of your CoC-wide policy and programs; and

2. accounted for the unique and complex needs of survivors.
1. The CoC ENGAGES with VSP STAND! & develops strong, intentional boundaries to protect confidentiality of survivors. The CoC engages with STAND! and other orgs serving survivors and engage people who self-disclose their survivor status. During 2022 Homeless Awareness Month, people with lived experience of homelessness and domestic violence were featured in a public awareness video to amplify their unique challenges and intersections. The CoC Board includes people with lived experience of DV who reference this experience as informing their approach to CoC policy changes. HOPE Solutions sits on the CoC Board & collaborates w/ VSP STAND! to operate Project Home SAFE, a RRH program for DV survivors. HOPE Solutions routinely gathers input from housing participants, including DV survivors, including a listening campaign for unhoused residents in Antioch, and brings this knowledge to the CoC Board and Committee work. The CoC is seeking DV bonus funding for SHELTER, Inc.’s Planting Roots RRH project, which includes a housing navigator team that identifies affordable units w/ additional safety features; individualized safety plans to maximize the safety of DV-affected families; & a dedicated DV-certified case manager that connects clients w/ a mental health counselor, eligibility specialist, housing navigator& employment specialist.

2. CoC accounts for the unique and complex needs of survivors by providing virtual access to all public meetings, which allows survivors to take steps to maintain confidentiality, including staying off camera & using pseudonyms. All participants in CoC Board meetings, Committees, & other meetings can provide name & gender prefs, and translators are available. CoC materials are translated into multiple languages. The 3 CoC Board seats designated for PWLE homelessness include compensation. Survivors are never asked to disclose their status. DV Bonus Project Planting Roots uses a trauma-informed, strengths based approach to ensure survivors play a central role in the provision and pace of services, focused on developing housing self-sufficiency and healing.

1C-6. Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+–Anti-Discrimination Policy and Training.

NOFO Section V.B.1.f.

| 1. Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination? | Yes |
| 2. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)? | Yes |
| 3. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access in Accordance With an Individual’s Gender Identity in Community Planning and Development Programs (Gender Identity Final Rule)? | Yes |


NOFO Section V.B.1.f.

Describe in the field below:
1. how your CoC regularly collaborates with LGBTQ+ and other organizations to update its CoC-wide anti-discrimination policy, as necessary to ensure all housing and services provided in the CoC are trauma-informed and able to meet the needs of LGBTQ+ individuals and families;

2. how your CoC assisted housing and services providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy;

3. your CoC’s process for evaluating compliance with your CoC’s anti-discrimination policies; and

4. your CoC’s process for addressing noncompliance with your CoC’s anti-discrimination policies.

(limit 2,500 characters)

1. CoC Board, w/ PUBLIC INPUT, REVIEWS & UPDATES WRITTEN STANDARDS, P&P, & GOVERNANCE CHARTER/BYLAWS on an annual/semi-annual basis. WRITTEN STANDARDS (updated 5/23) includes policies on Nondiscrim & Equal Access, including: All CoC- & ESG-funded pgms shall comply w/ applicable civil rights laws, incl EQUAL ACCESS FINAL RULE & GENDER IDENTITY FINAL RULE, nondiscrim & equal opp reqs in the Fair Housing Act, Title VI of the Civil Rights Act of 1964, Sect 504 of Rehab Act of 1973 & Title II of ADA. Written standards state CoC will not discrim against current/prospective participant on basis of race, color, ctznshp, national origin, ancestry, religion, sex, age, familial status, disability, actual/ perceived sex, orientation, gender ID/exprsn, marital status, income, genetic info, DV survivor status, or other rsns prohib by law. CoC Board (open to public) APPROVED BYLAWS REVISIONS to include more inclusive language re: gender ID & sexual orientation. CES P&Ps (updated 9/22) include guidance on FAIR HSG & MARKETING, incl. NON-DISCRIM POLICY. CoC approved PGM MODELS & PERFORMANCE STNDS dev’d w/ commnty input. CoC provided FAIR HSG/Equal Access Rule trng 8/23 w/ ECHO Hsb & Bay Area Legal Aid. 2. CoC ASSISTED PROVIDERS IN DEV’PING PROJECT-LEVEL ANTI-DISCRIM POLICIES by defining, adopting, publishing & conducting annual self assessments through PGM MODELS to: update WRITTEN STANDARDS & ANTI-DISCRIM P&P; create consistent contracting parameters that require anti-discrim; est performance expectations, msres, benchmarks, improve consistency, clarity, coord in svcvs; improve svc for LGBTQ+ & other historically mrgnlized partcipnts; & increase accountability w/in hmlessness systm. 3. CoC MONITORING PROCESS incl EVAL COMPLIANCE w/ CoC antidiscrim policies, reviewing agency, project P&P; leases; case mgt agreements; agency,project-specific docs for compliance w/ Interim Rule, Written Standards & Pgm Models. CoC INFORMS prticpnts about COMPLAINT POLICY; prtcprnts can escalate complaints, incl. discrimin complaints to CoC for invest. & recs. 4. ADDRESSING NONCOMPLIANCE: Through annual CoC Compliance Monitoring Process, policies & practices evaluated for compliance w/ anti-discrim policies. Noncompliant FINDING & corresponding RECD ACTION is included in MONITORING REPORT presented to provider, CoC Lead & summary report to CoC Board. CoC COMPLAINT PROCESS reso includes recs to address issues & noncompliance, including updating CoC provider P&Ps, including antidiscrim. policies.
Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with—if there is only one PHA in your CoC’s geographic area, provide information on the one:

<table>
<thead>
<tr>
<th>Public Housing Agency Name</th>
<th>Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry</th>
<th>Does the PHA have a General or Limited Homeless Preference?</th>
<th>Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Authority of the County of Contra Costa</td>
<td>69%</td>
<td>Yes-Both</td>
<td>Yes</td>
</tr>
<tr>
<td>Pittsburg Housing Authority</td>
<td>20%</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

1C-7a. Written Policies on Homeless Admission Preferences with PHAs.

NOFO Section V.B.1.g.

Describe in the field below:

1. steps your CoC has taken, with the two largest PHAs within your CoC’s geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—If your CoC only has one PHA within its geographic area, you may respond for the one; or

2. state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

(limit 2,500 characters)

1. HOMELESS ADMISSION PREFERENCE: The Housing Authority of Contra Costa County (HACCC), the CoC’s largest PHA, has a HOMELESS PREFERENCE for both Housing Choice Voucher (HCV) and Public Housing (PH) programs. In FY2022, HACCC housed 306 households in HCV programs that were homeless at entry, accounting for 69% of new admissions, and 19 households in Public Housing that were homeless at entry, accounting for 34% of new admissions. Combined, 325 of 499 households in Public Housing and Housing Choice Voucher Programs were homeless at entry, accounting for 65% of new PHA admissions into those programs. 198 of HACCC’s Emergency Housing Vouchers are also prioritized for people experiencing homelessness through the CoC’s CES.

In FY 2022, the PITTSBURG HOUSING AUTHORITY housed 5 households in HCV programs that were homeless at entry, accounting for 20% of new admissions.

The CoC continues to invite Pittsburg HA & the cities the PHAs serve to CoC Board, Learning Hub, subcommittee, & CES mtgs. Pittsburg HA has improved collaboration with the CoC & the Collaborative Applicant through attending CoC & CoC Board mtgs and applying for state funding to work with the CoC’s homeless service providers. The Pittsburg HA has also worked to develop MOUs with the County & Collaborative Applicant to further those efforts & improve coordination w/ CES & CoC providers.

The Housing Authorities continue to be strong CoC partners – HACCC sits on the CoC Board & the Local Govt Representative on the CoC Bd is a consultant to City of Antioch with ties to the Pittsburg HA. The CoC works to enhance coordination with local PHAs, including aligning priorities, policies, & integrating the PHAs into CES.
### 1C-7b. Moving On Strategy with Affordable Housing Providers.

Not Scored—For Information Only

Select yes or no in the chart below to indicate affordable housing providers in your CoC’s jurisdiction that your recipients use to move program participants to other subsidized housing:

<table>
<thead>
<tr>
<th>Provider Type</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Multifamily assisted housing owners</td>
<td>No</td>
</tr>
<tr>
<td>PHA</td>
<td>Yes</td>
</tr>
<tr>
<td>Low Income Housing Tax Credit (LIHTC) developments</td>
<td>Yes</td>
</tr>
<tr>
<td>Local low-income housing programs</td>
<td></td>
</tr>
<tr>
<td>Other (limit 150 characters)</td>
<td></td>
</tr>
</tbody>
</table>

You must select a response for elements 1 through 4 in question 1C-7b.

### 1C-7c. Include Units from PHA Administered Programs in Your CoC’s Coordinated Entry.

NOFO Section V.B.1.g.

In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC’s coordinated entry process:

<table>
<thead>
<tr>
<th>Program Type</th>
<th>Included</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Housing Vouchers (EHV)</td>
<td>Yes</td>
</tr>
<tr>
<td>Family Unification Program (FUP)</td>
<td>No</td>
</tr>
<tr>
<td>Housing Choice Voucher (HCV)</td>
<td>No</td>
</tr>
<tr>
<td>HUD-Veterans Affairs Supportive Housing (HUD-VASH)</td>
<td>No</td>
</tr>
<tr>
<td>Mainstream Vouchers</td>
<td>Yes</td>
</tr>
<tr>
<td>Non-Elderly Disabled (NED) Vouchers</td>
<td>No</td>
</tr>
<tr>
<td>Public Housing</td>
<td>No</td>
</tr>
<tr>
<td>Other Units from PHAs:</td>
<td></td>
</tr>
</tbody>
</table>

### 1C-7d. Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.

NOFO Section V.B.1.g.

Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?

Yes

Program Funding Source
2. Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.  

| Stability Voucher Initiative, Foster Youth to Independence Vouchers |

1C-7e. Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV).  

| NOFO Section V.B.1.g. |

Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?  

| Yes |

1C-7e.1. List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.  

| Not Scored–For Information Only |

Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?  

| Yes |

If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.  

| PHA |

| Housing Authority... |
1C-7e.1. List of PHAs with MOUs

**Name of PHA:** Housing Authority of Contra Costa County
1D. Coordination and Engagement Cont’d

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1D-1. Discharge Planning Coordination.

NOFO Section V.B.1.h.

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs.

<table>
<thead>
<tr>
<th>System</th>
<th>Coordination</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster Care</td>
<td>Yes</td>
</tr>
<tr>
<td>Health Care</td>
<td>Yes</td>
</tr>
<tr>
<td>Mental Health Care</td>
<td>Yes</td>
</tr>
<tr>
<td>Correctional Facilities</td>
<td>Yes</td>
</tr>
</tbody>
</table>

1D-2. Housing First–Lowering Barriers to Entry.

NOFO Section V.B.1.i.

1. Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.

21

2. Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.

21

3. This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.

100%

1D-2a. Project Evaluation for Housing First Compliance.

NOFO Section V.B.1.i.

You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.
1. Describe in the field below:

1. how your CoC evaluates every project—where the applicant checks Housing First on their project application—to determine if they are using a Housing First approach;

2. the list of factors and performance indicators your CoC uses during its evaluation; and

3. how your CoC regularly evaluates projects outside of your local CoC competition to ensure the projects are using a Housing First approach.

(2,500 characters)

1&2. PROJECT EVALUATION: CoC evaluates every project for Housing First (HF) compliance through local review & rank process, annual compliance monitoring & self-assessment dashboards completed by all CoC providers. ALL PROJECTS IN THE PRIORITY LISTING FOLLOW THE HF APPROACH. Scoring tools evaluate whether P&P are LOW BARRIER, consistent with HF & ensure prtpnts are not screened out based on income; substance use disorder; having a criminal record (w/ exceptions for state-mandated restrictions) & DV hx. The scoring tool awards pts for projects that PRIORITIZE RAPID PLACEMENT & STABILIZATION & DO NOT MANDATE PARTICIPATION IN SUPPORTIVE SVCS (except for HUD-mandated RRH case mgt); & don’t terminate participants for failure to make progress on svc plan; loss of income/failure to improve income; or being DV survivor. FACTORS & PERFORMANCE INDICATORS, R&R panelists were instructed to keep in mind that OUTCOMES WILL NATURALLY BE LOWER IN A MORE DIFFICULT TO SERVE POP w/ SEVERE NEEDS & VULNERABILITIES such as ppl exp chronic homelessness, mental illness, substance use disorders +/- DV survivors. R&R panel may deviate from % base scales based on SEVERITY OF BARRIERS experienced by program participants +/- project size for smaller projects as needed to account when % over or understate outcomes.

3. EVALUATION OUTSIDE LOCAL COMPETITION: A) All CoC funded projects complete SELF ASSESSMENT DASHBOARD that measures project outcomes against local PGM MODEL STANDARDS, wh/ is evaluated by CoC lead agency. ALL COC-FUNDED PROJECTS ARE MEETING HF MEASURES. HF related PERFORMANCE MSRS include: All aspects of the program must be HF, no sobriety req, tx compliance, CJ history exclusions or income reqs for enrollment; hsg must be available 24/365; All svc participation is voluntary. Must include subsidy so rent no more than 30% of adjusted income; proactive supportive services focused on housing retention; assistance w/ locating & applying for housing.

B) During its ANNUAL COMPLIANCE MONITORING process (Jan-June, intentionally offset from local comp process), CoC evaluates providers for fidelity w/ HF policies by examining P&P, eligibility criteria & svc participation criteria against HF principles. C) All participants have access to complaint policy, wh/ includes complaints re: BARRIERS TO ENTRY, RAPID PLACEMENT OR STABILIZATION. CoC reviews aggregate complaint reports for complaints related to HF reqs and responds w/ TA, training, or other measures as necessary.

1D-3. Street Outreach–Scope.

NOFO Section V.B.1.j.

Describe in the field below:

1. your CoC’s street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;
2. Whether your CoC’s Street Outreach covers 100 percent of the CoC’s geographic area; 

3. How often your CoC conducts street outreach; and 

4. How your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.

(limit 2,500 characters)

1. In 2023, the COC is expanding from 14 to 20 street outreach teams to ENSURE ALL PERSONS EXPERIENCING UNSHELTERED HOMELESSNESS ARE IDENTIFIED & ENGAGED by:

A. Conducting outreach at STRATEGIC LOCATIONS THROUGHOUT CoC where people experiencing unsheltered homelessness are frequently found & CONSULTING PEOPLE W/ LIVED EXPERIENCE to help expand location efforts.

B. UTILIZING BEST PRACTICES for street outreach providers including HARM-REDUCTION & TRAUMA-INFORMED approaches & using MOTIVATIONAL INTERVIEWING

C. OFFERING A WIDE RANGE OF SUPPORTS, including food, water, clothing, transportation to shelters & warming centers, assessment & prioritization, referrals for behav. health services, mobile healthcare & access to CARE Centers for meals, showers, laundry, mail, case mgt, hsg navigation, benefits enrollment, & add'l supplies. During COVID-19, outreach teams offered COVID testing, add'l tents to encourage social distancing, PPE & sanitation supplies & direct placement in noncongregate shelters.

2. Areas Accessible to Street Outreach Workers 99% Gated Communities 1%

CoC street outreach efforts cover 100% of the CoC’s geographic area. 99% of CoC’s geographic area is accessible to street outreach workers, while an estimated 1% is located in gated communities.

3. CoC outreach operates 8am-12am 7 days/wk. CORE Outreach operates 2 FT teams during weekend hours to correspond with the newly operating Concord drop-in center.

4. The CoC TAILORS STREET OUTREACH TO PPL WHO ARE LEAST LIKELY TO REQUEST ASSISTANCE through:

A. EMPLOYING OUTREACH WORKERS W/ LIVED EXPERIENCE; 2/3 of CORE team has lived exp of homelessness

B. Creating SPECIALIZED OUTREACH TEAMS for TAY, CalWORKS families, ppl w/disabilities, ppl exiting hospitals, jails & other institutions; regional teams & teams dedicated to reaching ppl near waterways & on public transit

C. STAFFING TEAMS W/ CLINICAL SOCIAL WORKERS to support engagements w/ ppl facing mental health issues

D. Partnering with Healthcare for the Homeless to embed 2 NURSES IN CORE OUTREACH TEAMS in late 2023.

E. LOWERING COMMUNICATION BARRIERS by having multilingual staff & access to translation line & svcs to communicate w/ ppl w/ HEARING, SPEECH disabilities

F. BLDG RELATIONSHIPS W/ ENCAMPMENTS, offering tailored support to connect to legal support, safe storage & ES. For ex, CORE has 2 outreach teams supporting ppl living on Caltrans property in the City of Richmond, through 2nd round of Encampment Resolution Funding
1D-4. Strategies to Prevent Criminalization of Homelessness.

NOFO Section V.B.1.k.

Select yes or no in the chart below to indicate strategies your CoC implemented to ensure homelessness is not criminalized and to reverse existing criminalization policies in your CoC’s geographic area:

<table>
<thead>
<tr>
<th>Your CoC’s Strategies</th>
<th>Ensure Homelessness is not Criminalized</th>
<th>Reverse Existing Criminalization Policies</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Engaged/educated local policymakers</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>2. Engaged/educated law enforcement</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>3. Engaged/educated local business leaders</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>4. Implemented community wide plans</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>5. Other: (limit 500 characters)</td>
<td>Strong partnerships b/w Contra Costa Health Services, (umbrella agency for H3), CORE Outreach &amp; local police depts prioritize a mental health response to behavioral health needs. The A3 Initiative – anytime, anyplace, anywhere – makes behavioral health part of the emergency response system.</td>
<td>Yes</td>
</tr>
</tbody>
</table>

1D-5. Rapid Rehousing—RRH Beds as Reported in the Housing Inventory Count (HIC) or Longitudinal Data from HMIS.

Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.

<table>
<thead>
<tr>
<th></th>
<th>HIC</th>
<th>Longitudinal HMIS Data</th>
<th>2022</th>
<th>2023</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>165</td>
<td>294</td>
</tr>
</tbody>
</table>

1D-6. Mainstream Benefits—CoC Annual Training of Project Staff.

NOFO Section V.B.1.m.

Indicate in the chart below whether your CoC trains program staff annually on the following mainstream benefits available for program participants within your CoC’s geographic area:

<table>
<thead>
<tr>
<th>Mainstream Benefits</th>
<th>CoC Provides Annual Training?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Food Stamps</td>
<td>Yes</td>
</tr>
<tr>
<td>2. SSI—Supplemental Security Income</td>
<td>Yes</td>
</tr>
<tr>
<td>3. SSDI—Social Security Disability Insurance</td>
<td>Yes</td>
</tr>
<tr>
<td>4. TANF—Temporary Assistance for Needy Families</td>
<td>Yes</td>
</tr>
<tr>
<td>5. Substance Use Disorder Programs</td>
<td>Yes</td>
</tr>
<tr>
<td>6. Employment Assistance Programs</td>
<td>Yes</td>
</tr>
</tbody>
</table>
CoC trains pgm staff annually on legal rights of ppl receiving benefits & how to file an administrative appeal to challenge action or inaction.

1. INFO & TRAINING ON MAINSTREAM RESOURCES: CoC partners with the County Employment & Human Services Department (EHSD) to provide MAINSTREAM BENEFITS TRAINING TO COC PROVIDERS AT LEAST ANNUALLY, covering how to connect program participants to GA, SSI, SSDI, & CalFRESH (SNAP). SSI Advocacy Dept trains outreach teams, social workers, & other CoC providers on SOAR. Programs maintain current info about resources through additional cross-sector trainings, monthly provider meetings, regular case conferencing, bulletins to the CoC listserv & website, & work w/disability advocacy & legal services orgs to facilitate access including filing appeals.

2. COLLAB w/ HEALTHCARE ORGS: CA’s new CalAIM Initiative & Housing & Homelessness Incentive Program (HHIP) have created regular & consistent opportunities for collaboration with the CoC. HHIP funding enabled the CoC to add 6 new CORE Outreach teams. Anthem Blue Cross will provide cash investment as part of Housing & Homelessness Incentive Program Investment Plan (HHIP IP). CoC trains all providers on helping clients enroll in health insurance, including how to collaborate w/ healthcare partners (EHSD, medical) & legal services to assist with barriers, sometimes through onsite visits. Contra Costa Health Services provides comprehensive services for CoC participants, incl: Mental health wellness & prevention planning, outpatient therapy, psychiatric & medication assessments, case management, crisis intervention; outpatient substance use disorder treatment, intensive outpatient treatment, medication assisted treatment, education, prevention. CoC reviews data on Medicaid utilization & other benefits to determine how well providers are connecting people & opps for improvement. CoC providers also increase benefits utilization by helping clients schedule & attend appointments. Once clients are enrolled in SNAP & other benefits, case managers educate clients on the scope of assistance they are eligible to receive, how to access those benefits, and how they can be used.

3. PROMOTE SOAR CERTIFICATION: CoC promotes SOAR Online Training course for caseworkers through annual training on mainstream benefits, monthly CoC mtgs, quarterly learning hub mtgs, & monthly emails to CoC Listserv (2300+ emails). The CoC website also maintains current information about access to mainstream resources.

NOFO Section V.B.1.n.

Describe in the field below how your CoC is increasing its capacity to provide non-congregate sheltering.

(limit 2,500 characters)

The CoC INCREASED CAPACITY FOR NON-CONGREGATE SHELTERING through the construction of non-congregate shelter Delta Landing. Delta Landing was built on the success of state-funded Project Roomkey hotels and used Project Homekey funding to create 172 rooms. It serves almost 200 individuals & couples experiencing homelessness on the site of a former motel. This site provides non-congregate shelter in east Contra Costa County, which previously only had one small congregate shelter for individuals with severe mental illness experiencing homelessness. Delta Landing provides onsite health services, 24/7 staffing, housing navigation and financial supports to assist individuals and couples to quickly access shelter and successfully exit to permanent housing options. As COVID-19 rates have decreased, 2 rooms are designated for Persons Under Investigation (PUI) of having COVID-19 to prevent the spread of infectious disease, which can be utilized for anyone experiencing homelessness in Contra Costa County, freeing up 6 more NCS rooms than in 2022. In addition, two congregate, dorm-like shelters, Brookside and Concord Shelters were decompressed and converted into non-congregate shelters. The Shelters include spaces for multi-generational adult-only households and couples and their pets. CoC lead agency H3 is also in planning discussions to master lease hotels as NCS. The CoC received Special NOFO funding to support HMIS & a PSH project, thereby increasing flow in system by expanding exits to PSH.

ID-8. Partnerships with Public Health Agencies–Collaborating to Respond to and Prevent Spread of Infectious Diseases.

NOFO Section V.B.1.o.

Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:

1. develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and
2. prevent infectious disease outbreaks among people experiencing homelessness.

(limit 2,500 characters)
CoC lead agency H3 is a division of Contra Costa Cnty Health Services Department (CCHS), which led to seamless coordination & communication w/ LOCAL, STATE & FEDERAL HEALTH AGENCIES to prevent & respond to INFECTIOUS DISEASES. 1. DEVPs COC-WIDE P&P TO RESPOND TO INFECTIOUS DISEASE: In 8/23, DPH developed & distributed updated guidance for homeless shelter clients w/ infectious disease, which includes whether a client can stay in congregate shelter; needs noncongregate housing; isolation requirements; & other guidance. Healthcare for the Homeless (HCFH) worked w/ H3 to set P&P during COVID-19 including: vaccines, testing sites, decompressing shelters, noncongregate shelters (NCS). COVID-19 leadership was provided by Department Operations Center (DOC), staffed by H3, to address needs of ppl experiencing homelessness & lend authority to ensure SAFETY MEASURE implementation. P&P include cleaning procdrs; symptom ID; approaches to suspected & confirmed cases; & isolation approaches outlined in Homeless Service Provider Guidance for Prevention & Management of COVID-19 Interim Guidance for Homeless Service Providers, 5/24/22. 2. PREVENTS INFECTIOUS DISEASE OUTBREAKS AMONG PPL EXPERIENCING HOMELESSNESS: The CoC response to COVID-19 provides a blueprint for future infectious disease response. THE CoC ID PPL EXPERIENCING HOMELESSNESS FOR COVID-19 VACCINATION w/ STATE & LOCAL GUIDELINES, HMIS data & provider demographic info to work w/ healthcare providers & HCFH mobile outreach team to ID ELIGIBLE ppl & administer 20,120 COVID-19 TESTS. CoC utilized federal, state, local & private funds to provide PPE, sanitation services & supplies, health svcs, testing & vaccines. They devped NCS & private units for ppl w/ COVID-19, exposed & esp vulnerable to infection. Envrmtl & public health (a)provide shelter evals to ID high risk areas for disease spread (b)create strategies to address risks & (c)provide direction from public hlth for safe transport. CoC operated DEDICATED WEBSITE w/ COVID-19 SAFETY MEASURES for HSG/HMLS SVC PROVIDERS. CoC distributed safety info via regular email blasts to CoC listserv (2300+ emails) & mnthly provider mtgs. In the event of a future public health emergency, the CoC can leverage the website, data dashboard & lger CoC listserv to communicate w/ providers & participants about urgent public health guidance. CoC forged new regional partnerships w/ providers & public hlth depts through cross-CoC COVID-19 response & vaccine wkg gps.

| ID-8a. Collaboration With Public Health Agencies on Infectious Diseases. |
| NOFO Section V.B.1.o. |
| Describe in the field below how your CoC: |
| 1. shared information related to public health measures and homelessness, and |
| 2. facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants. |

(limit 2,500 characters)
Contra Costa Health Services (CCHS) developed and regularly updates guidance for homeless service providers to prevent and limit infectious disease outbreaks among program providers. After 3.5 years of collaborative COVID-19 response, the CoC & public health agencies have developed & refined an effective approach to info sharing & facilitating communication that uses COVID-19 response as a blueprint for responding to other infectious diseases, including monkeypox, TB, flu, and MRSA. SHARING INFORMATION: In August 2023, Dept of Public Health developed & distributed updated guidance for homeless shelter clients with an infectious disease, which includes whether a client can stay in congregate shelter; needs noncongregate housing; isolation requirements; & other guidance. Developed & distributed online & in meetings Homeless Service Provider Guidance for Prevention and Management of COVID-19 Interim Guidance.

2. FACILITATING COMMUNICATION: In addition to sharing the public health guidance on the CoC website, via email & through meetings, the CoC takes an integrated approach to communicating directly w/ program participants. CORE Street Outreach teams were launched throughout the CoC 4 years ago in partnership with Public Health. This co-responder model has continued to be effective in response to infectious disease. Healthcare for the Homeless offers mobile health clinics and works in partnership w/ CORE to ensure that ppl exp homelessness can access healthcare. Info is developed by Healthcare for the Homeless and distributed by trusted CORE outreach workers in the field. Coordination efforts include: CoC monthly board meetings’ standing agenda item on public health updates (for first 3 years of COVID); public health updates provided at CoC meetings, Executive Director meetings, provider meetings. Before COVID reached plateau, coordination included regional COVID-19 planning calls; weekly meetings w/ CCHS healthcare and housing representatives; co-creation of guidance document between H3 and Public Health that assists providers in understanding and following shifting public health guidance around COVID-19 and monkeypox.

Guidance for Homeless Service Providers (Updated: May 24, 2022), used by homeless service providers to assist in the planning & response efforts to prevent and manage the spread of COVID-19.

<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>NOFO Section V.B.1.p.</td>
<td></td>
</tr>
</tbody>
</table>

Describe in the field below how your CoC's coordinated entry system:

1. covers 100 percent of your CoC's geographic area;
2. uses a standardized assessment process; and
3. is updated regularly using feedback received from participating projects and households that participated in coordinated entry.

(limit 2,500 characters)
GEOGRAPHIC COVERAGE: CoC CES operates across the entire county thru a variety of CE access points, including (A) 20 street outreach teams that offer assessments in the field anywhere in the coc, targeting areas w/encampments & increasing numbers experiencing hmlsns; (b) 24/7 centralized phone, text, & online access & referral option via 211, and (c) two drop-in coordinated assessment & resource centers.

2. Standardized assessment: CoC CES uses crisis needs assessment that was implemented in March 2020 in response to HUD’s 2020 data standards. this assessment provides a triage tool separately from a housing assessment and is used at all 3 CES access points, including (a) 14 street outreach teams that offer assessments in the field anywhere in the CoC, targeting areas w/encampments & increasing numbers of people experiencing hmlsns; (b) 24/7 centralized phone, text, & online access & referral option via 211, and (c) two drop-in coordinated assessment & resource centers. the coc also uses VI-SPDAT to assess and prioritize people most in need of assistance based on VI-SPDAT & length of time homeless. CoC is exploring additional ways to reduce burdens on people utilizing CES by exploring VI-SPDAT alternatives. CES uses housing placement committee case conferencing & by-name lists to prioritize vulnerable households. During COVID-19, CoC prioritized PH for residents in NCS especially at risk for COVID-19 complications.

3. CES updates based on feedback: the CoC board revised CES policies and procedures 9/15/22 to: accurately capture the way CES currently operates; ensure compliance with HUD & VAWA practices; & to align the policies & procedures with recent reports and updated system documents, including program models and performance standards; race equity assessment synthesis of findings and recommendations; coordinated entry system evaluation; and the CoC complaint policy. these revisions reflect the input from project staff & participants provided through the racial equity analysis, public oversight committee meetings, public HMIS policy ctee mtgs and public CoC mtgs. P&P also reflect that at least annually, CoC lead agency h3 will solicit feedback from participating projects and those who have participated in coordinated entry during that time period, with a focus on overall CES quality and effectiveness. H3 facilitated a lived experience wg to develop elements of the rfp for ce assessment redesign work, with RFP set to launch in fall 2023.

1D-9a. Program Participant-Centered Approach to Centralized or Coordinated Entry.

<table>
<thead>
<tr>
<th>NOFO Section V.B.1.p.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe in the field below how your CoC's coordinated entry system:</td>
</tr>
<tr>
<td>1. reaches people who are least likely to apply for homeless assistance in the absence of special outreach;</td>
</tr>
<tr>
<td>2. prioritizes people most in need of assistance;</td>
</tr>
<tr>
<td>3. ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and</td>
</tr>
<tr>
<td>4. takes steps to reduce burdens on people using coordinated entry.</td>
</tr>
</tbody>
</table>
1. REACHING PEOPLE LEAST LIKELY TO APPLY: CES reaches people least likely to apply for assistance through SPECIALIZED STREET OUTREACH TEAMS (TAY, Family, etc.) staffed by ppl w/ lived experience of unsheltered homelessness, w/ ed & experience reqs on all job postings updated to eliminate barriers for otherwise qualified applicants. Outreach Collab w/ partners that encounter harder to reach populations, such as faith communities, law enforcement, behavioral health providers, & transit operators. All CE access points are EQUIPPED W/ LANGUAGE LINE & services to communicate w/ people who have HEARING AND SPEECH DISABILITIES to ensure that effective communication is not a barrier to services. The CES also works W/ SCHOOLS to ID children & families at-risk or exp. homelessness, & the Youth Action Council assists with engaging TAY/young ppl experiencing hmlsns who may not otherwise seek help.

2. PRIORITIZATION: CoC uses VI-SPDAT to ASSESS & PRIORITIZE people most in need of assistance based on their VI-SPDAT score & length of time homeless. CES uses Housing Placement Committee case conferencing & by-name lists to prioritize vulnerable households. A year long, data and stakeholder informed process is underway to revise the assessment & prioritization framework to enhance equity and serve those most in need of assistance.

3. ENSURING TIMELY ASSISTANCE: Outreach teams make direct placements into ES for most vulnerable (e.g., the elderly, people w/medical conditions, etc.). CES streamlines placement in PH programs through Housing Placement Committees that assist w/ locating referred households, helping screen for eligibility & assisting gathering documents (i.e., proof of chron. hmlsns).

4. REDUCING BURDENS: CoC’s CES operates across entire county thru a variety of CE access points, including (A) 20 STREET OUTREACH TEAMS that offer assessments in the field anywhere in the CoC, targeting areas w/encampments & increasing numbers experiencing hmlsns; (B) 24/7 CENTRALIZED PHONE, TEXT, & ONLINE ACCESS & REFERRAL OPTION via 211; (C) Drop-in COORDINATED ASSESSMENT & RESOURCE CENTERS. CES intake process seeks to REDUCE Invasive questions and complexity in the assessment processes.

The CoC has worked with the local community to conduct EVALUATION of Coordinated Entry Policies and Procedures & RECOMMENDED CHANGES. These CHANGES are included in the recently 9/15/22 CES POLICIES AND PROCEDURES. In fall 2023, CoC will release RFQ for CES redesign, devt process led by PWLE.
1. **AFFIRMATIVE MARKETING**: CES P&P confirms that CoC AFFIRMATIVELY MARKETS CES as access pt for available housing & services to eligible persons who are least likely to apply in the absence of special outreach. Marketing ensures CES is avail to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender ID, marital status; ensures that CoC subpops, incl people experiencing chronic homelessness, veterans, families w/ children, youth & survivors of DV, have fair & equal CES access. CoC regularly engages members w/ lived experience of homelessness to create trauma-informed assessment tools, processes, strategies. Marketing matrls clearly convey that access points are accessible to sub-pops. CoC MONITORING includes EVALUATING COMPLIANCE w/ CoC anti-discrimination policies by reviewing agency, project P&P; lease docs; case mgt agreements; agency, project-specific docs to ensure compliance w/ CoC Interim Rule, Written Standards & Program Models.

2. CoC INFORMS participants about GRIEVANCE/COMPLAINT POLICY, allows participants to escalate complaints to CoC for investigation & recs. ADDRESSING NONCOMPLIANCE: Through annual CoC Monitoring, project policies & practices evaluated for compliance w/ antidiscrimination policies. Noncompliant policies IDed as FINDINGS & corresponding REC'D ACTIONS to mitigate noncompliance in MONITORING REPORT, presented to provider & CoC Lead H3. Summary report presented to CoC Board. When participant pursues CoC COMPLAINT PROCESS, resolution includes recs to address issues.

3. REPORTS CONDITIONS THAT IMPEDE HOUSING CHOICE: In annual compliance monitoring process, CoC evaluates CoC-funded providers for compliance w/ affirmatively furthering fair housing reqs, including informing participants of fair housing rights & notifying problematic conditions to DCD, agency responsible for certifying consistency w/ Consolidated Plan. CoC reviews policies, procedures & practices to ensure participants are informed of their rights & agencies are aware of responsibility to report violations to DCD. In 2023, CoC advised all providers to review Fair Housing Policy and include specific language around reporting problematic conditions to demonstrate compliance.

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**1D-10. Advancing Racial Equity in Homelessness–Conducting Assessment.**

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<th>NOFO Section V.B.1.q.</th>
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1. Has your CoC conducted a racial disparities assessment in the last 3 years? **Yes**

2. Enter the date your CoC conducted its latest assessment for racial disparities. 01/21/2022

---

**1D-10a. Process for Analyzing Racial Disparities–Identified Racial Disparities in Provision or Outcomes of Homeless Assistance.**

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<th>NOFO Section V.B.1.q.</th>
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**FY2023 CoC Application**

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Describe in the field below:

1. your CoC’s process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance; and
2. what racial disparities your CoC identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

1) The CoC partnered with C4 Innovations to conduct a racial equity system analysis of the CoC to ID any racial disparities in the provision or outcomes of assistance. Assessment activities included: •Examination of data processes (i.e., data collection, reporting, analysis, utilization) •Review of existing quantitative data reports •Listening sessions, structured interviews, & qualitative data analysis •Review of policies and procedures w/ a racial equity lens •Review of the coordinated entry system (CES) processes •Community conversations to identify challenges & next steps in developing authentic partnerships w/ people with lived experience (PWLE) This analysis resulted in a report, RACE EQUITY ASSESSMENT SYNTHESIS OF FINDINGS AND RECOMMENDATIONS, a GUIDE TO BUILDING AUTHENTIC PARTNERSHIPS WITH PEOPLE WITH LIVED EXPERIENCE OF HOMELESSNESS IN CONTRA COSTA, and specific implementation activities. The CoC TRACKS ANNUAL PROGRESS through the CoC Annual Report, which includes an analysis of HMIS DATA to identify and report demographic data, including race/ethnicity, gender. Per the CoC PROGRAM MODEL EQUITY MEASURES, the CoC lead agency’s data team has created PERFORMANCE DASHBOARDs for programs to track their data, including the equity measures found in the program models. In the 2023 COMPLIANCE MONITORING process, the CoC asked providers to provide baseline data regarding the race and ethnicity of their board, leadership, and staff.

(2) RACIAL DISPARITIES: According to the Race Equity Assessment, Black/African American & Native Indian/Alaska Native were over-represented in the CoC relative to the county census data (4x among Black/African American & 2x among Native Indian/Alaska Native); families experiencing homelessness are more likely to be Black/AA. Asian, people of Multiple Races, and Hispanic/Latin(a)(o)(x) households had the highest proportion of families accessing services than other races and nonHispanic/Latin(a)(o)(x) with at least 20% of households being households with children. CRISIS RESPONSE: Native Indian/Alaska Native were most likely to access crisis response (88% of Native Indian/Alaska Native compared to 62% to 83% for other races); they also had the lowest housing rate of exits to permanent housing from crisis response (8% compared to 10%-15% for other gps) RETURN RATES: Black/African American/African participants returned to homelessness at a higher rate than any other racial gp of participants (43%).

1D-10b. Implemented Strategies that Address Racial Disparities.

NOFO Section V.B.1.q.

Select yes or no in the chart below to indicate the strategies your CoC is using to address any racial disparities.
1. The CoC’s board and decisionmaking bodies are representative of the population served in the CoC. **Yes**

2. The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC. **Yes**

3. The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups. **Yes**

4. The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups. **Yes**

5. The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness. **Yes**

6. The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector. **Yes**

7. The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness. **Yes**

8. The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity. **Yes**

9. The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness. **Yes**

10. The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system. **Yes**

11. The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness. **Yes**

Other: (limit 500 characters)

12. In response to concerns about the VI-SPDAT’s objectivity and racial bias and its identification in a recent Coordinated Entry Evaluation as a replacement priority, CoC is issuing an RFQ in fall 2023 to develop a more equitable ALTERNATIVE CES ASSESSMENT & PRIORITIZATION TOOL TO VI-SPDAT. **Yes**

1D-10c. **Implemented Strategies that Address Known Disparities.**

NOFO Section V.B.1.q.

Describe in the field below the steps your CoC is taking to address the disparities identified in the provision or outcomes of homeless assistance. (limit 2,500 characters)
STEPS TO ADDRESS: The CoC provided a 4-part equity training series in partnership with C4; convened a CoC Board EQUITY WORKING GROUP to review the Equity Report, facilitate community discussion and feedback on the report, make recs to the CoC Board regarding equity priorities; & Drafted CoC Bylaws revisions to increase the number of Board members w/ lived experience of homelessness; TRACKING PROGRESS: The CoC collects CoC Board demographics compared to the people served by the CoC; convened a CoC Board EQUITY WORKING GROUP DATA GP to use data to build accountability for eliminating disparities in the provision & outcomes of homeless assistance; & created Program Models w/ equity measures to track disparities in service denials, length of time to hsg, & other msrs of service provision & outcomes. CoC providers conduct SELF-ASSESSMENTS comparing data to Program Model goals. The CoC has been focused on IMPROVING RACIAL EQUITY in the PROVISION & OUTCOMES of ALL FORMS OF ASSISTANCE & CORRECTING IMBALANCES BEYOND THOSE IDENTIFIED IN THE CoC’S PRIOR RACIAL EQUITY ASSESSMENTS. Steps taken by CoC include: A. Conducting an in-depth, intersectional 2020 data analysis of all CoC services provided & outcomes by race, ethnicity, age, gender, familial status, & LGBTQ+ identity to understand inequities & help IDENTIFY POTENTIAL BARRIERS TO IMPROVEMENTS. B. Holding a RACIAL EQUITY TRAINING SERIES for providers to deepen awareness of the role that individual & systemic racism plays in perpetuating homelessness. C. Partnering w/ C4 Innovations to conduct a RACIAL EQUITY IMPACT ASSESSMENT OF THE SYSTEM. C4 reviewed the CoC’s P&P, CES processes & data to identify areas that contribute to disparities. CoC formed an EQUITY WORKING GP to help the CoC IMPLEMENT RECOMMENDED CHANGES. In 2023, focused on PROVIDING OUTREACH & ED TO LATINE OR INDIGENOUS POPS RE: HOMELESS/HOUSING SVCS TO INCREASE KNOWLEDGE OF & ACCESS TO SERVICES due to DATA showing Latine underrep in svc access. D. CoC staff & PWLE in Contra Costa County participated in the Bay Area Regional Health Inequities Initiative’s Racial Equity Action Lab (REAL) to devp a series of recs to increase the CoC’s engagement with PWLE to help address the overrepresentation of Black & African American individuals and families. E. Provided a RACIAL EQUITY & HOMELESSNESS TRAINING with the Homebase Racial Equity Action and Coordination Team (REACT) for CoC providers.

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<th>1D-10d.</th>
<th>Tracked Progress on Preventing or Eliminating Disparities.</th>
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<td>NOFO Section V.B.1.q.</td>
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Describe in the field below:

1. the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and

2. the tools your CoC uses.

(limit 2,500 characters)
1. The CoC tracks progress through the CoC Annual Report, which includes an analysis of HMIS data to identify and report demographic data, including race/ethnicity, gender. Per the CoC PROGRAM MODEL EQUITY MEASURES, the CoC lead agency’s data team has created PERFORMANCE DASHBOARDS for programs to track their data, including the equity measures found in the program models. In the 2023 COMPLIANCE MONITORING process, the CoC asked providers to provide baseline data regarding the race and ethnicity of their board, leadership, and staff.

2. The CoC has implemented a PROVIDER SELF-ASSESSMENT DASHBOARD and annual COMPLIANCE MONITORING PROCESS, both of which collect demographic information, including race and gender, about staff, board, and people served. The Data Team looks at racial differences in the provision and outcomes of homeless assistance, as noted in the 2022 Annual Report. The CoC Board collects information on the demographics of CoC Board members and the Nominating Committee proactively recruits PWLE, incl. people from racial groups that are overrepresented in the homeless system of care. In 2023, the EQUITY COMMITTEE is focused on creating a level playing field for people understanding & accessing homeless services. This includes developing educational tools and materials with focus on Latine population, which under-utilizes homeless services. The Equity Committee identified “amplifiers,” people who can signal-boost ed materials and engages PWLE homelessness in materials devt and field testing. Committed to centering racial equity & building common language to combat indiv & structural racism, CoC Board adopted a set of EQUITY DEFINITIONS at the 8/3/23 public meeting. In response to concerns about the VI-SPDAT’s objectivity and racial bias and its identification in a recent Coordinated Entry Evaluation as a replacement priority. CoC is issuing an RFP in fall 2023 to develop a more equitable ALTERNATIVE CES ASSESSMENT & PRIORITIZATION TOOL TO VI-SPDAT.

1D-11. Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking–CoC’s Outreach Efforts.

NOFO Section V.B.1.r.

Describe in the field below your CoC’s outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decision making processes.

(limit 2,500 characters)
CoC Board, Committees, Workgroups: The CoC Board includes three people with lived experience of homelessness (PWLE), at least two of which came from an unsheltered situation, and the CoC Board approved a set of Bylaws revisions to increase the number of LIVED EXPERIENCE ADVISOR seats from 2 to 3, including 1 reserved for youth. The CES Redesign WG, wh/ included 6 ppl with lived experience of homelessness, convened to develop an RFQ to develop a more equitable alternative CES assessment & prioritization tool. PWLE were also included in the development of the Special NOFO for unsheltered homelessness.

Outreach is conducted through WEBSITE postings, EMAIL LISTSERVS, CoC provider agencies, CORE outreach workers, and other CoC members with lived experience. PWLE on the CoC Board: Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing; Provide input that is incorporated in the local planning process; Sit on each CoC Committee and workgroup, where they play a key role in power-sharing and decision-making; Participated in the hiring process for CoC leadership staff; Participated on the CoC/ESG Committee & UPDATED THE LOCAL COMPETITION SCORING CRITERIA; Participated on the 5-person local CoC REVIEW AND RANK COMMITTEE -3 Committee Members have lived experience of homelessness; Participated in the NOMINATING COMMITTEE, which INCREASED ACCESSIBILITY OF CoC BOARD MATERIALS FOR PWLE and conducts targeted outreach to PWLE; Are included in the decision-making processes related to addressing homelessness; Are included in the development and revision of the CoC’s local competition rating factors. As part of its COMMUNITY NEEDS ASSESSMENT, in Aug 2023 the CoC hosted a series of focus groups for youth/young adults with lived experience of homelessness to learn about their experience interacting with the homeless system of care & suggestions for improvement.

<table>
<thead>
<tr>
<th>Level of Active Participation</th>
<th>Number of People with Lived Experience Within the Last 7 Years or Current Program Participant</th>
<th>Number of People with Lived Experience Coming from Unsheltered Situations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Included in the decisionmaking processes related to addressing homelessness.</td>
<td>55</td>
<td>40</td>
</tr>
<tr>
<td>2. Participate on CoC committees, subcommittees, or workgroups.</td>
<td>52</td>
<td>37</td>
</tr>
<tr>
<td>3. Included in the development or revision of your CoC’s local competition rating factors.</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>4. Included in the development or revision of your CoC’s coordinated entry process.</td>
<td>6</td>
<td>5</td>
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</table>

NOFO Section V.B.1.r.

Describe in the field below how your CoC or CoC membership organizations provide professional development and employment opportunities to individuals with lived experience of homelessness.

(limit 2,500 characters)

The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education, professional development and job training opportunities. The CoC also trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery, data entry). The CoC works with organizations to create volunteer opportunities for program participants and with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials). CoC providers have incentives to promote client employment and/or volunteerism. CoC sends CoC Board members with lived experience of homelessness to annual National Alliance to End Homelessness conference & they report out to CoC Board. The CoC also created opportunities through Homelessness Awareness month (HAM) for PWLE to participate in activity/material planning, share their stories as part of a short video, nominate themselves or their peers for a “Thriving in the Face of Homelessness Award” for PWLE, invited 2 PWLE on CoC Bd. to speak to the Board of Supervisors for HAM presentation. There are 3 designated seats on the CoC Board for PWLE, and all receive compensation for their participation.

1D-11c. Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.

NOFO Section V.B.1.r.

Describe in the field below:

1. how your CoC routinely gathers feedback from people experiencing homelessness;

2. how your CoC routinely gathers feedback from people who have received assistance through the CoC or ESG Programs; and

3. the steps your CoC has taken to address challenges raised by people with lived experience of homelessness.

(limit 2,500 characters)
1-3 The CoC routinely gathers feedback from people experiencing homelessness and people who have received CoC/ESG assistance through: PARTICIPANT SURVEYS (developed by WG that included 6 PWLE) for all CoC services; daily interaction between people experiencing homelessness and the CORE outreach team; daily service provision at encampments, shelters, CARE centers, and all forms of CoC programming, during which service providers receive feedback on frequency and quality of services. All CoC service providers must also implement a PARTICIPANT GRIEVANCE POLICY, which encourages participants to express concerns about their experiences receiving assistance. 2. To address challenges raised by people with lived experience of homelessness, the CoC developed the CoC GRIEVANCE POLICY, which allows participants in CoC housing programs to escalate unresolved complaints to the wider CoC, including possible consideration by a nonconflicted CoC Complaint Panel. One grievance from an unhoused person who had gone through CES but was awaiting housing for several months resulted in formal recs to CES operator regarding formalizing a script explaining the CES process, wait times, & next steps. Because the 2023 CoC BOARD includes 3 designated seats for people with lived experiences of homelessness as well as a number of HOMELESS SERVICE PROVIDERS and other DIRECT SERVICE PROVIDERS, the CoC Board routinely considers the concerns of individual program participants as well as broader systemic issues. For example, feedback from people with lived experiences of homelessness has resulted in PROPOSED REVISIONS TO THE CoC BYLAWS, the formation of the CoC EQUITY WORKGROUP, & CES Redesign. The Equity Workgroup developed a 2023 CoC Board priority to “create accessible information, outreach, and educational materials to engage hard to reach or previously unreached communities in Contra Costa County” and to approve the creation of a STANDING EQUITY COMMITTEE of the CoC Board. PWLE homelessness led the RFQ creation process for CES Redesign & developing an alternative assessment/prioritization tool to VI-SPDAT.

1D-12. Increasing Affordable Housing Supply. NOFO Section V.B.1.t.
Describe in the field below at least 2 steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC’s geographic area regarding the following:

| 1. reforming zoning and land use policies to permit more housing development; and |
| 2. reducing regulatory barriers to housing development. |

(limit 2,500 characters)
1. CoC has taken the following steps to engage city, county, and state governments to REFORM ZONING AND LAND USE POLICIES: (a) The CoC’s lead agency Health, Housing and Homeless Services (H3) is collaborating with the Housing Authority of Contra Costa County (HACCC), and the Department of Conservation and Development (DCD) to allocate $12 million annually from MEASURE X toward a new HOUSING FUND. Measure X is a countywide 20 year, ½ cent sales tax allocated to a variety of community needs, including safety net services and affordable housing. The Housing Fund will include lease, sale, or joint ventures of County-owned SURPLUS LAND and other underutilized land; dedicated funds for HOMELESSNESS PREVENTION; and FUNDING FOR SUPPORTIVE SERVICES. (b) CoC Board includes dedicated seat for AFFORDABLE HOUSING DEVELOPER; (c) Measure X-approved recommendations also include a $5.2 million investment to leverage $16.8 million in Homekey funding to build 84 PERMANENT SUPPORTIVE HOUSING UNITS. (d) H3 supported the City of Antioch in its commitment of up to $2 million of American Rescue Plan Act funding to create housing through a competitive grant process; and (e) H3 supported East Bay Housing Organizations in their Housing Element Working Group to participate in an inclusive community planning process for the updated Housing Element. 2. The CoC works with city, county, and state governments to REDUCE REGULATORY BARRIERS TO HOUSING DEVELOPMENT in the following ways: (a) H3 coordinates monthly with the City of Concord through the Concord Naval Weapons Station Base Conversion Homeless Collaborative, which seeks to convert an old naval base to housing, including the development of at least 130 units for occupancy by people experiencing homelessness and (b) Working with local governments throughout the region to develop the Regional Action Plan, a roadmap to REDUCE UNSHELTERED HOMELESSNESS IN THE BAY AREA BY 75% by 2024. The RAP includes efforts to reduce regulatory barriers to housing development.
1E. Project Capacity, Review, and Ranking–Local Competition

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions


NOFO Section V.B.2.a. and 2.g.

You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.

1. Enter your CoC’s local competition submission deadline date for New Project applicants to submit their project applications to your CoC–meaning the date your CoC published the deadline.

   07/27/2023

2. Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC’s local competition–meaning the date your CoC published the deadline.

   07/27/2023

1E-2. Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criteria below.

NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e.

You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.

Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:

<p>| | |</p>
<table>
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<tbody>
<tr>
<td>1. Established total points available for each project application type.</td>
<td>Yes</td>
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<tr>
<td>2. At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).</td>
<td>Yes</td>
</tr>
<tr>
<td>3. At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).</td>
<td>Yes</td>
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<tr>
<td>4. Provided points for projects that addressed specific severe barriers to housing and services.</td>
<td>Yes</td>
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<tbody>
<tr>
<td>5.</td>
<td>Used data from comparable databases to score projects submitted by victim service providers.</td>
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<tr>
<td>6.</td>
<td>Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.</td>
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</table>

1E-2a. Scoring Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2, along with the required attachments from both questions as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criteria below.

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<tr>
<td>NOFO Section V.B.2.a., 2.b., 2.c., and 2.d.</td>
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You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.

Complete the chart below to provide details of your CoC's local competition:

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<tbody>
<tr>
<td>1. What were the maximum number of points available for the renewal project form(s)?</td>
<td>100</td>
</tr>
<tr>
<td>2. How many renewal projects did your CoC submit?</td>
<td>18</td>
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<tr>
<td>3. What renewal project type did most applicants use?</td>
<td>PH-PSH</td>
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<tr>
<td>NOFO Section V.B.2.d.</td>
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Describe in the field below:

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<tbody>
<tr>
<td>1. how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;</td>
<td></td>
</tr>
<tr>
<td>2. how your CoC analyzed data regarding how long it takes to house people in permanent housing;</td>
<td></td>
</tr>
<tr>
<td>3. how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and</td>
<td></td>
</tr>
<tr>
<td>4. considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.</td>
<td></td>
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</table>

(limit 2,500 characters)
1. During the Local Project Review & Ranking (R&R) process, the CoC COLLECTED & ANALYZED PROJECT DATA from RENEWAL PROJECTS that successfully housed pgm participants in permanent housing (PH). Projects were scored based on data in the CoC's HMIS, except for projects operated by victim services providers (VSP), which were scored based on data from the VSP's comparable database (DB). NEW PROJECTS were evaluated on EXPECTED OUTCOMES & CAPACITY to successfully carry out proposed work based on the agency's PAST PERFORMANCE.

2. For RENEWAL PROJECTS, the CoC evaluated HMIS data & VSP comparable DB for how long it takes to house ppl in PH (HUD SPM 1, 3). The CoC looked at utilization rate to determine if projects are at capacity; considered APR & other relevant util. data on beds/units for stayers & leavers who exit to a PH destination. For NEW Projects, the CoC looked at an agency's positive outcomes related to hsg stability, exits to homelessness, incrsd income/benefits, progress toward ed goals, measures of health/wellness &/or other measures of personal, economic, hsg stability (HUD SPM 2, 3, 4, 7).

3. NEEDS & VULNERABILITIES: The R&R process PRIORITIZED PROJECTS SERVING PPL W/ THE MOST SEVERE NEEDS & VULNERABILITIES by awarding additional pts for serving ppl experiencing chronic homelessness (SPM 1, 7). Scoring tools gave pts for meeting needs of particularly vulnerable subpops, incl transition age youth, people w/ mental illness, substance use disorders &/or survivors of DV. R&R panelists received an orientation w/ community data to understand local needs & assess whether a project met a local need & potential impact if a project were to lose funding.

4. CONSIDERATIONS: Scoring tools accounted for how project performance can be impacted by the severity of NEEDS & VULNERABILITIES of ppl served, incl. data on successful placement in PH (collected through APRs, distilled & analyzed in local competition reports for panelists). Panelists were advised that outcomes may be poorer for pgms that serve pops w/ SEVERE NEEDS & VULNERABILITIES & that panelists may deviate from % base scales based on the severity of barriers faced by pgm participants. Both New & Renewal scoring tools highlight the importance of LOW BARRIERS TO HOUSING & award points based on ALIGNMENT W/ HOUSING FIRST PRINCIPLES. Through apps & interviews, projects had the opportunity to discuss & respond to ?s about outcomes & the pops served.

**1E-3.** Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.

NOFO Section V.B.2.e.

Describe in the field below:

| 1. | how your CoC used the input from persons of different races and ethnicities, particularly those over-represented in the local homelessness population, to determine the rating factors used to review project applications; |
| 2. | how your CoC included persons of different races and ethnicities, particularly those over-represented in the local homelessness population in the review, selection, and ranking process; and |
| 3. | how your CoC rated and ranked projects based on the degree to which their project has identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers. |
1. INPUT: According to the 2023 PIT Count, HMIS data & 2020 Census, Black & Native American individuals are overrepresented in the CoC homeless population; although Black people comprise 9% of the general pop, they represent 30% of the pop experiencing homelessness; Native American people comprise less than 1% of the general pop but 9% of the pop experiencing homelessness. CoC Bd., which approves all scoring tools & the final priority list, increased in racial & ethnic diversity in 2022 as a result of intensive outreach & the dvpm of a lower barrier CoC Bd app process. The local competition SCORING TOOL was dev’d by CoC funding committee, 50% of which have lived exp of homelessness & 43% COMPRISED OF RACIAL GPS OVER-REP’D IN THE COC. Based on FEEDBACK of PEOPLE OF DIFFERENT RACES & PEOPLE w/ LIVED EXPERIENCE OF HOMELESSNESS, the RACIAL EQUITY RATING FACTOR was strengthened to provide more points for higher impact strategies, such as Internal structures to address issues of racial equity & staff recruitment, retention & devt strategies.

2. REVIEW, SELECTION, RANKING PROCESS: 50% of the 2023 Review & Rank Committee responsible for project review, selection & ranking was comprised of peo w/ lived exp of homelessness. 34% of the Committee was comprised of racial gps overrepresented in the CoC (Black & Native American).

3. PROJECT RATING & RANKING: The revised CoC scoring tools are designed to ensure that all apps for CoC funding were scored based on how practices align with CoC priorities & values, including IMPROVING RACIAL EQUITY. The Scoring Tools for new and renewal projects included up to 4 points for implementing strategies to address racial equity, including: a public written commitment to address/eliminate racial and ethnic inequities; written materials provided in Spanish, Tagalog, Chinese & other languages as necessary; staff training & support around UNDERSTANDING BARRIERS PARTICIPANTS MAY FACE RELATED TO THEIR RACE, ETHNICITY OR CULTURAL BACKGROUND; regular PROJECT DATA REVIEW on pops served, outcomes & perf msrs by race & ethnicity; internal structures to address racial equity and related BARRIERS; racial equity & cultural responsiveness incl in staff job descriptions & workplans; strategies to recruit, retain, and develop STAFF WHO SPEAK LANGUAGES FREQUENTLY ENCOUNTERED BY CoC PROVIDERS and STAFF WHO REPRESENT COMMUNITIES OF COLOR. More points are awarded for the higher impact strategies.


NOFO Section V.B.2.f.

Describe in the field below:

1. your CoC’s reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;

2. whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC’s local competition this year;

3. whether your CoC reallocated any low performing or less needed projects during its local competition this year; and

4. why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.
1. REALLOCATION PROCESS: CoC IDs low-performing projects through project performance outcomes, considering severity of needs of pop served & also opportunities for receiving TA to improve outcomes & performance. Rank & Review (R&R) panel reviews objective factors (i.e., population served, system performance measures, etc.), discusses each proj & looks at historical performance. CoC/Collab App discusses low/poor perf with projs in advance of R&R to encourage transparency & offer TA. CoC PROJECT IMPACT & RESPONSIVENESS TO LOCAL NEED in R&R helps address which projs are of greatest need. The R&R Panel facilitates reallocation discussion & process, in consultation w/ the CoC, CoC Board, Collab Applicant & CoC Program recipients & subrecipients who may be impacted. A neutral third party facilitator may be asked to support community discussions & technical assistance around the strategic benefits or consequences of reallocation decisions. The CoC Board must approve all final decisions about reallocation. The R&R panel takes into consideration poor performance, underspending, CoC engagement & participation, & history of contributing to improved system outcomes. The process is communicated to all renewal project applicants through CoC/ESG Committee Mtgs, to the public & stakeholders at the CoC Bd mtg when the policy was reviewed & approved by the CoC Bd, to new & renewal project applicants at the TA Workshop, & through posting on the CoC’s website.

2. The CoC did not identify any candidates for reallocation though the 2023 local process.

3. CoC did not reallocate any low performing or less needed projects during the 2023 local competition as none were identified. During the local competition process, one project voluntarily reallocated funds to more effectively utilize CoC funds across the system. Projects were high performing or of great need based on the scoring tool, which emphasized objective performance data. For projs where outcomes were lower or add’l support was needed, the CoC recognized that projs srvd pop w/severe needs. All renewal projects recommended for funding scored over 95 points out of 100.
<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.</td>
<td>If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.</td>
<td>08/31/2023</td>
</tr>
<tr>
<td>1E-5a.</td>
<td>Projects Accepted—Notification Outside of e-snaps. You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.</td>
<td></td>
</tr>
<tr>
<td>1E-5b.</td>
<td>Local Competition Selection Results for All Projects. You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project accepted or rejected status; 4. Project Rank–if accepted; 5. Requested Funding Amounts; and 6. Reallocated funds.</td>
<td>Yes</td>
</tr>
<tr>
<td>1E-5c.</td>
<td>Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline. You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.</td>
<td></td>
</tr>
<tr>
<td>1E-5d.</td>
<td>Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website. You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.</td>
<td></td>
</tr>
</tbody>
</table>
Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC’s website or partner’s website. | 09/25/2023
2A. Homeless Management Information System (HMIS) Implementation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2A-1. HMIS Vendor.

Enter the name of the HMIS Vendor your CoC is currently using.

Bitfocus

2A-2. HMIS Implementation Coverage Area.

Select from dropdown menu your CoC's HMIS coverage area.

Single CoC

2A-3. HIC Data Submission in HDX.

Enter the date your CoC submitted its 2023 HIC data into HDX.

04/28/2023


In the field below:

1. describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases;
2. state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database–compliant with the FY 2022 HMIS Data Standards; and
3. state whether your CoC’s HMIS is compliant with the FY 2022 HMIS Data Standards.

(limit 2,500 characters)

1. ACTIONS TAKEN TO ENSURE DV PROVIDERS COLLECT DATA IN HUD-COMPLIANT COMPARABLE DATABASES: The HMIS lead has worked closely with the CoC’s VSP (STAND!) to ensure that they are entering all HMIS data elements into their comparable database, Efforts to Outcomes. These efforts involved extensive TA and education about comparable database requirements, available comparable database software, and individualized technical assistance to support implementation. The HMIS lead regularly connects with STAND! to check-in about any questions or concerns they may have related to comparable database usage and reporting so that issues are addressed in advance of reporting deadlines. The CoC also engaged in a wider process to educate the CoC at large about comparable database requirements and the policies underlying them so that they have this knowledge when partnering with VSPs or if they need to switch to a comparable database in the future.

2. DV housing and service providers are using a HUD-compliance comparable database compliant with the FY 2022 HMIS Data Standards.

3. Yes, the CoC is compliant with the 2022 HMIS Data Standards.

<table>
<thead>
<tr>
<th>Project Type</th>
<th>Total Year-Round Beds in 2023 HIC</th>
<th>Total Year-Round Beds in HIC Operated by Victim Service Providers</th>
<th>Total Year-Round Beds in HMIS</th>
<th>HMIS Year-Round Bed Coverage Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Emergency Shelter (ES) beds</td>
<td>564</td>
<td>24</td>
<td>470</td>
<td>87.04%</td>
</tr>
<tr>
<td>2. Safe Haven (SH) beds</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>3. Transitional Housing (TH) beds</td>
<td>275</td>
<td>44</td>
<td>83</td>
<td>35.93%</td>
</tr>
<tr>
<td>4. Rapid Re-Housing (RRH) beds</td>
<td>294</td>
<td>19</td>
<td>252</td>
<td>91.64%</td>
</tr>
<tr>
<td>5. Permanent Supportive Housing (PSH) beds</td>
<td>1,325</td>
<td>0</td>
<td>1,325</td>
<td>100.00%</td>
</tr>
<tr>
<td>6. Other Permanent Housing (OPH) beds</td>
<td>274</td>
<td>0</td>
<td>274</td>
<td>100.00%</td>
</tr>
</tbody>
</table>

2A-5a. Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.

NOFO Section V.B.3.c.

For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:

1. steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and

2. how your CoC will implement the steps described to increase bed coverage to at least 85 percent.
(limit 2,500 characters)

The CoC increased the number of TH beds by 30 beds and increased the HMIS bed coverage rate for TH by 5%. Note that 19 year-round VSP RRH beds noted above are correct but are not displayed in HDX Competition Report.

1. STEPS TO INCREASE BED COVERAGE RATE: Engage with providers not participating in HMIS by offering technical assistance, resources, & training to encourage HMIS adoption.

2. IMPLEMENTATION: CoC lead agency H3 works to lower barriers through the HMIS P&P & the data quality monitoring plan & uses a strengths-based approach to highlight successful agencies participating in CES & HMIS. The CoC also utilizes other funding sources, including the state of California Homeless Housing, Assistance and Prevention (HHAP) Grant Program and the County Measure X program, to bring non-CoC providers into HMIS and increase the bed coverage rate. The CoC is working to increase the number of shelter beds available in the county. With the wind-down of COVID 19 hotels, the proportion of shelter beds has decreased, but H3 is exploring opportunities to bring new interim housing that would shift the balance of bed coverage in HMIS. One of the largest providers of shelter & transitional housing has firmly held religious beliefs that prevent their adoption of a Housing First model & they have declined participation in HMIS. They are active & valued participants in the system of care, however, & provide valuable input to the CoH & subcommittees.

<table>
<thead>
<tr>
<th>2A-6.</th>
<th><strong>Longitudinal System Analysis (LSA) Submission in HDX 2.0.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>NOFO Section V.B.3.d.</strong></td>
</tr>
<tr>
<td></td>
<td>You must upload your CoC’s FY 2023 HDX Competition Report to the 4B. Attachments Screen.</td>
</tr>
</tbody>
</table>

| Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 p.m. EST? | Yes |
2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2B-1. PIT Count Date.

NOFO Section V.B.4.a

Enter the date your CoC conducted its 2023 PIT count. 01/24/2023

2B-2. PIT Count Data–HDX Submission Date.

NOFO Section V.B.4.a

Enter the date your CoC submitted its 2023 PIT count data in HDX. 04/28/2023

2B-3. PIT Count–Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.

NOFO Section V.B.4.b.

Describe in the field below how your CoC:

1. engaged unaccompanied youth and youth serving organizations in your CoC’s most recent PIT count planning process;

2. worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC’s most recent PIT count planning process; and

3. included youth experiencing homelessness as counters during your CoC’s most recent unsheltered PIT count.

(limit 2,500 characters)
1&2. The CoC ENGAGED UNACCOMPANIED YOUTH & YOUTH SERVING ORGS through CORE Outreach, which engaged with youth in families, unaccompanied youth, and transition age youth (TAY) through 2 youth-and-TAY focused outreach teams. These teams were involved with PIT planning and identified “hot spots” or areas where TAY were likely to be identified during the PIT enumeration and for the PIT survey. The PIT Planning Committee also included service agencies that serve youth and TAY to participate in PIT planning, conducting the survey and providing feedback on survey questions. The committee also worked with the coordinated entry manager to obtain a by-name-list of families to contact to determine their shelter or housing status the night of the count.

3. INVOLVED YOUTH EXPERIENCING HOMELESSNESS IN THE ACTUAL COUNT: Among the 164 PIT staff/volunteers, 8 individuals indicated they were between the ages of 18-24 (TAY). There were also PIT volunteers/canvassers from local school districts and the County Office of Education familiar with where young adults experiencing homelessness may be identified for the PIT.

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### 2B-4. PIT Count–Methodology Change–CoC Merger Bonus Points.

**NOFO Section V.B.5.a and V.B.7.c.**

In the field below:

1. **describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;**

2. **describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and**

3. **describe how the changes affected your CoC's PIT count results; or**

4. **state “Not Applicable” if there were no changes or if you did not conduct an unsheltered PIT count in 2023.**

---

(limit 2,500 characters)

1&2. In 2023, the CoC updated its PIT count UNSHELTERED & SHELTERED methodology. After contracting out for the 2022 PIT count resulted in concerns about data quality & reliability, CoC lead agency H3’s Research, Evaluation, & Data (RED) team coordinated the 2023 PIT, building on H3’s existing partnership w/ service providers, PD, faith-based orgs, local govt, community members & youth serving orgs. CHANGES INCLUDED: engaging more partners for decision making & planning; outreach to stakeholder gps in Dec 2022 w/ specific request to enhance participation & support w/ pit; creating a CENTRAL WEBPAGE containing PIT info & updates, including volunteer reg, PIT training, event calendar & email updates; IMPROVED TECHNOLOGY. County GIS DOiT team combined survey responses & location input; provided location tracking for teams; integrated with Dashboard app for real-time monitoring. Volunteer teams canvassed GRIDS instead of census tracks. Improved GRID map navigation created more efficient team assignments.

3. These changes resulted in IMPROVED ACCURACY & DATA QUALITY in the 2023 PIT count. County GIS data will allow the CoC to better understand geographical coverage and refine map grids and assignments in 2024. It will also help the CoC to target training and volunteer recruitment for areas that had lower coverage.
2C. System Performance

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

### 2C-1. Reduction in the Number of First Time Homeless–Risk Factors Your CoC Uses.

**NOFO Section V.B.5.b.**

In the field below:

1. describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;
2. describe your CoC’s strategies to address individuals and families at risk of becoming homeless; and
3. provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the number of individuals and families experiencing homelessness for the first time

(limit 2,500 characters)
1. **IDing Risk Factors (RF):** To ID RF, CoC analyzes HMIS & PIT data, incl. trends across race, ethnic., age, gender & LGBTQ+ status. CoC collects qualitative data to ID root causes. RFs included cost of living, job loss, eviction, subst. use & family conflict.

2. **STRATEGIES TO ADDRESS HHs at risk inclds:**

   A. **PROBLEM SOLVING:**
   - CoC providers & CE access points engage in Problem Solving (PS) conversations to help HHs at imminent risk of hmlsns ID & access resources, incl. Housing Fund. CoC providers leverage private funds to offer expanded PS assistance to HHs w/ hsg at risk. Bay Area Legal Aid & Monument Impact provide tenant, eviction protection. CoC leverages local Msre X funding w/ 75% hsg funds for affordable hsg & eviction prevention, 25% funds for homeless crisis response. Yr 1 of Msre X, Housing Security Fund (HSF) received $10M & will receive $12M in future yrs. CoC participates in Housing Stabilization Learning Cohort to devo, implement coordinated prevention for housing insecure Hhs. Utilizing CalAIM supports to provide svcs & deposits to Medi-Cal members.
   - **FINANCIAL ASSISTANCE:**
     - HSF offers flex financial assist. to HHs at-risk of or exp. hmlsns to pay for hsg-related costs such as arrears, app fees, repairs, utilities, LL incentive, deposits. CoC partner EHSD uses state funds to provide prevention to CalWORKS families. Fund info widely distributed via CoC listserv & website, at cmmty mtgs & CE access pts. Community partners provide emergency eviction prevention assistance
   - **DISCHARGE PLANNING:**
     - CoC works w/ Probation, Reentry Svcs, Child Welf & Hospitals to prevent discharges to hmlsns. CoC awarded RRH expansion for ppl released from State prison in last 6 mos. CoC & probation part. in action lab to improve svc/hsg coord for ppl w/ crim records.
   - **SUPPORT FOR DV SURVIVORS:**
   - VSP STAND! provided emergency shelter, TH & emergency lodging for 161 survivors & their children. DV Bonus seeks to provide RRH for 12 survivors & their children.
   - **COORDINATION:**
     - CoC addresses hmlsns prevention at regional level by 1) participating in All Home CA Regional Action Plan 2) regional data gp to improve PIT count 3) coordinated strategies funded w/ Homeless Housing, Assistance & Prevention Pgm

3. **ORG RESPONSIBLE:** County Health, Housing & Homeless Services Division

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### 2C-1a. Impact of Displaced Persons on Number of First Time Homeless.

**NOFO Section V.B.5.b**

Was your CoC’s Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:

<table>
<thead>
<tr>
<th>Event</th>
<th>Affected</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. natural disasters?</td>
<td>No</td>
</tr>
<tr>
<td>2. having recently arrived in your CoCs’ geographic area?</td>
<td>No</td>
</tr>
</tbody>
</table>

### 2C-2. Length of Time Homeless–CoC’s Strategy to Reduce.

**NOFO Section V.B.5.c.**

In the field below:

1. describe your CoC’s strategy to reduce the length of time individuals and persons in families remain homeless;

2. describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
3. provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the length of time individuals and families remain homeless.

(limit 2,500 characters)

1. CoC’s STRATEGY TO REDUCE LENGTH OF TIME HOMELESS (LOTH) involves implementing a low-barrier, housing first approach to quickly connect people experiencing homelessness with housing. From 2021 to 2022, LOTH decreased by 19% for ppl in ES&SH and 16.7% for ppl in ES,SH, TH.

Additional strategies include:
A. Using Problem Solving strategies to help households identify alternative resources to quickly resolve homelessness including flexible financial assistance through the housing security fund.
B. STREAMLINING SYSTEMS: The CES decreases LOTH by streamlining referral & matching processes. Housing Placement Committees help locate referred households, conduct eligibility screening, & assist with obtaining necessary documents to ensure swift housing placement.
C. OFFERING HOUSING NAVIGATION services (help developing housing plans, application assistance, obtaining documents, locating units) through CoC providers and street outreach to facilitate rapid housing location and ensure effective landlord engagement.
D. CoC implemented new program models in 2022 that include housing focused case management in shelters and CARE Centers
E. CoC provided training on reducing hsg barriers for ppl w/ criminal records, incl ppl required to register for sex offense

2. HOW COC IDs & HOUSES HHs w/ Longest LOTH:
A. IDENTIFY: The CoC utilizes HMIS data, including CES assessment & emergency shelter utilization data, to ID households with the longest LOTH. by name lists are utilized for vets, youth, and chronically homeless populations to better track those with the longest LOTH who are most vulnerable.

B. HOUSE: The CoC maintains deep investment in permanent housing resources including 201 Emergency Housing Vouchers set aside for those with the longest shelter stays. The 2023 application includes 48 new units of PSH and 12 units of new PH-RRH for survivors of domestic violence. Future voucher opportunities will continue to target people with the longest lengths of time homeless. W/ State & local funds, H3 working w/ 4 providers to deliver a goal of 195 RRH units to supplement CoC funded units.

3. ORG RESPONSIBLE: County Health, Housing, & Homeless Services Division.

| 2C-3. Exit to Permanent Housing Destinations/Retention of Permanent Housing–CoC’s Strategy |
| NOFO Section V.B.5.d. |

In the field below:

1. describe your CoC’s strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;

2. describe your CoC’s strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and

3. provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to increase the rate that individuals and families exit to or retain permanent housing.
1. To increase the rate of successful EXITS from ES, SH, TH, and PH-RRH, the CoC is using the following strategies:

A. INCREASING PH RESOURCES:
1. In FY 2022, the CoC’s largest housing authority (Housing Authority of Contra Costa County) provided 306 Housing Choice Vouchers and housing for 19 addl households through the Public Housing Program for people experiencing homelessness or recently homeless.

B. HOUSING FIRST & TARGETED ASSISTANCE: all CoC providers take a HOUSING FIRST approach to rapidly place people into hsing & connect them to mainstream resources to ensure long-term stability. This involves IDing barriers that HHs face to PH & tailoring assistance to overcome those barriers, including CONNECTIONS TO EMPLOYMENT & BENEFITS to address lack of income; support with REENTRY SERVICES to overcome crim. history barriers; connections to CHILDCARE; linkages to VOLUNTARY BEHAVIORAL HEALTH SERVICES; & any other assistance needed to obtain hsing.

C. HOUSING NAVIGATORS leverage landlord relationships & access to flex funds to facilitate rapid hsing placement.

2. STRATEGY TO INCR. PH RETENTION/PH EXIT: In FY 2022 the CoC maintained a rate of 98% PH retention or exit to other PH. The CoC strives for 100% by offering HHs a robust set of supportive svcs, including fin. assistance, goal-oriented case mgmnt, mediation, workforce dev, & connections to benefits. In addition, CES Housing Placement Committees work w/ HHs on all referrals to improve matching & maximize client choice & satisfaction, leading to increased hsing stability. CoC providers are also trained on Problem Solving strategies for helping HHs identify alternative hsing stability resources such as the flexible HOUSING SECURITY FUND, which can pay costs incl. those necessary to cover repairs & rent/utility arrears. RRH providers offer ongoing support at check-ins at 3, 6, and 9 months post-subsidy, w/ outcomes tracked in HMIS. Non-congr. shelters instituted a 3-month aftercare prog. for residents who moved into PH during COVID-19 to increase hsing stability as well.

3. ORG RESPONSIBLE: County Health, Housing, & Homeless Services

<table>
<thead>
<tr>
<th>2C-4.</th>
<th>Returns to Homelessness–CoC’s Strategy to Reduce Rate.</th>
</tr>
</thead>
<tbody>
<tr>
<td>NOFO Section V.B.5.e.</td>
<td></td>
</tr>
</tbody>
</table>

In the field below:

1. describe your CoC’s strategy to identify individuals and families who return to homelessness;

2. describe your CoC’s strategy to reduce the rate of additional returns to homelessness; and

3. provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the rate individuals and persons in families return to homelessness.
The CoC’s 2-year return to homelessness (RTH) held relatively steady (160 in 2021 v 163 in 2022) & the CoC’s 6-month return to homelessness (RTH) decreased by 4%

1. HOW COC IDs HHs & COMMON FACTORS IN RTH: The CoC analyzes HMIS & CE data alongside qualitative data from outreach teams & CoC by-name lists. These analyses help the CoC ID patterns in who is returning to homelessness (specific subpopulations, geographic concentrations, etc.) & tailor housing supports to minimize returns to homelessness. The community sees that returns to homelessness are primarily driven by challenges in maintaining rental assistance after a subsidy ends. The high-rent market and depleted hsg capacity for ELI & VLI HHs in Contra Costa County make it challenging for HHs to maintain hsg stability w/out additional financial supports even when fully employed.

2. STRATEGIES TO REDUCE RATE OF RTH include:
   A. PROBLEM SOLVING CASE MANAGEMENT PAIRED W/ FLEXIBLE PREVENTION FUNDS: CoC providers prevent returns to homelessness by monitoring for housing stability & having problem solving conversations with households at risk to help them identify resources to maintain their housing. CoC providers also have access to multiple sources of flexible funding that can be used to prevent returns to homelessness, including housing security fund and emergency rental assistance program. The CoC publicized the availability of these funds widely throughout the pandemic, especially towards the end of COVID-19 eviction moratoriums. CoC participates in Housing Stabilization Learning Cohort to devp, implement coordinated prevention for housing insecure Hhs. CoC utilizes CalAIM supports to provide svcs & deposits to Medi-Cal members.
   B. PARTNERING w/ EMPLOYMENT & HUMAN SRVCS DEPT (EHSD) to provide required trainings to CoC providers and help connect clients to mainstream financial supports, benefits, & opportunities for employment that increase income & bolster housing stability.
   C. LINKS TO LEGAL SRVCS: The CoC partners w/5 legal services orgs that provide free eviction-prevention legal services.

3. ORG RESPONSIBLE: County Health, Housing, & Homeless Services

<table>
<thead>
<tr>
<th>2C-5.</th>
<th>Increasing Employment Cash Income–CoC’s Strategy.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>NOFO Section V.B.5.f.</td>
</tr>
</tbody>
</table>

In the field below:

1. describe your CoC’s strategy to access employment cash sources;

2. describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income; and

3. provide the organization name or position title that is responsible for overseeing your CoC’s strategy to increase income from employment.

(limit 2,500 characters)
1. STRATEGIES TO INCREASE EMPLOYMENT INCOME:
   A. EARLY FOCUS ON EMPLOYMENT: Case mgrs & employment specialists begin focusing on employment at the beginning of client engagement, ensuring sufficient time to obtain training & build income before subsidies end.
   B. COLLAB W/COUNTY EMPLOYMENT SVCS: The CoC works closely w/the County Employment & Human Srvcs Dept (EHSD) to connect clients to employment supports, incl. those available through the workforce development board (WDB), which prioritizes access for people exp. homelessness. An EHSD rep also sits on the CoC Bd. & helps strategize re: employment access. The CoC hosts the Homeless Workforce Integration Network (H-WIN), a partnership between Workforce Development & Homeless Svc focused on ensuring bidirectional information and resource sharing to support employment for people experiencing homelessness.
   C. TRAINING: CoC providers attend mandatory training on helping clients increase income through employment early, as well as how to access WDB services & connect clients to other venues for employment.
   D. TARGETED SERVICES TO OVERCOME EMPLOYMENT BARRIERS: Providers help clients ID barriers to employment & then link them to orgs that can provide targeted assistance such as the Reentry Success Center & Rubicon for people w/mental health issues. The WDB also assists people who lost jobs during COVID-19 through the BounceBack initiative.
   E. CREATING POSITIONS FOR PEOPLE W/LIVED EXP: the CoC & its partner agencies help increase income by creating internal positions for program participants or those who have recently completed programs, such as peer support & outreach specialists. The Service Provider Individualized Recovery Intensive Training (SPIRIT) is a collaboration between CCHS and local community colleges to provide behavioral health skills training & employment opps for people with lived experience.

2. WORK W/MAINSTREAM EMPLOYMENT ORGS: The CoC works with EHSD & WBD to provide program participants w/ assistance through America’s job centers (AJC). AJC services include career planning & assessment, job training, & workshops on basic computer skills, social networking, job searches, interviewing, & resume building. Providers also connect clients to Opportunity Junction for careers in healthcare & administration, & to SparkPoint for help w/financial management once they start earning income.

3. ORG RESPONSIBLE: County Health, Housing, & Homeless Services Division in collab w/ County EHSD.

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**2C-5a. Increasing Non-employment Cash Income–CoC’s Strategy**

NOFO Section V.B.5.f.

In the field below:

1. describe your CoC’s strategy to access non-employment cash income; and

2. provide the organization name or position title that is responsible for overseeing your CoC’s strategy to increase non-employment cash income.

(limit 2,500 characters)
1. STRATEGIES TO INCREASE NON-EMPLOYMENT INCOME: The County Employment & Human Services Dept (EHSD) & CoC operate joint targeted programs to ensure that HHs exp. & at risk of homelessness have access to public benefits & opportunities to increase non-employment income. Programs include the CalWORKs Housing Support Program, Housing Disability Advocacy Program (HDAP), Adult Protective Services Home Safe Program, & Adult & Aging Services Information & Assistance Program. EHSD also provides mandatory annual training to CoC providers on helping increase non-employment cash income through mainstream benefits, including how to troubleshoot eligibility issues & denials. The CoC works closely with the va through bimonthly meetings & the use of by-name lists to ensure that veterans receive all benefits they are eligible for. In addition, CoC providers ensure that all eligible clients apply for & receive unemployment benefits, particularly during the COVID-19 pandemic. To increase household budgets overall, the CoC partners w/ CBOs (Rubicon, SparkPoint) to increase financial literacy & money mgmt skills. SOAR & HDAP connect people w/ disabilities who are experiencing homelessness to disability benefits & dedicated housing. A specialized HDAP street outreach team staffed by clinicians provides access to these programs for people experiencing unsheltered homelessness. CARE drop-in service centers also provide linkages to benefits specialists who help screen & connect clients to resources, including non-employment cash income. Bay Area Legal Aid works directly with CoC clients to offer advocacy & representation where necessary to obtain & maintain benefits.

2. ORG RESPONSIBLE: County Health, Housing, & Homeless Services Division in collaboration with County EHSD.
3A. Coordination with Housing and Healthcare

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions


NOFO Section V.B.6.a.

You must upload the Housing Leveraging Commitment attachment to the 4B. Attachments Screen.

Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?

Yes


NOFO Section V.B.6.b.

You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.

Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?

Yes


NOFO Sections V.B.6.a. and V.B.6.b.

If you selected yes to questions 3A-1. or 3A-2., use the list feature icon to enter information about each project application you intend for HUD to evaluate to determine if they meet the criteria.

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Project Type</th>
<th>Rank Number</th>
<th>Leverage Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACCESS Expansion</td>
<td>PH-PSH</td>
<td>8</td>
<td>Both</td>
</tr>
<tr>
<td>High Utilizers of...</td>
<td>PH-PSH</td>
<td>20</td>
<td>Healthcare</td>
</tr>
</tbody>
</table>

1. What is the name of the new project? ACCESS Expansion

2. Enter the Unique Entity Identifier (UEI): TJBLL7SXRDC5

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC’s Priority Listing: 8

5. Select the type of leverage: Both


1. What is the name of the new project? High Utilizers of Multiple Systems – Project Based

2. Enter the Unique Entity Identifier (UEI): C88YLPTJJSY1

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC’s Priority Listing: 20

5. Select the type of leverage: Healthcare
# 3B. New Projects With Rehabilitation/New Construction Costs

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions


### NOFO Section V.B.1.s.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is your CoC requesting funding for any new project application requesting $200,000 or more in funding for housing rehabilitation or new construction?</td>
<td>No</td>
</tr>
</tbody>
</table>


### NOFO Section V.B.1.s.

If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:

1. Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and
2. HUD’s implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.

(limit 2,500 characters)

N/A
HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3C-1. Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.

Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?

No

3C-2. Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.

You must upload the Project List for Other Federal Statutes attachment to the 4B Attachments Screen.

If you answered yes to question 3C-1, describe in the field below:

1. how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and

2. how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.

(limit 2,500 characters)

N/A
4A. DV Bonus Project Applicants for New DV Bonus Funding

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

4A-1. New DV Bonus Project Applications

NOFO Section I.B.3.l.

Did your CoC submit one or more new project applications for DV Bonus Funding? Yes

4A-1a. DV Bonus Project Types

NOFO Section I.B.3.l.

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2023 Priority Listing.

<table>
<thead>
<tr>
<th>Project Type</th>
<th>1. SSO Coordinated Entry</th>
<th>2. PH-RRH or Joint TH and PH-RRH Component</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. SSO Coordinated Entry</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>2. PH-RRH or Joint TH and PH-RRH Component</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

You must click “Save” after selecting Yes for element 1 SSO Coordinated Entry to view questions 4A-2, 4A-2a. and 4A-2b.


NOFO Section I.B.3.l.(1)(c)

| 1. Enter the number of survivors that need housing or services: | 2,160 |
| 2. Enter the number of survivors your CoC is currently serving: | 1,447 |
| 3. Unmet Need:                                                    | 713   |
NOFO Section I.B.3.l.(1)(c)

Describe in the field below:

1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-3 element 1 and element 2; and
2. the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects); or
3. if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.

(limit 2,500 characters)

1. Survivors needing housing or services – unmet need: For FY 2022-23, the CoC has identified 713 domestic violence survivors with unmet housing needs. This number reflects the following:
   (a) The total number of people in HMIS who requested housing services and reported a history of DV or exploitation was 1743
   (b) VSP STAND! received 417 requests for housing assistance, which includes 161 participants in their TH, ES, or Emergency Lodging programs, 121 participants for whom housing was not provided and 135 participants referred to the DV housing advocate. 1743 + 417 = 2,160 total survivors needing housing.
   (c) Survivors served: the total number of people in HMIS who entered a residential program or the community queue and reported a history of DV or exploitation was 1165. STAND! provided 161 survivors with ES, TH, or EL. Esperanza RRH & New Journey RRH served 121 individuals. 1165 + 161 + 121 = 1,447
   (d) Unmet Need: 2,160 – 1,447 = 713. The CoC honors safety & confidentiality & some duplication may exist across systems. However, due to underreporting of DV & trafficking, we do not believe this duplication inflates the number of survivors in need of housing & services.
2. Data Source: HMIS, VSP STAND!’s comparable database, Efforts to Outcomes, SHELTER, Inc’s comparable database.
3. The CoC has only one Victim Services Provider, STAND! and needs additional financial resources that are set aside specifically for survivors of domestic violence, dating violence, human trafficking, and stalking. Without dedicated rental assistance funding or housing units, survivors that experience homelessness in the CoC may face challenges being prioritized for mainstream resources because many are not chronically homeless, and their vulnerabilities are not always captured through the VI-SPDAT assessment. In addition, mainstream CoC resources are in high demand due to Contra Costa County’s high cost of living and low vacancy rate. COVID-19 impacted STAND’s ability to bring people to the physical shelter site, and the shelter capacity was temporarily reduced to allow for safe social distancing. Placing survivors in motels was challenging due to costs & difficulty building trusting relationships w/ clients offsite. High costs of goods & svs & finding vendors has impacted agency budget. Barriers also created w/ vacancies in residential positions due to COVID & high cost of living.
<table>
<thead>
<tr>
<th>** Applicant Name **</th>
<th>SHELTER, Inc.</th>
</tr>
</thead>
</table>

Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects—only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.

NOFO Section II.B.11.e.(1)(d)

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2023 Priority Listing for New Projects:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Applicant Name</td>
</tr>
<tr>
<td>2</td>
<td>Project Name</td>
</tr>
<tr>
<td>3</td>
<td>Project Rank on the Priority Listing</td>
</tr>
<tr>
<td>4</td>
<td>Unique Entity Identifier (UEI)</td>
</tr>
<tr>
<td>5</td>
<td>Amount Requested</td>
</tr>
<tr>
<td>6</td>
<td>Rate of Housing Placement of DV Survivors–Percentage</td>
</tr>
<tr>
<td>7</td>
<td>Rate of Housing Retention of DV Survivors–Percentage</td>
</tr>
</tbody>
</table>


NOFO Section I.B.3.l.(1)(d)

For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below:

1. how the project applicant calculated both rates;
2. whether the rates accounts for exits to safe housing destinations; and
3. the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)
1. Rate of housing placement & rate of housing retention calculations are based on data from secure, comparable database analyzed by SHELTER, Inc.'s analytics team. They collect and analyze data to track, measure, and report on the exact number of clients served, client progress, and client exit data, including client exits to safe housing destinations, to measure the changes in participants’ housing status. Clients work with Housing Navigators to identify safe housing locations. Staff utilizes data to plan and manage progress in each program by conducting monthly reviews to monitor client progress toward stable housing. This review allows program managers to measure whether they are progressing well towards program goals and whether housing remains safe, or whether changes need to be made. Additionally, staff initiate regular contact with participants after their exit to permanent housing or rental assistance has ended to offer support and track housing retention in the comparable database, which is also reviewed monthly.

2. The housing placement and housing retention rates take into account exits to safe housing destinations.

3. SHELTER, Inc. uses a secure, comparable database to track data and measure outcomes for their DV programs. SHELTER, Inc. uses HMIS for non-DV projects.


NOFO Section I.B.3.I.(1)(d)

Describe in the field below how the project applicant:

1. ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;

2. prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC’s emergency transfer plan, etc.;

3. determined which supportive services survivors needed;

4. connected survivors to supportive services; and

5. moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.

(limit 2,500 characters)
1. Safe affordable hsg for survivors: SHELTER, Inc. has served survivors of DV experiencing homelessness since 1986 & operated housing specifically for DV survivors since 2019, serving 121 participants in 2022 through the Esperanza & newly launched New Journey RRH pgms for DV survivors. Using Hsng Navigators, DV-certified case mgrs & a HF Approach, 100% of participants have retained safe hsg.

2. Prioritized survivors: SHELTER, Inc. received survivor referrals prioritized through CoC CES. CoC provides shelter, svs, hotline & maintains an emergency transfer (ET) policy outlined in CES P&P & Written Stds. DV survivors requesting external ET have priority over all other applicants for CoC-funded hsg asstnce. Across RRH, PSH pgms in 3 counties, SHELTER, Inc’s Housing Navigators prioritize DV survivors in hsg placement.

3 & 4. Evaluating need & connecting to svcs: Since launching Esperanza RRH project for DV survivors in 2019, SHELTER, Inc. has demonstrated a strong track record in identifying & connecting survivors to supportive svcs that achieve hsg stability & improve finances to retain housing. DV-Certified Case Managers work w/ clients to develop housing stabilization plans that prioritize housing goals & supports for successful tenancies, improved incomes & safety. Svcs include connection to community health, ed & financial resources. Housing Navigators assist households to locate & lease rentals focused on long-term stability & affordability. Funds avail for security deposits & short-term partial rental assistance. Un/underemployed participants work w/ Employment Specialist & external providers to obtain/increase employment income through vocational assessment, job placement & retention. SOAR-Certified Eligibility Specialist connects participants to mainstream government benefits to supplement income. Agency protocols include strict confidentiality policies that protect the identities & safety of all survivors & children. Significant steps taken to increase safety features of housing units in program.

5. Housing Stability: In Esperanza RRH Project, 100% of clients retained stable housing. In the new Planting Roots RRH project, utilizing a progressive engagement approach, svcs, & funds are tailored to help 12 HHs w/ financial asstnce to regain & stabilize in hgs w/ add’l support. A flexible & individualized approach allows more HH to exit homelessness. Planting Roots seeks to have positive housing outcomes for at least 90% of participants.


**NOFO Section I.B.3.l.(1)(d)**

Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:

| 1. | taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors; |
| 2. | making determinations and placements into safe housing; |
| 3. | keeping information and locations confidential; |
| 4. | training staff on safety and confidentiality policies and practices; and |
| 5. | taking security measures for units (congregate or scattered site), that support survivors’ physical safety and location confidentiality. |

(limit 2,500 characters)
1. Privacy/confidentiality during intake/interview: Agency protocols include strict confidentiality policies to protect ID/safety of all HH members. Hsing Navigator works w/ survivors to ID a safe meeting location for intake/interview. Meeting locations are never in a public place & may include SHELTER, Inc. offices, the survivor’s home, or another private, safe location IDed by survivor, such as a hotel room. SHELTER, Inc. provides transportation as necessary.

2. Placements into safe hsg: In existing Esperanza & New Journey RRH program, Hsg navigators work w/ landlords to obtain secure rentals in places the survivor has ided as safe, taking into consideration the location of the person who caused harm, ppl who may not protect the survivor’s confidential location & community supports such as schools & healthcare. Moving svc, furniture, financial assistance provided; DV-cert case mgr connects w/ medical/mental health svcs & cmmty resources. Eligibility spclst maximizes benefits.

3. Keeping info/locations confidential: All participant records are kept in a secure, confidential db. Provider helps housed survivors in RRH register w/ agencies to keep addresses confidential, assist w/ suppressing state records & help block id from exposure in online db. Hsg navigator works w/survivors to create/implent safety plan.

4. Training staff on safety/confidentiality policies/practices: Protocols include strict confidentiality policies/practices to protect ID/safety of survivors & kids, incl. social media safety. SHELTER, Inc. case mgrs complete 40 hr training, incl. crisis counseling, restraining orders, emergency hsging, family law & power/control wheel. Case mgrs complete annual county-provided training on best practices for working w/ survivors & trning on trauma-informed care, mental health, motivational interviewing, self-care, cultural diversity, subsidized hsg. Case mgmt council provides mthly staff training on supporting clients w/self-care, depression & grieving. All staff complete extended training modules incl. sexual harassment, workplace violence & substance use.


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NOFO Section I.B.3.i.(1)(d)

Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.

(limit 2,500 characters)
As an existing CoC and DV provider, SHELTER, Inc. regularly evaluates its policies, procedures, and practices to ensure the safety of DV survivors served in its projects, including the existing Esperanza RRH project. SHELTER, Inc. is monitored by the CoC lead agency, H3, on an annual basis for compliance with HUD rules and regulations and compliance with the Violence Against Women Act (VAWA). All participants have access to the CoC grievance/complaint process. SHELTER, Inc has also formed a Participant Advisory Council, (PAC) which evaluates and informs SHELTER, Inc. policies and programs, including SHELTER, Inc’s capacity to ensure the safety of survivor participants. To date, no safety issues or concerns have been raised by survivors or H3 through these evaluation processes.

<table>
<thead>
<tr>
<th>4A-3e.</th>
<th><strong>Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>NOFO Section I.B.3.l.(1)(d)</td>
<td></td>
</tr>
</tbody>
</table>

Describe in the field below examples of the project applicant’s experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:

1. prioritizing placement and stabilization in permanent housing consistent with the program participants’ wishes and stated needs;

2. establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;

3. providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;

4. emphasizing program participants’ strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;

5. centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;

6. providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and

7. offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)
1&2. SHELTER, Inc. was an early adopter of the trauma-informed care model using a strengths-based, housing first approach to service delivery and innovation, as demonstrated in the Esperanza RRH program. Esperanza RRH employs a client-centered, trauma-informed service approach tailored to the needs of the target population. In addition to agency trainings, Shelter Inc. staff have attended CoC trainings focused on serving DV survivors and will attend CoC offered trainings on trauma informed care. Housing navigators work with landlords to identify & obtain secure rental units. Financial assistance is provided as needed. SHELTER, Inc provides moving svcs & any other assistance—including new furnishings/fixtures. The project takes a participant-centered approach to providing services, & consistent with housing first practices, does not use punitive interventions.

3. Providing program participants with information on trauma: The SHELTER, Inc. DV-certified Pgm Mgr has over a decade of experience in social work. To achieve a DV certificate, case managers need to complete 40 hrs of training which include topics such as crisis counseling, restraining orders, emergency housing, & family law. The sequential intercept model is used by staff to help severely traumatized clients begin their healing journey, & participants receive training on the power & control wheel. SHELTER, Inc. works with the Family Justice Center, the 211 hotline, & the County Mental Health Department. Together, these agencies include a variety of svc & resources to help DV-affected families heal from their traumas & gain self-sufficiency.

4. Emphasizing participants’ strengths: SHELTER Inc. uses a trauma informed, strengths-based model emphasizing physical, psychological, & emotional safety. This model creates opportunities to rebuild a sense of control & empowerment. In the Esperanza RRH PROGRAM, survivors’ & their families’ needs are assessed by the case manager, who then appropriately targets svc. This means pacing the assessment according to the clients’ needs. All svc are performed using a client-centered approach, placing the desires & needs of the participant at the center of their svc. Participants are also linked to a variety of third-party programs such as tutoring, financial skills, taxes, tenant rights & responsibilities, parenting classes, & a variety of other svc offered free of charge to help families heal from the trauma of domestic violence, homelessness, & build critical skills that will help them increase their incomes, improve their relationships, build self-esteem & ultimately retain their housing for the long-term.

5. Cultural responsiveness & inclusivity: Applicant creates an inclusive, diverse, trauma-informed & culturally competent environment for all employees & clients. All program svc are conducted in a trauma-informed, victim-centered manner. All case managers complete regular county-provided training in trauma-informed care & client-centered care. Housing pool includes several ADA-certified units equipped w/ wheelchair ramps, non-slip floor treatments, handrails, sensor lights, & other features to accommodate persons with disabilities.

6. Opportunities for connection: Participants are linked to a variety of third-party programs such as tutoring, financial skills, taxes, tenant rights & responsibilities, parenting classes, & a variety of other svc. These svcvs are offered free of charge to help families heal from the trauma of domestic violence, homelessness, & build critical skills that will help them increase their incomes, improve their relationships, build self-esteem & ultimately retain their housing for the long-term.

7. Support for survivor parenting: SHELTER, Inc. connects parenting participants to trauma-informed Counseling Options & Parent Education (C.O.P.E.) for mental health support & Triple P Positive Parenting Program, an
During funding year 2022, SHELTER, inc. staff provided the following supportive services to DV survivors in SHELTER, Inc’s existing CoC domestic violence RRH program, Esperanza RRH:

1. Formed housing stability safety plans with participants and their Case Manager that include: (a) Plans for preventing and escaping violent situations; (b) Forming a supportive network of friends, family, and service providers; (c) Teaching children how to respond to dangerous situations; (d) Internet safety; and (e) Obtaining protective/restraining orders.

2. Provided housing first, RRH services to eligible households, coupled with intensive case management from DV-certified case manager and housing navigators to help homeless families & individuals to locate & stay in permanent housing. RRH is effective for a wide range of participants, including those impacted by domestic violence, dating violence, stalking, and sexual assault, even in costly rental markets like Contra Costa Cty.

3. Provided intensive one-on-one visits with case managers who connect them to mainstream benefits, linkages to counseling, medical and mental health services.

4. Connected clients to trauma-informed resources: Applicant works with Family Justice Center of Contra Costa County, the 211 hotline, and Contra Costa County Mental Health Department to help DV-affected families heal from their traumas and gain self-sufficiency. Additionally, these agencies facilitate referrals and enhance access to svc.

5. Employment specialist & external providers work with clients to increase employment income through vocational assessment, job preparedness, resume/interviewing skills, job placement, retention & career support & assist participants with accessing benefits.

6. Provide connections to third-party resources offering free services such as tutoring, financial skills, taxes, tenant rights and responsibilities, parenting classes, and a variety of other assistance to help families build critical skills that support long-term housing retention. For example, SHELTER, Inc. connects parenting participants to trauma-informed Counseling Options & Parent Education (C.O.P.E.) for mental health support & Triple P Positive Parenting Program, an evidence based parenting curriculum & connected participants with Regional Center, Fred Finch Youth Ctr & Care Parent Network to support parents of children w/disabilities.
Describe in the field below examples of how the new project(s) will:

1. prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;

2. establish and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;

3. provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;

4. emphasize program participants' strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivor-defined goals and aspirations;

5. center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;

6. provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and

7. offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)
1. & 2. SHELTER, Inc. was an early adopter of the trauma-informed care model and housing first approach & will continue to use a strengths-based approach to service delivery and innovation. Planting Roots is committed to using a Housing First Approach, including taking proactive steps to minimize barriers to entry & retention. This program will employ a client-centered, trauma-informed service approach tailored to the needs of the target population. Housing navigators will work with landlords to identify & obtain secure rental units. Financial assistance will be provided as needed. Moving svcs & any other assistance--including new furnishings/fixtures--provided. The project takes a participant-centered approach to providing services, & consistent with housing first practices, does not use punitive interventions. As noted in the priority listing, Planting Roots is committed to using a housing first approach, including taking proactive steps to minimize barriers to entry & retention.

3. Providing program participants with information on trauma: SHELTER, Inc. DV-certified Pgm Mgr has over a decade of experience in social work. To achieve a DV certificate, case managers need to complete 40 hrs of training which include topics such as crisis counseling, restraining orders, emergency housing, & family law. The sequential intercept model is used by staff to help severely traumatized clients begin their healing journey, & participants receive training on the power & control wheel. In the Planting Roots project, SHELTER, Inc. will continue its partnership with Family Justice Center, the 211 hotline, & County Mental Health Department. Together, these agencies include a variety of svc & resources to help DV-affected families heal from their traumas & gain self-sufficiency.

4. Emphasizing participants’ strengths: SHELTER Inc. uses a trauma informed, strengths-based model emphasizing physical, psychological, & emotional safety. This model creates opportunities to rebuild a sense of control & empowerment. Survivors’ & their families’ needs are assessed by the case manager, who then appropriately targets svc. This means pacing the assessment according to the clients’ needs. All svc are performed using a client-centered approach, placing the desires & needs of the participant at the center of their svc. Participants are also linked to a variety of third-party programs such as tutoring, financial skills, taxes, tenant rights & responsibilities, parenting classes, & a variety of other svc are offered free of charge to help families heal from the trauma of domestic violence, homelessness, & build critical skills that will help them increase their incomes, improve their relationships, build self-esteem & ultimately retain their housing for the long-term.

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7. Support for survivor parenting: SHELTER, Inc. has demonstrated success in
serving parenting survivors & their children. Planting Roots parenting participants will be connected to trauma-informed Counseling Options & Parent Education (C.O.P.E.) for mental health support & Triple P Positive Parenting Program, an evidence based parenting curriculum; and connected with Regional Center, Fred Finch Youth Ctr & Care Parent Network to support parents of children w/ disabilities.


NOFO Section I.B.3.l.(1)(f)

Describe in the field below how the new project will involve survivors:

1. with a range of lived expertise; and
2. in policy and program development throughout the project’s operation.

(limit 2,500 characters)

Participants in the new Planting Roots project will have the opportunity to participate in SHELTER, Inc’s Participant Advisory Council (PAC), which evaluates and helps inform SHELTER, Inc. policies and programs. The PAC meets quarterly and its membership consists of the agency’s participants spanning the three counties they serve. These participants have lived experience of homelessness (or have been at-risk of homelessness) in different SHELTER, Inc. programs and are compensated with a stipend for their participation. At least one PAC member is a survivor of DV. The PAC agenda is developed by PAC members and creates a space for former and current participants to communicate about their experiences with the agency’s services and make recommendations for improvements. For example, transportation was recently identified as a significant barrier to participants in obtaining and retaining stable housing, and the PAC revised and revised a survey for RRH program participants to determine how SHELTER, Inc. can assist participants with addressing these challenges. Planting Roots participants will have the opportunity to join the PAC and inform the agenda and focus.

Planting Roots participants will also be part of SHELTER, Inc’s focus on data and equity, as part of a Tipping Point initiative focused on improving equity in service delivery through monthly data analysis. Planting Roots participants will also provide feedback through surveys and interviews, which will be used to improve Planting Roots services. SHELTER, Inc.’s participant demographics consist of over 70% BIPOC (Black, Indigenous, Persons of Color) individuals, and they actively foster a culturally inclusive workplace that represents the families they serve. Staff come from a wide variety of backgrounds: 65% of SHELTER, Inc.’s total staff and 39% of the leadership team are BIPOC individuals, reflecting the demographics of SHELTER, Inc’s clients. This leads to increased connection and communication between survivors and staff, which in turn facilitates more candid and open conversations about how programs can improve.
4B. Attachments Screen For All Application Questions

We have provided the following guidance to help you successfully upload attachments and get maximum points:

1. You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.
2. You must upload an attachment for each document listed where 'Required?' is 'Yes'.
3. We prefer that you use PDF files, though other file types are supported–please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.
4. Attachments must match the questions they are associated with.
5. Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.
6. If you cannot read the attachment, it is likely we cannot read it either.
   - We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).
   - We must be able to read everything you want us to consider in any attachment.
7. After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.
8. Only use the "Other" attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.

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Submission Summary

Ensure that the Project Priority List is complete prior to submitting.

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FY2023 COC CONSOLIDATED APPLICATION
ATTACHMENT: PHA Homeless Preference (1C-7)

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HCV- Section 8
Administrative Plan

Housing Authority of the County of Contra Costa
3133 Estudillo Street
Martinez, CA 94553

Administrative Plan (revised December 13, 2022)

date updated
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PART III: SELECTION FOR HCV ASSISTANCE

4-III.A. OVERVIEW

As vouchers become available, families on the waiting list must be selected for assistance in accordance with the policies described in this part.

The order in which families are selected from the waiting list depends on the selection method chosen by HACCC and is impacted in part by any selection preferences for which the family qualifies. The availability of targeted funding also may affect the order in which families are selected from the waiting list.

HACCC must maintain a clear record of all information required to verify that the family is selected from the waiting list according to HACCC’s selection policies [24 CFR 982.204(b) and 982.207(e)].

4-III.B. SELECTION AND HCV FUNDING SOURCES

Special Admissions [24 CFR 982.203]

HUD may award funding for specifically-named families living in specified types of units (e.g., a family that is displaced by demolition of public housing; a non-purchasing family residing in a HOPE 1 or 2 projects). In these cases, HACCC may admit such families whether or not they are on the waiting list, and, if they are on the waiting list, without considering the family’s position on the waiting list. These families are considered non-waiting list selections. HACCC must maintain records showing that such families were admitted with special program funding.

HACCC administers the following Special Purpose funding:

- Veterans Administration Supportive Housing Program (VASH). Admissions are accepted at 80% of Area Median Income (Low Income) limit.

- Mainstream Program

- Emergency Housing Vouchers

Special (non-waitlist) Admissions include the following:

- In-Place households for newly authorized PBV projects

- Public Housing residents displaced due to RAD and other HACCC redevelopment efforts

- Up to 50 vouchers designated for formerly homeless families transitioning from higher-level Continuum of Care-funded permanent supportive housing programs who no longer need a higher level of care. A referral from the permanent supportive housing program is required.
• Family Unification Program Referrals from a partnering agency.

Targeted Funding [24 CFR 982.204(e)]

HUD may award a PHA funding for a specified category of families on the waiting list. HACCC must use this funding only to assist the families within the specified category. In order to assist families within a targeted funding category, HACCC may skip families that do not qualify within the targeted funding category. Within this category of families, the order in which such families are assisted is determined according to the policies provided in Section 4-III.C.

HACCC Policy

HACCC currently administers targeted funding for Mainstream 5 and Emergency Housing Vouchers.

Regular HCV Funding

Regular HCV funding may be used to assist any eligible family on the waiting list. Families are selected from the waiting list according to the policies provided in Section 4-III.C.

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that HACCC will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits HACCC to establish other local preferences, at its discretion. Any local preferences established must be consistent with HACCC plan and the consolidated plan and must be based on local housing needs and priorities that can be documented by a generally accepted data sources.

HACCC Policy

HACCC will use the following preferences (listed below with their ranking value) to rank applicants on the wait list:

• Involuntary Displacement (20 points). A preference for applicants who have been involuntarily displaced from housing due to:
  • A federal or state declared disaster
  • Government action (e.g., code enforcement, public improvement or development). Government action will also include participants in a witness protection program)
• Action by a housing owner that is beyond an applicant’s ability to control, and which occurs despite the applicant's having met all previous conditions of occupancy, and is other than a rent increase (e.g. conversion of a unit to non-rental or residential use, owner wants the property for personal use, foreclosure).

If the owner is an immediate family relative and there has been no previous rental agreement and the applicant has been part of the owner's family immediately prior to application, the applicant will not be considered involuntarily displaced.

To receive this preference, applicants must not be living in standard, permanent replacement housing. State law requires a preference in cases of displacement by public or private action.

• **Permanent Supportive Housing Graduation (500 points)**. A preference for formerly homeless families who have graduated from a Contra Costa County Continuum of Care (COC) funded permanent supportive housing program, or another homeless housing program participating in the COC Coordinated Entry system, that partners with HACCC such as the Continuum of Care Rental Assistance Program formerly known as Shelter Plus Care. A referral from the COC Coordinated Entry system is required to be eligible for this preference.

HACCC will provide up to 50 vouchers to eligible families who are homeless and that meet the local preference criteria defined in the Memorandum of Understanding (MOU) by and between HACCC and its partner agency(s). HACCC may, at its discretion, modify the total number of vouchers available for this local preference based on funding availability, the performance of social service agency partners, or other factors.

To serve these clients, HACCC's partner(s) will refer clients to HACCC that meet certain eligibility criteria for the local preference as defined in the Memoranda of Understanding (MOU) with each organization. HACCC may, at its discretion, enter into MOUs with additional agencies serving this population in the future. The partner agency must agree to provide housing search assistance and case management support so that the clients can find housing and remain stably housed. HACCC will not accept any referrals from partner agencies once the allotment for this local preference has been met. Thereafter, applicants referred by partner agencies will be added to the waiting list when there are vouchers available for this local preference. Applicants who are already on HACCC's waiting list may be pulled to the top of the Waiting List if they meet the eligibility requirements for the preference and are referred by the partner agencies.

Eligibility for this local preference is limited to families who are formerly homeless as defined in the MOU between HACCC and the partner agency. Additionally, applicants who qualify for the local preference must meet all of HACCC's specific screening and eligibility requirements.

• **Mainstream (250 Points)**. A preference for non-elderly persons with disabilities transitioning out of institutional and other segregated settings, at serious risk of institutionalization, homeless, at risk of becoming homeless or previously experienced homelessness and is currently a client in permanent supportive housing or a rapid rehousing project. Families on the HCV waiting list shall have first priority for the Mainstream vouchers and thereafter a separate waiting list for Mainstream eligible households shall be maintained to include referrals from the Housing
Consortium of the East Bay and the Contra Costa County Health, Housing and Human Services department who are partners with HACCC in the Mainstream voucher program.

- **Move from Las Deltas Properties to dramatically improve living conditions (500 points).** A preference for residents of the Las Deltas public housing properties who will move to other housing as soon as possible to dramatically improve their living conditions.

- **Insufficient Funding Termination (20 points).** A preference to any family that has been terminated from HACCC’s HCV program due to insufficient program funding.

- **Residency Preference (10 points).** A residency preference for applicants who live, work or have been hired to work in Contra Costa County. The use of a residency preference will not have the purpose or effect of delaying or otherwise denying admission to the program based on the race, color, ethnic origin, gender, religion, disability, or age of any member of an applicant family.

- Eligibility for this preference must be demonstrated by having a permanent physical residence within the jurisdictional area. Physical residence shall be defined as a domicile with a mailing address, other than a P.O. Box, for which the applicant can produce one or more of the following: a lease or purchase agreement, utility bills in their name showing the stated address, two pieces of first-class mail addressed to the applicant or a member of their household at the stated address. In certain circumstances of homelessness, third party verification from service agencies, clergy, merchants or other reliable source can be substituted subject to the approval of HACCC.

- **Veterans Assistance (1 point).** A preference for current or former members of the U.S. Armed Forces, veterans, or surviving spouses of veterans (as required by state law).

**Income Targeting Requirement [24 CFR 982.201(b)(2)]**

HUD requires that extremely low-income (ELI) families make up at least 75% of the families admitted to the HCV program during HACCC’s fiscal year. ELI families are those with annual incomes at the greater of the Federal Poverty level or below 30% of the area median income. To ensure this requirement is met, a PHA may skip non-ELI families on the waiting list in order to select an ELI family.

Low-income families admitted to the program that are “continuously assisted” under the 1937 Housing Act [24 CFR 982.4(b)], as well as low-income or moderate-income families admitted to the program that are displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing, are not counted for income targeting purposes [24 CFR 982.201(b)(2)(v)].

**HACCC Policy**

HACCC will monitor progress in meeting the income targeting requirement throughout the fiscal year. Extremely low-income families will be selected ahead of other eligible families on an as-needed basis to ensure the income targeting requirement is met.
• Oral Third-party Verification

• Self-Certification

Each of the verification methods is discussed in subsequent sections below. Exhibit 7-1 below contains an excerpt from the notice that provides guidance with respect to how each method may be used.

Exhibit 7-1 HUD’s Verification Hierarchy

<table>
<thead>
<tr>
<th>Level</th>
<th>Verification Technique</th>
<th>Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>Upfront Income Verification (UIV) using HUD’s Enterprise Income Verification (EIV) system (not available for income verifications of applicants)</td>
<td>Highest (Mandatory)</td>
</tr>
<tr>
<td>5</td>
<td>Upfront Income Verification (UIV) using non-HUD system</td>
<td>Highest (Optional)</td>
</tr>
<tr>
<td>4</td>
<td>Written third Party Verification</td>
<td>High (Mandatory to supplement EIV-reported income sources and when EIV has no data; Mandatory for non-EIV reported income sources; Mandatory when tenant disputes EIV-reported employment and income information and is unable to provide acceptable documentation to support dispute)</td>
</tr>
<tr>
<td>3</td>
<td>Written Third Party Verification Form</td>
<td>Medium-Low (Mandatory if written third party verification documents are not available or rejected by the PHA; and when the applicant or tenant is unable to provide acceptable documentation)</td>
</tr>
<tr>
<td>2</td>
<td>Oral Third-Party Verification</td>
<td>Low (Mandatory if written third party verification is not available)</td>
</tr>
<tr>
<td>1</td>
<td>Tenant Declaration</td>
<td>Low (Use as a last resort when unable to obtain any type of third-party verification)</td>
</tr>
</tbody>
</table>

Requirements for Acceptable Documents

HACCC Policy
PART I: GENERAL REQUIREMENTS

17-I.A. OVERVIEW

[24 CFR 983.5; FR Notice 1/18/17; Notice PIH 2017-21; FR Notice 1/24/22]

The project-based voucher (PBV) program allows HACCC that already administer a tenant- based voucher program under an annual contributions contract (ACC) with HUD to take up to 20 percent of its authorized units and attach the funding to specific units rather than using it for tenant-based assistance [24 CFR 983.6]. HACCC may only operate a PBV program if doing so is consistent with HACCC’s Annual Plan, and the goal of de-concentrating poverty and expanding housing and economic opportunities [42 U.S.C. 1437f(o)(13)].

HACCC Policy

HACCC will operate a project-based voucher program using up to 20 percent of its authorized units for project-based voucher assistance.

An additional 10 percent of the authorized units can be made available for PBV assistance. The units may be distributed among one, all, or a combination of the categories as long as the total number of units does not exceed the 10 percent cap.

For units under a HAP contract that was first executed on or after April 18, 2017, units qualify under this exception if the units:

- Are specifically made available to house individuals and families that meet the definition of homeless under section 103 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11302) and contained in the Continuum of Care Interim Rule at 24 CFR 578.3.

- Are specifically made available to house families that are comprised of or include a veteran.

  - Veteran means an individual who has served in the United States Armed Forces.

- Provide supportive housing to persons with disabilities or elderly persons as defined in 24 CFR 5.403. Support Services may include the following:

  - Meal service adequate to meet nutritional need;
  - Housekeeping aid;
  - Personal assistance;
  - Transportation services;
  - Health-related services;
  - Educational and employment services; or
  - Other services designed to help the recipient live in the community as independently as possible.
17-I.A.2 OTHER UNITS NOT SUBJECT TO THE PBV PROGRAM UNIT EXCEPTION

In addition to the units listed above, other units are not subject to the program limitation calculation and would be excluded in the total number of authorize units and the total number of PBV units currently committed to PBV that the PHA submits to the field office. The units are as follows:

a. PBV Units under the RAD Demonstration Program
b. HUD -VASH Set Aside - The exception only applies to HUD-VASH that were awarded to HACCC through the HUD-VASH PBV Set-Aside funding process. All other VASH vouchers including and that HACCC chooses to project-base are still subject to the PBV program limitations.

17-I.A.3 INCOME-MIXING PROJECT CAP EXEMPTIONS

Projects listed in 17-I.A.1 above are further exempted from the cap on the number of units receiving PBV assistance in any project. For these projects, 100% of the units can be assisted with PBV assistance. Provisions of 17-I.A.1.(2) (3) (4) shall be applicable to these projects.

This provision does not apply to units that were receiving PBV assistance prior to the effective date of April 18, 2017 of the HOTMA implementation guidance.

PBV HAP Contracts are considered legally binding obligations by HACCC and shall be the last units affected by any HACCC efforts to respond to insufficient funding. PBV assistance may be attached to existing housing or newly constructed or rehabilitated housing [24 CFR 983.52]. If PBV units are already selected for project-based assistance either under an agreement to enter into HAP Contract (Agreement) or a HAP contract, HACCC is not required to reduce the number of these units if the amount of budget authority is subsequently reduced. However, HACCC is responsible for determining the number of units that are available for project-based vouchers and ensuring that the number of units that are assisted with PBV assistance are within the available units under the ACC [24 CFR 983.6]. HACCC shall also ensure that the amount of funding for the assistance attached to the units is available under the ACC.

17-I.B. TENANT-BASED VS. PROJECT-BASED VOUCHER ASSISTANCE

[24 CFR 983.2]

Much of the tenant-based voucher program regulations also apply to the PBV program. Consequently, many of HACCC's policies related to tenant-based assistance also apply to PBV assistance. The provisions of the tenant-based voucher regulations that do not apply to the PBV program are listed at 24 CFR 983.2.
Except as otherwise noted in this chapter, or unless specifically prohibited by PBV program regulations, HACCC's policies for the tenant-based voucher program contained in this administrative plan also apply to the PBV program and its participants.

17-I.C. RELOCATION REQUIREMENTS

[24 CFR 983.7]

Any persons displaced as a result of implementation of the PBV program must be provided relocation assistance in accordance with the requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (URA)[42 U.S.C. 4201-4655] and implementing regulations at 49 CFR part 24.

The cost of required relocation assistance may be paid with funds provided by the owner, local public funds, or funds available from other sources. HACCC may not use voucher program funds to cover relocation costs, except that HACCC may use their administrative fee reserve to pay for relocation expenses after all other program administrative expenses are satisfied, and provided that payment of the relocation benefits is consistent with state and local law. Use of the administrative fee for these purposes must also be consistent with other legal and regulatory requirements, including the requirement in 24 CFR 982.155 and other official HUD issuances.

The acquisition of real property for a PBV project is subject to the URA and 49 CFR part 24, subpart B. It is the responsibility of HACCC to ensure the owner complies with these requirements.

17-I.D. EQUAL OPPORTUNITY REQUIREMENTS

[24 CFR 983.8]

HACCC must comply with all equal opportunity requirements under federal law and regulations in its implementation of the PBV program. This includes the requirements and authorities cited at 24 CFR 5.105(a). In addition, HACCC must comply with HACCC's Administrative Plan certification on civil rights and affirmatively furthering fair housing, submitted in accordance with 24 CFR 903.7(o).
must refer these families to the project owner for an appropriately sized PBV unit in the project. Admission of eligible in-place families is not subject to income targeting requirements.

This regulatory protection from displacement does not apply to families that are not eligible to participate in the program on the proposal selection date.

17-VI.C. ORGANIZATION OF THE WAITING LIST

[24 CFR 983.251(C)]

HACCC may establish a separate waiting list for PBV units or it may use the same waiting list for both tenant-based and project-based assistance. HACCC may also merge the PBV waiting list with a waiting list for other assisted housing programs offered by HACCC. If HACCC chooses to offer a separate waiting list for PBV assistance, HACCC must offer to place applicants who are listed on the tenant-based waiting list on the waiting list for PBV assistance.

If HACCC decides to establish a separate PBV waiting list, HACCC may use a single waiting list for HACCC’s whole PBV program, or it may establish separate waiting lists for PBV units in particular projects or for sets of such units.

HACCC Policy

It was past practice for HACCC to use the same waiting list for both tenant-based and PBV assistance. HACCC used the HCV waiting list for PBV assistance until site-based waiting lists were established for each PBV project. All HCV applicants were given the first opportunity to be placed on these site-based wait lists. Since then and thereafter, all applicants interested in PBV assistance shall be placed on the project’s site-based wait list. Placement on the site-based wait list shall not affect applicants’ placement or status on the HCV wait list.

Establishment of Site Based Waiting List for RAD Covered Projects

24 CFR § 983.251 sets out PBV program requirements related to establishing and maintaining a voucher-wide, PBV program-wide, or site-based waiting list from which residents for the Covered Project will be admitted. These provisions will apply unless the project is covered by a remedial order or agreement that specifies the type of waiting list and other waiting list policies. HACCC shall consider the best means to transition applicants from the current public housing waiting list, including:

i. Transferring an existing site-based waiting list to a new site-based waiting list. If HACCC is transferring the assistance to another neighborhood, HACCC must notify applicants on the waitlist of the transfer of assistance, and on how they can apply for residency at the new project site or other sites. Applicants on a project-specific waiting list for a project where the assistance is being transferred shall have priority on the newly formed waiting list for the new project site in accordance with the date and time of their application to the original project's waiting list.
<table>
<thead>
<tr>
<th>Location</th>
<th>Address</th>
<th>1st Unit</th>
<th>2nd Unit</th>
<th>3rd Unit</th>
<th>4th Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Idaho Apartments - RAD 2</td>
<td>10203 San Pablo Ave., El Cerrito/Richmond 94530</td>
<td>28</td>
<td>28</td>
<td>Family</td>
<td></td>
</tr>
<tr>
<td>Robin Lane</td>
<td>1149 Meadow Lane, Concord, CA</td>
<td>2</td>
<td>2</td>
<td>4</td>
<td>Family</td>
</tr>
<tr>
<td>St. Paul's Community Center and Apartments</td>
<td>1880 Trinity Ave., Walnut Creek, CA</td>
<td>5</td>
<td></td>
<td>5</td>
<td>Family</td>
</tr>
<tr>
<td>Tabora Gardens</td>
<td>3701 Tabora Dr., Antioch, CA 94509</td>
<td>22</td>
<td></td>
<td>22</td>
<td>Senior</td>
</tr>
<tr>
<td>Triangle Court - RAD</td>
<td>980 Triangle Court, Richmond, CA 94804</td>
<td>26</td>
<td>56</td>
<td>15</td>
<td>Family</td>
</tr>
</tbody>
</table>

17-VI.D. SELECTION FROM THE WAITING LIST

[24 CFR 983.251(C)]

Applicants who will occupy units with PBV assistance must be selected from HACCC’s site-based waiting list for that property. HACCC shall establish selection criteria or preferences for occupancy of particular PBV units. HACCC may place families referred by the PBV owner to their PBV site-based waiting list.

Continuum of Care Assisted Units

In addition to site-based waiting lists for each PBV property, HACCC shall maintain a separate wait list for units designated for assistance through the Continuum of Care’s Coordinated Entry System (CES). These units are required to be used to house homeless families that are in the CES for housing assistance referral. When vacancies occur at the PBV properties in these designated units, the owner shall request a suitable referral from the Coordinated Entry System. Once the owner has reviewed the application and accepted the referral for housing assistance, the owner shall refer the family to HACCC's initial eligibility team for program eligibility determination and leasing. Families will only be placed on this waiting list if they are deemed suitable for occupancy by the owner and immediately processed for intake.

This waiting list will not have a preference designation since all additions to the list will immediately be designated for specific units within the PBV portfolio. The only qualifier will be the date and time of the applicant's addition to the CES wait list.

Units eligible for CES assistance and priority are as follows:

- Garden Park Apartments - 2387 Lisa Lane, Pleasant Hill, CA
- Idaho Apartments - 10203 San Pablo Ave., El Cerrito/Richmond 94530
- Lakeside Apartments - 1897 Oakmead Dr., Concord, CA
  1. Unit A-10
  2. Unit B-3
  3. Unit B-5
  4. Unit C-1
- Robin Lane – 1149 Meadow Lane, Concord, CA
  1. M103
HACCC may use the same selection preferences that are used for the tenant-based voucher program, establish selection criteria or preferences for the PBV program as a whole, or for occupancy of particular PBV developments or units. HACCC must provide an absolute selection preference for eligible in-place families as described in Section 17-VI.B. above.

Although HACCC is prohibited from granting preferences to persons with a specific disability, HACCC may give preference to disabled families who need services offered at a particular project or site if the preference is limited to families (including individuals):

- With disabilities that significantly interfere with their ability to obtain and maintain themselves in housing;
- Who, without appropriate supportive services, will not be able to obtain or maintain themselves in housing; and
- For whom such services cannot be provided in a non-segregated setting.

In advertising such a project, the owner may advertise the project as offering services for a particular type of disability; however, the project must be open to all otherwise eligible disabled persons who may benefit from services provided in the project. In these projects, disabled residents may not be required to accept the particular services offered as a condition of occupancy.

If HACCC has projects with "excepted units" (units specifically made available for elderly or families receiving supportive services), HACCC must give preference to such families when referring families to these units [24 CFR 983.261(b); FR Notice 1/18/17].

**HACCC Policy**

HACCC will provide a selection preference when required by the regulation (i.e., eligible in-place families and mobility impaired persons for accessible units). In the event an owner is obligated to house specific populations in conformance with Federal, State or Local funding regulatory agreements, HACCC shall review the preferences for the designated site-based wait list and determine on a case-by-case basis whether a modification is required and will be adopted in this administrative plan. The following preferences have been adopted by HACCC for all PBV Site-Based Wait Lists:

Eligible households from a converting project under RAD interested in off-site replacement units for designated RAD Converted units. (500 Points)

Homeless - RAD SRO ONLY: Eligible households for RAD PBV projects converted from the McKinney Moderate Rehabilitation Single Room Occupancy (SRO) Program to RAD under Component 2 of the RAD Program who verify homelessness pursuant to the HUD McKinney-Vento Homeless Assistance Act as amended by the HEARTH Act and contained in the Continuum of Care at 24 CFR § 578.3. (50 Points)

Eligible in-place families as described as described in Section 17-VI.B. (200 Points); Eligible households from the Housing Choice Voucher Wait List. (150 Points);
Current or former members of the U.S. Armed Forces, veterans, or surviving spouses of veterans (as required by state law) (1 Point);

Applicants who live, work or have been hired to work in HACCC’s jurisdiction (all of Contra Costa County) The use of a residency preference will not have the purpose or effect of delaying or otherwise denying admission to the program based on the race, color, ethnic origin, gender, religion, disability, or age of any member of an applicant family;

- Eligibility for this preference must be demonstrated by having a permanent physical residence within the jurisdictional area. Physical residence shall be defined as a domicile with a mailing address, other than a P.O. Box, for which the applicant can produce one or more of the following: a lease or purchase agreement, utility bills in their name showing the stated address, two pieces of first-class mail addressed to the applicant or a member of their household at the stated address. In certain circumstances of homelessness, third party verification from service agencies, clergy, merchants or other reliable source can be substituted subject to the approval of HACCC. (10 Points)

Applicants who have been involuntarily displaced from housing due to a federal or state declared disaster, government action (e.g., code enforcement, public improvement or development. Government action will also include participants in a witness protection program) or action by a housing owner that is beyond an applicant’s ability to control and which occurs despite the applicant's having met all previous conditions of occupancy, and is other than a rent increase (e.g. conversion of a unit to non-rental or residential use, owner wants the property for personal use, foreclosure). If the owner is an immediate family relative and there has been no previous rental agreement and the applicant has been part of the owner's family immediately prior to application, the applicant will not be considered involuntarily displaced. To receive this preference, applicants must not be living in standard, permanent replacement housing. (State law requires a preference in cases of displacement by public or private action) (20 Points);

Formerly homeless families who have graduated from a Contra Costa County Continuum of Care (COC) funded permanent supportive housing program, or another homeless housing program participating in the COC Coordinated Entry system, that partners with HACCC such as the Continuum of Care Rental Assistance Program formerly known as Shelter Plus Care. A referral from the COC Coordinated Entry system is required to be eligible for this preference (500 Points);

Any family that has been terminated from HACCC’s HCV program due to insufficient program funding (20 Points);

All applicants will be assigned points based on any preference(s) for which they qualify (e.g., a veteran and resident of HACCC’s jurisdiction would receive 11 points).

Applicants with more preference points will be ranked ahead of applicants with fewer preference points. Among applicants with the same number of preference points, families will be selected according to the date and time of application to that site-based wait list. A
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Administrative Plan

Housing Authority of the County of Contra Costa
3133 Estudillo Street
Martinez, CA 94553

Administrative Plan (revised December 13, 2022)
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4-III.A. OVERVIEW

As vouchers become available, families on the waiting list must be selected for assistance in accordance with the policies described in this part.

The order in which families are selected from the waiting list depends on the selection method chosen by HACCC and is impacted in part by any selection preferences for which the family qualifies. The availability of targeted funding also may affect the order in which families are selected from the waiting list.

HACCC must maintain a clear record of all information required to verify that the family is selected from the waiting list according to HACCC’s selection policies [24 CFR 982.204(b) and 982.207(e)].

4-III.B. SELECTION AND HCV FUNDING SOURCES

Special Admissions [24 CFR 982.203]

HUD may award funding for specifically-named families living in specified types of units (e.g., a family that is displaced by demolition of public housing; a non-purchasing family residing in a HOPE 1 or 2 projects). In these cases, HACCC may admit such families whether or not they are on the waiting list, and, if they are on the waiting list, without considering the family’s position on the waiting list. These families are considered non-waiting list selections. HACCC must maintain records showing that such families were admitted with special program funding.

HACCC administers the following Special Purpose funding:

- Veterans Administration Supportive Housing Program (VASH). Admissions are accepted at 80% of Area Median Income (Low Income) limit.
- Mainstream Program
- Emergency Housing Vouchers

Special (non-waitlist) Admissions include the following:

- In-Place households for newly authorized PBV projects
- Public Housing residents displaced due to RAD and other HACCC redevelopment efforts
- **Up to 50 vouchers designated for formerly homeless families transitioning from higher-level Continuum of Care-funded permanent supportive housing programs who no longer need a higher level of care. A referral from the permanent supportive housing program is required.**
• Family Unification Program Referrals from a partnering agency.

Targeted Funding [24 CFR 982.204(e)]

HUD may award a PHA funding for a specified category of families on the waiting list. HACCC must use this funding only to assist the families within the specified category. In order to assist families within a targeted funding category, HACCC may skip families that do not qualify within the targeted funding category. Within this category of families, the order in which such families are assisted is determined according to the policies provided in Section 4-III.C.

HACCC Policy

HACCC currently administers targeted funding for Mainstream 5 and Emergency Housing Vouchers.

Regular HCV Funding

Regular HCV funding may be used to assist any eligible family on the waiting list. Families are selected from the waiting list according to the policies provided in Section 4-III.C.

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that HACCC will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits HACCC to establish other local preferences, at its discretion. Any local preferences established must be consistent with HACCC plan and the consolidated plan and must be based on local housing needs and priorities that can be documented by a generally accepted data sources.

HACCC Policy

HACCC will use the following preferences (listed below with their ranking value) to rank applicants on the wait list:

• Involuntary Displacement (20 points). A preference for applicants who have been involuntarily displaced from housing due to:
  • A federal or state declared disaster
  • Government action (e.g., code enforcement, public improvement or development). Government action will also include participants in a witness protection program)
• Action by a housing owner that is beyond an applicant’s ability to control, and which occurs despite the applicant's having met all previous conditions of occupancy, and is other than a rent increase (e.g. conversion of a unit to non-rental or residential use, owner wants the property for personal use, foreclosure).

If the owner is an immediate family relative and there has been no previous rental agreement and the applicant has been part of the owner's family immediately prior to application, the applicant will not be considered involuntarily displaced.

To receive this preference, applicants must not be living in standard, permanent replacement housing. State law requires a preference in cases of displacement by public or private action.

• **Permanent Supportive Housing Graduation (500 points).** A preference for formerly homeless families who have graduated from a Contra Costa County Continuum of Care (COC) funded permanent supportive housing program, or another homeless housing program participating in the COC Coordinated Entry system, that partners with HACCC such as the Continuum of Care Rental Assistance Program formerly known as Shelter Plus Care. A referral from the COC Coordinated Entry system is required to be eligible for this preference.

HACCC will provide up to 50 vouchers to eligible families who are homeless and that meet the local preference criteria defined in the Memorandum of Understanding (MOU) by and between HACCC and its partner agency(s). HACCC may, at its discretion, modify the total number of vouchers available for this local preference based on funding availability, the performance of social service agency partners, or other factors.

To serve these clients, HACCC's partner(s) will refer clients to HACCC that meet certain eligibility criteria for the local preference as defined in the Memoranda of Understanding (MOU) with each organization. HACCC may, at its discretion, enter into MOUs with additional agencies serving this population in the future. The partner agency must agree to provide housing search assistance and case management support so that the clients can find housing and remain stably housed. HACCC will not accept any referrals from partner agencies once the allotment for this local preference has been met. Thereafter, applicants referred by partner agencies will be added to the waiting list when there are vouchers available for this local preference. Applicants who are already on HACCC’s waiting list may be pulled to the top of the Waiting List if they meet the eligibility requirements for the preference and are referred by the partner agencies.

Eligibility for this local preference is limited to families who are formerly homeless as defined in the MOU between HACCC and the partner agency. Additionally, applicants who qualify for the local preference must meet all of HACCC’s specific screening and eligibility requirements.

• **Mainstream (250 Points).** A preference for non-elderly persons with disabilities transitioning out of institutional and other segregated settings, at serious risk of institutionalization, homeless, at risk of becoming homeless or previously experienced homelessness and is currently a client in permanent supportive housing or a rapid rehousing project. Families on the HCV waiting list shall have first priority for the Mainstream vouchers and thereafter a separate waiting list for Mainstream eligible households shall be maintained to include referrals from the Housing Choice & Mainstream Voucher Move-On Preference Description.
• Oral Third-party Verification

• Self-Certification

Each of the verification methods is discussed in subsequent sections below. Exhibit 7-1 below contains an excerpt from the notice that provides guidance with respect to how each method may be used.

**Exhibit 7-1 HUD’s Verification Hierarchy**

<table>
<thead>
<tr>
<th>Level</th>
<th>Verification Technique</th>
<th>Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>Upfront Income Verification (UIV) using HUD’s Enterprise Income Verification (EIV) system (not available for income verifications of applicants)</td>
<td><strong>Highest</strong> (Mandatory)</td>
</tr>
<tr>
<td>5</td>
<td>Upfront Income Verification (UIV) using non-HUD system</td>
<td><strong>Highest</strong> (Optional)</td>
</tr>
<tr>
<td>4</td>
<td>Written third Party Verification</td>
<td><strong>High</strong> (Mandatory to supplement EIV-reported income sources and when EIV has no data; Mandatory for non-EIV reported income sources; Mandatory when tenant disputes EIV-reported employment and income information and is unable to provide acceptable documentation to support dispute)</td>
</tr>
<tr>
<td>3</td>
<td>Written Third Party Verification Form</td>
<td><strong>Medium-Low</strong> (Mandatory if written third party verification documents are not available or rejected by the PHA; and when the applicant or tenant is unable to provide acceptable documentation)</td>
</tr>
<tr>
<td>2</td>
<td>Oral Third-Party Verification</td>
<td><strong>Low</strong> (Mandatory if written third party verification is not available)</td>
</tr>
<tr>
<td>1</td>
<td>Tenant Declaration</td>
<td><strong>Low</strong> (Use as a last resort when unable to obtain any type of third-party verification)</td>
</tr>
</tbody>
</table>

**Requirements for Acceptable Documents**

HACCC Policy
must refer these families to the project owner for an appropriately sized PBV unit in the project. Admission of eligible in-place families is not subject to income targeting requirements.

This regulatory protection from displacement does not apply to families that are not eligible to participate in the program on the proposal selection date.

17-VI.C. ORGANIZATION OF THE WAITING LIST

[24 CFR 983.251(C)]

HACCC may establish a separate waiting list for PBV units or it may use the same waiting list for both tenant-based and project-based assistance. HACCC may also merge the PBV waiting list with a waiting list for other assisted housing programs offered by HACCC. If HACCC chooses to offer a separate waiting list for PBV assistance, HACCC must offer to place applicants who are listed on the tenant-based waiting list on the waiting list for PBV assistance.

If HACCC decides to establish a separate PBV waiting list, HACCC may use a single waiting list for HACCC’s whole PBV program, or it may establish separate waiting lists for PBV units in particular projects or for sets of such units.

HACCC Policy

It was past practice for HACCC to use the same waiting list for both tenant-based and PBV assistance. HACCC used the HCV waiting list for PBV assistance until site-based waiting lists were established for each PBV project. All HCV applicants were given the first opportunity to be placed on these site-based wait lists. Since then and thereafter, all applicants interested in PBV assistance shall be placed on the project’s site-based wait list. Placement on the site-based wait list shall not affect applicants’ placement or status on the HCV wait list.

Establishment of Site Based Waiting List for RAD Covered Projects

24 CFR § 983.251 sets out PBV program requirements related to establishing and maintaining a voucher-wide, PBV program-wide, or site-based waiting list from which residents for the Covered Project will be admitted. These provisions will apply unless the project is covered by a remedial order or agreement that specifies the type of waiting list and other waiting list policies. HACCC shall consider the best means to transition applicants from the current public housing waiting list, including:

i. Transferring an existing site-based waiting list to a new site-based waiting list. If HACCC is transferring the assistance to another neighborhood, HACCC must notify applicants on the waitlist of the transfer of assistance, and on how they can apply for residency at the new project site or other sites. Applicants on a project-specific waiting list for a project where the assistance is being transferred shall have priority on the newly formed waiting list for the new project site in accordance with the date and time of their application to the original project's waiting list.
Site-Based Wait Lists

<table>
<thead>
<tr>
<th>Site-Based Wait Lists</th>
<th>Preferences for PBV</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Administrative Plan</strong></td>
<td></td>
</tr>
</tbody>
</table>

- •

<table>
<thead>
<tr>
<th>Site Based Wait Lists</th>
<th>Preferences for PBV</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Robin Lane</strong>&lt;br&gt;1149 Meadow Lane, Concord, CA</td>
<td>2 2 4 Family</td>
</tr>
<tr>
<td><strong>St. Paul's Community Center and Apartments</strong>&lt;br&gt;1880 Trinity Ave., Walnut Creek, CA</td>
<td>5 5 Family</td>
</tr>
<tr>
<td><strong>Tabora Gardens</strong>&lt;br&gt;3701 Tabora Dr., Antioch, CA 94509</td>
<td>22 22 Senior</td>
</tr>
<tr>
<td><strong>Triangle Court - RAD</strong>&lt;br&gt;980 Triangle Court, Richmond, CA 94804</td>
<td>26 56 15 97 Family</td>
</tr>
</tbody>
</table>

### 17-VI.D. SELECTION FROM THE WAITING LIST

[24 CFR 983.251(C)]

Applicants who will occupy units with PBV assistance must be selected from HACCC’s site-based waiting list for that property. HACCC shall establish selection criteria or preferences for occupancy of particular PBV units. HACCC may place families referred by the PBV owner to their PBV site-based waiting list.

**Continuum of Care Assisted Units**

In addition to site-based waiting lists for each PBV property, HACCC shall maintain a separate wait list for units designated for assistance through the Continuum of Care's Coordinated Entry System (CES). These units are required to be used to house homeless families that are in the CES for housing assistance referral. When vacancies occur at the PBV properties in these designated units, the owner shall request a suitable referral from the Coordinated Entry System. Once the owner has reviewed the application and accepted the referral for housing assistance, the owner shall refer the family to HACCC's initial eligibility team for program eligibility determination and leasing. Families will only be placed on this waiting list if they are deemed suitable for occupancy by the owner and immediately processed for intake.

This waiting list will not have a preference designation since all additions to the list will immediately be designated for specific units within the PBV portfolio. The only qualifier will be the date and time of the applicant's addition to the CES wait list.

Units eligible for CES assistance and priority are as follows:

- **Garden Park Apartments - 2387 Lisa Lane, Pleasant Hill, CA**
- **Idaho Apartments - 10203 San Pablo Ave., El Cerrito/Richmond 94530**
- **Lakeside Apartments - 1897 Oakmead Dr., Concord, CA**
  1. Unit A-10
  2. Unit B-3
  3. Unit B-5
  4. Unit C-1
  5. Unit C-7
  6. Unit C-8
  7. Unit D-2
  8. Unit D-16
  9. Unit E-1
  10. Unit E-14
  11. Unit G-9
- **Robin Lane – 1149 Meadow Lane, Concord, CA**
  1. M103

Administrative Plan - HCV Program

Revised 12/13/2022
HACCC may use the same selection preferences that are used for the tenant-based voucher program, establish selection criteria or preferences for the PBV program as a whole, or for occupancy of particular PBV developments or units. HACCC must provide an absolute selection preference for eligible in-place families as described in Section 17-VI.B. above.

Although HACCC is prohibited from granting preferences to persons with a specific disability, HACCC may give preference to disabled families who need services offered at a particular project or site if the preference is limited to families (including individuals):

- With disabilities that significantly interfere with their ability to obtain and maintain themselves in housing;
- Who, without appropriate supportive services, will not be able to obtain or maintain themselves in housing; and
- For whom such services cannot be provided in a non-segregated setting.

In advertising such a project, the owner may advertise the project as offering services for a particular type of disability; however, the project must be open to all otherwise eligible disabled persons who may benefit from services provided in the project. In these projects, disabled residents may not be required to accept the particular services offered as a condition of occupancy.

If HACCC has projects with "excepted units" (units specifically made available for elderly or families receiving supportive services), HACCC must give preference to such families when referring families to these units [24 CFR 983.261(b); FR Notice 1/18/17].

**HACCC Policy**

HACCC will provide a selection preference when required by the regulation (i.e., eligible in-place families and mobility impaired persons for accessible units). In the event an owner is obligated to house specific populations in conformance with Federal, State or Local funding regulatory agreements, HACCC shall review the preferences for the designated site-based wait list and determine on a case-by-case basis whether a modification is required and will be adopted in this administrative plan. The following preferences have been adopted by HACCC for all PBV Site-Based Wait Lists:

Eligible households from a converting project under RAD interested in off-site replacement units for designated RAD Converted units. (500 Points)

Homeless - RAD SRO ONLY: Eligible households for RAD PBV projects converted from the McKinney Moderate Rehabilitation Single Room Occupancy (SRO) Program to RAD under Component 2 of the RAD Program who verify homelessness pursuant to the HUD McKinney-Vento Homeless Assistance Act as amended by the HEARTH Act and contained in the Continuum of Care at 24 CFR § 578.3. (50 Points)

Eligible in-place families as described as described in Section 17-VI.B. (200 Points); Eligible households from the Housing Choice Voucher Wait List. (150 Points);
Current or former members of the U.S. Armed Forces, veterans, or surviving spouses of veterans (as required by state law) (1 Point);

Applicants who live, work or have been hired to work in HACCC’s jurisdiction (all of Contra Costa County) The use of a residency preference will not have the purpose or effect of delaying or otherwise denying admission to the program based on the race, color, ethnic origin, gender, religion, disability, or age of any member of an applicant family;

• Eligibility for this preference must be demonstrated by having a permanent physical residence within the jurisdictional area. Physical residence shall be defined as a domicile with a mailing address, other than a P.O. Box, for which the applicant can produce one or more of the following: a lease or purchase agreement, utility bills in their name showing the stated address, two pieces of first-class mail addressed to the applicant or a member of their household at the stated address. In certain circumstances of homelessness, third party verification from service agencies, clergy, merchants or other reliable source can be substituted subject to the approval of HACCC. (10 Points)

Applicants who have been involuntarily displaced from housing due to a federal or state declared disaster, government action (e.g., code enforcement, public improvement or development. Government action will also include participants in a witness protection program) or action by a housing owner that is beyond an applicant’s ability to control and which occurs despite the applicant's having met all previous conditions of occupancy, and is other than a rent increase (e.g. conversion of a unit to non-rental or residential use, owner wants the property for personal use, foreclosure). If the owner is an immediate family relative and there has been no previous rental agreement and the applicant has been part of the owner's family immediately prior to application, the applicant will not be considered involuntarily displaced. To receive this preference, applicants must not be living in standard, permanent replacement housing. (State law requires a preference in cases of displacement by public or private action) (20 Points);

Formerly homeless families who have graduated from a Contra Costa County Continuum of Care (COC) funded permanent supportive housing program, or another homeless housing program participating in the COC Coordinated Entry system, that partners with HACCC such as the Continuum of Care Rental Assistance Program formerly known as Shelter Plus Care. A referral from the COC Coordinated Entry system is required to be eligible for this preference (500 Points);

Any family that has been terminated from HACCC’s HCV program due to insufficient program funding (20 Points);

All applicants will be assigned points based on any preference(s) for which they qualify (e.g., a veteran and resident of HACCC’s jurisdiction would receive 11 points).

Applicants with more preference points will be ranked ahead of applicants with fewer preference points. Among applicants with the same number of preference points, families will be selected according to the date and time of application to that site-based wait list.
FY2023 COC CONSOLIDATED APPLICATION ATTACHMENT: Letter Signed by Working Group (1D-11a)

TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Document Satisfying Requirement</th>
<th>Page Number</th>
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<tr>
<td>Cover Sheet</td>
<td>1</td>
</tr>
<tr>
<td>Letter Signed by Members with Lived Experience</td>
<td>2</td>
</tr>
<tr>
<td>o Letter signed by 3 current members of the CoC Board (Council on Homelessness) that have lived experience of homelessness</td>
<td>2</td>
</tr>
</tbody>
</table>
August 31, 2023

U.S. Department of Housing and Urban Development
Office of Community Planning and Development
451 7th Street, S.W.
Washington, DC 20410

RE: CoC CA-505 Notice of Funding Opportunity for FY 2023 Continuum of Care Competition

To Whom It May Concern:

letter signed by 3 members of the CoC board with lived experience of homelessness

As three members of the Contra Costa Council on Homelessness (CoH) and people with lived experience of homelessness, we support the Contra Costa Continuum of Care NOFO application, which reflects our shared priorities of serving individuals and families experiencing homelessness with severe service needs in the CoC’s geographic area.

The CoH is the governing body of the Contra Costa Continuum of Care (CA-505), with members appointed by the Contra Costa County Board of Supervisors. The CoH currently includes three members with current or past lived experience of homelessness within the last 7 years. The Contra Costa CoC shares the same geographic boundaries and are served by the same set of homeless services partners and stakeholders as Contra Costa County. The County, through Health, Housing & Homeless Services (H3), serves as the collaborative applicant and administrative entity on behalf of the CoC, as stated in the CoH Governance Charter and Bylaws. H3 ensures the homeless system of care is coordinated across the entire region. The CoH provides advice and input on the coordination and operations of homeless services, program operations, and program development efforts in Contra Costa County.

We understand that H3 is proposing to use this funding to expand the number of permanent supportive housing units in our community to ensure more individuals and families experiencing unsheltered homelessness obtain safe, stable, and supportive housing. As well as increase funding for the Homeless Management and Information System (HMIS) and bolster the existing strategies to incorporate the voices of people with lived experience (PWLE) throughout the CoC. Having seen H3’s success in Contra Costa County, we believe this funding has the potential to decrease homelessness in our community. We are excited for this opportunity to expand Contra Costa’s capacity to address homelessness and strongly support H3 and the CoC’s application for funding.

Sincerely,

Renee Jupp Hedrick
Chair, Contra Costa Council on Homelessness

Jo Bruno
Vice-Chair, Contra Costa Council on Homelessness

Wayne Earl
Member, Contra Costa Council on Homelessness
<table>
<thead>
<tr>
<th>Document Satisfying Requirement</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Cover Sheet</td>
<td>1</td>
</tr>
<tr>
<td><strong>Housing First Self-Assessment Form for CoC-Funded Project</strong></td>
<td>2-13</td>
</tr>
<tr>
<td>o Housing-First self-assessment dashboard for HUMS, a CoC-funded PSH project; assessment occurred outside of CoC local competition</td>
<td>2-13</td>
</tr>
</tbody>
</table>
### Program Information

<table>
<thead>
<tr>
<th><strong>Program Model:</strong></th>
<th>Permanent Supportive Housing</th>
<th>CoC-funded project name</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Program Name:</strong></td>
<td>HUMS</td>
<td></td>
</tr>
<tr>
<td><strong>Program Address if Site-based:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Check if scattered site</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Admin Office Address:</strong></td>
<td>2400 Bisso Ln ste-D2 Concord CA 94520</td>
<td></td>
</tr>
<tr>
<td><strong>Contact Information (person completing assessment):</strong></td>
<td></td>
<td>Jose Villa</td>
</tr>
<tr>
<td>Name:</td>
<td>Jose Villa</td>
<td></td>
</tr>
<tr>
<td>Email:</td>
<td><a href="mailto:jose.villa@cchealth.org">jose.villa@cchealth.org</a></td>
<td></td>
</tr>
</tbody>
</table>

#### Program Capacity:

| **# of units/vouchers per contract:** | 30 | Performance Dashboard Table: "PSH Unit Occupancy", column "Unit Inventory" |
| **# of Households Served July 1, 2021-June 30, 2022:** | 29 | Performance Dashboard Table: "Households Served" |
| **# adult-only HH served:** | 29 | Performance Dashboard Table: "Households Served" |
| **# households with children:** | 0 | Performance Dashboard Table: "Households Served" |
Eligibility, Enrollments and Exits

* data sources for some of the items below are listed in red text

Eligible and Prioritized Populations:

<table>
<thead>
<tr>
<th>Model Standards:</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;All Households assisted by PSH must be literally homeless [category 1 &amp; 4 of HUD def.] and living with a documented disabling condition&quot;</td>
</tr>
<tr>
<td>&quot;Whether dedicated to chronically homeless, the Written Standards prioritize those with longest history and severest service needs&quot;</td>
</tr>
</tbody>
</table>

Are program units/vouchers dedicated to chronically homeless?

*From APR, Question #2*

<table>
<thead>
<tr>
<th>X Yes, All</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes, some units are or they are Dedicated Plus</td>
</tr>
<tr>
<td>No</td>
</tr>
</tbody>
</table>

Population Served

<table>
<thead>
<tr>
<th>% of households who were literally homeless</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
</tr>
<tr>
<td>Performance Dashboard</td>
</tr>
<tr>
<td>Table: &quot;Literally Homeless Households&quot;</td>
</tr>
<tr>
<td>If less than 100%, has project verified remaining HH were fleeing dv or exiting institutions after less than a 90-day stay and were literally homeless before? (client files or audit report)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>% of households with one or more disabling conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
</tr>
<tr>
<td>Performance Dashboard</td>
</tr>
<tr>
<td>Table: &quot;Chronic Homeless and Disabled Households&quot;</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>% of chronically homeless households</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
</tr>
<tr>
<td>Performance Dashboard</td>
</tr>
<tr>
<td>Table: &quot;Chronic Homeless and Disabled Households&quot;</td>
</tr>
</tbody>
</table>

Are participants served consistent with the model standard?

<table>
<thead>
<tr>
<th>X Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
</tr>
</tbody>
</table>

Referrals Sources used by Program:

<table>
<thead>
<tr>
<th>Model Standards:</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;PSH openings are filled by drawing from the Community queue in order of priority&quot;</td>
</tr>
</tbody>
</table>

Referral sources for all move ins in the last fiscal year (check all that apply)

<table>
<thead>
<tr>
<th>Community Queue</th>
<th>Law Enforcement Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>CORE Teams</td>
<td>Other County departments</td>
</tr>
<tr>
<td>CARE Centers</td>
<td>City</td>
</tr>
<tr>
<td>Emergency Shelters</td>
<td>N/A no new move-ins in last fiscal year</td>
</tr>
<tr>
<td>Self Referred</td>
<td></td>
</tr>
</tbody>
</table>

Referral Data

<table>
<thead>
<tr>
<th>Performance Dashboard Table: &quot;Enrollments Originating from CQ&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Enrollments</td>
</tr>
<tr>
<td># of referral connected enrollments</td>
</tr>
<tr>
<td>% of enrollments from Community Queue</td>
</tr>
</tbody>
</table>

Are referral sources consistent with model standards? ACCESS through CES referrals
Program Intake Practices:

Model Standards:
"All aspects of the program...must be Housing First, meaning no sobriety requirement, treatment compliance, criminal justice history exclusions or minimum income requirements for enrollment"

<table>
<thead>
<tr>
<th>Can applicants enter the program without income?</th>
</tr>
</thead>
<tbody>
<tr>
<td>X Yes</td>
</tr>
<tr>
<td>No If no, explain</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Can applicants enter the program even if they aren’t “clean and sober” or “treatment compliant”?</th>
</tr>
</thead>
<tbody>
<tr>
<td>X Yes</td>
</tr>
<tr>
<td>No If no, explain</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Can applicants the program even if they have criminal justice system involvement?</th>
</tr>
</thead>
<tbody>
<tr>
<td>X Yes</td>
</tr>
<tr>
<td>No If no, explain</td>
</tr>
</tbody>
</table>

Describe reasons that a referred household would not be enrolled in your program.

Participants that have acute health conditions and need a higher level of care is an example of a referred household that would not be enrolled.

Are intake practices consistent with model standards?

| X Yes |
| No    |
### Program Exits and Terminations

**Exits to homelessness are avoided**

| Model Standards: |
| "Housing retention is the goal of PSH; exits should be to other permanent housing when they do occur." |
| "Participants who must be exited for unresolved lease/program violations must get written notice and have the right to appeal" |

| # of households who exited to homelessness--streets or shelter | (Performance Dashboard Table: "Exits to Homelessness and Unknown Destinations") |
| | |

#### Termination of Assistance Initiated by Program

- The next questions will require a review of participant records.

| # of households who were notified by program of intent to terminate assistance |
| # of households provided written notice of cause and right to appeal |
| # of appeals received |
| # of appeals resulting in participants continued tenancy |

#### Are terminations of assistance executed in a manner consistent with model standards?

| X | Yes |
| | No |

#### Comments on why eligibility, enrollment, and/or exits vary from the Model Standard

| N/A |

#### What actions will the program take to improve consistency with the model standard?

- PSH will continue to work in compliance with the model standard.

#### What support does the program need to improve consistency with the model standard?

- Quarterly trainings will help improve consistency.
Housing Operating Hours

Model Standards:
"Housing must be available twenty-four hours per day, 365 days per year. Services must be available at a minimum of regular business hours (for example, Monday through Friday from 9:00 am to 5:00 pm). Evening and weekend hours are encouraged if resources allow. In scattered site programs access cannot be restricted by requiring participants to travel to centralized service sites; support must also be delivered through home visits as appropriate."

Do tenants have access to their units 24/7?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

Indicate the hours supportive services are available to tenants

- M-F 8-4 PM

Are there policies and procedures for conducting home visits?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Are operating hours consistent with model standards?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If no, explain:

- What actions will the program take to improve consistency with the model standard?
  
  PSH will continue to work collaboratively with its partners to improve the model standard.

- What support does the program need to improve consistency with the model standard?
  
  PSH has all the support needed to continue to provide excellent support and services to our participants.
### Required Elements: Housing, Services, Staffing

#### Housing and Services

**Model Standards:**

"All aspects of the program from enrollment through housing retention must be Housing First, meaning all services participation is voluntary for tenants, and non-participation cannot be a basis for terminating tenancy. PSH can be scattered-site or project-based. Must include a subsidy such that the participant household pays no more than 30% of adjusted income for rent; proactive supportive services focused on housing retention; assistance with locating and applying for housing."

#### How does the program assist participants in locating and applying for housing?

**If site-based, answer N/A**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>The HUMS program has a partnership with Shelter Inc. They are the master leaser to each HUMS participant. Shelter, Inc. is responsible to locate and find the client their unit.</td>
</tr>
</tbody>
</table>

#### Is this assistance available to all new participants?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td>Yes always</td>
</tr>
<tr>
<td></td>
<td>When participants requests it and there is capacity</td>
</tr>
<tr>
<td></td>
<td>Program doesn't start working with participants until after move in</td>
</tr>
</tbody>
</table>

#### How does the program assist with move-in costs and logistics?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td>Program has resources to help with move-in deposits, furniture &amp; furnishings</td>
</tr>
<tr>
<td>X</td>
<td>Program helps participants acquire move-in funds, furniture and furnishings</td>
</tr>
<tr>
<td>X</td>
<td>Program refers participants to other agencies that help with move-in needs</td>
</tr>
<tr>
<td></td>
<td>Program doesn't start working with participants until after move in</td>
</tr>
</tbody>
</table>

#### If scattered site, how does program determine rent reasonableness and participant rents?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Program does this</td>
</tr>
</tbody>
</table>
| X | Program relies on SHELTER, Inc.  
(i.e. Housing Authority) |

#### If scattered site, who conducts Housing Quality Standards inspections?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Program does this</td>
</tr>
</tbody>
</table>
| X | Program relies on SHELTER, Inc.  
(i.e. Housing Authority) |

#### Describe services provided by staff to proactively support housing retention?

The HUMS program has two dedicated case managers that help support our participants housing retention. Our case managers ensure that participants utilize all of the available resources in the community so that they are better equipped to live independently.
**Staffing**

**Model Standards**
"Minimum staffing for PSH supportive services equals one full-time housing focused case manager/other support services staff for every 15 households."

**Staff Ratios**

<table>
<thead>
<tr>
<th>Number of supportive services staff</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of households served at a time= (tenants in housing + any enrolled and in housing search)</td>
<td>30</td>
</tr>
<tr>
<td>equals caseload per full-time equivalent staff person</td>
<td>15</td>
</tr>
</tbody>
</table>

**Review staff job descriptions do they clearly communicate how position supports commitments to Housing First, Trauma Informed Care, Voluntary Services and Housing Retention?**

| Yes, program job descriptions are aligned with Program Model Standards | X |
| Some, but not all are up to date |   |
| Job descriptions need to be updated |   |

**Review P & P/operating manuals/orientation materials, do they clearly communicate how program supports commitments to Housing First, Trauma Informed Care, Voluntary Services and Housing Retention?**

| Yes, program documents are aligned with Program Model Standards | X |
| Some, but not all are up to date |   |
| No, they need to be updated |   |

**Comments on why housing, services or staffing vary from the model standard**

There are many types of housing programs and the requirements and eligibility are different. At PSH we follow the HUD standard ans will continue to work closely with our partner agencies so that we can provide the best.

**What actions will the program take to improve consistency with the model standard?**

The HUMS program will continue to improve its consistency with providing services to our clients with transparency and accountability.

**What support does the program need to improve consistency with the model standard?**

Quarterly trainings with the red team will help case managers improve their knowledge in HMIS.
Admission process is expedited with speed & efficiency; measures are used to prevent eviction; providing stable housing is a priority

<table>
<thead>
<tr>
<th>Benchmark #</th>
<th>Performance Benchmarks Description--from Model Standard</th>
<th>Data Source in Report*</th>
<th>Actual Performance per dashboard</th>
<th>Is program Meeting Benchmark</th>
<th>Comments/Extenuating circumstances</th>
</tr>
</thead>
<tbody>
<tr>
<td>a)</td>
<td>Program declines less than 5% of eligible CE referrals</td>
<td>Table: &quot;Referrals Denied by Provider&quot;</td>
<td>0%</td>
<td>no</td>
<td>Error, client is enrolled in HUMS as of 10/06/22</td>
</tr>
<tr>
<td>b)</td>
<td>Maintain 95%-unit occupancy/voucher utilization unless the program is in lease up phase</td>
<td>Table: &quot;PSH Unit Occupancy&quot;, Combined Average Column</td>
<td>96.70%</td>
<td>yes</td>
<td>Working with partner agency (SHELTER, Inc) by trying to provide resources and guidance on</td>
</tr>
<tr>
<td>c)</td>
<td>Time between program enrollment and move into housing is 120 days or less</td>
<td>Table: &quot;Average Time to Move In&quot;</td>
<td>217.6</td>
<td>no</td>
<td>Working with partner agency (SHELTER, Inc) by trying to provide resources and guidance on</td>
</tr>
<tr>
<td>d)</td>
<td>Housing retention and exits to permanent housing combined is 96% or greater</td>
<td>Table: &quot;HH Retains or Exits to PH&quot;</td>
<td>96.80%</td>
<td>yes</td>
<td>Working with partner agency (SHELTER, Inc) by trying to provide resources and guidance on</td>
</tr>
<tr>
<td>e)</td>
<td>80% of those who enroll in the program without health insurance, have acquired it by program exit/annual update, or project shows a 10% improvement from prior year if rate is below 70%</td>
<td>Table: &quot;Obtains Health Insurance in PSH&quot;</td>
<td>100%</td>
<td>yes</td>
<td>Working with partner agency (SHELTER, Inc) by trying to provide resources and guidance on</td>
</tr>
<tr>
<td>f)</td>
<td>80% of those who enroll in the program without non-cash benefits, for which they would be eligible, have acquired those benefits by program exit/annual update, or project shows a 10% improvement from prior year if rate is below 70%</td>
<td>Table: &quot;Obtains Non-Cash Benefits in PSH&quot;</td>
<td>57.10%</td>
<td>yes</td>
<td>Working with partner agency (SHELTER, Inc) by trying to provide resources and guidance on</td>
</tr>
<tr>
<td>i)a.</td>
<td>An error rate of no more than 5% for null/missing and unknown/don’t know/refused responses for all UDEs and program specific data elements excluding Race and Social Security Number</td>
<td>Table: &quot;Missing UDEs Rate&quot;, percent column</td>
<td>0.00%</td>
<td>yes</td>
<td></td>
</tr>
<tr>
<td>i)b.</td>
<td>Data entered within three days of service event including entry and exit</td>
<td>Table: &quot;Timeliness of Data Entry&quot;</td>
<td>83.30%</td>
<td>yes</td>
<td></td>
</tr>
</tbody>
</table>
Trainings are always welcomed in this everchanging landscape. Staying informed with trainings helps ensure staff have the right tools to better serve our participants.

The HUMS program will continue to work on all of the benchmarks. One benchmark that we have been working with is reducing the amount of time it takes to place a participant in a unit. PSH has been working closely with our partner agency and is holding them accountable.

What actions will the program take to improve performance consistency with the performance standard?

The HUMS program will continue to train and provide resources to its case managers to ensure that our participants are being provided with guidance and access to resources.

Which 1-3 benchmarks will be the focus of your improvement?

Support program needs to improve consistency with the model standard?

Trainings are always welcomed in this everchanging landscape. Staying informed with trainings helps ensure staff have the right tools to better serve our participants.
## Advancing Racial Equity

### Model Standards:

"Program demonstrates racially equitable service delivery."*

"Each level of an organization from frontline staff, executive leadership and board membership needs to include people with lived experience and reflect the populations being served, by race and gender."

*Note: Racial equity is presumed to include Hispanic/Latin(a)(o)(e)x

* data sources for some of the items below are listed in red text

### Demographics

<table>
<thead>
<tr>
<th>Demographics</th>
<th>Equity in Service Delivery</th>
<th>Performance Dashboard: Equity Tables</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>&quot;Referral Status by Race&quot;, # of CQ Referrals</td>
<td>&quot;Referral Status by Race&quot;, % of CQ Referrals Accepted</td>
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<tr>
<td>Totals</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Race</td>
<td></td>
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<td>1</td>
<td>1</td>
</tr>
<tr>
<td>White</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Native American/Alaskan Native</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Multiple Races</td>
<td></td>
<td></td>
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<tr>
<td>Asian American/Asian</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Native Hawaiian/Other Pacific Islander</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ethnicity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hispanic/Latin(a)(o)(e)x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Hispanic/Latin(a)(o)(e)x</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments on any differences in program acceptance and housing retention rates across racial and ethnic groups:

H3 is committed to advancing Racial Equity (RE) by taking a multi-pronged approach through continuous training, data/evaluation, engaging in open conversations among staff, and shifting hiring practices to ensure programs are designed to address racial/ethnic disparities.
### Demographics

<table>
<thead>
<tr>
<th>Race</th>
<th># of employees</th>
<th>As % of all Employees</th>
<th># of Sr Managers and BOD</th>
<th>as % of all Managers and BOD</th>
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</thead>
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<tr>
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<td></td>
<td></td>
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<tr>
<td>White</td>
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<tr>
<td>Native American/Alaskan Native</td>
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<td>Multiple Races</td>
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<tr>
<td>Asian American/Asian</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Native Hawiian/Other Pacific Islander</td>
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<td></td>
<td></td>
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<tr>
<td>Ethnicity</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hispanic/Latin(a)(o)(e)(x)</td>
<td>2</td>
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<tr>
<td>Non-Hispanic/Latin(a)(o)(e)(x)</td>
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<tr>
<td>Gender</td>
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<td></td>
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</tr>
<tr>
<td>Female</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Male</td>
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<tr>
<td>Transgender M-F</td>
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<tr>
<td>Transgender F-M</td>
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<tr>
<td>Gender non-conforming</td>
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<tr>
<td>Persons with Lived Experience</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Comment on any differences between the race, ethnic, and gender composition of staff, leadership and participants served.**

The HUMS program has a staff of diverse ethnicities and genders. All of our different backgrounds helps us learn from each so we can better serve our diverse community.
Describe how people with lived experience of homelessness are involved in organization/program at staff, leadership and policy setting level

Our hiring practices emphasize hiring those with LE and out of the four PSH CMs, 75% have LE which enables our team to connect authentically with those in program.

Describe current or planned strategies to advance racial equity in program and organization

H3 is committed to advancing Racial Equity (RE) by taking a multi-pronged approach through continuous training, data/evaluation, engaging in open conversations among staff, and shifting hiring practices to ensure programs are designed to address racial/ethnic disparities. We believe that RE is directly tied to a longstanding history of racism that has led to wide-ranging consequences for BIPOC.
## FY2023 COC CONSOLIDATED APPLICATION ATTACHMENT: Web Posting of Local Competition Deadline (1E-1)

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<th>Document Satisfying Requirement</th>
<th>Page Number</th>
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</thead>
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<td>Cover Sheet</td>
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<tr>
<td><strong>Screenshot of Web Posting of 2023 CoC Local Competition Deadline – Advanced Public Notice</strong></td>
<td>2</td>
</tr>
<tr>
<td>- Original local submission deadline was 8/21/2023, at noon</td>
<td></td>
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<tr>
<td>- Includes legible display of system generated date and time</td>
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</tr>
<tr>
<td><strong>2023 Continuum of Care (CoC) Public Solicitation Email</strong></td>
<td>3-5</td>
</tr>
<tr>
<td>- Email notification of 2023 CoC Program Competition</td>
<td></td>
</tr>
<tr>
<td>- Indicates TA workshop was on 7/26/2023 at 10:00 AM</td>
<td></td>
</tr>
<tr>
<td><strong>Copy of 2023 Public Solicitation from Web Posting</strong></td>
<td>6</td>
</tr>
<tr>
<td>- Indicates notification of 2023 CoC Program Competition</td>
<td></td>
</tr>
<tr>
<td><strong>Screenshot of Local Competition Material</strong></td>
<td>26</td>
</tr>
<tr>
<td>- TA Workshop web posting</td>
<td></td>
</tr>
<tr>
<td>- Includes legible display of system generated date and time</td>
<td></td>
</tr>
</tbody>
</table>
2023 CoC Program Competition: Funding Opportunity
The deadline for Renewal Project Applications is: Wednesday August 2 at 12pm
The deadline for New Project Applications is: Monday August 21 at 12 pm
For more information see: cohealth.org/h3/cooc/bNOFO-FY2023-Public-Solicitation.pdf
Past Federal Award and Competition notices ×
Public Solicitation for 2023 Continuum of Care (CoC) Project Applications

Greetings Contra Costa County CoC Members and Community Partners,

On July 5, HUD released its **Notice of Funding Opportunity (NOFO) for the 2023 Continuum of Care (CoC) Program Competition**.

If you are interested in applying for this funding, please join us for the Contra Costa CoC’s mandatory informational Technical Assistance (TA) Workshop on **Wednesday, July 26, 2023 from 10:00am - 12:00pm via Zoom**. This workshop will provide attendees with an overview of the local application process, as well as instructions for completing the local and project applications. **Click here to register for the Zoom meeting.**

Indicates notification of 2023 CoC NOFO competition

local competition materials; TA Workshop

https://mail.google.com/mail/u/0/?ik=a58212ba4b&view=pt&search=all&permmsgid=msg-f:1770804093134953972&simpl=msg-f:1770804093134953972 1/3
Information will be provided about renewal project applications as well as applications for new housing projects through reallocated and/or Bonus funding. **We encourage all organizations interested in applying for CoC funding to attend, including organizations that have not previously received CoC funding.**

We do yet know the funding amounts available in Contra Costa but we will pass along that information once HUD releases it. For reference, in 2022 the following funding amounts were available in Contra Costa:

- Estimated Annual Renewal Demand: $16,372,796
- Estimated Tier 1 Funding: $15,554,156
- Estimated Tier 2 Funding (CoC Bonus): $818,640
- Estimated DV Bonus Funding: $536,883
- Estimated Planning Funding: $491,184

Please note that these amounts are not necessarily indicative of what will be available this year.

**Technical Assistance (TA) Workshop**

Wednesday, July 26, 2023, from 10:00 am - 12:00pm

*Zoom registration required*

Further information regarding the Contra Costa CoC Competition local process will be shared shortly. Please reach out to contracostaTA@homebaseccc.org with any questions.

Public Solicitation Document - coming soon!

Contra Costa Health, Housing and Homeless Services | 2400 Bisso Lane, Suite D2, Concord, CA 94520

Unsubscribe contracosta@homebaseccc.org

Update Profile | Constant Contact Data Notice

Sent by contracostacoc@cchealth.org powered by
Try email marketing for free today!
Dear Contra Costa Council on Homelessness:

Please be advised that the Department of Housing and Urban Development (HUD) released the Fiscal Year 2023 Continuum of Care Program Competition Notice of Funding Opportunity (NOFO) on Wednesday, July 5, 2023.

This Public Solicitation for Project Applications provides a summary of the 2023 NOFO and the overall timeline for accessing this funding opportunity.

A mandatory virtual Technical Assistance Workshop for all interested parties will be held on Wednesday, July 26 from 10:00am to 12:00pm. The details of upcoming deadlines are included on page 2 of this Public Solicitation.

This Public Solicitation will be posted in the following virtual and physical locations:

- Contra Costa Council on Homelessness Website
- Contra Costa Health, Housing & Homeless Services Division Website
- Contra Costa Council on Homelessness Listserv

The public should please forward this Public Solicitation to any interested parties, send to relevant additional listservs, and post on public bulletin boards. The CoC encourages applications from organizations that have not previously received CoC Program funding.

Inquiries about this process may be directed to ContraCosta@homebaseccc.org.
Available funding for our CoC

HUD determines the maximum award for which each CoC is eligible, determined by a combination of factors. HUD has not yet released the FY 2023 available funding amounts for the Contra Costa CoC, however, below are estimates based on FY 2022 available funding. The official numbers will be circulated once they are released by HUD.

**Estimated Annual Renewal Demand:** $16,827,031

**Estimated Tier 1 Funding:** $15,649,139

**Estimated Tier 2 Funding (including CoC Bonus):** $2,355,785

**Estimated DV Bonus Funding:** $567,123

**Estimated Planning Funding:** $841,352

*These amounts have been updated based on HUD’s release of the ARD Report on July 25, 2023.*

Local Process Timeline

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>HUD Releases FY2023 CoC Program Notice of Funding Opportunity (NOFO) Competition</td>
<td>Wednesday, July 5, 2023</td>
</tr>
<tr>
<td>Mandatory Technical Assistance (TA) Workshop (register here)</td>
<td>Wednesday, July 26, 2023</td>
</tr>
<tr>
<td>Renewal Project Local Applications (PRESTO) and Attachments Due to <a href="mailto:contracosta@homebaseccc.org">contracosta@homebaseccc.org</a></td>
<td>Wednesday, August 2, 2023 (12:00 PM)</td>
</tr>
<tr>
<td>New Project Letters of Intent Due</td>
<td>Friday, August 4, 2023 (5:00 PM)</td>
</tr>
<tr>
<td>Review &amp; Rank Panel Orientation</td>
<td>Wednesday, August 9, 2023</td>
</tr>
<tr>
<td>New Project Local Applications (PRESTO) Due</td>
<td>Monday, August 21, 2023 (12:00 PM)</td>
</tr>
<tr>
<td>Draft of New and Renewal e-snaps Project Applications Due</td>
<td>Monday, August 21, 2023 (12:00 PM)</td>
</tr>
<tr>
<td>Project Submission Checklist and Required Documentation (New and Renewal Projects) Due to <a href="mailto:contracosta@homebaseccc.org">contracosta@homebaseccc.org</a></td>
<td>Monday, August 21, 2023 (12:00 PM)</td>
</tr>
</tbody>
</table>
| Review & Rank Panel Scoring Meetings & Interviews                   | Tuesday, August 22, 2023
<p>|                                                                      | Thursday, August 24, 2023                |
|                                                                      | Wednesday, August 30, 2023               |</p>
<table>
<thead>
<tr>
<th>Event</th>
<th>Date and Time</th>
</tr>
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<tbody>
<tr>
<td>Review &amp; Rank Preliminary Priority Listing Decisions Announced</td>
<td>Thursday, August 31, 2023 (11:59 PM)</td>
</tr>
<tr>
<td>Intent to Appeal Due</td>
<td>Friday, September 1, 2023 (5:00 PM)</td>
</tr>
<tr>
<td>Appeals Materials Due</td>
<td>Tuesday, September 5, 2023 (12:00 PM)</td>
</tr>
<tr>
<td>Appeals Committee Meets</td>
<td>Wednesday, September 6, 2023, *time TBD</td>
</tr>
<tr>
<td>Final Priority Listing Distributed to Applicants</td>
<td>Wednesday, September 6, 2023 (11:59 PM)</td>
</tr>
<tr>
<td>Council on Homelessness Reviews and Acts on Final Priority Listing</td>
<td>Thursday, September 7, 2023 (1:00 PM – 3:00 PM)</td>
</tr>
<tr>
<td>Applicants Notified of Final Decisions</td>
<td>Friday, September 8, 2023 (11:59 PM)</td>
</tr>
<tr>
<td>e-snaps Project Application Technical Reviews and Coordination with Applicants</td>
<td>Thursday August 31, 2023 – Thursday September 21, 2023</td>
</tr>
<tr>
<td>Final New and Renewal Project Applications and Attachments Submitted in e-snaps</td>
<td>Thursday, September 21, 2023 (5:00 PM)</td>
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<tr>
<td>CoC Application Completed in e-snaps</td>
<td>Friday, September 22, 2023</td>
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<tr>
<td>CoC Consolidated Application Publicly Posted Online</td>
<td>Monday, September 25, 2022</td>
</tr>
<tr>
<td>CoC Consolidated Application Submission to HUD</td>
<td>Wednesday, September 27, 2023</td>
</tr>
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</table>
FY 2023 Continuum of Care Notice of Funding Opportunity (CoC NOFO) Summary

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Noteworthy Changes

- **Tier 1 is smaller this year**, equal to **93%** of the CoC’s Annual Renewal Demand (ARD) minus the Annual Renewal Amounts of YHDP Renewal and YHDP Replacement projects that were initially awarded through YHDP Round 2 or later. Tier 1 was **95%** of ARD in 2022.
- **CoC Bonus amounts for new projects are higher**, equal to **7%** of Final Pro Rata Need (FPRN), up from **5%** in 2022.
- **CoC Planning grant amounts are higher**, equal to **5%** of Final Pro Rata Need (FPRN), up from **3%** in 2022, and with an increased cap of $1,500,000.
- **Increase in Number of Rapid Rehousing Beds Rating Factor**. In the FY 2023 NOFO, HUD is allowing CoCs to earn points in this rating factor if they are able to demonstrate any increase in the number of rapid rehousing beds in the CoC or by demonstrating that more households entered PH through RRH programs by using Annual Performance Report or other longitudinal HMIS data. Previously HUD required CoCs to show a **20%** increase in the number of rapid rehousing beds.
- HUD added **new budget line items (BLIs)** for newly eligible CoC Activities:
  - **Violence Against Women Act (VAWA) Costs Budget Line Item**: Per the VAWA Reauthorization Act of 2022, this BLI allows CoC grants to be used for facilitating and coordinating activities to ensure and monitor compliance with VAWA’s emergency transfers provision and confidentiality protections. For additional details about this BLI, see pp. 42-43 of the NOFO.
  - **Rural Costs Budget Line Item**: Per the James M. Inhofe National Defense Authorization Act for FY 2023, this BLI allows CoC grants to be used to address barriers to transitioning families in rural areas to permanent housing and additional activities to increase capacity to address the unique challenges CoCs face when serving people experiencing homelessness in rural areas. HUD defines rural area within this FY 2023 NOFO. For more information about this BLI, see pp. 43 of the NOFO.
- **The VAWA Reauthorization Act of 2022** changes the criteria for survivors whom HUD must consider as “homeless” under CoC and other HUD Programs. All projects funded through FY 2023 NOFO must include the definition in their eligibility criteria for program participants.
  - CoCs and CoC programs may implement the new definition prior to HUD rulemaking, provided that CoCs update the relevant written standards and policies to reflect the new criteria. For the purposes of the CoC Program and other HUD programs, the VAWA Reauthorization Act of 2022 expanded the HUD definition of “homeless” to include any individual or family who is:
    - Experiencing trauma or a lack of safety related to, or fleeing or attempting to flee, domestic violence, dating violence, sexual assault, stalking or other dangerous, traumatic, or life-threatening conditions related to the violence against the individual or a family member in the individual’s or family’s current housing situation, including where the health and safety of children are jeopardized;
    - Has no other safe residences; and
    - Lacks the resources to obtain other safe permanent housing.

Background

The U.S. Department of Housing and Urban Development (HUD) has released a Notice of Funding Opportunity (NOFO), signifying the beginning of a funding competition among approximately 450 Continuums of Care (CoC), the community stakeholder groups that guide local responses to homelessness. The 2023 CoC NOFO was released on July 5, 2023, opening the competition making available **approximately $3.1 billion nationally** to serve people experiencing homelessness. The information in the NOFO sets forth the competition rules and processes for 2023.

This summary includes the highlights of the FY 2023 CoC NOFO. New or revised policies relating to the FY 2023 CoC Program Competition are indicated as **NEW IN 2023** and **REVISED IN 2023**,
respectively. Additional information about project application requirements and standards will be available locally.

Details about anything in this summary can be found in the NOFO, available at: https://www.hudexchange.info/programs/e-snaps/fy-2023-coc-program-nofa-coc-program-competition/

**Important HUD-Required Dates**

- **Wednesday, July 5, 2023** → The 2023 CoC Program NOFO is released.
- By the end of **July 2023** → The CoC Application, CoC Priority Listing, and Project Applications are available in e-snaps.
- On or before **Tuesday, August 29, 2023** (30 days prior to submission deadline) → All project applications are required to be submitted to the CoC.
- On or before **Wednesday, September 13, 2023** (15 days prior to submission deadline) → The CoC is required to notify, in writing outside of e-snaps, all project applicants who submitted their project applications to the CoC by the CoC-established deadline whether their project application(s) will be accepted and ranked on the CoC Priority Listing, rejected, or reduced by the CoC.
- On or before **Tuesday, September 26, 2023** (2 days prior to submission deadline) → CoCs must post on their website (or a partner’s website) all parts of the CoC Consolidated Application, including the CoC Application attachments and the Priority Listing, and notify community members and key stakeholders that the CoC Consolidated Application is available.

**Submission Deadline:**
**Thursday, September 28, 2023, at 8:00 PM EDT / 7:00 PM CDT / 5:00 PM PDT**

- HUD strongly suggests that Collaborative Applicants print a copy of the Submission Summary form from the CoC Application and the FY 2023 CoC Priority Listing before closing their internet browser after the CoC Consolidated Application has been submitted by HUD. This is the Collaborative Applicant’s receipt of submission and proof of compliance with the application deadline.
- HUD may issue more than one conditional funding announcement.
- **September 30, 2025** → All conditional funds awarded in the FY 2023 CoC Program Competition must be obligated.
- **September 30, 2030** → Obligated funds awarded in the FY 2023 CoC Program Competition must be expended.

**Funding Available for Our CoC**

HUD has not yet released the FY 2023 available funding amounts for Contra Costa CoC, however, below are estimates based on FY 2022 available funding. The official numbers will be circulated once they are released by HUD.

- **Tier 1** (93% of Annual Renewal Demand): $15,649,139
- **Tier 2** (remainder of Annual Renewal Demand + CoC Bonus): $2,355,785
- **CoC Bonus**: $1,177,892
- **Domestic Violence (DV) Bonus**: $567,123
- **CoC Planning**: $841,352
These amounts have been updated based on HUD’s release of the ARD Report on July 25, 2023.

2022-2026 HUD Strategic Goals

**REVISED IN 2023**

HUD’s FY 2022-2026 Strategic Plan sets the direction and focus of programs and staff and lays out this administration’s strategy for ensuring everyone has an affordable, healthy place to live. Over the course of the next three years HUD will continue pursuing two overarching priorities focused on increasing equity and improving customer experience across all HUD programs. The five strategic goals of the plan remain the same, however, HUD indicated that the following goals from the plan are applicable to the 2023 NOFO:

1. Support Underserved Communities
2. Ensure Access to and Increase the Production of Affordable Housing
3. Promote Homeownership
4. Advance Sustainable Communities

HUD expects CoCs to consider the policy priorities established in the strategic goals, the policy priorities established in this NOFO, and local priorities to determine the ranking of new and renewal project application requests.

Projects selected for funding will be expected to establish a plan to track progress related to those goals, objectives, and measures. HUD will monitor compliance with the goals, objectives, and measures.

2023 HUD CoC Policy Priorities

The work funded through this NOFO will support the actions and strategies proposed within the six pillars of the 2022 USICH Federal Strategic Plan to Prevent and End Homelessness:

- Equity
- Data and evidence
- Collaboration
- Housing and Supports
- Crisis Response
- Prevention

CoCs will be evaluated based on the extent to which they further HUD’s policy priorities. The policy priorities listed this year remain the same from the 2022 NOFO; however, there is an emphasis on including people who are currently or have previously experienced homelessness to be included in the local planning process.

1. Ending homelessness for all persons
   a. To end homelessness, CoCs should identify, engage, and effectively serve all persons experiencing homelessness.
   b. CoCs should measure their performance based on local data that consider the challenges faced by all subpopulations experiencing homelessness in the geographic area (e.g., veterans, youth, families, or those experiencing chronic homelessness, and people with disabilities, including those living with HIV/AIDS).
   c. CoCs should partner with housing, health care, and supportive services providers to expand housing options, such as permanent supportive housing, housing subsidies, and rapid rehousing.
d. Additionally, CoCs should use local data to determine the characteristics of individuals and families with the highest needs and longest experiences of homelessness to develop housing and supportive services tailored to their needs.

2. **Use a housing first approach**
   a. Housing First prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions. CoC Program funded projects should help individuals and families move quickly into permanent housing, and CoCs should measure and help projects reduce the length of time people experience homelessness.
   b. Additionally, CoCs should engage landlords and property owners to housing units available for rapid rehousing and permanent supportive housing participants, remove barriers to entry, and adopt client-centered service methods.
   c. HUD encourages CoCs to assess how well Housing First approaches are being implemented in their communities.

3. **Reducing unsheltered homelessness**
   a. In recent years, the number of people experiencing unsheltered homelessness has risen significantly, including a rising number of encampments in many communities across the country. People living unsheltered have extremely high rates of physical and mental illness and substance use disorders.
   b. CoCs should explore all available resources, including CoC and ESG funded assistance, housing subsidies, and supportive services to provide permanent housing options for people who are unsheltered.

4. **Improving system performance**
   a. CoCs should be using system performance measures (e.g., average length of homeless episodes, rates of return to homelessness, rates of exit to permanent housing destinations) to determine how effectively they are serving people experiencing homelessness.
   b. Additionally, CoCs should use their Coordinated Entry process to promote participant choice, coordinate homeless assistance and mainstream housing, and services to ensure people experiencing homelessness receive assistance quickly, and make homelessness assistance open, inclusive, and transparent.
   c. CoCs should review all projects eligible for renewal in FY 2023 to determine their effectiveness in serving people experiencing homelessness, including cost-effectiveness.
   d. CoCs should also look for opportunities to implement continuous quality improvement and other process improvement strategies.

5. **Partnering with housing, health, and service agencies**
   a. Using cost performance and outcome data, CoCs should improve how all available resources are utilized to end homelessness. This is especially important as the CARES Act and American Rescue Plan have provided significant new resources to help end homelessness.
   b. HUD encourages CoCs to maximize the use of mainstream and other community-based resources when serving persons experiencing homelessness and to:
      (1) Work closely with public and private healthcare organizations and assist program participants to receive primary care, receive housing-related services, and obtain medical insurance to address healthcare needs. This includes
developing close partnerships with public health agencies to analyze data and design approaches that reduce homelessness, improve the health of people experiencing homelessness, and prevent and address disease outbreaks, including HIV/AIDS.

(2) Partner closely with PHAs and state and local housing organizations to utilize coordinated entry, develop housing units, and provide housing subsidies to people experiencing homelessness. These partnerships can also help CoC Program participants exit permanent supportive housing through Housing Choice Vouchers and other available housing options. CoCs and PHAs should especially work together to implement targeted programs such as Emergency Housing Vouchers, HUD-VASH, Mainstream Vouchers, Family Unification Program Vouchers, and other housing voucher programs targeted to people experiencing homelessness. CoCs should coordinate with their state and local housing agencies on the utilization of new HOME program resources provided through the Homelessness Assistance and Supportive Services Program that was created through the American Rescue Plan.

(3) Partner with local workforce development centers to improve employment opportunities.

(4) Work with tribal organizations to ensure that Tribal members can access CoC-funded assistance when a CoC's geographic area borders a Tribal area.

### 6. Racial equity

a. In nearly every community, Black, Indigenous, and other people of color are substantially overrepresented in the homeless population. HUD is emphasizing system and program changes to address racial equity within CoCs.

b. Responses to preventing and ending homelessness should address racial inequities to ensure successful outcomes for all persons experiencing homelessness using proven approaches, such as: developing a coordinated community response created in partnership with a racially diverse set of stakeholders and people experiencing homelessness and partnering with organizations with experience serving underserved populations.

c. CoCs should review local policies, procedures, and processes to determine where and how to address racial disparities affecting individuals and families experiencing homelessness.

### 7. Improving assistance to LGBTQ+ individuals

a. Discrimination on the basis of gender identity or sexual orientation manifests differently for different individuals and often overlaps with other forms of prohibited discrimination. CoCs should address the needs of LGBTQ+, transgender, gender non-conforming, and non-binary individuals and families in their planning processes.

b. Additionally, when considering which projects to select in their local competition to be included in their application to HUD, CoCs should ensure privacy, respect, safety, and access regardless of gender identity or sexual orientation in projects.

c. CoCs should also consider partnering with organizations with expertise in serving LGBTQ+ populations.

### 8. Persons with lived experience

a. The people who know best what solutions will effectively end homelessness are those who are experiencing homelessness.
b. **REVISED IN 2023** In the 2022 NOFO, HUD had encouraged CoCs to include in the local planning process people who are currently experiencing or have formerly experienced homelessness. HUD now expects CoCs to do this.

c. People with lived experience should determine how local policies may need to be revised and updated to improve the effectiveness of homelessness assistance programs, including participating in planning and oversight activities and developing local competition processes.

d. CoC leaders and stakeholders should also prioritize hiring people who have experienced homelessness in areas where their expertise is needed (e.g., peer outreach and support).

9. Increasing affordable housing supply

a. The lack of affordable housing is the main driver of homelessness. CoCs play a critical role in educating local leaders and stakeholders about the importance of increasing the supply of affordable housing and the specific consequences of the continued lack of affordable housing.

b. CoCs should be communicating with jurisdiction leaders, including for the development of Consolidated Plans, about the harmful effects of the lack of affordable housing, and they should engage local leaders about steps such as zoning and land use reform that would increase the supply of affordable housing.

c. This FY2023 CoC NOFO awards points to CoCs that take steps to engage local leaders about increasing affordable housing supply.

**Application Structure**

The CoC Consolidated Application is made up of three parts:

1. **CoC Application** provides information about the CoC planning body, governance structure, overall performance, and the strategic planning process. This part of the application is scored and will determine the order in which CoCs are funded.

2. **Project Applications** are completed in e-snaps by agencies applying for projects.

3. **CoC Priority Listing** ranks all project applications in order of priority.

**Review and Rank Changes and Reminders**

**NEW in 2023** HUD requires CoCs to review and rank projects submitted by project applicants, including project applications for Round 1 YHDP Renewal or replacement projects (those initially funded during the FY 2016 YHDP competition), having them fall into two Tiers based on a financial threshold.

CoCs must not rank the following project applications: YHDP Renewal or replacement projects originally awarded through the FY 2017 YHDP Competition (Round 2) or later, CoC Planning, and UFA Costs (if applicable) projects. All projects must pass HUD’s eligibility and threshold requirements to be funded, no matter their priority.

If a DV Bonus project is selected with DV Bonus funds, the project will be removed from the Priority Listing and the projects below it will move up one rank position. However, if a new DV Bonus project is not selected with DV Bonus funds, the project will retain its ranked position.

**Tier 1**

- Tier 1 is equal to 93% of the CoC’s Annual Renewal Demand minus the Annual Renewal Amounts of YHDP Renewal and YHDP Replacement projects from FY 2017 YHDP Competition (Round 2) or later.
• Tier 1 projects will be conditionally selected from the highest-scoring CoC to the lowest-scoring CoC, provided the project applications pass both eligibility and threshold review, and if applicable, project renewal threshold.

• In the event insufficient funding is available under the NOFO to award all Tier 1 projects, Tier 1 will be reduced proportionately, which could result in some Tier 1 projects falling into Tier 2. Therefore, CoCs should carefully determine the priority and ranking for all project applications in Tier 1 as well as Tier 2.

**Tier 2**

• Tier 2 is the difference between Tier 1 and the maximum amount of renewal, reallocation, Round 1 YHDP Renewal, Round 1 YHDP Replacement, and CoC Bonus funds. It does not include YHDP Renewal or YHDP Replacement projects from FY 2017 YHDP Competition (Round 2) or later, CoC Planning projects, UFA Costs projects (if applicable), or projects selected with DV Bonus funds.

• Project applications placed in Tier 2 will be assessed for project eligibility and project quality threshold requirements, and if applicable, project renewal threshold requirements.

• Projects in Tier 2 are less likely to be funded, and every Tier 2 project will be scored using a 100-point scale based on three factors:
  - **CoC Score.** Up to 50 points will be awarded in direct proportion to the score received on the CoC Application.
  - **CoC Project Ranking.** Up to 40 points will be assigned directly related to the CoC’s ranking of the project application(s). Additional details are available on p. 27 of the NOFO.
  - **Commitment to Housing First.** Up to 10 points will be awarded based on the project application’s commitment to follow a housing first approach that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions (such as sobriety or a minimum income threshold). Dedicated HMIS projects and coordinated entry SSO projects will automatically receive 10 points.

**Important CoC Strategy Reminders**

• HUD will not award funds to a new project unless the project was created through reallocation, or the CoC has demonstrated to HUD’s satisfaction that projects are evaluated and ranked based on the degree to which they improve the CoC’s system performance as outlined in sections I.A.4.b.(4) and V.B.2.b of the NOFO.

• HUD will prioritize funding for CoCs that have demonstrated the capacity to reallocate funding from lower to higher performing projects.

• CoCs may only reallocate eligible renewal projects that have previously been renewed under the CoC Program. CoCs may reallocate YHDP projects HUD initially awarded Round 1 YHDP to create new CoC grants. Reallocated Round 1 YHDP grants are not required to serve Youth.

• CoCs are prohibited from reallocating YHDP projects initially awarded in Round 2 or later, but may submit YHDP Replacement projects serving Youth. Additional details are available on pp. 45-49 of the NOFO.

**Eligible New Projects**

• CoCs may apply for new projects created through reallocation, CoC Bonus, a combination of reallocation and CoC Bonus, new DV Bonus, and CoC planning.
Because new project applications may be created through the reallocation or CoC Bonus processes, if HUD determines that a project applicant or a CoC incorrectly classified one or more new projects as reallocation or CoC Bonus, HUD may reclassify the project(s) as either reallocation or CoC Bonus if the CoC exceeded either its reallocation or CoC Bonus amount.

If a project applicant uses both reallocation and CoC Bonus amounts to create a single new project but did not have enough available from either source, HUD will reduce the project to the amount available, if any.

- HUD will review all new project applications to determine if they meet project quality threshold requirements. See pp. 54-59 of the NOFO for details.

Allowable Grant Terms

- The initial grant term for new project applications may be one year, two years, three years, four years, five years, or 15 years, but there are limitations depending on the grant type. Please see pp. 39-40 of the NOFO for details. The grant term may be extended consistent with 2 CFR 200.308 and 2 CFR 200.309. Please note that the total grant amount is divided among the grant years (e.g., you can receive $100,000 for one year, or $33,333 for 3 years).

- HUD will allow new projects to request one year of funding with a longer initial grant term not to exceed 18 months. HUD has determined that most new projects requesting one year of funding normally take approximately three to six months to begin fully operating the new project (e.g., hiring staff, developing partnerships with landowners if leasing or renting). Therefore, a new project requesting one year of funding may request a grant term of 12-18 months that will allow for the additional start-up process.

Transition Projects

- Applicants may transition their project(s) from one CoC Program component to another (e.g., Transitional Housing to Rapid Rehousing, Rapid Rehousing to Permanent Supportive Housing) over a one-year grant cycle.

- To create a transition grant, the CoC must wholly eliminate one or more projects and use those funds to create the single, new transition grant.

- The applicant must have the consent of the CoC, as indicated by:
  - The project application identifying the project as a transition project, and
  - The CoC ranking the new transition grant project on the New Project Listing in the FY 2023 CoC Priority Listing.

- Recipients may use as much of the awarded grant funds on the costs of eligible activities of the program component originally funded; however, by the end of the operating year, the recipient must be fully operating the new program component. Recipients will be eligible for renewal in subsequent fiscal years for eligible activities of the new program component.

Consolidation Projects

- Applicants may consolidate up to ten renewal projects into one project during the application process.

- This means that a CoC Program recipient does not have to wait for a grant agreement amendment to be executed to consolidate two or more grants before it can apply for a single consolidated project in the CoC Program Competition.

- The projects being combined during a grant consolidation will continue uninterrupted.
To be eligible for consolidation, projects must have the same recipient and be for the same component; and they will be funded in this competition only with FY 2023 funds (meaning no funds recaptured from prior years will be awarded to the project).

**CLARIFIED in 2023**: YHDP Renewal projects that wish to consolidate may establish a single YHDP Replacement grant to replace multiple YHDP grants.

A YHDP Renewal project cannot consolidate with a non-YHDP project. A transitional housing and a permanent housing project cannot consolidate to form a Joint TH and PH-RRH component project. Transition grants cannot consolidate with any other project.

**Expansion Projects**

HUD will allow project applicants to apply for a new expansion project under the DV Bonus, reallocation, and CoC bonus processes to expand existing projects by adding units, persons served, services provided to existing program participants, or to add additional activities to HMIS and SSO-CE projects.

**NEW IN 2023** HUD will only select a new DV Bonus project that expands an existing renewal project if HUD selects the renewal project in Tier 1 or 2. For DV Bonus applications that propose expansion but do not meet requirements for an expansion project or the renewal portion is not selected in Tier 1 or 2, HUD will consider the DV Bonus application as a standalone DV Bonus application and use the DV Bonus selection process outlined in I.B.2.b.(8).

To request an expansion for a current CoC-Program-funded project, applicants will be required to submit two project applications:

1. The renewal project application that will be expanded; and
2. A new project application with just the expansion information.

For the new expansion project to be selected for a conditional award the renewal project application must also be selected for conditional award.

**Eligible Types of New Projects Created Through Bonus or Reallocated Funding**

- **Permanent Supportive Housing** projects for persons experiencing chronic homelessness at the time they initially enroll in the project persons eligible to be served by DedicatedPLUS projects as described in Section I.B.2.b(7) of the NOFO (in which case all units funded by the project must be used to serve program participants who meet the qualifications for DedicatedPLUS).

- **Rapid Rehousing** projects for people who qualify as homeless under paragraphs (1), (2), or (4) of 24 CFR 578.3 (and paragraph (3) if the CoC is approved to serve this population).

- **Joint Transitional Housing and Rapid Rehousing** component projects for people who qualify as homeless under paragraphs (1), (2), or (4) of 24 CFR 578.3 (and paragraph (3) if the CoC is approved to serve this population).

- **Dedicated HMIS** project for the costs at 24 CFR 578.37(a)(4) that can only be carried out by the HMIS Lead, which is the recipient or subrecipient of an HMIS grant and is listed on the HMIS Lead form in the CoC Applicant Profile in e-snaps. Additionally, if the CoC has organizations within its geographic area that are victim service providers, the HMIS Lead, or subrecipient, may request HMIS funds for a comparable database. Victim service providers may also request HMIS funds in their project application budgets to enter data into a comparable database.

- **Supportive services Only projects for Coordinated Entry** project to develop or operate a centralized or coordinated assessment system.
Eligible Types of New Projects Created Through Domestic Violence (DV) Bonus

- Through this NOFO, at least $52,000,000 is available nationally for DV Bonus projects, which are dedicated to survivors of domestic violence, dating violence, sexual assault, and stalking who qualify under paragraph (4) of the definition of homeless at 24 CFR 578.3.

- In the initial DV Bonus selection process, HUD will select approximately $45,000,000 in new DV Bonus eligible projects. As HUD selects projects through Tiers 1 and 2, HUD will apply additional DV Bonus funds to selected projects and will continue doing so until the combined amount selected is at least $52,000,000.

- **NEW in 2023** HUD is clarifying that while persons who are fleeing or attempting to flee human trafficking may qualify as homeless under paragraph (4) of the definition of homeless at 24 CFR 578.3 and may be eligible for certain forms of homeless assistance under the CoC program, a DV Bonus project may not exclusively serve people fleeing or attempting to flee human trafficking.

- A CoC may apply the following types of projects:
  - **Rapid Rehousing** that adopts a housing first approach and is dedicated to serving survivors of domestic violence, dating violence, sexual assault, or stalking that are defined as homeless (24 CFR 578.3)
  - **Joint Transitional Housing and Rapid Rehousing** that adopts a housing first approach and is dedicated to serving survivors of domestic violence, dating violence, sexual assault, or stalking that are defined as homeless (24 CFR 578.3)
  - **Supportive Services Only projects for Coordinated Entry** to implement policies, procedures, and practices that equip the CoC’s coordinated entry to better meet the needs of people experiencing homelessness who are survivors of domestic violence, dating violence, sexual assault, or stalking (e.g., to implement policies and procedures that are trauma-informed and client-centered or to better coordinate referrals between the CoC’s coordinated entry and the victim service providers coordinated entry system where they are different)

- **Number of Applications.** A CoC may apply for any number of PH-RRH and Joint TH and PH-RRH projects provided that each application is for at least $50,000. A CoC can only submit one project application for an SSO-CE project.

- **Expansion Projects.** A CoC may apply to expand an existing renewal project, including one that was previously funded with DV Bonus funding. DV Bonus funding may be used to expand an existing renewal project that is not dedicated to serving survivors of domestic violence, dating violence, and/or stalking so long as the DV Bonus funds for expansion are solely for additional units, beds, or services dedicated to persons eligible to be served with DV Bonus funding. HUD will only select a new DV Bonus project that expands an existing renewal project if HUD selects the renewal project in Tier 1 or 2. For DV Bonus applications that propose expansion but do not meet requirements for an expansion project or the renewal portion is not selected in Tier 1 or 2, HUD will consider the DV Bonus application as a standalone DV Bonus application and use the DV Bonus selection process outlined in I.B.2.b.(8).

- **Project Quality Threshold for DV Bonus.** To be eligible to receive a new DV Bonus project, a CoC must demonstrate it ranks projects based on how they improve system performance as outlined in Section I.B.3.1 of the NOFO. Additionally, to be eligible to receive a DV Bonus project for PH-RRH or Joint TH and PH-RRH component, all projects funded through the DV Bonus must adopt a housing first approach.

- **Ranking.** CoCs are required to rank all DV Bonus projects on the New Project Listing of the CoC Priority Listing with a unique rank number and the corresponding renewal project application must
be on the Renewal Project Listing with a unique rank number. A new DV Bonus project that expands an existing renewal project will only be selected if the renewal project is conditionally selected in Tier 1 or 2. If the renewal project application is selected for conditional award with CoC Program funds and the new DV Bonus expansion project is approved for selection, HUD will only select the new DV Bonus project with DV Bonus funds and HUD will remove the new DV Bonus project from the New Project Listing and all other project applications ranked below the new DV Bonus project will move up one rank position.

- **Scoring.** For new projects the CoC indicates it would like considered as part of the DV Bonus, HUD will award a point value to each project application combining both the CoC Application score and responses to the domestic violence bonus specific questions in the CoC Application using the following 100-point scale:
  
  o For Rapid Rehousing and Joint Transitional Housing and Rapid Rehousing component projects:
    
    - **CoC Score.** Up to 50 points in direct proportion to the score received on the CoC Application.
    
    - **CoC Collaboration with Victim Service Providers.** Up to 10 points in direct proportion to the score received on the following rating factors in the CoC application: Section V.B.1.e, Section V.B.2.c, and Section V.B.3.b.
    
    - **Need for the Project.** Up to 10 points based on the extent the CoC quantifies the need for the project in its portfolio, the extent of the need, and how the project will fill that gap.
    
    - **Quality of the Project Applicant.** Up to 15 points based on the previous performance of the applicant in serving survivors of domestic violence, dating violence, sexual assault, or stalking, and their ability to house survivors and meet safety outcomes.
    
    - **Demonstration of inclusion of victim-centered practices.** Up to 8 points based on the quality of the project’s plan to address the housing and safety needs of survivors by adopting victim-centered practices (e.g., Housing First, Trauma-Informed Care, Confidentiality) in operating their project. Full points will be awarded to project applicants that can demonstrate they are already adopting victim-centered practices.
    
    - **Demonstration of plan to include survivors with lived expertise.** Up to 7 points based on the project’s ability to demonstrate its plan to involve survivors in policy and program development throughout the project’s operation.

  
  o For Supportive Services Only Projects for Coordinated Entry:
    
    - **CoC Score.** Up to 50 points in direct proportion to the score received on the CoC Application.
    
    - **CoC Collaboration with Victim Service Providers.** Up to 10 points in direct proportion to the score received on the following rating factors in the CoC application: Section V.B.1.e, Section V.B.2.c, and Section V.B.3.b.
    
    - **Need for the Project.** Up to 25 points based on the extent to which the CoC demonstrates the need for a coordinated entry system that better meets the needs of survivors of domestic violence, dating violence, sexual assault, or stalking, and how the project will fill this need.
Demonstration of plan to include survivors with lived expertise. Up to 15 points based on the project’s ability to demonstrate its plan to involve survivors in policy and program development throughout the project’s operation.

Important Points for Renewal Projects

- To be eligible for renewal in FY 2023, a project must have an executed grant agreement by December 31, 2023 and have an expiration date in Calendar Year (CY) 2024 (between January 1, 2024, and December 31, 2024).
- **Grant Term.** All CoC Program renewal project applications are limited to a one-year grant term and one year of funding. Any renewal permanent housing project that receives project-based rental assistance or operating costs may request up to a 15-year grant term; however, project applicants may only request one year of funding. The grant term may be extended consistent with 2 CFR 200.308 and 2 CFR 200.309.
- **Project Quality Threshold.** HUD will review renewal projects to determine if project applicants and subrecipients meet the project quality threshold requirements detailed in section III.C.5.d. of this NOFO. If HUD determines these standards are not met, HUD will reject the project application, unless otherwise provided in this NOFO.
- **Eligible Program Participants**
  - PH-PSH projects must serve one of the following:
    - Program participants who are eligible for assistance under the project’s current grant agreement;
    - Persons eligible to be served by DedicatedPLUS projects as described in Section I.B.2.b(7) of the NOFO where all units funded by this project must be used to serve program participants who meet the qualifications for DedicatedPLUS; or
    - Persons experiencing chronic homelessness at the time they initially enrolled in the project.
  - PH-RRH, Joint TH and PH-RRH component, TH, and SSO projects may serve persons who qualify as homeless under paragraphs (1), (2), or (4) of 24 CFR 578.3. Additionally, these projects may serve persons who qualify as homeless under paragraph (3) of 24 CFR 578.3 if the CoC is approved to serve persons in paragraph (3).
  - Renewal projects originally awarded under a previous year’s DV Bonus must continue to serve survivors of domestic violence, dating violence, sexual assault, and stalking who qualify under paragraph (4) of 24 CFR 578.3.

Important Points for All Project Applicants

- CoC Application and Project Applicant Scoring did not change significantly from FY 2022 NOFO.
- **NEW IN 2023** 2022 Violence Against Women Act (VAWA) Budget Line Item. VAWA provides various protections to victims of domestic violence, dating violence, sexual assault, and stalking under the CoC Program and other HUD programs. VAWA 2022 reauthorized, amended, and strengthened VAWA. As a result, HUD added a VAWA Costs Budget Line Item (BLI) to be built into the CoC Program Competition Application process. Applicants wishing to utilize this new BLI can request a budget modification during the competition to add funds to these line items from an existing line item. Applicants may also request to expand existing renewal grants to add new funding to these BLIs.
**NEW IN 2023** Rural Costs Budget Line Item. Section 5707 of the James M. Inhofe National Defense Authorization Act for FY 2023 amends federal law to include activities that address barriers to transitioning families in rural areas to PH and additional activities to increase capacity to address the unique challenges CoCs face when serving people experiencing homelessness in rural areas.

**NEW in 2023** Affirmatively Furthering Fair Housing (AFFH). With some exceptions for Federally recognized Indian tribes and their instrumentalities, HUD states project applicants must discuss how they will carry out the proposed activities in a manner that affirmatively furthers fair housing in compliance with the Fair Housing Act and how applicants will meet the requirements of the definition of AFFH at 24 CFR 5.151. Applicants may propose activities that are consistent with their jurisdiction’s Analysis of Impediments (AI), an Assessment of Fair Housing (AFH), or other means of fair housing planning that meaningfully supports their AFFH certification.

Youth. Youth aged 24 and under must not be required to provide third-party documentation that they meet the homeless definition in 24 CFR 578.3 as a condition for receiving services funded under the NOFO. Any youth-serving provider (a private nonprofit organization whose primary mission is to provide services to youth aged 24 and under and families headed by youth aged 24 and under) funded under the NOFO may serve unaccompanied youth aged 24 and under or families headed by youth aged 24 and under who have an unsafe primary nighttime residence and no safe alternative to that residence. These youth-related requirements supersede any conflicting requirements under the NOFO or the Rule.

SAM Registration Requirement. Applicants must be registered with https://www.sam.gov/SAM before submitting their application. Applicants must maintain current information in SAM on immediate and highest-level owner and subsidiaries, as well as on all predecessors that have been awarded a federal contract or grant within the last three years, if applicable. Information in SAM must be current for all times during which the applicant has an active Federal award or an application or plan under consideration by HUD.

UEI Number Requirement. Applicants must provide a valid UEI number, registered and active at https://www.sam.gov/SAM in the application.

Code of Conduct. All project applicants must ensure their organization has a Code of Conduct that complies with the requirements of 2 CFR part 200 and is on file with HUD. Be sure to review the Code of Conduct for HUD Grant Programs page on HUD’s website to ensure your organization is listed (which means you have submitted an approved Code of Conduct). If you do not see your organization on the list, be sure to attach a current and complete Code of Conduct to your Project Applicant Profile in e-snaps.

2023 FMRs Will Apply. Because the application submission deadline falls in FY 2023, HUD will use FY 2023 FMRs for funding amounts.

Community-Level Changes and Reminders

**REVISED IN 2023** Affirmative Furthering Fair Housing. HUD revised the Centralized or Coordinated Assessment System rating factor (V.B.j.) to place emphasis on CoCs affirmatively marketing housing and services available within the CoC broadly throughout the local area to any demographic groups that would be unlikely or least likely to apply absent such efforts. One point was added for this rating factor.

Addressing the Needs of Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ+) Individuals. HUD continues to give points for factors for addressing the needs of LGBTQ+ individuals to continue emphasizing CoCs implementing and training their providers on the CoC-wide anti-discrimination policies that ensure LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination.
Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decision Making and Provide Professional Development and Employment Opportunities. One more point was added to Section V.B.1.r of the NOFO for CoCs that demonstrate:

- Outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decision-making processes
- Individuals with lived experience of homelessness participate in CoC committees, subcommittees, or workgroups
- Individuals with lived experience of homelessness are routinely included in decision-making processes of the CoC related to addressing homelessness (e.g., minutes from CoC or CoC Subcommittee meetings show people with lived experience are involved in decision-making)
- Individuals with lived experience of homelessness are included in the development, or revision, of the local competition rating factors
- Professional development (e.g., internships, continuing education, skill-based training) and employment opportunities are provided to individuals with lived experience of homelessness either within the CoC or by CoC membership organizations
- Feedback is routinely gathered from people experiencing homelessness and people who have received assistance through the CoC or ESG program on their experience receiving assistance and the steps the CoC takes to address challenges raised by people with lived experience of homelessness

Persons with lived experience must have been homeless within the last seven years or are currently program participants. Full points are available if there is more than one person with lived experience of homelessness engaged in local CoC planning and at least one person with lived experience came from an unsheltered situation.

Increasing Affordable Housing Supply. The FY 2023 NOFO awards points to CoCs that take steps to engage local leaders about increasing housing supply. CoCs must describe at least 2 steps they have taken in the past 12 months that engage city, county, or state governments within their geographic area regarding the following:

- Reforming zoning and land use policies to permit more housing development; or
- Reducing regulatory barriers to housing development.

Racial Disparities. HUD continues to award points for CoCs evaluating racial disparities and making system and program changes to address racial equity.

**REVISED IN 2023** Promoting Racial Equity in the Local CoC Process. HUD continues to have points available to CoCs that are promoting racial equity through the local CoC competition. The points will be awarded on the rating factors; review, selection, and ranking processes used; and if rating and ranking of projects is based on the degree to which projects have identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and are taking or will take steps to eliminate the identified barriers. One point was added for this rating factor.

Leveraging Housing Resources. CoCs may receive up to 7 points in Section V.B.6.a of the NOFO (same as 2022) if the CoC Priority Listing includes at least one new permanent supportive housing or rapid rehousing project application created through reallocation or the CoC Bonus that utilizes housing subsidies or subsidized housing units funded through sources other than the CoC or ESG programs. The full 7 points will be awarded if at least 25% of the units (PSH) or participants (RRH) will be supported with non-CoC funded housing. CoCs must attach letters of commitment,
contrats, or other formal written documents that demonstrate the number of subsidies or units being provided to support the project. See Section V.B.6.a of the NOFO for additional details.

- **Leveraging Healthcare Resources.** CoCs may receive up to 7 points in Section V.B.6.b of the NOFO (same as 2022) if the CoC Priority Listing includes at least one new permanent supportive housing or rapid rehousing project application that utilizes healthcare resources to help individuals and families experiencing homelessness. This must be documented with a written commitment from a health care organization to provide substance use treatment or recovery services to all interested program participants who qualify or to provide services equal in value to 25% of the funding being requested by the project. See Section V.B.6.b of the NOFO for additional details.

- **DV Bonus.** HUD maintained the point value distribution for project applications based on the CoC Application score and responses to the revised domestic violence bonus specific questions in the project applications. For the FY 2023 CoC Program Competition, HUD maintained scoring factors based on the responses to questions that demonstrate CoCs’ collaboration with victim service providers in the CoC Application, projects’ plans to include survivors with lived experience in policy and program development and the inclusion of victim-centered practices in operating their projects.

- **Indian Tribes and Tribally Designated Housing Entities (TDHE).** In the FY 2021 competition, Tribes and TDHEs were eligible to apply for projects through existing CoCs only. In the FY 2022 competition, HUD published PPRNs for all formula areas, as that term is defined in the Indian Housing Block Grant program at 24 CFR 1000.302, including tribal formula areas, and allowed CoCs to include tribal formula areas in their CoC geography during the FY 2022 CoC Program registration process. A Tribe or TDHE could also form a CoC including only tribal formula areas as part of their geography through the CoC registration process. In FY 2023 CoC Program Competition Tribes and TDHEs remain able to be designated as Collaborative Applicants.

- **CoC Mergers.** To encourage CoC mergers and mitigate the potential adverse scoring implications that may occur when a high-performing CoC merges with one or more lower-performing CoC(s), HUD will award up to 25 bonus points (same as 2022) to CoCs that first registered as a merged CoC between the FY 2022 and FY 2023 CoC Program Registration process.

- **Projects on Reservations and Trust Land.** Applicants that propose to locate a project on a reservation or trust land must include a tribal resolution from the tribe authorizing the applicant to do so or a letter from an official or principal of the Indian Tribe or TDHE who is authorized to act on behalf of the Indian Tribe or TDHE indicating approval. Tribes do not need to include a tribal resolution or a letter from an official of the Indian Tribe or TDHE who is authorized to act on behalf of the Indian Tribe or TDHE to site a project on their own reservation or trust land. A tribal resolution is the formal way the tribal government expresses its legislative will in accordance with its organic documents. In the absence of such organic documents, a written expression adopted pursuant to tribal practices will be acceptable.

- **Participative Planning and Implementation.** Applicants must identify the steps they will take to ensure that traditionally marginalized populations (such as racial and ethnic minorities and persons with disabilities) will be able to meaningfully participate in the planning process. The applicant must identify the specific populations that it will include, identify community organizations that represent these populations, and describe how these populations will be included in the planning process. In seeking public participation, applicants and recipients must ensure that all communications are provided in a manner that is effective for persons with hearing, visual, and other communication-related disabilities consistent with Section 504 of the Rehabilitation Act of 1973 and, as applicable, the Americans with Disabilities Act. In addition, Title VI of the Civil Rights Act of 1964, 42 U.S.C. 2000d require that grantees take reasonable steps to ensure meaningful access to services, programs, and activities by persons with Limited English Proficiency (LEP persons).
Homelessness and Human Trafficking. In FY 2022 NOFO, HUD clarified that persons who are fleeing or attempting to flee human trafficking may qualify as homeless under paragraph (4) of the homeless definition at 24 CFR 578.3; and, therefore, the individuals may be eligible for certain forms of homeless assistance under the CoC Program, subject to other restrictions that may apply. HUD considers human trafficking, including sex trafficking, to be “other dangerous or life-threatening conditions that relate to violence against the individual or family member” under paragraph (4) of the definition of homeless at 24 CFR 578.3. In FY 2023 NOFO, HUD clarified that a DV Bonus project may not exclusively serve people fleeing or attempting to flee human trafficking.

Resources

- 2023 CoC NOFO Competition Page: [https://www.hudexchange.info/programs/e-snaps/fy-2023-coc-program-nofa-coc-program-competition/](https://www.hudexchange.info/programs/e-snaps/fy-2023-coc-program-nofa-coc-program-competition/)
- Application Pages
  - e-snaps Information: [https://www.hudexchange.info/programs/e-snaps/](https://www.hudexchange.info/programs/e-snaps/)
  - Code of Conduct for HUD Grant Programs: [https://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/conductgrants](https://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/conductgrants)
  - System for Award Management (SAM): [https://www.sam.gov/SAM](https://www.sam.gov/SAM)
- Miscellaneous HUD Websites
  - General site: [www.hud.gov](http://www.hud.gov)
  - General site: [www.hudexchange.info](http://www.hudexchange.info)
  - Training and Resources: [www.hudexchange.info/homelessness-assistance/](http://www.hudexchange.info/homelessness-assistance/)
  - Subscribe to HUD Listserv: [www.hudexchange.info/mailinglist](http://www.hudexchange.info/mailinglist)
  - Ask A Question (AAQ) Portal: [https://www.hudexchange.info/program-support/my-question/](https://www.hudexchange.info/program-support/my-question/)
Continuum of Care Funding

Federal Funding

Housing and Urban Development (HUD) Continuum of Care (CoC)

Description: The CoC Program (42 U.S.C. part 74) is a program of the federal Department of Housing and Urban Development and is designed to promote a community-wide commitment to the goal of ending homelessness. To provide funding for efforts by nonprofit providers, States, and local governments to quickly re-house the homeless while minimizing the trauma and disruption caused by homelessness, to promote access to and effective utilization of mainstream programs by the homeless, and to optimize self-sufficiency among those experiencing homelessness.

2023 CoC Program Competition: Funding Opportunity

The deadline for Renewal Project Applications is: Wednesday, August 2 at 10pm
The deadline for New Project Applications is: Monday, August 21 at 11pm
For more information see: https://www.hud.gov/AwardsAndGrants/2023-Disbursement-Declaration.pdf
Past Federal Award and Competition notices

Meetings

<table>
<thead>
<tr>
<th>DATE</th>
<th>MATERIALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>July 26, 2023</td>
<td>- TA Workshop</td>
</tr>
<tr>
<td></td>
<td>- Materials 1/Receivables</td>
</tr>
<tr>
<td></td>
<td>- Project Submission Checklist (or in Microsoft Word format)</td>
</tr>
<tr>
<td></td>
<td>- Compendium Timeline</td>
</tr>
<tr>
<td></td>
<td>- Local Competition Handout (National Competition &amp; PRESTO)</td>
</tr>
<tr>
<td></td>
<td>- Technical Assistance (TA) Handbook (National Competition &amp; -awards)</td>
</tr>
<tr>
<td></td>
<td>- TA Workshop Notes/Printed Links shared in the chat at zoom meeting</td>
</tr>
<tr>
<td>June 6, 2023</td>
<td>- CoC NOFO 101</td>
</tr>
<tr>
<td></td>
<td>- Slides / Recordings</td>
</tr>
</tbody>
</table>

local competition materials: TA workshop
## FY2023 COC CONSOLIDATED APPLICATION ATTACHMENT: Local Competition Scoring Tool (1E-2)

### TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Document Satisfying Requirement</th>
<th>Page Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cover Sheet</td>
<td>1</td>
</tr>
<tr>
<td><strong>Project Review and Ranking Process CoC Used in its Local Competition,</strong> composed of the following documents that have been combined into one pdf:</td>
<td></td>
</tr>
<tr>
<td>• <strong>Renewal Project Scoring Tool 2023</strong></td>
<td></td>
</tr>
<tr>
<td>o scoring tool CoC used in local competition to score Renewal ranked projects – <strong>pg. 2-17</strong></td>
<td></td>
</tr>
<tr>
<td>o CoC used at least one criterion relating to improving system performance – <strong>pg. 7</strong></td>
<td></td>
</tr>
<tr>
<td>• <strong>New Project Scoring Tool 2023</strong></td>
<td></td>
</tr>
<tr>
<td>o scoring tool CoC used in local competition to score New ranked projects – <strong>pg. 18-31</strong></td>
<td></td>
</tr>
<tr>
<td>• <strong>Example of Scored Project</strong></td>
<td></td>
</tr>
<tr>
<td>o A copy of one scored project application form for Hope Solutions’ ACCESS Project (PSH -most common type of renewal project). Includes the objective criteria and system performance criteria and their respective maximum point values and the actual points the CoC awarded to the project applicant – <strong>pg. 32</strong></td>
<td></td>
</tr>
<tr>
<td>• <strong>Final CoC Priority Listing</strong></td>
<td></td>
</tr>
<tr>
<td>o Includes all ranked new and renewal projects final project scores – <strong>pg. 33</strong></td>
<td></td>
</tr>
<tr>
<td><strong>2-33</strong></td>
<td></td>
</tr>
</tbody>
</table>
## FY2023 CoC Program Competition
### Renewal Project Scoring Tool

**OVERVIEW**

<table>
<thead>
<tr>
<th>Factor</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Project’s Work is Consistent with HUD and Local Priorities</td>
<td>15</td>
</tr>
<tr>
<td>2. Project Performance Outcomes</td>
<td>36</td>
</tr>
<tr>
<td>3. Agency Capacity</td>
<td>39</td>
</tr>
<tr>
<td>4. Efficient Use of Funds</td>
<td>10</td>
</tr>
<tr>
<td>5. <em>Reallocation Bonus</em></td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Note: The following projects will be reviewed for threshold in response to supplemental questions and placed at the bottom of Tier 1 at the discretion of the panelists:

- HMIS renewal projects,
- Coordinated Entry renewal projects, and
- Renewal projects operational less than one year.
# THRESHOLD CRITERIA

<table>
<thead>
<tr>
<th>Factor</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Coordinated Entry</strong></td>
<td>N/A</td>
</tr>
<tr>
<td>Project participates in coordinated entry to the extent possible for this project type.</td>
<td></td>
</tr>
<tr>
<td>2. <strong>HMIS</strong></td>
<td>N/A</td>
</tr>
<tr>
<td>Project will enter data for all CoC-funded beds into HMIS. A project serving survivors of domestic violence is required to use a comparable database to HMIS.</td>
<td></td>
</tr>
<tr>
<td>3. <strong>Successful Drawdown</strong></td>
<td>N/A</td>
</tr>
<tr>
<td>Project, if operational, has made at least one successful drawdown of federal funds as of the time of this application.</td>
<td></td>
</tr>
<tr>
<td>4. <strong>Program Policies &amp; Procedures</strong></td>
<td>N/A</td>
</tr>
<tr>
<td>Project has submitted policies and procedures that are consistent with minimum HUD requirements.</td>
<td></td>
</tr>
<tr>
<td>5. <strong>Participant Eligibility</strong></td>
<td>N/A</td>
</tr>
<tr>
<td>The project will only accept participants that can be documented as eligible for this project’s program type based on their housing and disability status.</td>
<td></td>
</tr>
<tr>
<td>6. <strong>Equal Access/Fair Housing</strong></td>
<td>N/A</td>
</tr>
<tr>
<td>The project provides equal access and fair housing, and will not discriminate against a program participant or prospective program participant on the basis of race, color, citizenship, national origin, ancestry, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity or expression, marital status, source of income, genetic information, status as a survivor of domestic violence, or other reasons prohibited by law.</td>
<td></td>
</tr>
</tbody>
</table>
SCORING CRITERIA

All the scoring factors in this tool measure projects’ contribution to improving Contra Costa CoC’s System Performance by strengthening the overall system of care through data collection, coordination, prioritization, and increasing resources available to end homelessness in Contra Costa. Certain scoring factors relate to specific Performance Measures, as enumerated in each factor.

1. PROJECT’S WORK IS CONSISTENT WITH HUD AND LOCAL PRIORITIES (15 PTS.)

<table>
<thead>
<tr>
<th>Factor 1.A. Prioritizing Chronically Homeless Households†</th>
<th>Scale</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage of new clients who are chronically homeless</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Panelists may exercise discretion based on factors</td>
<td></td>
<td></td>
</tr>
<tr>
<td>including but not limited to project size, population</td>
<td></td>
<td></td>
</tr>
<tr>
<td>served (e.g., transition age youth, survivors of</td>
<td></td>
<td></td>
</tr>
<tr>
<td>domestic violence), and circumstances beyond the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>project’s sphere of influence. When project has no</td>
<td></td>
<td></td>
</tr>
<tr>
<td>new intakes during the identified period, the project</td>
<td></td>
<td></td>
</tr>
<tr>
<td>will provide an explanation and panelists can award</td>
<td></td>
<td></td>
</tr>
<tr>
<td>up to 5 points with discretion.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

†HUD System Performance Measures 1, 7

**Factor 1.B. Project Impact & Responsiveness to Local Need**

<table>
<thead>
<tr>
<th>Impact of the program in addressing local needs. Consider:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Subpopulations served</td>
</tr>
<tr>
<td>• Demonstrated need for the project type in the community</td>
</tr>
<tr>
<td>• Leveraged resources (e.g., site-based housing, match)</td>
</tr>
</tbody>
</table>

Panelists should consider the impact on the community if the project’s funding were reduced or eliminated. Data packet provided during the competition can help inform if a project is meeting local need.

<table>
<thead>
<tr>
<th>Scale</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excellent</td>
<td>10</td>
</tr>
<tr>
<td>Very Good</td>
<td>8</td>
</tr>
<tr>
<td>Good</td>
<td>6</td>
</tr>
<tr>
<td>Fair</td>
<td>4</td>
</tr>
<tr>
<td>Poor</td>
<td>0</td>
</tr>
</tbody>
</table>
2. PROJECT PERFORMANCE OUTCOMES (36 PTS.)

Projects will be scored based on data in the CoC’s HMIS, except for projects operated by victim services providers which will be scored based on data from the victim service provider’s comparable database. Keep in mind that outcomes will naturally be lower in a more difficult to serve population with severe needs and vulnerabilities such as persons experiencing chronic homelessness, mental illness, substance use disorders and/or domestic violence survivors. Review and Rank panel may deviate from percentage base scales based on severity of barriers.
experienced by program participants and/or project size for smaller projects as needed to account when percentages over or understate outcomes.

<table>
<thead>
<tr>
<th>Factor 2.A. Housing Stability for RRH and PSH Projects</th>
<th>Scale</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>RRH: Exits to Permanent Housing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of “living-leavers” who exited to a permanent destination</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Project will provide an explanation if there were no “living-leavers” that exited to a permanent destination during this reporting period.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• When there are no “living-leavers” that exited to a permanent destination during this reporting period, panelists may award 18 points with discretion.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RRH APR Sources: [(APR 23a Permanent Destinations Subtotal + APR 23b Permanent Destinations Subtotal) ÷ APR 5a Leavers]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PSH: Increasing Housing Retention</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of participants who remained in the program for at least 6 months or “living-leavers” who exited to another permanent destination</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Project will provide an explanation if there were no participants in the program for at least 6 months and there were no “living-leavers” who exited to another permanent destination during this reporting period.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• When no participants were in the program for at least 6 months and there were no “living-leavers” who exited to another permanent destination during this reporting period, panelists may award 18 points with discretion.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PSH APR Sources: [APR22a1 Stayers 181 to 1825 Days + APR23a Permanent Destinations Subtotal + APR23b Permanent Destinations Subtotal] ÷ [APR5a Total Served - APR22a1 Stayers Less than 30 Days to 180 Days - APR23a Deceased - APR23b Deceased]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

# Factor 2.B. Exits to Homelessness

% of persons who exited to homeless temporary destinations (emergency shelter, transitional housing, place not meant for human habitation, or hotel/motel)

- Project will provide an explanation if there were no persons who exited to homeless temporary destinations during this reporting period.
- When no persons exited to homeless temporary destination (emergency shelter, transitional housing, place not meant for human habitation, or hotel/motel) during this reporting period, panelists may award 8 points with discretion.

<table>
<thead>
<tr>
<th>Scale</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>≤2%</td>
<td>8</td>
</tr>
<tr>
<td>2.1-4%</td>
<td>6</td>
</tr>
<tr>
<td>4.1-6%</td>
<td>4</td>
</tr>
<tr>
<td>6.1-8%</td>
<td>2</td>
</tr>
<tr>
<td>8.1-10%</td>
<td>1</td>
</tr>
<tr>
<td>&gt;10%</td>
<td>0</td>
</tr>
</tbody>
</table>

**APR Sources:** 

\[ Q23c \text{ Adults exiting to a temporary destination} \div [\text{APR } 5a \text{ Adults} – \text{APR } 23c \text{ Deceased}] \]
## Factor 2.C. Maintaining/Increasing Cash Income

<table>
<thead>
<tr>
<th>Scale</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>≥90%</td>
<td>4</td>
</tr>
<tr>
<td>80-89.9%</td>
<td>3</td>
</tr>
<tr>
<td>70-79.9%</td>
<td>2</td>
</tr>
<tr>
<td>60-69.9%</td>
<td>1</td>
</tr>
<tr>
<td>&lt;60%</td>
<td>0</td>
</tr>
</tbody>
</table>

% of adults who maintained or increased any non-zero cash income (employment and/or mainstream benefits) based on last completed annual assessment for stayers and based on exit for leavers

- Project will provide an explanation for any leavers that exit in less than 6 months. Panelists may use their discretion to award points based on a calculation that excludes leavers that exited in less than 6 months.
- When no clients were in the program long enough to be eligible for an annual assessment and no clients exited the program during the reporting period, panelists will award 4 points.

**APR Sources:**

\[
\text{[Q19a3 Adults with increased income + Q19a3 Adults who gained income + Q19a3 Adults with the same non-zero income]} \\
\div \ [\text{APR 5a Adults - APR 18 Adult Stayers Not Yet Required to Have an Assessment}]
\]
### Factor 2.D. Connecting to Non-Cash Mainstream Benefits\(^5\)

<table>
<thead>
<tr>
<th>Scale</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>( \geq 40% )</td>
<td>2</td>
</tr>
<tr>
<td>10-39.9%</td>
<td>1</td>
</tr>
<tr>
<td>&lt;10%</td>
<td>0</td>
</tr>
</tbody>
</table>

% of adults who access at least one non-cash mainstream benefit based on last completed annual assessment for stayers and based on exit for leavers

- Project will provide an explanation for any leavers that exit in less than 6 months. Panelists may use their discretion to award points based on a calculation that excludes leavers that exited in less than 6 months.
- When no clients were in the program long enough to be eligible for an annual assessment and no clients exited the program during the reporting period, panelists will award 2 points.

**APR Sources:** 
\[ \text{[APR 20b 1Plus Sources Leavers + APR 20b 1Plus Sources Stayers]} \div \text{[APR 5a Adults - APR 18 Adult Stayers Not Yet Required to Have an Assessment]} \]

---

\(^5\text{HUD System Performance Measures 2, 7}\)

*Adopted by Council on Homelessness – 5/4/2023*
## Factor 2.E. Connecting to Health Insurance

<table>
<thead>
<tr>
<th>Scale</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>≥95%</td>
<td>4</td>
</tr>
<tr>
<td>85-94.9%</td>
<td>3</td>
</tr>
<tr>
<td>75-84.9%</td>
<td>2</td>
</tr>
<tr>
<td>55-74.9%</td>
<td>1</td>
</tr>
<tr>
<td>&lt;55%</td>
<td>0</td>
</tr>
</tbody>
</table>

% of adults who access at health insurance benefits based on last completed annual assessment for stayers and based on exit for leavers

- Project will provide an explanation for any leavers that exit in less than 6 months. Panelists may use their discretion to award points based on a calculation that excludes leavers that exited in less than 6 months.
- When no clients were in the program long enough to be eligible for an annual assessment and no clients exited the program during the reporting period, panelists will award 4 points.

**APR Sources:**  
\[ \text{[APR 21 Stayers 1 Source of Health Insurance + APR 21 Stayers More than 1 Source of Health Insurance + APR 21 Leavers 1 Source of Health Insurance + APR 21 Leavers More than 1 Source of Health Insurance]} \div \text{[APR 5a Adults - APR 18 Adult Stayers Not Yet Required to Have an Assessment]} \]
3. AGENCY CAPACITY (39 PTS.)

<table>
<thead>
<tr>
<th>Factor 3.A. Administrative Structure</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency have the expertise, staff, procedural, and administrative structure needed to meet all grant audit, administrative, and reporting requirements?</td>
<td>6</td>
</tr>
<tr>
<td>• Any outstanding HUD findings and/or financial audit findings? (Panelists will deduct up to 2 pts for outstanding HUD and/or financial audit findings)</td>
<td></td>
</tr>
<tr>
<td>• Has HUD deobligated any of the agency’s/program’s grant funds in the past three operating years? (Panelists will deduct up to 2 pts if HUD has deobligated any agency/program grant funds in the past three operating years)</td>
<td></td>
</tr>
<tr>
<td>• Does the application packet that was submitted reflect an agency with capacity that is sufficient to carry out the HUD administrative requirements? (2 pts)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Factor 3.B. HMIS Participation &amp; Data Quality</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Does the project have 1% or fewer values that are missing/unknown for required HUD Universal Data Elements (UDEs)? (3 pts) (3 pts)</td>
<td>6</td>
</tr>
<tr>
<td>• Does the project run data checks at least quarterly? (3 pts)</td>
<td></td>
</tr>
<tr>
<td>• Applicants who request to correct HUD-submitted APR data past the review deadline and during the evaluation report review process will be penalized by 1 pt.</td>
<td></td>
</tr>
<tr>
<td>Consider: HMIS Data Quality Report</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Factor 3.C. CoC Participation</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency and/or project sponsor participate in Contra Costa Council on Homelessness and CoC-related planning meetings?</td>
<td>3</td>
</tr>
</tbody>
</table>
System Performance Criteria - addressing barriers

### Factor 3.D. Consistent Implementation of Housing First

<table>
<thead>
<tr>
<th>Points</th>
<th>Consider the extent to which a project’s policies include a commitment to identifying and lowering its barriers to housing.</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>• To what extent does the project’s written policies and procedures ensure that participants are not screened out based on the following criteria? (4 pts)</td>
</tr>
<tr>
<td></td>
<td>o Having too little or no income (1 pt)</td>
</tr>
<tr>
<td></td>
<td>o Active, or history of, substance use or a substance use disorder (1 pt)</td>
</tr>
<tr>
<td></td>
<td>o Having a criminal record (with exceptions for state-mandated restrictions) (1 pt)</td>
</tr>
<tr>
<td></td>
<td>o History of domestic violence (e.g., lack of a protective order, period of separation from abuser, or law enforcement involvement) (1 pt)</td>
</tr>
<tr>
<td></td>
<td>• To what extent does the project’s written policies and procedures ensure that participants are not terminated from the program for the following reasons? (5 pts)</td>
</tr>
<tr>
<td></td>
<td>o Failure to participate in supportive services (with exception for HUD-mandated monthly case management meeting for RRH program participants) (1 pt)</td>
</tr>
<tr>
<td></td>
<td>o Failure to make progress on a service plan (1 pt)</td>
</tr>
<tr>
<td></td>
<td>o Loss of income or failure to improve income (1 pt)</td>
</tr>
<tr>
<td></td>
<td>o Being a survivor of domestic violence (1 pt)</td>
</tr>
<tr>
<td></td>
<td>o Any other activity not covered in a lease agreement typically found in the project’s geographic area (1 pt)</td>
</tr>
<tr>
<td></td>
<td>• Does the project take proactive steps to minimize barriers to entry and retention? (2 pts)</td>
</tr>
</tbody>
</table>

7 HUD System Performance Measures 1, 3, 7

<table>
<thead>
<tr>
<th>Factor 3.E. Quality Assurance</th>
<th>Points</th>
</tr>
</thead>
</table>
| Does the agency and/or project maintain policies, procedures, and actions to ensure continuous quality improvement? Consider:  
- Does the agency train its staff to ensure high quality of care? (2 pts)  
- Does the agency monitor program performance using data? (2 pts) | 4 |

### Factor 3.F. Lived Experience Engagement

| Points | 5 |
---|---|

- **Does the agency implement each** of the 2 strategies below to engage people with lived experience of homelessness? One point will be awarded only if both strategies are implemented. In addition to providing narrative, the agency will submit documentation demonstrating each of the strategies cited are being implemented (i.e., recent survey summary, written policy, event flyer, screenshot of webpage information, etc.). Projects that serve survivors of domestic violence must describe how they involve survivors with lived expertise in the program development and operations. (1 pts):
  1. The agency administers lived experience **satisfaction surveys**.
  2. The program involves people with lived experience in **program development and operations**.

- **Does the agency describe one example of feedback received from participants in the past two years and the way the agency responded to that feedback, including its process for ensuring feedback is implemented and any concrete changes it made to program design, policy, or operations?** (1 pts)

- **Has the agency implemented one or more of the strategies below to engage people with lived experience of homelessness? One point will be awarded for 1 strategy. Two points will be awarded for 2 strategies. Three points will be awarded for all 3 strategies. In addition to providing narrative, the agency will submit documentation demonstrating that each of the strategies cited are being implemented (i.e., anonymized board demographic analysis, written policy, job description, meeting agenda, meeting attendance summary, distributed flyer, etc.).** (3 pts)
  1. The agency has a board with at least one person with current or past experience of homelessness OR some other regular mechanism for people with lived experience of homelessness to meaningfully impact the agency’s strategic direction.
  2. The agency’s policies and approaches (e.g., job descriptions and/or qualifications, peer support positions, on-the-job training, outreach/recruitment strategies, etc.) are designed to prioritize hiring and retention of people with lived experience or identities that are reflective of the population served (e.g., race, ethnicity, language, experience of homelessness, disability, experience with the criminal legal system, etc.).
  3. The agency has a **Lived Experience Advisory Board** that meets on an ongoing basis.

*Adopted by Council on Homelessness – 5/4/2023*
## Factor 3.G. Racial Equity

- Does the agency implement each of the 4 strategies below to advance racial equity? One point will be awarded only if all 4 strategies are implemented. In addition to providing narrative, the agency will submit documentation demonstrating that each of the strategies cited are being implemented (i.e., written policy, job description, screenshot of webpage information, distributed flyer, etc.). (1 pt)
  1. **Public written commitment** to address/eliminate racial and ethnic inequities is included in the organization's mission, vision, goals, etc.
  2. **Written materials** are provided in Spanish, Tagalog, and Chinese, as well as other languages as necessary.
  3. Staff receive regular training and support regarding racial equity, including structured conversations within the agency and training provided by the CoC around racial equity, understanding the barriers participants may face that are related to their race, ethnicity, or cultural background, and staff's role and tools for addressing them. The CoC will also provide a resource list for racial equity training.
  4. **Staff regularly review project data** on populations being served, outcomes, and performance metrics by race and ethnicity.

- Does the agency implement one or more of the strategies below to advance racial equity? One point will be awarded for 1 strategy. Two points will be awarded for 2 strategies. Three points will be awarded for 3+ strategies. In addition to providing narrative, the agency will submit documentation demonstrating that each of the strategies cited are being implemented (i.e., written policy, meeting agenda, job description/posting, sample staff workplan, screenshot of webpage information, distributed flyer, etc.) (3 pts)
  1. **Internal structures exist to address issues of racial equity and barriers participants face** that are related to their race, ethnicity, or cultural background (i.e., community advisory body, equity committee).
  2. **Strategies exist to recruit, retain, and develop staff who represent communities of color and/or speak languages frequently encountered by the organization, including Spanish, Tagalog, Chinese, and other languages as necessary.**
  3. Racial equity and cultural responsiveness knowledge, skills and practices are part of both staff job descriptions and workplans.
  4. **Translation and interpretive services** are provided in Spanish, Tagalog, and Chinese, as well as other languages as necessary.

---

| Points | 4 |
## 4. EFFICIENT USE OF FUNDS (10 PTS.)

### Factor 4.A. Utilization Rate\(^8\)

Is the project at capacity in meeting the number of homeless people it is designed to serve?

- Consider: Annual Performance Report and other relevant utilization data on beds (for single persons) OR units (for shared housing/families) for stayers and living-leavers who exit to a permanent housing destination.

<table>
<thead>
<tr>
<th>Scale</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excellent</td>
<td>5</td>
</tr>
<tr>
<td>Very Good</td>
<td>4</td>
</tr>
<tr>
<td>Good</td>
<td>3</td>
</tr>
<tr>
<td>Fair</td>
<td>2</td>
</tr>
<tr>
<td>Poor</td>
<td>0</td>
</tr>
</tbody>
</table>

### Factor 4.B. Unspent Grant Funds

Has the agency left project grant funds unspent in the past 2 years?

- Consider if the program is running at capacity in the past 2 years and if the project receives leasing or rental assistance funding.
- Panelists may score programs up or down from the scaled score based on project narrative (e.g., if the project has not yet completed two grant years and is still ramping up, if the project receives leasing or rental assistance funding).

<table>
<thead>
<tr>
<th>Scale</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;5%</td>
<td>5</td>
</tr>
<tr>
<td>5.1 – 10%</td>
<td>4</td>
</tr>
<tr>
<td>10.1 – 20%</td>
<td>3</td>
</tr>
<tr>
<td>20.1 – 30%</td>
<td>2</td>
</tr>
<tr>
<td>&gt;30.1%</td>
<td>0</td>
</tr>
</tbody>
</table>

## 5. REALLOCATION BONUS (5 PTS.)

### Factor 5.A. Reallocation

Did the Agency voluntarily reallocate a renewal project? Consider:

- How much funding was reallocated?
- What was the project type?
- Panelists will award up to 5 points if the agency has voluntarily reallocated funds to a renewal project during this NOFO cycle.

Points: 5

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\(^8\)HUD System Performance Measures 1, 3

## OVERVIEW

<table>
<thead>
<tr>
<th>Factor</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Project’s Work is Consistent with HUD and Local Priorities</td>
<td>20</td>
</tr>
<tr>
<td>2. Project Design and Readiness</td>
<td>30</td>
</tr>
<tr>
<td>3. Agency Capacity</td>
<td>40</td>
</tr>
<tr>
<td>4. Efficient Use of Funds</td>
<td>10</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Note: This tool will be used for reallocated projects and bonus projects.
## THRESHOLD CRITERIA

<table>
<thead>
<tr>
<th>Factor</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Coordinated Entry</strong></td>
<td>N/A</td>
</tr>
<tr>
<td>Project will participate in coordinated entry to the extent possible for this project type.</td>
<td></td>
</tr>
<tr>
<td><strong>2. HMIS</strong></td>
<td>N/A</td>
</tr>
<tr>
<td>Project will enter data for all CoC-funded beds into HMIS, unless it is serving survivors of domestic violence, in which case it will enter data into a comparable database.</td>
<td></td>
</tr>
<tr>
<td><strong>3. Program Policies &amp; Procedures</strong></td>
<td>N/A</td>
</tr>
<tr>
<td>Project has adopted, or is committed to adopting, policies and procedures that are consistent with minimum HUD requirements.</td>
<td></td>
</tr>
<tr>
<td><strong>4. Participant Eligibility</strong></td>
<td>N/A</td>
</tr>
<tr>
<td>The project will only accept participants that can be documented as eligible for this project’s program type based on their housing and disability status.</td>
<td></td>
</tr>
<tr>
<td><strong>5. Equal Access/Fair Housing</strong></td>
<td>N/A</td>
</tr>
<tr>
<td>The project provides equal access and fair housing, and will not discriminate against a program participant or prospective program participant on the basis of race, color, citizenship, national origin, ancestry, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity or expression, marital status, source of income, genetic information, status as a survivor of domestic violence, or other reasons prohibited by law.</td>
<td></td>
</tr>
</tbody>
</table>
SCORING CRITERIA

All the scoring factors in this tool measure projects’ contribution to improving Contra Costa CoC’s System Performance by strengthening the overall system of care through data collection, coordination, prioritization, and increasing resources available to end homelessness in Contra Costa. Certain scoring factors relate to specific Performance Measures, as enumerated in each factor. Projects will be scored based on data in the CoC’s HMIS, except for projects operated by victim services providers which will be scored based on data from the victim service provider’s comparable database.

1. PROJECT’S WORK IS CONSISTENT WITH HUD AND LOCAL PRIORITIES (20 PTS.)

<table>
<thead>
<tr>
<th>Factor 1.A. HUD and Local Priorities</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Points will be awarded at the discretion of the Review &amp; Rank Panel within the following ranges, taking into consideration community need:</td>
<td>10</td>
</tr>
<tr>
<td>• Permanent supportive housing for chronically homeless or DedicatedPLUS = 5 to 10 points</td>
<td></td>
</tr>
<tr>
<td>o The full 10 points may only be awarded if:</td>
<td></td>
</tr>
<tr>
<td>▪ At least 25 percent of the PSH units will be supported with non-CoC-funded housing or housing subsidies; and/or</td>
<td></td>
</tr>
<tr>
<td>▪ The project will leverage healthcare resources to provide substance use treatment or recovery services to all interested program participants who qualify; and/or</td>
<td></td>
</tr>
<tr>
<td>▪ The project will leverage healthcare resources to provide services equal in value to 25 percent of the funding being requested by the project.</td>
<td></td>
</tr>
<tr>
<td>• Rapid re-housing = up to 5 points</td>
<td></td>
</tr>
<tr>
<td>o The full 5 points may only be awarded if:</td>
<td></td>
</tr>
<tr>
<td>▪ At least 25 percent of the RRH participants will be supported with non-CoC-funded housing or housing subsidies; and/or</td>
<td></td>
</tr>
<tr>
<td>▪ The project will leverage healthcare resources to provide substance use treatment or recovery services to all interested program participants who qualify; and/or</td>
<td></td>
</tr>
<tr>
<td>▪ The project will leverage healthcare resources to provide services equal in value to 25 percent of the funding being requested by the project.</td>
<td></td>
</tr>
<tr>
<td>• Joint transitional housing and rapid re-housing = up to 5 points</td>
<td></td>
</tr>
<tr>
<td>• Coordinated Entry = up to 5 points</td>
<td></td>
</tr>
<tr>
<td>• HMIS = up to 5 points</td>
<td></td>
</tr>
</tbody>
</table>

1 HUD System Performance Measures 1, 2, 3, 7
<table>
<thead>
<tr>
<th>Factor 1.B. Project Impact &amp; Responsiveness to Local Need</th>
<th>Scale</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Impact of the program in addressing local needs. Consider:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Leveraged resources (e.g., site-based housing)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Subpopulations served</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Demonstrated need for the project type in the community, experience working with the local population and local partners</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Panelists should consider the benefit to the community of funding this new project. Data provided on local needs can help inform if new project will meet existing community needs.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Excellent</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>Very Good</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>Good</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Fair</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Poor</td>
<td>0</td>
</tr>
</tbody>
</table>
2. PROJECT DESIGN AND READINESS

PTS. (30)

Consider the overall design of the project in light of its outcome objectives, and the Continuum of Care’s goals that permanent housing programs for homeless people result in stable housing and increased income (through benefits or employment).

<table>
<thead>
<tr>
<th>Factor 2.A. Program Design²</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>For all projects (5pts): Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services.</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>• Does the program design include the use of innovative or evidence-based practices?</td>
<td></td>
</tr>
<tr>
<td>• Will the project be ready to start within HUD’s statutory deadlines (e.g., can demonstrate site control, has plan to identify units, is an expansion of an existing project)?</td>
<td></td>
</tr>
<tr>
<td>• Is the project staffed appropriately to operate the housing/services?</td>
<td></td>
</tr>
<tr>
<td>• Are staff trained to meet the needs of the population to be served?</td>
<td></td>
</tr>
<tr>
<td>• Does the program include involvement of clientele in designing and operating the program?</td>
<td></td>
</tr>
<tr>
<td>• Does the method of service delivery described include culture-specific/sensitive elements (e.g., trauma-informed care)?</td>
<td></td>
</tr>
<tr>
<td>• Will the program be physically accessible to persons with disabilities?</td>
<td></td>
</tr>
<tr>
<td>Are program outcomes realistic but sufficiently challenging given the scale of the project? Are outcomes measurable and appropriate to the population being served?</td>
<td></td>
</tr>
<tr>
<td>• For Domestic Violence Bonus projects, does the program design include safety, planning, and confidentiality protocols? Does the project demonstrate trauma-informed, victim-centered approaches?</td>
<td></td>
</tr>
</tbody>
</table>

Project specific criteria (5 pts):

For PSH/RRH (at least 3 of 4 required by HUD and the project must complete the point under the third criteria)

• Does the type of housing proposed, including the number and configuration of units, fit the needs of the program participants (e.g., two or more bedrooms for families)?
• Will the type of supportive services that will be offered to program participants ensure successful retention in or help to obtain permanent housing, including all supportive services regardless of funding source?
• Does the project have a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible to apply that meets the needs of program participants (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education)?
• Will the project assist program participants to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some

² HUD System Performance Measures 1, 2, 3, 4, 7

Adopted by Council on Homelessness – 6/1/2023
<table>
<thead>
<tr>
<th>FY2023 COC PROGRAM COMPETITION</th>
<th>NEW PROJECT SCORING TOOL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>type of transportation to access needed services, safety planning, case management, additional assistance to ensure retention of permanent housing?</strong></td>
<td></td>
</tr>
</tbody>
</table>

**For Joint TH-RRH (at least 4 of 6 required by HUD and the project must complete the point under the fourth criteria)**

- Does the type of housing proposed, including the number and configuration of units, fit the needs of the program participants (e.g., two or more bedrooms for families)?
- Will the project provide enough rapid re-housing assistance to ensure that at any given time a program participant may move from transitional housing to permanent housing? (This may be demonstrated by identifying a budget that has twice as many resources for the RRH portion than TH, by having twice as many RRH units at a point in time as TH units, or by demonstrating that the budget and units are appropriate for the population being served.)
- Will the type of supportive services that will be offered to program participants ensure successful retention in or help to obtain permanent housing, including all supportive services regardless of funding source?
- Does the project have a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible to apply that meets the needs of program participants (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education)?
- Will the project assist program participants to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, additional assistance to ensure retention of housing)?
- Will the project adhere to a housing first model and adopt low barriers to entry and prioritize rapid placement and stabilization in permanent housing?

**For Coordinated Entry: Program design is in alignment with coordinated entry system design envisioned by CoC (at least 3 of the 5 required by HUD and the project must complete the point under the fifth bullet).**

- Is the system easily accessible for all persons within the CoC’s geographic area, including persons with disabilities, who are seeking information regarding homelessness assistance?
- Is there a strategy for advertising the program that is designed specifically to reach homeless persons with the highest barriers within the CoC’s geographic area?
- Is there a standardized assessment process?
- Does the program ensure that program participants are directed to appropriate housing and services that fit their needs?
- Will the project assist program participants to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, additional assistance to ensure retention of housing)?

*Adopted by Council on Homelessness – 6/1/2023*
For HMIS: Program design is in alignment with CoC’s data needs (at least 3 of the 4 required by HUD).
- Will HMIS funds be expended in a way that is consistent with the CoC’s funding strategy for the HMIS and furthers the CoC’s HMIS implementation?
- Will the HMIS collect all Universal Data Elements as outlined in the HMIS data standards?
- Will the project be able to unduplicate client records?
- Will the project help further the HMIS’s ability to produce all HUD-required reports (APR, quarterly reports, data for CAPER/ESG reporting) and other reports required by federal partners.

**Factor 2.B. Services Capacity and Partnership**

<table>
<thead>
<tr>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
</tr>
</tbody>
</table>

There is a committed relationship with a service provider with a signed letter of commitment or MOU; if agency is providing services itself, they have shown they have the funds to do that. Consider:
- What depth of services will be offered?
- Will the services meet the needs of the target population proposed?
- How will services be leveraged or funded?
- How will the project collaborate with partner organizations for service delivery, including with providers not currently receiving CoC Program funding?

**Factor 2.C. Expected Outcomes**

<table>
<thead>
<tr>
<th>Points</th>
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</thead>
<tbody>
<tr>
<td>12</td>
</tr>
</tbody>
</table>

Has the agency demonstrated, through past performance in a similar project, in other work providing services in the community, and/or through a partnership, the ability to successfully carry out the work proposed and effectively provide services to people experiencing homelessness? Consider the agency’s ability to demonstrate positive outcomes related to:
- Measures of housing stability,
- Exits to homelessness,
- Increased income/benefits,
- Progress toward educational goals,
- Measures of health and wellness, and/or
- Other measures of personal, economic, or housing stability.

For expansion projects, panelists should primarily consider the outcomes for the renewal project that is proposed for expansion.

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3 HUD System Performance Measures 2, 3, 7
4 HUD System Performance Measures 2, 3, 4, 7
For new projects, panelists should consider an applicant’s current ability and methodology to set outcome targets and to measure and track outcomes.
### 3. AGENCY CAPACITY (40 PTS.)

#### Factor 3.A. Agency Experience

Does the agency have the expertise and staffing needed to operate the proposed project?

<table>
<thead>
<tr>
<th>Consider:</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Does the agency have a clear staffing plan that covers both grant management and performance of grant activities? Can the agency demonstrate its capacity to bring on new programs? (3 pts) Consider:</td>
</tr>
<tr>
<td>- Has the agency ramped up a new program in the past 5 years, OR has the agency described a plan to develop capacity to bring on new programs through support from partners, accessing technical assistance and training, and/or accessing support from community network?</td>
</tr>
<tr>
<td>- Has the agency provided letter(s) of recommendation from current or former participants, previous funders, or partners?</td>
</tr>
<tr>
<td>- If the agency has built capacity through partnership, does the application demonstrate that the partnership will continue through the full grant period?</td>
</tr>
<tr>
<td>- Have the Executive Director and Financial Director (or comparable leadership positions) been with the organization for at least 2 years?</td>
</tr>
<tr>
<td>- Has the agency, members or the agency’s Board, or members of the agency’s leadership team successfully handled at least one other federal grant or other major grant of this size and complexity, either in or out of the CoC? (3 pts) Consider:</td>
</tr>
<tr>
<td>- Were at least 90% of the funds spent from such grants?</td>
</tr>
</tbody>
</table>

For expansion projects, panelists should also consider the capacity and staffing of the renewal project that is proposed for expansion.

#### Factor 3.B. Administrative Structure

Does the agency have the procedural and administrative structure needed to meet all grant audit, administrative, and reporting requirements?

<table>
<thead>
<tr>
<th>Consider:</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Does the agency have any outstanding HUD findings and/or financial audit findings? (Panelists will deduct up to 2 pts for outstanding HUD and/or financial audit findings)</td>
</tr>
<tr>
<td>- Has HUD deobligated any of the agency’s grant funds in the past three operating years? (Panelists will deduct up to 2 pts if HUD has deobligated any agency funds in the past three operating years)</td>
</tr>
<tr>
<td>- Does the application packet that was submitted reflect an agency with capacity that is sufficient to carry out the HUD administrative requirements? (2 pt)</td>
</tr>
</tbody>
</table>

#### Factor 3.C. HMIS Participation

Is the agency/program actively participating in HMIS or an alternative database for domestic violence projects, within this CoC or another CoC? Award up to 4 of 4 points for current participation.

<table>
<thead>
<tr>
<th>Consider:</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Consider: adherence with HMIS Policies and Procedures, including maintaining client data and confidentiality, collecting all mandatory data elements, assuring accuracy,</td>
</tr>
</tbody>
</table>

---

*Adopted by Council on Homelessness – 6/1/2023*
monitoring data quality, maintaining security, and participating in trainings and HMIS Policy Committee meetings; HMIS or Alternative Database Data Quality Report

If the agency/program does **not** actively participate in HMIS or an alternative database for domestic violence projects, does the agency/program demonstrate capacity to collect and manage data? Award up to 2 of 4 points, considering:

- Has the agency participated in HMIS in the past?
- Has an internal database to collect and manage data?
- What outcomes are tracked?
- Collecting & tracking outcomes by race and ethnicity?
- Collecting & tracking outcomes based on other demographics? (e.g. Sexual Orientation, Gender Identity, and Expression)
- Can you run a data report?
- Has the org completed HMIS trainings (or other initial steps to HMIS participation)?

<table>
<thead>
<tr>
<th>Factor 3.D. CoC Participation</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency and/or project sponsor participate in Contra Costa Council on Homelessness and CoC-related planning meetings? If new to the CoC, has the agency interacted with the CoC and participated in new provider onboarding and other CoC trainings?</td>
<td>3</td>
</tr>
</tbody>
</table>
Factor 3.E. Housing First

Consider the extent to which the proposed project’s policies will include a commitment to identifying and lowering barriers to housing.

- To what extent will the project’s written policies and procedures ensure that participants are not screened out based on the following criteria? (4 pts)
  - Having too little or no income (1 pt)
  - Active, or history of, substance use or a substance use disorder (1 pt)
  - Having a criminal record (with exceptions for state-mandated restrictions) (1 pt)
  - History of domestic violence (e.g., lack of a protective order, period of separation from abuser, or law enforcement involvement) (1 pt)

- To what extent will the project’s written policies and procedures ensure that participants are not terminated from the program for the following reasons? (5 pts)
  - Failure to participate in supportive services (with exception for HUD-mandated monthly case management meeting for RRH program participants) (1 pt)
  - Failure to make progress on a service plan (1 pt)
  - Loss of income or failure to improve income (1 pt)
  - Being a survivor of domestic violence (1 pt)
  - Any other activity not covered in a lease agreement typically found in the project’s geographic area (1 pt)

- How will the project take proactive steps to minimize barriers to entry and retention? (2 pts)

For expansion projects, panelists should consider the policies and procedures used for the renewal project that is proposed for expansion.

For new projects, panelists should consider an applicant’s ability to implement these criteria, looking to an applicant’s experience with comparable projects if available.

---

 HUD System Performance Measures 1, 3, 7

*Adopted by Council on Homelessness – 6/1/2023*
## Factor 3.F. Quality Assurance

<table>
<thead>
<tr>
<th>Does the agency and/or project maintain policies, procedures, and actions to ensure continuous quality improvement? Consider:</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Does the agency train its staff to ensure high quality of care? (2 pts)</td>
<td>4</td>
</tr>
<tr>
<td>• Does the agency monitor program performance using data? (2 pts)</td>
<td></td>
</tr>
</tbody>
</table>

## Factor 3.G. Lived Experience Engagement

<table>
<thead>
<tr>
<th>Does the agency implement each of the 2 strategies below to engage people with lived experience of homelessness? One point will be awarded only if both strategies are implemented. In addition to providing narrative, the agency will submit documentation demonstrating each of the strategies cited are being implemented (i.e., recent survey summary, written policy, event flyer, screenshot of webpage information, etc.). Projects that intend to serve survivors of domestic violence must describe how they currently or will involve survivors with lived expertise in the program development and operations. (1 pt):</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The agency administers lived experience satisfaction surveys.</td>
<td>5</td>
</tr>
<tr>
<td>2. The program involves people with lived experience in program design and operations.</td>
<td></td>
</tr>
<tr>
<td>Does the agency describe one example of feedback received from participants in the past two years and the way the agency responded to that feedback, including its process for ensuring feedback is implemented and any concrete changes it made to program design, policy, or operations? (1 pt)</td>
<td></td>
</tr>
<tr>
<td>Has the agency implemented one or more of the strategies below to engage people with lived experience of homelessness? One point will be awarded for 1 strategy. Two points will be awarded for 2 strategies. Three points will be awarded for all 3 strategies. In addition to providing narrative, the agency will submit documentation demonstrating that each of the strategies cited are being implemented (i.e., anonymized board demographic analysis, written policy, job description, meeting agenda, meeting attendance summary, distributed flyer, etc.). (3 pts)</td>
<td></td>
</tr>
<tr>
<td>1. The agency has a board with at least one person with current or past experience of homelessness OR some other regular mechanism for people with lived experience of homelessness to meaningfully impact the agency’s strategic direction.</td>
<td></td>
</tr>
<tr>
<td>2. The agency’s policies and approaches (e.g., job descriptions and/or qualifications, peer support positions, on-the-job training, outreach/recruitment strategies, etc.) are designed to prioritize hiring and retention of people with lived experience or identities that are reflective of the population served (e.g., race, ethnicity, language, experience of homelessness, disability, experience with the criminal legal system, etc.).</td>
<td></td>
</tr>
<tr>
<td>3. The agency has a Lived Experience Advisory Board that meets on a regular ongoing basis.</td>
<td></td>
</tr>
</tbody>
</table>
## Factor 3.H. Racial Equity

<table>
<thead>
<tr>
<th>Points</th>
<th>Factor 3.H. Racial Equity</th>
</tr>
</thead>
</table>
| 4      | Does the agency implement each of the 4 strategies below to advance racial equity? One point will be awarded only if all 4 strategies are implemented. In addition to providing narrative, the agency will submit documentation demonstrating that each of the strategies cited are being implemented (i.e., written policy, job description, screenshot of webpage information, distributed flyer, etc.). (1 pts)  
  o Public written commitment to address/eliminate racial and ethnic inequities is included in the organization’s mission, vision, goals, etc.  
  o Written materials are provided in Spanish, Tagalog, and Chinese, as well as other languages as necessary.  
  o Staff receive training and support regarding racial equity, including structured conversations within the agency and training provided by the CoC around racial equity, understanding the barriers participants may face that are related to their race, ethnicity, or cultural background, and staff’s role and tools for addressing them. The CoC will also provide a resource list for racial equity training.  
  o Staff regularly review project data on populations being served, outcomes, and performance metrics by race and ethnicity. |
|        | Does the agency implement one or more of the strategies below to advance racial equity? One point will be awarded for 1 strategy. Two points will be awarded for 2 strategies. Three points will be awarded for 3+ strategies. In addition to providing narrative, the agency will submit documentation demonstrating that each of the strategies cited are being implemented (i.e., written policy, meeting agenda, job description/posting, sample staff workplan, screenshot of webpage information, distributed flyer, etc.) (3 pts)  
  o Internal structures exist to address issues of racial equity and barriers participants face that are related to their race, ethnicity, or cultural background (i.e., formal or informal complaint resolution process, community advisory body, equity committee).  
  o Strategies exist to recruit, retain, and develop staff who represent communities of color and/or speak languages frequently encountered by the organization, including Spanish, Tagalog, Chinese, and other languages as necessary.  
  o Racial equity and cultural responsiveness knowledge, skills and practices are part of staff job descriptions and workplans.  
  o Translation and interpretive services are provided in Spanish, Tagalog, and Chinese, as well as other languages as necessary. |
## FY2023 COC PROGRAM COMPETITION
### NEW PROJECT SCORING TOOL

### 4. EFFICIENT USE OF FUNDS

<table>
<thead>
<tr>
<th>Factor 4.A. Budget</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is budget clearly articulated, with no unnecessary or unexplained items? Consider:</td>
<td></td>
</tr>
<tr>
<td>• Does the budget show that the project will have enough resources to provide high-quality, reliable services to the target population? (2 pts)</td>
<td>5</td>
</tr>
<tr>
<td>• Does the budget show that the project will match/leverage significant outside resources (funding, staff, building space, volunteers, etc.) rather than rely entirely on CoC funds? Are the outside sources realistic? (2 pts)</td>
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</tr>
<tr>
<td>• Does the budget show that the project is taking appropriate measures to promote cost effectiveness? (1 pt)</td>
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<tr>
<td>For expansion projects, panelists may also consider the efficient use of funds factors of the renewal project that is proposed for expansion.</td>
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<table>
<thead>
<tr>
<th>Factor 4.B. Financial Management</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has the applicant submitted their most recently completed independent audit of their nonprofit financial statements?</td>
<td>5</td>
</tr>
<tr>
<td>• If so, does the audit demonstrate the agency’s capacity to maintain adequate control over all funds, property, and other assets to ensure they are used solely for authorized purposes?</td>
<td></td>
</tr>
<tr>
<td>If the applicant has not completed an independent audit:</td>
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</tr>
<tr>
<td>• Have they submitted unaudited financial statements and articulated their plan to meet federal financial management requirements?</td>
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</table>
**14) ACCESS (Hope Solutions)**

<table>
<thead>
<tr>
<th>Category</th>
<th>Panelist 1</th>
<th>Panelist 2</th>
<th>Panelist 3</th>
<th>Panelist 4</th>
<th>Panelist 5</th>
<th>Panelist 6</th>
<th>Panelist 7</th>
<th>Average Panel Score</th>
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<td>1.A. Prioritizing Chronically Homeless Households (5 points)</td>
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<td>2. Housing Stability (score only 2.A. or 2.B. per project based on project type) (18 points)</td>
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<td>2.A. PSH Housing Metric: Increasing Housing Retention (18 points)</td>
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<td>2.C. Maintaining/Increasing Cash Income (4 points)</td>
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<td>2.D. Connecting to Non-Cash Mainstream Benefits (2 points)</td>
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<td>2.E. Connecting to Health Insurance (4 points)</td>
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<td>3.B. HMIS Participation &amp; Data Quality (6 points)</td>
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<td>3.C. CoC Participation (3 points)</td>
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<td>3.E. Quality Assurance (4 points)</td>
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<td>3.F. Lived Experience Engagement (5 points)</td>
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<td>3.G. Racial Equity (4 points)</td>
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<td>5.A. Bonus Reallocation (5 points)</td>
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<td>100</td>
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</table>
## Contra Costa Council on Homelessness
### FY2023 CoC Program Competition Priority Listing

Approved by the Council on Homelessness on September 7, 2023

<table>
<thead>
<tr>
<th>Rank</th>
<th>Score</th>
<th>Applicant</th>
<th>Project</th>
<th>Type</th>
<th>Request Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>102.43</td>
<td>SAHA</td>
<td>Tabora Gardens Senior Apartments</td>
<td>PSH</td>
<td>$281,055</td>
</tr>
<tr>
<td>2</td>
<td>99.86</td>
<td>Hope</td>
<td>ACCESS</td>
<td>PSH</td>
<td>$1,059,055</td>
</tr>
<tr>
<td>3</td>
<td>99.86</td>
<td>Hope</td>
<td>Garden Park Apartments Community</td>
<td>PSH</td>
<td>$352,150</td>
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<tr>
<td>4</td>
<td>99.29</td>
<td>HACCC</td>
<td>Lakeside</td>
<td>PSH</td>
<td>$96,628</td>
</tr>
<tr>
<td>5</td>
<td>99.14</td>
<td>Hope</td>
<td>Families in Supportive Housing</td>
<td>PSH</td>
<td>$1,087,325</td>
</tr>
<tr>
<td>6</td>
<td>99.14</td>
<td>HACCC</td>
<td>Villa Vasconcellos</td>
<td>PSH</td>
<td>$115,671</td>
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<tr>
<td>7</td>
<td>99.00</td>
<td>CCHS (H3)</td>
<td>Destination Home</td>
<td>PSH</td>
<td>$429,457</td>
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<tr>
<td>8</td>
<td>99.00</td>
<td>Hope</td>
<td>ACCESS Expansion (New Project)</td>
<td>PSH</td>
<td>$522,197</td>
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<tr>
<td>9</td>
<td>98.57</td>
<td>HACCC</td>
<td>Contra Costa Tenant-Based Rental Assistance</td>
<td>PSH</td>
<td>$6,830,871</td>
</tr>
<tr>
<td>10</td>
<td>98.57</td>
<td>CCHS (H3)</td>
<td>High Utilizers of Multiple Systems</td>
<td>PSH</td>
<td>$1,883,352</td>
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<tr>
<td>11</td>
<td>98.43</td>
<td>HACCC</td>
<td>Contra Costa Project-Based Rental Assistance</td>
<td>PSH</td>
<td>$159,920</td>
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<tr>
<td>12</td>
<td>*</td>
<td>CCHS</td>
<td>Contra Costa Coordinated Entry</td>
<td>SSO</td>
<td>$1,217,035</td>
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<tr>
<td>13</td>
<td>*</td>
<td>CCHS</td>
<td>Contra Costa HMIS</td>
<td>HMIS</td>
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<td>14</td>
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<td>Hope</td>
<td>Richmond Hacienda</td>
<td>PSH</td>
<td>$150,220</td>
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<tr>
<td>15</td>
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<td>Hope</td>
<td>Project Home SAFE</td>
<td>RRH</td>
<td>$716,332</td>
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<tr>
<td>16</td>
<td>*</td>
<td>SHELTER, Inc.</td>
<td>Pelancha RRH</td>
<td>RRH</td>
<td>$536,883</td>
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<td>17</td>
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<td>Permanent Connections (Straddling Tiers)</td>
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<td>$35,392</td>
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<td>Permanent Connections (Straddling Tiers)</td>
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<td>18</td>
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<td>SHELTER, Inc.</td>
<td>Project Thrive</td>
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<td>RCD</td>
<td>Idaho Apartments</td>
<td>PSH</td>
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<td>CCHS (H3)</td>
<td>HUMS Project Based** (New Project)</td>
<td>PSH</td>
<td>$670,175</td>
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</table>

### Domestic Violence (DV) Bonus

<table>
<thead>
<tr>
<th>Rank</th>
<th>Score</th>
<th>Applicant</th>
<th>Project</th>
<th>Type</th>
<th>Request Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>21</td>
<td>95.14</td>
<td>SHELTER, Inc.</td>
<td>New Horizons (New Project)</td>
<td>PSH</td>
<td>$1,177,892</td>
</tr>
<tr>
<td>22</td>
<td>94.00</td>
<td>Hope</td>
<td>YOUTH Hope (New Project)</td>
<td>RRH</td>
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<tr>
<td>23</td>
<td>87.43</td>
<td>LFCD</td>
<td>Care Campus San Pablo (New Project)</td>
<td>RRH</td>
<td>$1,258,692</td>
</tr>
</tbody>
</table>

### Not Recommended for CoC Funding****

<table>
<thead>
<tr>
<th>Rank</th>
<th>Score</th>
<th>Applicant</th>
<th>Project</th>
<th>Type</th>
<th>Request Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>24</td>
<td>88.00</td>
<td>SHELTER, Inc.</td>
<td>Planting Roots*** (New Project) (DV Bonus)</td>
<td>RRH</td>
<td>$567,123</td>
</tr>
</tbody>
</table>

---

* Per local process, HMIS, CE, and projects with less than 1 year of data are automatically ranked at bottom of Tier 1.

** This project voluntarily elected to be placed at this ranking despite it’s higher score. The award amount is reduced from applicant’s initial request ($1,177,892) to align with the remaining funding available to the CoC.

*** This project is being submitted for DV Bonus funding. If not selected for DV Bonus funding, the project is not recommended for CoC Bonus funding to align with the total funding amount available to the CoC.

**** These projects are not recommended for CoC funding as total requests exceeded funding amount available to the CoC.

### Funding Summary

- **Annual Renewal Demand**: $1,682,031
- **CoC Bonus**: $1,177,892
- **Domestic Violence Bonus (1 application received)**: $567,123
- **Tier 1 Amount**: $15,649,139
- **Tier 2 Amount**: $2,355,784
- **CoC Planning (not ranked)**: $841,352
- **Total Request to HUD**: $19,413,398
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<table>
<thead>
<tr>
<th>Document Satisfying Requirement</th>
<th>Page Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cover Sheet</td>
<td>1</td>
</tr>
<tr>
<td><strong>Scored Project Forms for One Project—from CoC’s Local Competition</strong></td>
<td></td>
</tr>
<tr>
<td>o example of a scorecard used for renewal projects submitted in local competition</td>
<td></td>
</tr>
<tr>
<td>o form includes maximum point values and actual points CoC awarded for one scored renewal project</td>
<td>2</td>
</tr>
<tr>
<td>Panelist 1</td>
<td>Panelist 2</td>
</tr>
<tr>
<td>----------</td>
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<td><strong>TOTAL PROJECT SCORE</strong></td>
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</table>
FY2023 COC CONSOLIDATED APPLICATION
ATTACHMENT: Notification of Projects Rejected-Reduced (1E-5)

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<table>
<thead>
<tr>
<th>Document Satisfying Requirement</th>
<th>Page Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cover Sheet</td>
<td>1</td>
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<tr>
<td>Individual Emails to Each Rejected or Reduced Applicant</td>
<td>2-7</td>
</tr>
<tr>
<td>- Email to Youth Hope project applicant pp.2-3</td>
<td></td>
</tr>
<tr>
<td>- Email to New Horizons project applicant pp.4-5</td>
<td></td>
</tr>
<tr>
<td>- Email to Care Campus San Pablo project applicant pp.6-7</td>
<td></td>
</tr>
<tr>
<td>Email to All Applicants Distributing Final Ranked List</td>
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<tr>
<td>- Indicates recipients</td>
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<tr>
<td>- Evidence of attachment of final ranked list</td>
<td></td>
</tr>
<tr>
<td>- Evidence of link to the ranked list posted online</td>
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<tr>
<td>Screenshot of Final Ranked List Posted Online</td>
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<tr>
<td>- Indicates system generated date</td>
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<td>Final CoC Priority Listing (Ranked List)</td>
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<td>- Copy of the ranked list that was attached and linked</td>
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<td>- Indicates project scores</td>
<td></td>
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<tr>
<td>- Indicates funding amounts</td>
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</table>
Dear Hope Solutions staff,

Thank you for your participation in the 2023 Contra Costa County Continuum of Care (CoC) Program Local Competition. We appreciate your time and effort to prepare your funding application.

The Review and Rank Panel met this week to complete the review and scoring of all submitted applications in this year's Continuum of Care (CoC) Notice of Funding Opportunity (NOFO) competition. The Panel appreciated learning about your program and interest in providing housing and services for persons experiencing homelessness in Contra Costa County.

The Review and Rank Panel has decided not to recommend YOUTH Hope for CoC funding at this time. Several projects were not recommended for CoC funding as total requests exceeded the funding amount available to the CoC.

Please find the attached Review and Rank Panel's Recommended Priority Listing.

NEXT STEPS

- Should you be eligible and wish to appeal the Panel's ranking you may do so. Information is included below on the Appeals Process.
- The Council on Homelessness will review and approve the Priority Listing at their next meeting on Thursday, September 7 from 1:00 - 3:00 PM (register for the meeting here). Once approved by the Council, the Final Priority Listing will be sent to HUD as the CoC's funding recommendation.

APPEALS PROCESS

The Appeals Policy states the following regarding the eligibility to appeal – an applicant may be eligible to appeal the decision of the CoC Review and Rank Panel if their project application: is rejected from inclusion as part of the CoC Consolidated Application submission, or receives decreased funding (e.g., through reallocation). For more information on the appeals process, please see the CoC Application Process (pp. 6-7).

After reviewing the policy, if you believe you may be eligible to appeal, you will need to do the following:

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- Email a written appeal (no more than 2 pages) and supporting documentation to ContraCosta@homebaseccc.org by 5 PM on Tuesday, September 5
- Attend a virtual meeting on Wednesday, September 6 from 1 - 2:30 PM so the Appeals Panel can hear your appeal

Please note that a successful appeal must demonstrate that their score was not reflective of the application information provided, or that there was bias or unfairness in the process that warrants the appeal. If you have any questions about this process, please contact ContraCosta@homebaseccc.org.

Best,
Mark

---

Michele Byrnes <michele@homebaseccc.org>

2023 CoC NOFO Preliminary Priority Listing - Contra Costa CoC
1 message

Mark Mora <mark@homebaseccc.org> Thu, Aug 31, 2023 at 6:52 PM
Reply-To: contracosta@homebaseccc.org
To: Deanne Pearn <dpearn@hopesolutions.org>, Bill Jones <bjones@hopesolutions.org>, Araba Andoh <aandoh@hopesolutions.org>
Cc: Contra Costa <contracosta@homebaseccc.org>, Jamie Schecter <Jamie.Schecter@cchealth.org>, Shelby Ferguson <shelby.ferguson@cchealth.org>, Jaime Jenett <Jaime.Jenett@cchealth.org>

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NEXT STEPS

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Best,
Mark

---

Michele Byrnes <michele@homebaseccc.org>

2023 CoC NOFO Preliminary Priority Listing - Contra Costa CoC
1 message

Mark Mora <mark@homebaseccc.org> Thu, Aug 31, 2023 at 6:52 PM
Reply-To: contracosta@homebaseccc.org
To: Deanne Pearn <dpearn@hopesolutions.org>, Bill Jones <bjones@hopesolutions.org>, Araba Andoh <aandoh@hopesolutions.org>
Cc: Contra Costa <contracosta@homebaseccc.org>, Jamie Schecter <Jamie.Schecter@cchealth.org>, Shelby Ferguson <shelby.ferguson@cchealth.org>, Jaime Jenett <Jaime.Jenett@cchealth.org>

Dear Hope Solutions staff,

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- Should you be eligible and wish to appeal the Panel's ranking you may do so. Information is included below on the Appeals Process.
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Please note that a successful appeal must demonstrate that their score was not reflective of the application information provided, or that there was bias or unfairness in the process that warrants the appeal. If you have any questions about this process, please contact ContraCosta@homebaseccc.org.

Best,
Mark
Homebase | Mark Mora | Senior Policy Analyst

Pronouns: He/Him/His  
p: 415-788-7961 ext. 368  
w: www.homebaseccc.org  
a: 870 Market Street, Suite 1228, San Francisco, CA 94102

Advancing Solutions to Homelessness  
Legal and Technical Assistance | Policy | Advocacy | Planning  

Homebase COVID-19 Key Resources Guide - Click Here

The content in this message is provided for information purposes only and does not constitute legal advice. Homebase does not enter into attorney-client relationships. jaim

FY 2023 Contra Costa CoC Priority Listing.pdf

Priority listing that includes project name, rank, score, and funding amount
Dear SHELTER, Inc. staff,

Thank you for your participation in the 2023 Contra Costa County Continuum of Care (CoC) Program Local Competition. We appreciate your time and effort to prepare your funding application.

The Review and Rank Panel met this week to complete the review and scoring of all submitted applications in this year’s Continuum of Care (CoC) Notice of Funding Opportunity (NOFO) competition. The Panel appreciated learning about your program and interest in providing housing and services for persons experiencing homelessness in Contra Costa County.

The Review and Rank Panel has decided not to recommend New Horizons for CoC funding at this time. Several projects were not recommended for CoC funding as total requests exceeded the funding amount available to the CoC.

Please find the attached Review and Rank Panel’s Recommended Priority Listing.

NEXT STEPS

- Should you be eligible and wish to appeal the Panel’s ranking you may do so. Information is included below on the Appeals Process.
- The Council on Homelessness will review and approve the Priority Listing at their next meeting on Thursday, September 7 from 1:00 - 3:00 PM (register for the meeting here). Once approved by the Council, the Final Priority Listing will be sent to HUD as the CoC’s funding recommendation.

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Best,
Mark
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FY 2023 Contra Costa CoC Priority Listing.pdf

priority listing that includes project name, rank, score, and funding amount
Dear LFCD staff:

Thank you for your participation in the 2023 Contra Costa County Continuum of Care (CoC) Program Local Competition. We appreciate your time and effort to prepare your funding application.

The Review and Rank Panel met this week to complete the review and scoring of all submitted applications in this year's Continuum of Care (CoC) Notice of Funding Opportunity (NOFO) competition. The Panel appreciated learning about your program and interest in providing housing and services for persons experiencing homelessness in Contra Costa County.

The Review and Rank Panel has decided not to recommend Care Campus San Pablo for CoC funding at this time. Several projects were not recommended for CoC funding as total requests exceeded the funding amount available to the CoC. Please find the attached Review and Rank Panel's Recommended Priority Listing.

NEXT STEPS

- Should you be eligible and wish to appeal the Panel's ranking you may do so. Information is included below on the Appeals Process.
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Best,
Mark

---

Michele Byrnes <michele@homebaseccc.org>

2023 CoC NOFO Preliminary Priority Listing - Contra Costa CoC

1 message

Mark Mora <mark@homebaseccc.org> Thu, Aug 31, 2023 at 6:50 PM
Reply-To: contracosta@homebaseccc.org
To: krothberg@lfcd.org, Mai Quach <mquach@lfcd.org>, Brad Meyer <bmeyer@lfcd.org>, grants@lfcd.org
Cc: Contra Costa <contracosta@homebaseccc.org>, Jamie Schecter <Jamie.Schecter@cchealth.org>, Shelby Ferguson <shelby.ferguson@cchealth.org>, Jaime Jenett <Jaime.Jenett@cchealth.org>

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Best,
Mark
Advancing Solutions to Homelessness
Legal and Technical Assistance | Policy | Advocacy | Planning
Homebase COVID-19 Key Resources Guide - Click Here

The content in this message is provided for information purposes only and does not constitute legal advice. Homebase does not enter into attorney-client relationships.

FY 2023 Contra Costa CoC Priority Listing.pdf
priority listing that includes project name, rank, score, and funding amount
Dear Contra Costa CoC 2023 NOFO Applicants:

At their meeting today (9/7), the Council on Homelessness approved the 2023 CoC NOFO Priority Listing as recommended by the Review and Rank Panel.

Please find the approved Priority Listing attached, as well as on the CoC website: https://cchealth.org/h3/coc/funding.php#Federal

Should you have any questions or concerns, please reach out to ContraCosta@homebaseccc.org.

Thank you!

Best,
Mark
Continuum of Care Funding

Federal Funding

Housing and Urban Development (HUD) Continuum of Care (CoC)

Description: The CoC Program (24 CFR part 578) is a program of the federal Department of Housing and Urban Development and is designed to promote a community-wide commitment to the goal of ending homelessness; to provide funding for efforts by nonprofit providers, States, and local governments to quickly re-house the homeless while minimizing the trauma and dislocation caused by homelessness; to promote access to and effective utilization of mainstream programs by the homeless; and to optimize self-sufficiency among those experiencing homelessness.

2023 CoC Program Competition: Funding Opportunity

Approved Priorities Listing

The deadline for Renewal Project Applications is: Wednesday August 2 at 12pm
The deadline for New Project Applications is: Monday August 21 at 12 pm

For more information see: cchealth.org/3cock/pdf/NOFD-FY2023-Public-Solicitation.pdf
Past Federal Award and Competition notices +

Meetings

<table>
<thead>
<tr>
<th>DATE</th>
<th>MATERIALS</th>
</tr>
</thead>
</table>
| July 26, 2023 | TA Workshop  
- Materials | Recording  
- Project Submission Checklist (or in Microsoft Word format)  
- Competition Timeline  
- Local Competition Handbook (Local Competition & PRESTO)  
- Technical Assistance (TA) Handbook (National Competition & TA)  
- TA Workshop Links (helpful links shared in the chat at zoom meeting) |
| June 9, 2023   | CQG (NOFD 101)  
- Files | Recording |
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**Tier 2**

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**Domestic Violence (DV) Bonus**

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**Not Recommended for CoC Funding****

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* Per local process, HMIS, CE, and projects with less than 1 year of data are automatically ranked at bottom of Tier 1.
** This project voluntarily elected to be placed at this ranking despite it’s higher score. The award amount is reduced from applicant’s initial request ($1,177,892) to align with the remaining funding available to the CoC.
*** This project is being submitted for DV Bonus funding. If not selected for DV Bonus funding, the project is not recommended for CoC Bonus funding to align with the total funding amount available to the CoC.
**** These projects are not recommended for CoC funding as total requests exceeded funding amount available to the CoC.

---

*Final ranked list*

*Project funding amount*

*Rejected projects highlighted in green; reduced projects highlighted in blue*

*PBA High Utilizers of Multiple Systems in esnaps priority listing*
FY2023 COC CONSOLIDATED APPLICATION ATTACHMENT: Notification of Projects Accepted (1E-5a)

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<td>1</td>
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<tr>
<td>Email to All Applicants Distributing Final Ranked List</td>
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</tr>
<tr>
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<tr>
<td>• Evidence of attachment of final ranked list</td>
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<td>Screenshot of Final Ranked List Posted Online</td>
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</tr>
<tr>
<td>• Indicates funding amounts</td>
<td></td>
</tr>
</tbody>
</table>
Dear Contra Costa CoC 2023 NOFO Applicants:

At their meeting today (9/7), the Council on Homelessness approved the 2023 CoC NOFO Priority Listing as recommended by the Review and Rank Panel.

Please find the approved Priority Listing attached, as well as on the CoC website: https://cchealth.org/h3/coc/funding.php#Federal

Should you have any questions or concerns, please reach out to ContraCosta@homebaseccc.org.

Thank you!

Best,
Mark

FY 2023 Approved Contra Costa CoC Priority Listing.pdf

attachment of final ranked list
Contra Costa Council on Homelessness  
FY2023 CoC Program Competition Priority Listing  
Approved by the Council on Homelessness on September 7, 2023

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<td>RRH</td>
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<td>PSH</td>
<td>$1,251,559</td>
</tr>
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<td>RCD</td>
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<td>$471,985</td>
</tr>
</tbody>
</table>

**Per local process, HMIS, CE, and projects with less than 1 year of data are automatically ranked at bottom of Tier 1.**

**This project voluntarily elected to be placed at this ranking despite its higher score. The award amount is reduced from applicants initial request ($1,177,892) to align with the remaining funding available to the CoC.**

**This project is being submitted for DV Bonus funding. If not selected for DV Bonus funding, the project is not recommended for CoC Bonus funding to align with the total funding amount available to the CoC.**

**These projects are not recommended for CoC funding as total requests exceeded funding amount available to the CoC.**

---

| Annual Renewal Demand | $16,827,031 |
| CoC Bonus              | $1,177,892  |
| Domestic Violence Bonus (1 application received) | $567,123 |
| Tier 1 Amount          | $15,649,139 |
| Tier 2 Amount          | $2,355,784  |
| CoC Planning (not ranked) | $841,352   |
| Total Request to HUD   | $19,413,398 |
FY2023 COC CONSOLIDATED APPLICATION ATTACHMENT: Final Project Scores for All Projects – Local Competition Selection Results (1E-5b)

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<table>
<thead>
<tr>
<th>Document Satisfying Requirement</th>
<th>Page Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cover Sheet</td>
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<td>Local Competition Selection Results–Scores for All Projects</td>
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<td>• Copy of the final ranked list that was attached and linked in notifications to applicants</td>
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<td>• includes the following:</td>
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<tr>
<td>o project names</td>
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<tr>
<td>o project scores</td>
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</tr>
<tr>
<td>o project accepted or rejected/reduced status</td>
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<tr>
<td>o project rank</td>
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<tr>
<td>o requested funding amounts</td>
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## FY2023 CoC Program Competition Priority Listing

Approved by the Council on Homelessness on September 7, 2023

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**Tier 1**

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**Not Recommended for CoC Funding****

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**FY2023 COC CONSOLIDATED APPLICATION ATTACHMENT:** Web Posting – CoC-Approved Consolidated Application (1E-5c)

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<td><strong>Screenshot of Web Posting CoC-Approved Consolidated Application</strong></td>
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</tr>
<tr>
<td>• Displays system-generated date and time that demonstrates CoC publicly posted the final version of CoC’s Consolidated Application 3 days before the FY 2023 CoC Program Competition application submission deadline of 9/28/2023</td>
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**FY2023 COC CONSOLIDATED APPLICATION ATTACHMENT:** Notification of CoC-Approved Consolidated Application (1E-5d)

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<td>Cover Sheet</td>
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<tr>
<td><strong>Copy of Email to CoC Listserv</strong></td>
<td>2-3</td>
</tr>
<tr>
<td>• Demonstrates that Contra Costa CoC notified community members and key stakeholders that the CoC posted the final version of the Consolidated Application on September 25, 2023, 3 days before the FY 2023 CoC Program Application submission deadline of September 28, 2023</td>
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<td>• Indicates link to Final Consolidated Application posted to CoC website</td>
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FY2023 COC CONSOLIDATED APPLICATION ATTACHMENT: HUD’s Homeless Data Exchange (HDX) Competition Report (2A-6)

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<td><strong>Copy of Homeless Data Exchange (HDX) Competition Report</strong></td>
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### Total Population PIT Count Data

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<th>2021 PIT</th>
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<td>2372</td>
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<td>Safe Haven Total</td>
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<td>0</td>
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<tr>
<td>Transitional Housing Total</td>
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<td>111</td>
<td>132</td>
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<tr>
<td>Total Sheltered Count</td>
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<td>820</td>
<td>764</td>
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<tr>
<td>Total Unsheltered Count</td>
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<td>1570</td>
<td>2329</td>
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### Chronically Homeless PIT Counts

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<th>2023 PIT</th>
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<td>Unsheltered Count of Chronically Homeless Persons</td>
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<td>519</td>
<td>1,139</td>
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### Homeless Households with Children PIT Counts

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<th>2021 PIT</th>
<th>2022 PIT</th>
<th>2023 PIT</th>
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### Homeless Veteran PIT Counts

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<th>2021 PIT</th>
<th>2022 PIT</th>
<th>2023 PIT</th>
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<td>Sheltered Count of Homeless Veterans</td>
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<td>Unsheltered Count of Homeless Veterans</td>
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<td>68</td>
<td>95</td>
<td>73</td>
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*For CoCs that did not conduct an unsheltered count in 2021, 2020 data were used.*
## HMIS Bed Coverage Rates

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<th>Project Type</th>
<th>Total Year-Round, Current Beds</th>
<th>Total Year-Round, Current, HMIS Beds</th>
<th>Total Year-Round, Current, Non-VSP Beds*</th>
<th>HMIS Bed Coverage Rate for Year-Round Beds</th>
<th>Total Year-Round, Current VSP Beds in an HMIS Comparable Database</th>
<th>Total Year-Round, Current, VSP Beds**</th>
<th>HMIS Comparable Bed Coverage Rate for VSP Beds</th>
<th>Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database</th>
<th>HMIS and Comparable Database Coverage Rate</th>
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<tbody>
<tr>
<td>ES Beds</td>
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<td>446</td>
<td>540</td>
<td>82.59%</td>
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<td>24</td>
<td>100.00%</td>
<td>470</td>
<td>83.33%</td>
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<td>SH Beds</td>
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<td>0</td>
<td>NA</td>
<td>0</td>
<td>0</td>
<td>NA</td>
<td>0</td>
<td>NA</td>
</tr>
<tr>
<td>TH Beds</td>
<td>275</td>
<td>61</td>
<td>231</td>
<td>26.41%</td>
<td>22</td>
<td>44</td>
<td>50.00%</td>
<td>83</td>
<td>30.18%</td>
</tr>
<tr>
<td>RRH Beds</td>
<td>294</td>
<td>252</td>
<td>294</td>
<td>85.71%</td>
<td>0</td>
<td>0</td>
<td>NA</td>
<td>252</td>
<td>85.71%</td>
</tr>
<tr>
<td>PSH Beds</td>
<td>1,325</td>
<td>1,325</td>
<td>1,325</td>
<td>100.00%</td>
<td>0</td>
<td>0</td>
<td>NA</td>
<td>1,325</td>
<td>100.00%</td>
</tr>
<tr>
<td>OPH Beds</td>
<td>274</td>
<td>274</td>
<td>274</td>
<td>100.00%</td>
<td>0</td>
<td>0</td>
<td>NA</td>
<td>274</td>
<td>100.00%</td>
</tr>
<tr>
<td><strong>Total Beds</strong></td>
<td><strong>2,732</strong></td>
<td><strong>2,358</strong></td>
<td><strong>2,664</strong></td>
<td><strong>88.51%</strong></td>
<td><strong>46</strong></td>
<td><strong>68</strong></td>
<td><strong>67.65%</strong></td>
<td><strong>2,404</strong></td>
<td><strong>87.99%</strong></td>
</tr>
</tbody>
</table>

*As noted in 2A-5 & HIC report, this should be 19
2023 HDX Competition Report
HIC Data for CA-505 - Richmond/Contra Costa County CoC
## 2023 HDX Competition Report

### HIC Data for CA-505 - Richmond/Contra Costa County CoC

Notes
*For OPH Beds, this does NOT include any beds that are Current, Non-VSP, Non-HMIS, and EHV-funded.*

**For OPH Beds, this does NOT include any beds that are Current, VSP, Non-HMIS, and EHV-funded.**

In the HIC, “Year-Round Beds” is the sum of “Beds HH w/o Children”, “Beds HH w/ Children”, and “Beds HH w/ only Children”. This does not include Overflow (“O/V Beds”) or Seasonal Beds (“Total Seasonal Beds”).

In the HIC, Current beds are beds with an “Inventory Type” of “C” and not beds that are Under Development (“Inventory Type” of “U”).

### PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

<table>
<thead>
<tr>
<th>Chronically Homeless Bed Counts</th>
<th>2020 HIC</th>
<th>2021 HIC</th>
<th>2022 HIC</th>
<th>2023 HIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC</td>
<td>584</td>
<td>611</td>
<td>679</td>
<td>746</td>
</tr>
</tbody>
</table>

### Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

<table>
<thead>
<tr>
<th>Households with Children</th>
<th>2020 HIC</th>
<th>2021 HIC</th>
<th>2022 HIC</th>
<th>2023 HIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>RRH units available to serve families on the HIC</td>
<td>62</td>
<td>51</td>
<td>35</td>
<td>66</td>
</tr>
</tbody>
</table>

### Rapid Rehousing Beds Dedicated to All Persons

<table>
<thead>
<tr>
<th>All Household Types</th>
<th>2020 HIC</th>
<th>2021 HIC</th>
<th>2022 HIC</th>
<th>2023 HIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>RRH beds available to serve all populations on the HIC</td>
<td>231</td>
<td>243</td>
<td>165</td>
<td>294</td>
</tr>
</tbody>
</table>
Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October 1, 2012.

**Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.**

**Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.**

a. This measure is of the client’s entry, exit, and bed night dates strictly as entered in the HMIS system.

<table>
<thead>
<tr>
<th></th>
<th>Universe (Persons)</th>
<th>Average LOT Homeless (bed nights)</th>
<th>Median LOT Homeless (bed nights)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Submitted FY 2021</td>
<td>FY 2022</td>
<td>Submitted FY 2021</td>
</tr>
<tr>
<td>1.1 Persons in ES and SH</td>
<td>1314</td>
<td>1659</td>
<td>235</td>
</tr>
<tr>
<td>1.2 Persons in ES, SH, and TH</td>
<td>1393</td>
<td>1754</td>
<td>234</td>
</tr>
</tbody>
</table>

b. Due to changes in DS Element 3.17, metrics for measure (b) will not be reported in 2016.

This measure includes data from each client’s “Length of Time on Street, in an Emergency Shelter, or Safe Haven” (Data Standards element 3.17) response and prepends this answer to the client’s entry date effectively extending the client’s entry date backward in time. This “adjusted entry date” is then used in the calculations just as if it were the client’s actual entry date.

NOTE: Due to the data collection period for this year’s submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year’s submission.
### FY2022 - Performance Measurement Module (Sys PM)

<table>
<thead>
<tr>
<th>Description</th>
<th>Universe (Persons)</th>
<th>Average LOT Homeless (bed nights)</th>
<th>Median LOT Homeless (bed nights)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Submitted FY 2021</td>
<td>FY 2022</td>
<td>Submitted FY 2021</td>
</tr>
<tr>
<td>1.1 Persons in ES, SH, and PH (prior to &quot;housing move in&quot;)</td>
<td>1737</td>
<td>2209</td>
<td>955</td>
</tr>
<tr>
<td>1.2 Persons in ES, SH, TH, and PH (prior to &quot;housing move in&quot;)</td>
<td>1814</td>
<td>2307</td>
<td>940</td>
</tr>
</tbody>
</table>
Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

<table>
<thead>
<tr>
<th>Exit was from</th>
<th>Total # of Persons who Exit a Permanent Housing Destination (2 Years Prior)</th>
<th>Return to Homelessness in Less than 6 Months</th>
<th>Return to Homelessness from 6 to 12 Months</th>
<th>Return to Homelessness from 13 to 24 Months</th>
<th>Number of Returns in 2 Years</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>FY 2022</td>
<td>% of Returns</td>
<td>FY 2022</td>
<td>% of Returns</td>
<td>FY 2022</td>
</tr>
<tr>
<td>Exit was from SO</td>
<td>122</td>
<td>8 7%</td>
<td>10 8%</td>
<td>5 4%</td>
<td>23 19%</td>
</tr>
<tr>
<td>Exit was from ES</td>
<td>261</td>
<td>34 13%</td>
<td>9 3%</td>
<td>17 7%</td>
<td>60 23%</td>
</tr>
<tr>
<td>Exit was from TH</td>
<td>27</td>
<td>1 4%</td>
<td>2 7%</td>
<td>2 7%</td>
<td>5 19%</td>
</tr>
<tr>
<td>Exit was from SH</td>
<td>0</td>
<td>0 0%</td>
<td>0 0%</td>
<td>0 0%</td>
<td>0 0%</td>
</tr>
<tr>
<td>Exit was from PH</td>
<td>529</td>
<td>18 3%</td>
<td>7 1%</td>
<td>50 9%</td>
<td>75 14%</td>
</tr>
<tr>
<td>TOTAL Returns to Homelessness</td>
<td>939</td>
<td>61 6%</td>
<td>28 3%</td>
<td>74 8%</td>
<td>163 17%</td>
</tr>
</tbody>
</table>

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts
This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

<table>
<thead>
<tr>
<th></th>
<th>January 2021 PIT Count</th>
<th>January 2022 PIT Count</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Total PIT Count of sheltered and unsheltered persons</td>
<td>3093</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency Shelter Total</td>
<td>709</td>
<td>632</td>
<td>-77</td>
</tr>
<tr>
<td>Safe Haven Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Transitional Housing Total</td>
<td>111</td>
<td>132</td>
<td>21</td>
</tr>
<tr>
<td>Total Sheltered Count</td>
<td>820</td>
<td>764</td>
<td>-56</td>
</tr>
<tr>
<td>Unsheltered Count</td>
<td></td>
<td>2329</td>
<td></td>
</tr>
</tbody>
</table>

**Metric 3.2 – Change in Annual Counts**

This measures the change in annual counts of sheltered homeless persons in HMIS.

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2021</th>
<th>FY 2022</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Unduplicated Total sheltered homeless persons</td>
<td>1415</td>
<td>1774</td>
<td>359</td>
</tr>
<tr>
<td>Emergency Shelter Total</td>
<td>1336</td>
<td>1678</td>
<td>342</td>
</tr>
<tr>
<td>Safe Haven Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Transitional Housing Total</td>
<td>83</td>
<td>126</td>
<td>43</td>
</tr>
</tbody>
</table>
Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2021</th>
<th>FY 2022</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults (system stayers)</td>
<td>566</td>
<td>555</td>
<td>-11</td>
</tr>
<tr>
<td>Number of adults with increased earned income</td>
<td>46</td>
<td>48</td>
<td>2</td>
</tr>
<tr>
<td>Percentage of adults who increased earned income</td>
<td>8%</td>
<td>9%</td>
<td>1%</td>
</tr>
</tbody>
</table>

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2021</th>
<th>FY 2022</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults (system stayers)</td>
<td>566</td>
<td>555</td>
<td>-11</td>
</tr>
<tr>
<td>Number of adults with increased non-employment cash income</td>
<td>246</td>
<td>176</td>
<td>-70</td>
</tr>
<tr>
<td>Percentage of adults who increased non-employment cash income</td>
<td>43%</td>
<td>32%</td>
<td>-11%</td>
</tr>
</tbody>
</table>

Metric 4.3 – Change in total income for adult system stayers during the reporting period

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2021</th>
<th>FY 2022</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults (system stayers)</td>
<td>566</td>
<td>555</td>
<td>-11</td>
</tr>
<tr>
<td>Number of adults with increased total income</td>
<td>271</td>
<td>209</td>
<td>-62</td>
</tr>
<tr>
<td>Percentage of adults who increased total income</td>
<td>48%</td>
<td>38%</td>
<td>-10%</td>
</tr>
</tbody>
</table>
Metric 4.4 – Change in earned income for adult system leavers

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2021</th>
<th>FY 2022</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults who exited (system leavers)</td>
<td>54</td>
<td>95</td>
<td>41</td>
</tr>
<tr>
<td>Number of adults who exited with increased earned income</td>
<td>8</td>
<td>12</td>
<td>4</td>
</tr>
<tr>
<td>Percentage of adults who increased earned income</td>
<td>15%</td>
<td>13%</td>
<td>-2%</td>
</tr>
</tbody>
</table>

Metric 4.5 – Change in non-employment cash income for adult system leavers

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2021</th>
<th>FY 2022</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults who exited (system leavers)</td>
<td>54</td>
<td>95</td>
<td>41</td>
</tr>
<tr>
<td>Number of adults who exited with increased non-employment cash income</td>
<td>25</td>
<td>42</td>
<td>17</td>
</tr>
<tr>
<td>Percentage of adults who increased non-employment cash income</td>
<td>46%</td>
<td>44%</td>
<td>-2%</td>
</tr>
</tbody>
</table>

Metric 4.6 – Change in total income for adult system leavers

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2021</th>
<th>FY 2022</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults who exited (system leavers)</td>
<td>54</td>
<td>95</td>
<td>41</td>
</tr>
<tr>
<td>Number of adults who exited with increased total income</td>
<td>30</td>
<td>48</td>
<td>18</td>
</tr>
<tr>
<td>Percentage of adults who increased total income</td>
<td>56%</td>
<td>51%</td>
<td>-5%</td>
</tr>
</tbody>
</table>
Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2021</th>
<th>FY 2022</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Person with entries into ES, SH or TH during the reporting period.</td>
<td>1027</td>
<td>1347</td>
<td>320</td>
</tr>
<tr>
<td>Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.</td>
<td>406</td>
<td>338</td>
<td>-68</td>
</tr>
<tr>
<td>Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)</td>
<td>621</td>
<td>1009</td>
<td>388</td>
</tr>
</tbody>
</table>

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2021</th>
<th>FY 2022</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Person with entries into ES, SH, TH or PH during the reporting period.</td>
<td>1656</td>
<td>2317</td>
<td>661</td>
</tr>
<tr>
<td>Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.</td>
<td>591</td>
<td>680</td>
<td>89</td>
</tr>
<tr>
<td>Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)</td>
<td>1065</td>
<td>1637</td>
<td>572</td>
</tr>
</tbody>
</table>
Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD’s Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in FY2022 (Oct 1, 2021 - Sept 30, 2022) reporting period.

Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

Metric 7a.1 – Change in exits to permanent housing destinations

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2021</th>
<th>FY 2022</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Persons who exit Street Outreach</td>
<td>3262</td>
<td>3355</td>
<td>93</td>
</tr>
<tr>
<td>Of persons above, those who exited to temporary &amp; some institutional destinations</td>
<td>501</td>
<td>842</td>
<td>341</td>
</tr>
<tr>
<td>Of the persons above, those who exited to permanent housing destinations</td>
<td>267</td>
<td>151</td>
<td>-116</td>
</tr>
<tr>
<td>% Successful exits</td>
<td>24%</td>
<td>30%</td>
<td>6%</td>
</tr>
</tbody>
</table>

Metric 7b.1 – Change in exits to permanent housing destinations
2023 HDX Competition Report
FY2022 - Performance Measurement Module (Sys PM)

<table>
<thead>
<tr>
<th>Metric 7b.2 – Change in exit to or retention of permanent housing</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing</th>
<th><strong>Submitted FY 2021</strong></th>
<th><strong>FY 2022</strong></th>
<th><strong>Difference</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Of the persons above, those who exited to permanent housing destinations</td>
<td>1232</td>
<td>1516</td>
<td>284</td>
</tr>
<tr>
<td>% Successful exits</td>
<td>47%</td>
<td>40%</td>
<td>-7%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Universe: Persons in all PH projects except PH-RRH</th>
<th><strong>Submitted FY 2021</strong></th>
<th><strong>FY 2022</strong></th>
<th><strong>Difference</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations</td>
<td>1210</td>
<td>1460</td>
<td>250</td>
</tr>
<tr>
<td>% Successful exits/retention</td>
<td>98%</td>
<td>98%</td>
<td>0%</td>
</tr>
</tbody>
</table>

7/28/2023 10:18:47 PM
## 2023 HDX Competition Report
### FY2022 - SysPM Data Quality
#### CA-505 - Richmond/Contra Costa County CoC

<table>
<thead>
<tr>
<th></th>
<th>All ES, SH</th>
<th>All TH</th>
<th>All PSH, OPH</th>
<th>All RRH</th>
<th>All Street Outreach</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Number of non-DV Beds on HIC</td>
<td>508</td>
<td>740</td>
<td>699</td>
<td>167</td>
<td>157</td>
</tr>
<tr>
<td>2. Number of HMIS Beds</td>
<td>385</td>
<td>740</td>
<td>620</td>
<td>45</td>
<td>51</td>
</tr>
<tr>
<td>3. HMIS Participation Rate from HIC (%)</td>
<td>75.79</td>
<td>100.00</td>
<td>88.70</td>
<td>26.95</td>
<td>32.48</td>
</tr>
<tr>
<td>4. Unduplicated Persons Served (HMIS)</td>
<td>2267</td>
<td>1340</td>
<td>1678</td>
<td>116</td>
<td>83</td>
</tr>
<tr>
<td>5. Total Leavers (HMIS)</td>
<td>1610</td>
<td>821</td>
<td>1224</td>
<td>75</td>
<td>38</td>
</tr>
<tr>
<td>6. Destination of Don't Know, Refused, or Missing (HMIS)</td>
<td>771</td>
<td>158</td>
<td>183</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>7. Destination Error Rate (%)</td>
<td>47.89</td>
<td>19.24</td>
<td>14.95</td>
<td>8.00</td>
<td>15.79</td>
</tr>
</tbody>
</table>
2023 HDX Competition Report

FY2022 - SysPM Data Quality
# 2023 HDX Competition Report

**Submission and Count Dates for CA-505 - Richmond/Contra Costa County CoC**

## Date of PIT Count

| Date CoC Conducted 2023 PIT Count | 1/24/2023 |

## Report Submission Date in HDX

<table>
<thead>
<tr>
<th>Submitted On</th>
<th>Met Deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/28/2023</td>
<td>Yes</td>
</tr>
<tr>
<td>4/28/2023</td>
<td>Yes</td>
</tr>
<tr>
<td>2/27/2023</td>
<td>Yes</td>
</tr>
</tbody>
</table>
FY2023 COC CONSOLIDATED APPLICATION ATTACHMENT: Housing Leveraging Commitments (3A-1)

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August 4, 2022

Deanne Pearn, Executive Director
Contra Costa Interfaith Housing (DBA Hope Solutions)
399 Taylor Blvd., #115
Pleasant Hill, CA 94523

Subject: Project Based Voucher (PBV) Program
Hope Village
2100 Tice Valley Blvd.
Walnut Creek, CA 94595

Dear Ms. Pearn:

Thank you for your application for Project-Based Voucher (PBV) assistance for your Hope Village located at 2100 Tice Valley Blvd., Walnut Creek, CA. We received 17 applications in response to the Request for Proposals (RFP) and the demand was much greater than the available units. Accordingly, we were not able to award the requested units for most projects. After review of your application and an on-site review of the property site and neighborhood, the Housing Authority of the County of Contra Costa (HACCC) is pleased to inform you that funding for six (6) units under the Project-Based Voucher Program has been reserved for the above-referenced project.

These funds will be made available through the HACCC voucher budget authority authorized by the U.S. Department of Housing and Urban Development (HUD). The initial term of the Housing Assistance Payments Contract will be 20 years with an extension of an additional term of 20 years upon expiration of the initial term.

This reservation is subject to all applicable HUD requirements and approval by HACCC’s Board of Commissioners. In addition, please note that final approval is conditioned upon the completion of the preliminary and final analyses once all funding has been secured. We have completed the Site and Neighborhood Review. Pursuant to 24 CFR 983.58, an Environmental Impact Review and proper documentation will be required to be completed and documentation presented to HACCC. In addition, since your project is proposed to be partially assisted by Project-Based Vouchers, HUD will need to complete a Subsidy Layering Review and approve your initial rents for your project.

Prior to execution of the Housing Assistance Payments (HAP) Contract, a final rent appraisal will be conducted to determine the HAP Contract rents. In no case can the rents exceed 110 percent of
the HUD-published Fair Market Rents. However, if the rents end up being lower than the rents approved in the Agreement to enter into Housing Assistance Payments Contract (AHAP), they will be reduced to the rent-reasonably determined rents.

Moreover, it is important that you **not** begin any construction work prior to executing an AHAP with this Agency which cannot be executed until the subsidy layering review and environmental clearances have been completed.

This project will be subject to the accessibility requirements outlined in Section 504 of the Rehabilitation Act of 1973 with amendments, the Americans with Disabilities Act of 1990 and Uniform Federal Accessibility Standards, including, but not limited to ensuring that five percent (5%) of the assisted units must be physically accessible, **plus** an additional two percent (2%) of the assisted units must be accessible for the visual and hearing impaired. Moreover, units located along accessible paths must meet adaptability criteria pursuant to the Acts indicated above. For your project that means that 1 units will need to be physically accessible and 1 unit will need to be accessible for hearing and vision impairments.

We look forward to working with you on this project. If you have any questions about this process, please do not hesitate to contact Tony Ucciferri, Special Assistant to the Executive Director, at (925) 957-8055 or at tucciferri@contracostahousing.org by email.

Sincerely,

Joseph Villarreal
Executive Director

Cc: Tony Ucciferri, Special Assistant
# FY2023 COC CONSOLIDATED APPLICATION ATTACHMENT: Healthcare Formal Agreements (3A-2)

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September 21, 2023

Kimberly Nash
U.S. Department of Housing and Urban Development
Office of Community Planning and Development
San Francisco Regional Office
One Sansome Street, Suite 1200
San Francisco, CA 94104-4430

PROJECT NAME: ACCESS Expansion
GRANT TERM: 2/01/24 - 1/31/25

Dear Ms. Nash:

Contra Costa Health, Housing and Homeless Services (H3) is pleased to support Hope Solutions in its application for the project, ACCESS Expansion, in the U.S. Department of Housing & Urban Development's grant competition.

Blue Cross of California, Housing and Homeless Incentive Program (HHIP) is making investments to community partners, such as H3 to build partnerships and address housing and homelessness among Medi-Cal members.

Contra Costa Health’s mission, in partnership with consumers, families, staff, and community-based agencies, is to provide welcoming, integrated services for mental health, substance abuse, homelessness, and other needs that promote wellness, recovery, and resiliency while respecting the complexity and diversity of the people we serve. Contra Costa Health has created a system of care for adults, older adults, children, adolescents, and families that include:

- Mental health wellness and prevention planning, outpatient therapy, psychiatric and medication assessments, case management, crisis intervention;
- Outpatient substance use disorder treatment, intensive outpatient treatment, medication assisted treatment, education, prevention;
- Outpatient primary health care services;
- Information and referral services, case management, housing case management, direct financial assistance; and
- Outreach services to encampments
In addition to the above services, as Contra Costa Health (CCH) is a primary care provider, primary health care services may be captured as in-kind match.

Assuming CCH continues to provide the above services, CCH will provide a comprehensive range of behavioral health, housing supports, and primary health care services funded by state and local government dollars, other non-federal sources, and allowable federal sources to eligible participants in the ACCESS Expansion project.

Project eligibility for program participants will be based on CoC Program fair housing requirements and will not be restricted by CCH. In addition to in-kind services, at least $189,000 will be provided as cash match to the ACCESS Expansion project for the grant term.

Sincerely,

Christy Saxton, MS  
Health, Housing and Homeless Services Director  
Contra Costa Health
August 15, 2023

Kimberly Nash  
U.S. Department of Housing and Urban Development  
Office of Community Planning and Development  
San Francisco Regional Office  
One Sansome Street, Suite 1200  
San Francisco, CA 94104-4430

PROJECT NAME: **High Utilizers of Multiple Systems – Project-Based**

Dear Ms. Nash:

Contra Costa Health is eager to support the **High Utilizers of Multiple Systems – Project-Based** program in its application for the U.S. Department of Housing & Urban Development’s CoC Program grants.

Contra Costa Health, in partnership with consumers, families, staff, and community-based organizations, works to provide welcoming, integrated primary healthcare, mental health, substance abuse, and homelessness services that promote wellness, recovery, and resiliency while respecting the complexity and diversity of the people we serve. Our mission is to care for and improve the health of all people in Contra Costa County with special attention to those who are most vulnerable to health problems. We have created a system of care for adults, older adults, children, adolescents, and families that include:

- mental health wellness and prevention planning, outpatient therapy, psychiatric and medication assessments, case management, crisis intervention;
- outpatient substance use disorder treatment, intensive outpatient treatment, medication assisted treatment, education, prevention;
- outpatient primary health care services;
- information and referral services, case management, housing case management, direct financial assistance; and
- outreach services to encampments.

Contra Costa Health will provide a comprehensive range of behavioral health, housing supports, and primary health care services funded by state and local government dollars, other non-federal sources, and allowable federal sources to eligible participants in the **High Utilizers of Multiple Systems** -
Project-Based program. Project eligibility for program participants in the new PH-PSH project will be based on CoC Program fair housing requirements and will not be restricted by the health care service provider. Eligible CoC Program costs outlined in Subpart D of the interim rule, Section 578.73(b), may also be provided as cash match. At least $294,473 in services as described above will be provided as match to the project.

Sincerely,

Lavonna Martin, MPH, MPA
Deputy Director of Contra Costa Health