

## 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 2022 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2022 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 2022 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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

**1A-1. CoC Name and Number:** CA-502 - Oakland, Berkeley/Alameda County CoC

**1A-2. Collaborative Applicant Name:** Alameda County

**1A-3. CoC Designation:** CA

**1A-4. HMIS Lead:** Alameda County

## 1B. Coordination and Engagement–Inclusive Structure and Participation

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

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<b>1B-1.</b>	<b>Inclusive Structure and Participation–Participation in Coordinated Entry.</b>	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.p., and VII.B.1.r.	
	In the chart below for the period from May 1, 2021 to April 30, 2022:	
	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:	

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing CoC Board Members	Participated in CoC’s Coordinated Entry System
1.	Affordable Housing Developer(s)	Yes	Yes	Yes
2.	Agencies serving survivors of human trafficking	Yes	Yes	Yes
3.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
4.	Disability Advocates	Yes	Yes	Yes
5.	Disability Service Organizations	Yes	Yes	Yes
6.	EMS/Crisis Response Team(s)	Yes	Yes	Yes
7.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
8.	Hospital(s)	Yes	Yes	Yes
9.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
10.	Law Enforcement	Yes	Yes	Yes
11.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	Yes
12.	LGBTQ+ Service Organizations	Yes	Yes	Yes
13.	Local Government Staff/Officials	Yes	Yes	Yes
14.	Local Jail(s)	Yes	Yes	Yes
15.	Mental Health Service Organizations	Yes	Yes	Yes
16.	Mental Illness Advocates	Yes	Yes	Yes

17.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
18.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
19.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
20.	Other homeless subpopulation advocates	Yes	Yes	Yes
21.	Public Housing Authorities	Yes	Yes	Yes
22.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
23.	State Domestic Violence Coalition	No	No	No
24.	State Sexual Assault Coalition	No	No	No
25.	Street Outreach Team(s)	Yes	Yes	Yes
26.	Substance Abuse Advocates	Yes	Yes	Yes
27.	Substance Abuse Service Organizations	Yes	Yes	Yes
28.	Victim Service Providers	Yes	Yes	Yes
29.	Domestic Violence Advocates	Yes	Yes	Yes
30.	Other Victim Service Organizations	Yes	Yes	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.	County Public Child Welfare Agency	Yes	Yes	Yes
35.	Healthcare Organization	Yes	Yes	Yes

1B-2.	Open Invitation for New Members.	
	NOFO Section VII.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 with individuals with disabilities, including the availability of accessible electronic formats;
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. INVITE PROCESS: CoC membership is open to any individual interested in and committed to the collective impact initiative to end homelessness in Alameda County. Individuals join via a brief online application prominently linked on the CoC’s website. New members are solicited at two annual community meetings, both open to the public. Partners who serve underrepresented communities extend invitations to their clients. Partners that provide services for people with lived experience are asked to promote the annual community meetings by posting flyers in areas where clients are likely to see the invitation.
2. ACCESSIBILITY: The CoC communicates via email and website postings, both accessible electronic formats. All invitations are available online and through email, available in large print formats, compatible with assistive technology, and translated in languages other than English upon request. CoC meetings currently take place exclusively via Zoom which incorporates a wide range of accessibility features including closed captioning, recording and use with assistive technology. Any announcements made in meetings are also accessible.
3. INVITE CULTURALLY SPECIFIC COMMUNITIES: In Feb. 2022, a new CoC Governance Charter was adopted that designates that all boards and committees include 1/3 individuals with lived experience of homelessness and reflect the racial demographics of the people served by our homelessness response system. The racial diversity metric for our boards, committees, and workgroups will be set by the racial demographics reflected in our annual Point-In-Time count. A Racial Equity Workgroup has been created as part of this new charter to help ensure that racial equity is centered across the homelessness response system and that racially disparate outcomes around homelessness and housing are addressed and eliminated. The committee will advise and hold accountable all other boards, committees, and workgroups, including the Leadership Board on racial equity goals, metrics, and outcomes. In addition, in the recruitment process for the new Leadership Board, many BIPOC led and BIPOC serving organizations were outreached to directly to encourage participation in the Leadership Board. For the NOFO processes this year, we also reached out to many BIPOC led/BIPOC serving/LGBTQ+ serving organizations to encourage their participation in a Beginner NOFO session to help educate and prepare organizations that had not applied for HUD funding before.

1B-3.	CoC’s Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.	
	NOFO Section VII.B.1.a.(3)	
	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; and	
3.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.	

(limit 2,500 characters)

1. SOLICIT/CONSIDER OPINION FROM ORGS: The CoC Leadership Board and participating community members include local governments, LGBTQ+/TAY/VETERAN/DISABILITY ADVOCATES, CBOs, FBOs and more. Opinions are solicited via public meetings, focus groups, committees, online surveys, email outreach, and social media. Invitations, agendas with Zoom links, and minutes are posted on the EveryOne Home website for: Community Meetings, HUD CoC, Leadership Board, HMIS Oversight, Results-based Accountability, and System Coordination Committees. All meetings are open to the public and welcome public comment. Announcements of upcoming meetings are shared through Constant Contact to a 4,000+ person list of citizens, providers, agency staff, and elected officials to ensure the inclusion of all communities and constituents reflected our homeless population.

2. COMMUNICATE INFORMATION AT PUBLIC MEETINGS: Two CoC-wide virtual community meetings with 80+ attendees were held between 07/2021 and 6/2022. Those meetings included a platform to share and receive feedback on state funding priorities, addressing homelessness in vulnerable and underserved populations, and the CoC governance restructuring plan.

3. CONSIDERS INFORMATION FROM PUBLIC MEETINGS: The Home Together 2026 Community Plan is a 5-year strategic initiative which centers racial equity and identifies the strategies, activities and resources needed to dramatically reduce homelessness in Alameda County. The Plan details specific strategies and action steps informed by an extensive community input process co-led by the CoC and the County that included system leaders, homeless program participants, service providers and partners in the homelessness response system, and people with lived experience. Public input led to significant changes included in the final report, including adding new emergency shelter/crisis housing resources in light of the significant increase in unsheltered homelessness in the County. In addition, CoC Committee meetings are often where improvements and approaches to preventing and ending homelessness are generated and discussed. A particular example includes the work of the Results Based Accountability Committee soliciting feedback from providers and participants regarding how well the coordinated entry system has been working and what are the changes the community needs to see in order for a more fair, equitable, efficient and effective coordinated entry process.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
	NOFO Section VII.B.1.a.(4)	
	Describe in the field below how your CoC notified the public:	
1.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;	
2.	about how project applicants must submit their project applications—the process;	
3.	about how your CoC would determine which project applications it would submit to HUD for funding; and	
4.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.	

(limit 2,500 characters)

1. **COC CONSIDER NEW AGENCIES:** EveryOne Home broadly advertised the availability of funding for new projects through the 2022 CoC competition and explicitly encouraged organizations not currently receiving funding to apply. Outreach emails were sent to 4,526 addresses from a Constant Contact database that includes any interested person or organization, not just CoC membership. Information was also publicly posted on the CoC's website. The 2022 New Projects Local Application Instructions explicitly state that eligible applicants include non-CoC funded projects. Attendees at the Bidder's Conference included both CoC and non-CoC funded organizations, and CoC staff provided detailed information to all potential applicants on the local application process, HUD CoC requirements, and eligible project types. The CoC also provided a separate "CoC 101" Orientation session for potential new applicants and an E-Snaps orientation session; both of which were attended by organizations not previously funded. The CoC offered individualized 1:1 TA for any interested applicant.
2. **SUBMITTING APPS:** The process for submitting applications was publicly posted on the CoC's website, announced via email to 4,526 addresses, and explained during a virtual (Zoom) bidder's conference. Applicants were instructed to complete an application form plus attachments for rating and ranking in the local process, as well as completing their Project Applications in E-Snaps. Technical assistance was available via email, telephone and one-on-one Zoom meetings to assist with any issues that arose during the application process.
3. **REVIEW PROCESS:** The process for evaluating and scoring applications and selecting projects to include on the Project Priority List was publicly posted on the CoC's website, announced via email to 4,526 addresses and explained during a virtual (Zoom) bidder's conference. All projects were scored using the same set of criteria. All applications for new funding must meet threshold requirements and are scored based on alignment with local priorities, track record of performance in comparable projects, budget and cost effectiveness, and applicant capacity. Applicants who have not previously received CoC or other federal funding were encouraged to either apply on their own, or partner with existing grantees to strengthen their proposal.
4. **ACCESSIBLE COMMUNICATIONS:** All communications are made in accessible electronic formats via email and posting online.

## 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:

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  - PHA Crosswalk; and
  - Frequently Asked Questions

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

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	No
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	



18.		
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section VII.B.1.b.	

Describe in the field below how your CoC:	
1.	consulted with ESG Program recipients in planning and allocating ESG and ESG-CV 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 within your CoC's geographic area so it could be addressed in Consolidated Plan update.

**(limit 2,500 characters)**

1. COC CONSULT WITH ESG RECIPIENTS: ESG recipients serve on the CoC Board, which meets monthly, and establishes funding priorities for use of ESG and CoC funds. All Con Plan jurisdictions and ESG recipients participate actively on Committees including the CoC Board, System Coordination, and Results Based Accountability.
2. COC EVALUATES ESG PERFORMANCE: Recipients utilize HMIS performance data to evaluate ESG funded activities and the scoring of sub-recipient applications. The CoC provides HIC, PIT and performance data to all the Con Plan jurisdictions: Alameda, Berkeley, Hayward, Fremont, Livermore, Oakland, Pleasanton, San Leandro, Union City and the Urban County.
3. PROVIDE PIT/HIC IN CONSOLIDATED PLAN JURISDICTIONS: New this year in 2022, all 14 cities and the Unincorporated County received a specific Point in Time Count infographic report that included high level data regarding the sheltered and unsheltered count in May of 2022 so jurisdictions could receive their data much earlier to be able to make more informed decisions around planning and resources. In addition, a data dashboard was released at this time that provided more detailed information for the community regarding the Point in Time Count data.
4. INFO TO CONSOLIDATED PLAN JURISDICTIONS TO BE ADDRESSED: CoC and ESG recipient staff meet annually to review ESG allocation and local program policies to ensure they align with CoC priorities. Currently, ESG recipients align funding with the CoC's plan and Coordinated Entry by supporting shelter and rapid rehousing slots of chronically homeless and high need individuals and families. CoC staff drafts and/or reviews Consolidated Plan updates and annual reports, ensuring use of data and alignment with CoC priorities. CoC Staff also serves on ESG allocation committees as needed.

1C-3.	Ensuring Families are not Separated.	
	NOFO Section VII.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:
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1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
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.	Yes
5.	Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers.	No
6.	Other. (limit 150 characters)	
	No in-person trainings were conducted but virtual trainings were conducted to ensure compliance with shelter standards.	Yes

1C-4.	CoC Collaboration Related to Children and Youth—SEAs, LEAs, School Districts.	
	NOFO Section VII.B.1.d.	

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

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	Yes
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

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

FORMAL PARTNERSHIPS W/ LEA: Alameda County Office of Education (ACOE) McKinney Vento worked with the CoC and local liaisons in 18 school districts and charter schools via formal partnerships. Liaisons coordinated services to ensure that homeless children and youth enrolled in school and have the opportunity to succeed academically. ACOE worked closely with the CoC to improve the method of counting unsheltered families in the 2022 PIT Count. ACOE identified 7 districts serving unsheltered families and had their McKinney Vento liaisons reach out to each family to identify their location on the day of the count.

FORMAL PARTNERSHIPS W/ SCHOOL DISTRICTS: Two of the Access Points in Alameda County's CE System, North County Housing Resource Center and Oakland Housing Resource Center (covering Berkeley and Emeryville) work directly with school district McKinney Vento liaisons to coordinate care and services for families with children receiving Housing Crisis services. In San Leandro, Alameda and Oakland, McKinney Vento liaisons come to shelters and sign children and youth up for school. Oakland Head Start wrote a grant to serve the children in shelters with a mobile van classroom. In Alameda, the staff at Alameda Family Services prioritizes the children at the Midway Shelter for their Head Start program and comes to the shelter to enroll them.

1C-4b.	Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services.	
	NOFO Section VII.B.1.d.	

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

**(limit 2,500 characters)**

It is CoC policy that school-aged children are enrolled within 5 days of program entry. Districts have procedures in place to facilitate rapid enrollment and stays to the end of a semester when a family relocates. Staff from CoC programs assess educational needs at intake, inform families of educational services for which they are eligible and provide advocacy with school districts to ensure desired services are accessed. Verification letters for school free lunch programs, school site resources (i.e. tutoring and counseling services) and any other services needed to protect education rights of the child are provided as needed. Family and youth serving agencies in the CoC attend quarterly provider meetings for several districts to ensure children and youth access services and programs that best meet their needs, such as literacy skills, earning their GED, or complete certificates at vocational schools or community colleges. In Sept. 2019, ACOE approved an updated policy on the education of homeless children and youth to meet best practices and comply with state legislation requiring it to extend protections provided to foster care students to homeless youth.

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

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years	No	Yes
2.	Child Care and Development Fund	No	No
3.	Early Childhood Providers	No	No
4.	Early Head Start	No	No
5.	Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	No
6.	Head Start	No	Yes
7.	Healthy Start	No	No
8.	Public Pre-K	No	No
9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.	Maternal and Child Health	No	Yes

1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Collaborating with Victim Service Providers.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC regularly collaborates with organizations who help provide housing and services to survivors of domestic violence, dating violence, sexual assault, and stalking to:

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

(limit 2,500 characters)

1. UPDATE CoC WIDE POLICIES: DV organizations participate actively in CoC governance committees to ensure survivors are considered in every CoC-wide policy. DV organizations participate in the CoC Systems Coordination Committee meetings to identify where the CoC’s crisis response system needs to be more survivor-centered. In an example of how this has impacted CoC-wide policies, the CoC has recognized the need for a new parallel Coordinated Entry System (CES) for survivors. The Alameda County Health Care Services Agency’s Office of Homeless Care and Coordination (OHCC), Building Futures for Women and Children (a DV housing and services organization), Family Violence Law Center, and Eden I&R 211 have created a plan to establish a parallel and connected Coordinated Entry System for survivors of domestic violence, sexual assault, and human trafficking in Alameda County so that they can better access needed support services, health care, and housing resources to begin to live a life free from abuse and homelessness. The plan has secured HUD CoC funding. In another example, a 2021 HUD-funded Emergency Housing Voucher program (part of the COVID-19 relief effort), included a partnership with victim services providers and a set-aside of 87 vouchers for survivors of violence. Voucher recipients will also receive tenancy sustaining support services, including coaching for independent living and community integration.

2. TRAUMA-INFORMED HOUSING AND SERVICES THAT CAN MEET THE NEEDS OF SURVIVORS: DV serving agencies meet monthly and sometimes more often to identify gaps and address areas of need within the CoC. More than 11 agencies are part of this collaborative. Based on guidance from DV organizations, CES triage questions are designed to determine if someone may be fleeing or attempting to flee domestic violence or human trafficking, or is a survivor of domestic violence or human trafficking. If so, DV resources are offered immediately. The new DV-CES will establish a small network of special designated Access Points for people fleeing domestic or gender-based violence so that they may receive specialty services designed with them in mind.

1C-5a.	Annual Training on Safety and Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	
	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. COC TRAINS PROGRAM STAFF: The CoC collaborates with providers of services for DV survivors such as the Family Violence Law Center and Building Futures to present trainings for homeless services providers that include: defining domestic violence, types of abuse, red flags, barriers faced by survivors trying to leave their abusive relationship, things to know when working with a domestic violence survivor, safety planning/tech safety, difference between safe houses and emergency shelters, domestic violence restraining order hearings, impact of domestic violence on kids, and more. In 2021, Building Futures hosted multiple trainings reaching a total of 380 CoC agency staff attendees.

2. COC TRAINS COORDINATED ENTRY STAFF: CoC staff provide annual training and best practices on trauma informed care and safety protocols for new staff. Coordinated Entry staff training and updates were informed based on feedback from survivor agencies about how clients were being served by and accessing CES. Family Violence Law Center held focus groups and informational sessions with all the homeless outreach teams and access point staff and street outreach teams received DV training to help them identify and serve survivors. Family Violence Law Center and Building Futures provide informal training to 211 call center staff and providers on safety practices. The new DV CES is informed by the expertise of DV serving agencies in the CoC. When the new DV CES is established, EIR will provide tailored training to their operators to ensure people fleeing violence reach staff who understand safety protocols and shelter and housing resources.

1C-5b.	Using De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
NOFO Section VII.B.1.e.		
Describe in the field below:		
1.	the de-identified aggregate data source(s) your CoC uses 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. DE-IDENTIFIED AGGREGATE DATA TO ADDRESS DV NEED: The CoC uses a number of data sources to assess community needs related to domestic violence, dating violence, sexual assault, and stalking, including the National Network to End Domestic Violence, the California Department of Justice, and the California Partnership to End Domestic Violence. Alameda County has seven providers that serve DV survivors, operate 24-hour hotlines, provide shelter and housing, and are required to have comparable databases. This data is analyzed to help determine where there are unmet needs for survivors of domestic violence, dating violence, sexual assault, and stalking. The CoC also uses PIT Count data to determine system-wide needs related to domestic violence. The new DV CES project that received HUD CoC funding in 2021 will provide more thorough and accurate data to improve DV services planning.

2. HOW DE-IDENTIFIED DATA IS USED TO EVALUATE/MEET NEEDS RELATED TO DV AND HOMELESSNESS: The CoC draws on these data sources to better understand system needs related to DV. For example, PIT data helped us determine how many Emergency Housing Vouchers to allocate for DV survivors. Our new DV CES project will create a network of specialized access points and data solutions to give DV survivors access to the same range of programs and services as all other applicants for services. Housing Problem Solving services delivered at these access points will be adapted to the safety needs of survivors.

1C-5c.	Communicating Emergency Transfer Plan to Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	
	Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:	
1.	the emergency transfer plan policies and procedures; and	
2.	the process for individuals and families to request an emergency transfer.	

(limit 2,500 characters)

1.HOW COC COMMUNICATES THE EMERGENCY TRANSFER PLAN POLICIES AND PROCEDURES: All Housing Authorities in Alameda County have Emergency Transfer Plan policies and procedures based on HUD’s model emergency transfer plan that allows a tenant who is a victim of DV to request an emergency transfer if they believe that there is a threat of imminent harm if they remain in the same unit. Other permanent supportive housing programs with site-based units (such as Shelter Plus Care) have transfer plans and support households to relocate when there is a threat of harm remaining in the same unit; this can include relocation to another site-based unit that will be safe or a transfer to a tenant-based subsidy. Participants in other types of CoC programs who feel unsafe in their current placement because of a DV issue may go through Coordinated Entry, which includes a safety assessment, to be relocated to a different placement.

2.THE PROCESS FOR INDIVIDUALS AND FAMILIES TO REQUEST AN EMERGENCY TRANSFER: The program participant/tenant must make a written request for an emergency transfer, and such information is kept confidential. If the provider has no units that are safe and available for the tenant to move into, they will assist the tenant in finding appropriate housing with another provider. If the tenant receives HCV assistance or a different type of tenant-based subsidy, the provider will assist tenant with a move to a safe unit using existing HCV assistance and make exceptions to program regulations restricting moves. EIR is the call center for the Coordinated Entry System (CES). EIR also maintains a comprehensive housing database with more than 77,000 units of rental housing, including all of Alameda County’s subsidized and affordable housing.

&nbsp;

1C-5d.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have access to all of the housing and services available within the CoC’s geographic area.

(limit 2,500 characters)



The CoC circulates information broadly about how people fleeing violence or currently experiencing homelessness can access Coordinated Entry System Access Points (211, housing resources, and Housing Resource Centers). Anyone who reaches out for assistance from a Coordinated Entry System Access Point is given a safety assessment, whereupon anyone identified as experiencing DV, dating violence, sexual assault or stalking is given the option to be served by a DV provider. Programs that specifically serve survivors of domestic and/or gender-based violence are not permitted to enter client data into HMIS. Because of this, the CoC has sought and received funding for a new DV specific Coordinated Entry System (CES) in which victim services organizations will use a comparable DV CES database and will participate in Coordinated Entry through dedicated Access Points. The DV CES will utilize separate and non-shared data collection and unique identifiers that protect participant privacy while allowing survivors enrolled in domestic violence programs access to the resources of the larger Coordinated Entry System. The DV CES databases will allow these dedicated Access Points to enter data and analyze data in a way that mirrors HMIS, including assessments and an assessment scoring processor. Data solutions will allow information entered into the non-HMIS databases to be integrated with other CE data (i.e., the housing queue) in a way that protects confidentiality while ensuring equitable access to resources simultaneously. In this way, the CoC will ensure that survivors have the same access to all of the housing and services available as other people experiencing homelessness while protecting confidentiality.

1C-5e.	Including Safety, Planning, and Confidentiality Protocols in Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC's coordinated entry includes:	
1.	safety protocols,
2.	planning protocols, and
3.	confidentiality protocols.

(limit 2,500 characters)

1. SAFETY PROTOCOLS: Safety Screening is completed as a primary step by all Access Points to identify any emergency health or safety needs that a household seeking assistance may have, and to make an immediate connection to the appropriate response, including police, medical, or domestic violence services. Persons fleeing domestic violence or seeking victim services who are not in need of immediate emergency services must be offered the option to seek housing assistance through the Housing Crisis Response System, through the County’s network of domestic violence or victim services organizations, or through both. For those wishing to be assisted through the domestic violence or victim services organizations, they must be immediately connected to a regional Domestic Violence hotline. Each regional DV hotline is available on a 24/7 basis. At times providers may also call individual organizations if the hotline does not yield the necessary resource. All Access Points complete safety screening as a first step when someone seeks services at an Access Point and training related to this is provided as part of the Coordinated Entry training series that is available online and on demand and required for Access Point staff.

2. PLANNING PROTOCOLS: Triage for Coordinated Entry includes questions designed to determine if someone may be a fleeing or attempting to flee domestic violence or human trafficking or is a survivor of the same. Anyone identified as a survivor is offered DV resources. If the person who is a survivor declines these resources, and continues to the next step in the workflow, which is a Housing Problem Solving conversation, safety considerations and any safety planning is addressed in the resolution plan.

3. CONFIDENTIALITY PROTOCOLS: Within the current CES, the contracted 211 provider identifies callers’ needs and routes callers to appropriate resources including homeless services and programs to support survivors of domestic violence (DV), human trafficking, and other gender-based violence. If a client accesses the system through CE, intake begins with an anonymous Safety Screening with built-in protocol to connect households to Victim Service Providers (VSP). Through a Housing Crisis Screening, households may choose how to access the system. All HMIS and other applicable privacy and security policies are extended to any data collection methods outside of HMIS as well as case conferencing.

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

1C-6a.	Anti-Discrimination Policy—Updating Policies—Assisting Providers—Evaluating Compliance—Addressing Noncompliance.	
	NOFO Section VII.B.1.f.	

Describe in the field below:

1.	whether your CoC updates its CoC-wide anti-discrimination policy, as necessary, based on stakeholder feedback;
2.	how your CoC assisted providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination;
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. **WHETHER CoC UPDATES ITS CoC-WIDE ANTI-DISCRIMINATION POLICY:** CoC written standards address non-discrimination and fair housing laws intended to ensure universal and equitable access to Coordinated Entry and the Homelessness Response System for all people experiencing homelessness in Alameda County regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual identity, or gender identity. The written standards must be approved by the CoC Standards, Compliance and Funding Committee, which monitors programmatic compliance with HUD and CoC-specific requirements. The standards are subject to revision based on stakeholder feedback, which may be submitted directly to the Committee or to the Office of Homeless Care and Coordination. The standards are reviewed and updated annually at a minimum.
2. **HOW CoC ASSISTED PROVIDERS IN DEVELOPING PROJECT-LEVEL ANTI-DISCRIMINATION POLICIES:** Per the 2017 Alameda County CoC LGBT Housing Access Anti-Discrimination Policy, all HUD-funded Homeless Assistance Programs, including but not limited to rental assistance to prevent homelessness, street outreach, emergency, transitional, rapid rehousing and permanent supportive housing, shall not discriminate based upon actual or perceived sexual orientation, actual or perceived gender identity, or marital status. Programs must determine eligibility for housing regardless of an individual sexual orientation or gender identity, grant equal access to programs or facilities consistent with a person's gender identity, and not require anatomical, documentary, physical, or medical evidence of gender identity. In addition, all HUD-funded Homeless Assistance Programs must take non-discriminatory steps to address privacy concerns based on actual or perceived LGBTQ+ status. In 2022, OHCC has offered a three-part training series to assist providers in developing culturally competent and non-discriminatory program design, staffing, and policies.
3. The CoC's anti-discrimination policies are included in the County's contracts with CoC funded programs. All programs contracted through the County are subject to review by the County's Compliance Office.
4. Instances of non-compliance with the CoC's anti-discrimination policies are pursued by the County's Compliance Office as part of the compliance process, with grievance policies required to be shared and described, and easily accessed.

1C-7.	<b>Public Housing Agencies within Your CoC's Geographic Area--New Admissions--General/Limited Preference--Moving On Strategy.</b>	
	NOFO Section VII.B.1.g.	

You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.

Enter information in the chart below for the two largest PHAs highlighted in gray on the FY 2021 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:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2021 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Housing Authority of Alameda County	39%	Yes-HCV	Yes
Oakland Housing Authority	31%	Yes-HCV	No

1C-7a.	<b>Written Policies on Homeless Admission Preferences with PHAs.</b>	
	NOFO Section VII.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)

**STEPS TO ADOPT HOMELESS PREFERENCE:** The two largest PHAs within the CoC’s geographic area, the Housing Authority of the County of Alameda (HACA) and Oakland Housing Authority (OHA), both have homeless admission preferences. HACA awards preference points for homeless individuals and families seeking Housing Choice Vouchers and Project Based Vouchers, has a set-aside of mainstream vouchers for individuals and families who are homeless. OHA has a homeless preference for the MTW Section 8 tenant-based voucher program waiting list, for mainstream program vouchers, and non-elderly disabled vouchers. Alameda County’s CoC partners coordinate closely with the PHAs. HACA and OHA work directly with Coordinated Entry for referrals to units with homeless preferences. County staff meet monthly with the OHA to review the pipeline for projects with homeless units, to consider potential projects for project-based vouchers, and to problem-solve projects with operating gaps. Additionally, the OHA has brought projects to the county to partner when a services commitment would allow the project to serve people who are homeless. OHA is an MTW authority and is able to prioritize people who are homeless for direct program referrals. County staff also collaborate closely with HACA, the county HA. There are regular meetings between the County and HACA leadership. HACA has partnered with the County to receive referrals through Coordinated Entry for a subset of vouchers that included a homeless preference. HACA has taken on a subsidy administration role for the county for large, countywide projects for housing assistance and flexible subsidies.

<b>1C-7b.</b>	<b>Moving On Strategy with Affordable Housing Providers.</b>	
	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:

1.	Multifamily assisted housing owners	No
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes
	Other (limit 150 characters)	
5.		

<b>1C-7c.</b>	<b>Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.</b>	
	NOFO Section VII.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?

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	No
3.	Housing Choice Voucher (HCV)	No
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	Yes
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	No
8.	Other Units from PHAs:	
	CoC, H4W, HCSA, MHSA, MTW Local Subsidy (Sponsor-based housing assistance program/OPRI), MTW Local Housing Assistance Payments (SROs), Project-based vouchers (NOVA Apartments/100% PSH)	Yes

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.	
	NOFO Section VII.B.1.g.	

1.	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)?	No
		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.	

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

<b>PHA</b>
Oakland Housing A...
Berkeley Housing ...
Housing Authority...

Alameda Housing A...

## **1C-7e.1. List of PHAs with MOUs**

**Name of PHA:** Oakland Housing Authority

## **1C-7e.1. List of PHAs with MOUs**

**Name of PHA:** Berkeley Housing Authority

## **1C-7e.1. List of PHAs with MOUs**

**Name of PHA:** Housing Authority of Alameda County

## **1C-7e.1. List of PHAs with MOUs**

**Name of PHA:** Alameda Housing Authority



## 1D. Coordination and Engagement Cont'd

1D-1.	Discharge Planning Coordination.	
	NOFO Section VII.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.

1. Foster Care	Yes
2. Health Care	Yes
3. Mental Health Care	Yes
4. Correctional Facilities	Yes

1D-2.	Housing First—Lowering Barriers to Entry.	
	NOFO Section VII.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 2022 CoC Program Competition.	34
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 2022 CoC Program Competition that have adopted the Housing First approach.	34
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 2022 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 VII.B.1.i.	

Describe in the field below:

1.	how your CoC evaluates every recipient—that checks Housing First on their Project Application—to determine if they are actually 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 the competition to ensure the projects are using a Housing First approach.

**(limit 2,500 characters)**

1.HOW CoC EVALUATES EVERY RECIPIENT DETERMINE IF THEY ARE USING A HOUSING FIRST APPROACH: The local application process requires that all applicants certify their compliance with Housing First principles as one of the threshold project requirements for renewals and a scored factor for new projects. Applicants are also required to attach copies of policies and procedures demonstrating they are actually implementing their projects in accordance with a Housing First approach. EveryOne Home (the CoC lead) reviews the documents to confirm they are aligned with Housing First principles. During the Bidder’s Conference and throughout the competition emphasis is placed on explaining the principles of Housing First and how to apply them. The CoC has also implemented policies to ensure that any CoC and ESG funded projects use a Housing First approach.

2.FACTORS AND PERFORMANCE INDICATORS CoC USES IN EVALUATION: All applicants must certify that the project operates in accordance with Housing First Principles, including: 1) participants are not screened out based on income, active/history of substance abuse, having a criminal record, or a history of domestic violence, and 2) are not terminated from the project for failure to participate in services, and 3) are prioritized for rapid placement and stabilization in permanent housing and offered needed supports so that returns to homelessness are avoided. For renewal applicants this is a threshold requirement and for new projects it is a scored factor. Renewal applicants must provide copies of policies and procedures documenting they are actually practicing what they certified; and new applicants must provide draft policies and procedures for the proposed program that document how they will implement the Housing First approach they have certified.

3.HOW CoC REGULARLY EVALUATES PROJECTS TO ENSURE THE PROJECTS ARE USING A HOUSING FIRST APPROACH: The Alameda County HCSA manages the Coordinated Entry System and insures it adheres to Housing First. CE then refers individuals to a wide array of housing providers, and regularly reviews and flags projects that deny referrals or are slow to fill vacancies. COVID has impacted the ability to do site visits to monitor Housing First principles, but the CoC intends to once it is safe to do so. Client files are reviewed annually to ensure that nobody is being terminated for lack of participation or in other ways that are not Housing First.

1D-3.	Street Outreach–Scope.	
	NOFO Section VII.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. **COC OUTREACH:** Outreach services in Alameda County are covered by countywide Health Care for the Homeless Street Health teams and supplemented by Coordinated Entry Access Points and by city-contracted outreach. These teams include social workers, navigators, and nurses to ensure they can connect people to appropriate services. They distribute resources and provide basic medical care at the sites where unsheltered people are living. They coordinate closely with Coordinated Entry in every geographic zone to connect people to crisis and housing assessment and prioritization.
2. **100% COVERAGE:** Outreach covers 100% of the CoC geographic area. Street Health teams are each assigned a geographic zone within the county where approximately 500 unsheltered individuals are living. There are 14 teams, covering 7,000 unsheltered people each month. The teams visit all areas of the county and keep records of all visits.
3. **FREQUENCY OF OUTREACH:** Outreach operates on varying schedules, including mornings, weekends and evenings. Call center operators and outreach workers speak multiple languages, have translation services, and TTY machines available to assist with access. Street Outreach is a priority area of expansion under the Home Together 2026 Community Plan.
4. **OUTREACH TAILORED TO HIGHEST RISK AND LEAST LIKELY TO REQUEST ASSISTANCE:** Outreach teams are trained to engage with individuals and families experiencing the highest vulnerabilities and obstacles to housing using a harm reduction and housing first approach. Many people in unsheltered situations like homeless encampments are reluctant to accept shelter because they have had bad experiences in shelters and/or because shelters have rules they cannot consent to (e.g., it would require them to part with a trusted partner or beloved pet, curfews that conflict with a job). It often takes a period of building trust before the person is willing to be linked to shelter or services. Outreach teams can link vulnerable individuals to low-barrier shelter opportunities such as Navigation Centers, Safe Parking or Community Cabins that may be more appealing because of their flexible policies. Such programs operate under the premise that getting off the streets should be as easy and accessible as possible.

<b>1D-4.</b>	<b>Strategies to Prevent Criminalization of Homelessness.</b>	
	NOFO Section VII.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:

		Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	No
2.	Engaged/educated law enforcement	Yes	No
3.	Engaged/educated local business leaders	Yes	No
4.	Implemented community wide plans	Yes	Yes
5.	Other:(limit 500 characters)		
	PSH subsidies for CH identified by law enforcement; Develop humane, consistent encampment response; Repeal/stop enforcement of criminalization laws	Yes	Yes

1D-5.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC).	
	NOFO Section VII.B.1.i.	

		2021	2022
	Enter the total number of RRH beds available to serve all populations as reported in the HIC—only enter bed data for projects that have an inventory type of “Current.”	768	1,550

1D-6.	Mainstream Benefits–CoC Annual Training of Project Staff.	
	NOFO Section VII.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:

	Resource	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	TANF–Temporary Assistance for Needy Families	Yes
4.	Substance Abuse Programs	Yes
5.	Employment Assistance Programs	Yes
6.	Other (limit 150 characters)	

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.	
	NOFO Section VII.B.1.m	

Describe in the field below how your CoC:

1.	systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC's geographic area;
2.	works with project staff to collaborate with healthcare organizations, including substance abuse treatment and mental health treatment, to assist program participants with receiving healthcare services; and
3.	works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

(limit 2,500 characters)

1.COMMUNICATE INFO ABOUT RESOURCES: Housing Navigators at Housing Resource Centers assist with mainstream benefits assessment and enrollment. The Alameda County Social Services Agency works in partnership with Behavioral Health Care Services (BHCS) to provide outreach, case management, disability advocacy, and housing navigation and assistance to General Assistance (GA) clients who are homeless and SSI eligible. The Housing and Disability Access Program (HDAP) seeks to ensure homeless GA clients with highest needs are provided timely services. The Office of Homeless Care and Coordination has identified a need for additional caregiver services for a subset of the homeless population moving into permanent supportive housing, and is working with Social Services to coordinate enrollment in In Home Support Services (IHSS) for this population.

2.COLLABORATION WITH HEALTHCARE ORGANIZATIONS: Health Care for the Homeless (HCH), part of Alameda County’s Office of Homeless Care and Coordination housed within Alameda County’s Health Care Services Agency, has weekly collaboration meetings with outreach and shelter providers and ensure that they are able to make effective referrals to Alameda Health Services (the Medi-Cal Managed Care Plan serving Alameda County), community clinics and substance use and mental health treatment. HCH also provides monthly “deep dive” trainings for providers and health care providers on special health topics of particular urgency such as hoarding and cluttering, M-Pox, and Medication Assisted Treatment. The Office of Homeless Care and Coordination meets with the County’s Behavioral Health Department (also located within the same agency) twice monthly to discuss homeless services coordination.

3.To promote SSI/SSDI Outreach, Access and Recovery (SOAR) certification, AC Social Services Agency’s contracted service provider has trained 500 individuals representing 121 organizations over the course of 20 different trainings during FY 21-22. Although fewer in-person trainings have been provided since the pandemic, efforts to pivot to virtual and on-demand training sessions have successfully been implemented providing opportunities for greater outreach.

1D-7.	Increasing Capacity for Non-Congregate Sheltering.	
	NOFO Section VII.B.1.n.	

Describe in the field below how your CoC is increasing its capacity to provide non-congregate sheltering.
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**(limit 2,500 characters)**

The CoC recognizes the importance of non-congregate sheltering in efforts to reduce the unsheltered homeless population. In addition to the significant need for housing in Alameda County, because 79% of the people experiencing homelessness in Alameda County are unsheltered, the County’s Home Together 2026 Community Plan calls for a significant increase in shelter in the next two years, including an increase of 975 additional non-congregate shelter beds to come online between July 1, 2022 and June 30, 2024 to serve vulnerable adults and families with children. As new permanent housing comes online and demand for shelter decreases, these non-congregate shelter beds will either be converted to permanent housing or removed from the system.

During the COVID-19 pandemic, Alameda County participated in the State of California’s Project Roomkey program to utilize hotels and motels as temporary emergency non-congregate shelter options for people experiencing homelessness. At the height of the pandemic, the County operated 10 hotel sites (>1,400 rooms). Since March of 2020, Alameda County has served over 5,000 people in its Project Roomkey sites. As of June 2022, two of the hotel sites (total of 240 guest rooms) remain in operation as temporary non-congregate shelter sites. After three years, they will convert to permanent housing under the State’s Project Homekey. Another two non-congregate sites (total of 140 guest units, many double-occupancy) will continue to operate as shelter. Among the people who took part in the “shelter in place” model in Alameda County in 2020-2022, more than 70% of exits were to permanent housing.

ID-8.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section VII.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)

**1.POLICIES AND PROCEDURES TO RESPOND TO INFECTIOUS DISEASE OUTBREAKS:** The CoC actively collaborates with the County’s Office of Homeless Care and Coordination (OHCC), which sits within the County Health Care Services Agency. This positions OHCC to coordinate closely with Public Health on infectious disease protocols impacting homeless populations. The COVID pandemic prompted many new policies and procedures that will continue to enhance response to infectious disease outbreaks. Systems Coordination: Providers prioritized emergency meetings, ad hoc policies, and new methods of coordinating and sharing resources. Weekly community calls and increased coordination will continue. Isolation and Quarantine: Alameda County set up I&Q sites in March of 2020 for COVID positive/exposed people who were homeless. This program has expanded to also provide isolation for high-risk MPox cases. Housing: The County leased more than 1,400 rooms for shelter during the pandemic. This non-congregate model has resulted in improved health and housing outcomes that go beyond COVID prevention. The County and city partners will continue to expand this model. Technology: During COVID many technological improvements were made to better assist sheltered and unsheltered clients. Street-based technology and telehealth options were improved and expanded.

**2.PREVENT INFECTIOUS DISEASE OUTBREAKS:** The Shelter Health Team of Health Care for the Homeless (ACHCH) has developed detailed Health Guidance for Shelter and Homeless Services Providers to prevent future infectious disease outbreaks. The guidance addresses hygiene and prevention materials, symptom screening, referring to isolation housing, social distancing, sanitation services, and vaccine information. The Shelter Health Team hosts a weekly homeless providers community call every week and hosts a webpage with all Alameda County Public Health updates and guidance. The team has done site visits at shelters and conducts trainings to reduce potential exposure. OHCC has met with the County’s Chief Health Officer and County Medical Director to discuss prevention and response for people in homeless programs and ensure nursing care is available for isolation and quarantine. A Clinical Policy Group formed during the COVID pandemic continues to meet to strategize and plan around Mpox response. Alameda County was also awarded new air filtration units for emergency shelters throughout the county by the Bay Area Air Quality Management District

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases. NOFO Section VII.B.1.o.	
Describe in the field below how your CoC effectively equipped providers to prevent or limit infectious disease outbreaks among program participants by:		
1.	sharing information related to public health measures and homelessness, and	
2.	facilitating 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)

1. SHARING INFORMATION RELATED TO PUBLIC HEALTH MEASURES AND HOMELESSNESS: During the COVID pandemic, ACHCH worked to support, educate and inform countywide networks of shelter, outreach and housing providers, including Continuum of Care providers but also including many other providers, through carrying out a COVID Community Call every week since March of 2020 involving 80-100 providers. The ACHCH program also keeps a website updated with the all safety, guidance, testing, COVID housing, and vaccine-related information. HCH also carries out a monthly provider training on topics that involve COVID response and skills building. Staff from OHCC, CoC, and city representative meet monthly with representatives from throughout the Bay Area to share best practices and current areas of interest in homelessness response and health needs. HCH staff have participated in and presented at the national Health Care for the Homeless conference every year. These learnings are then presented regularly at CoC and other community meetings.

2. FACILITATING COMMUNICATION BETWEEN PUBLIC HEALTH AGENCIES AND HOMELESS SERVICE PROVIDERS: The Community Call referenced above is a fully interactive forum. Health Care leadership shares news, research and updates, local developments and restrictions, but also facilitates conversation and problem-solving, and provides an opportunity for outreach and shelter providers to highlight best practices and findings. ACHCH also invites subject matter experts to present information and play “stump the expert.” Notes to these meetings are shared each week. Additionally, OHCC staff meets weekly with staff from Public Health, Environmental Health, Infectious Disease and Epidemiology, and Behavioral Health leadership.

1D-9.	Centralized or Coordinated Entry System–Assessment Process.	
	NOFO Section VII.B.1.p.	
	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)



1. 100% COVERAGE: There are 12 Coordinated Entry Access Points (Housing Resource Centers) across all 5 geographic regions of the county, with staff providing housing problem solving, flexible funds, crisis and housing assessment, and program referral. We have 14 Street Health Zones covering 100% of the County in which Street Outreach Teams provide CES services in the field.
2. STANDARDIZED ASSESSMENT PROCESS: The Coordinated Entry process uses specific assessments to obtain information about both the immediate and long-term needs of persons and households seeking services. The Assessment workflow has seven steps: 1) Triage (including safety needs and safety planning); 2) Client Profile; 3) Housing Problem Solving; 4) Assessment pre-questions; 5) Enrollment in Coordinated Entry; 6) Crisis Assessment and/or Housing Assessment (depending on client preference and eligibility). All Access Points must follow the order of the workflow and use the same assessments for the smooth and fair functioning of the Coordinated Entry process.
3. REGULAR UPDATES USING FEEDBACK FROM PARTICIPATING PROJECTS AND HOUSEHOLDS THAT HAVE PARTICIPATED IN CE: As required by HUD, all Coordinated Entry policies and procedures are documented in a formal Coordinated Entry Policy Manual that must be approved by the CoC's Outreach, Access, and Coordination Committee as part of its oversight of the Coordinated Entry System. Review occurs annually at a minimum. As with all CoC Committees, at least 33% of members must be people with lived experience of homelessness going forwarded (per new CoC governance charter approved in February 2022). The CES Manual was posted for public comment and people with lived experience and homeless services providers were encouraged to provide feedback.

	1D-9a. Program Participant-Centered Approach to Centralized or Coordinated Entry.	
	NOFO Section VII.B.1.p.	
	Describe in the field below how your CoC's coordinated entry system:	
	1. reaches people who are least likely to apply for homeless assistance in the absence of special outreach;	
	2. prioritizes people most in need of assistance;	
	3. ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and	
	4. takes steps to reduce burdens on people using coordinated entry.	

(limit 2,500 characters)

1. REACH LEAST LIKELY TO APPLY: The CoC’s Coordinated Entry approach provides full coverage of Alameda County through physical open access points (Housing Resource Centers) as well as street outreach covering all regions of the County. The County’s Street Health teams serve as an access point for Coordinated Entry targeting people living outside. Outreach teams enroll their clients in Coordinated Entry and HMIS to ensure that people who are unsheltered have access to the full range of housing and services in the CoC. The CoC continues to expand Access Points in neighborhoods with high rates of poverty and risk of homelessness. The County has contracted with agencies focused on underserved populations in an effort to increase equity. Regional coordinators work directly with law enforcement, outreach teams, service providers, food pantries, libraries, and more.

2. PRIORITIZES MOST IN NEED: Alameda County prioritizes people for crisis housing resources based on need and circumstances, and for permanent supportive housing based on vulnerabilities and housing barriers. All individuals and families who participate in Coordinated Entry complete a crisis assessment and are put in the crisis queue based on factors such as length of time homeless, disability or health need. The Coordinated Entry housing assessment incorporates questions regarding a participant’s length of time homeless, housing barriers, and health and other care needs – information that is used to prioritize and match participants in the housing queue.

3. ENSURE TIMELY ASSISTANCE: Although there are not currently enough housing opportunities to house everyone in need, the CES system of prioritization and matching ensures that those most in need are prioritized for the housing resources that exist and referred as soon as possible. Weight is given to disabilities and self-care needs, duration of literal or chronic homelessness, household size and ages of members, and presence of housing barriers (evictions, arrests and convictions, income issues).

4. STEPS TAKEN TO REDUCE BURDENS ON PEOPLE USING COORDINATED ENTRY: The Coordinated Entry standardized intake process includes a series of “Assessment Pre-Questions” to determine whether the next steps (enrollment, assessment) are necessary due to the participant’s desired services and their likelihood of being prioritized for a resource. Housing Problem Solving is always available to promote quick resolution and accompanied by flex funds when needed.

1D-10.	Promoting Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section VII.B.1.q.	

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.	01/01/2022

1D-10a.	Process for Analyzing Racial Disparities—Identifying Racial Disparities in Provision or Outcomes of Homeless Assistance.	
	NOFO Section VII.B.1.q.	

	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. **PROCESS FOR ANALYZING RACIAL DISPARITIES:** In 2020, the CoC completed a racial equity and homelessness response system report, Centering Racial Equity in Homeless System Design. This included a racial equity impact analysis, quantitative analysis of PIT and HMIS data; and focus groups with 53 individuals experiencing homeless who identified as BIPOC. In 2021, EveryOne Home created a Race Equity survey for CoC applicants to assess the extent to which they are enacting specific racial equity policies and practices. Also in 2021, the CoC developed 13 new equity indicators that disaggregate system performance data by race and utilize additional data sources besides HMIS data. This data is reviewed on a quarterly basis and significant findings are lifted up to the Leadership Board for review. In Spring of 2022, Focus Strategies conducted an independent analysis of the new Coordinated Entry scoring system to evaluate whether the results were equitable across race/ethnicity and other demographic factors. The results were presented to the CoC in June of 2022, along with recommendations on how to improve the assessment tools and scoring criteria.

2. **RACIAL DISPARITIES IDENTIFIED:** HMIS data shows racial disparities in both first-time homelessness and returns to homelessness, with African Americans and Native Americans experiencing homelessness at a rate four times higher than Alameda County's general population. The Black and African American population is approximately 10% of Alameda County, but 43% of those experiencing homelessness. In FY 2021, persons who were Black or African American represented 55% of homelessness system enrollments, but 57% of those who returned to homelessness after two years. As stated above, the CoC has undertaken different types of analyses to analyze racial disparities in the provision of services or outcomes of homeless assistance. Although these analyses have not uncovered systematic disparities in service provision or housing exits by race, the CoC continues to explore how the system can address disproportionate experience of homelessness and returns to homelessness through more targeted interventions addressing the needs of underserved communities.

1D-10b.	Strategies to Address Racial Disparities.	
	NOFO Section VII.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.	
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.		

**You must select a response for elements 1 through 11 in question 1D-10b.**

1D-10c.	<b>Actions Taken to Address Known Disparities.</b>	
	NOFO Section VII.B.1.q.	

Describe in the field below the steps your CoC and homeless providers have taken to address disparities identified in the provision or outcomes of homeless assistance.

**(limit 2,500 characters)**

**STEPS BY COC TO IMPROVE RACIAL EQUITY:** In the revised CoC governance charter approved in February of 2022, the CoC made significant changes to center racial equity in homelessness response system governance and strategic direction. It specified that all boards, committees and workgroups will reflect the racial demographics of the people served by the homelessness response system. It established a new Racial Equity Workgroup and required all other committees to set equity goals in their annual workplans. In addition, an evaluation was conducted in Spring of 2022 of the coordinated entry assessment and scoring data to analyze whether these mechanisms were equitable across race/ethnicity and a number of other factors. The results of this evaluation led to a number of recommendations to adjust the assessment questions utilized and the scoring criteria for the new coordinated entry process and system to improve equity.

**STEPS BY PROVIDERS:** Some of the actions already embedded in our service model that we will continue to implement to address inequities include supporting evidence-based strategies, contracting with place-based CBOs that are representative of populations experiencing homelessness, incorporating peer specialists and people with lived experience in service teams and placing additional homelessness system access points in neighborhoods with higher populations of Black and Native American residents. The Centering Racial Equity in Homeless System Design report (CRE) modeled what an optimal system to respond to homelessness and reduce racial disparities would look like and what gaps need to be filled. Moving forward, informed by the CRE, the County and its contracted providers will focus efforts increasing long-term interventions like ongoing shallow subsidies that bridge the gap between earned income and the cost of housing and dedicated affordable housing for extremely low-income households with low service needs, creating significant additional affordable housing dedicated specifically to people experiencing homelessness, developing supportive housing for people who need increased supports, such as older and frail adults, growing the supply of transitional housing for youth, expanding current program models such as Rapid Rehousing and supportive housing, expanding targeted behavioral health services throughout the system, and improving and expanding targeted homelessness prevention.

1D-10d.	Tracking Progress on Preventing or Eliminating Disparities.	
	NOFO Section VII.B.1.q.	

Describe in the field below the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance.
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**(limit 2,500 characters)**

The CoC has set system performance goals for reducing homelessness. For each of these goals, the CoC has also set a corollary goal for addressing equity in the homelessness response system. These goals set an intention of reaching larger percentages of all BIPOC served by the system and exiting to permanent housing, so that it aligns with BIPOC representation in the overall homeless system. These goals are documented and tracked as part of the State of California’s process for securing Homeless Housing Assistance and Prevention (HHAP) funding. Goals include the following: 1) Persons Served: People who are Black or African American as a % of total persons served by the homeless response system will increase to 59% by 2024; 2) Reducing first time homelessness: The percentage change in the rate of increase of persons who become homeless for the first time who are Black or African American will slow from 45% to 41% between 2020 and 2024; 3) Exits to permanent housing: By 2024 at least 4% of housing exits should be American Indian or Alaska Native; 3% Asian; 53% Black or African American; and 2% Native Hawaiian or other Pacific Islander; and 7% with multiple races. 4) Reducing the length of time homeless: Reduce the average length of time that families with children remain homeless to 200 days by 2024 (Black or African American families are disproportionately represented in the family homeless system); 5) Placements from street outreach: By 2024, increase the % of non-white persons successfully placed from street outreach to 4% for American Indian or Alaska Native; 3% Asian; 53% Black or African American; and 2% Native Hawaiian or other Pacific Islander; and 7% with multiple races.

The CoC also has a goal of using data to improve outcomes and track equity impacts by improving HMIS coverage, enhancing data quality, and regularly reviewing system and program outcomes data disaggregated by race. The CoC will increase HMIS licensed users by 5% (32 new users) and participating agencies by 5% (4 new agencies) in 2023.

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

The CoC recognizes that the voice of people with lived experience of homelessness is essential to how we design and implement an effective homelessness response system in Alameda County. In the revision to its governance charter approved in February 2022, the CoC set a representation metric of at least 33% lived experience on all boards, committees, and workgroups. To make this possible, the CoC committed to providing ongoing financial compensation for participation and transportation to attend meetings; ensuring all members have access to technology and equipment necessary to attend virtual meetings; establishing a mentoring program for members with lived experience and an Emerging Leaders Program to provide orientation, training, and support for serving on CoC boards, committees and workgroups; providing resources for targeted outreach and recruitment of individuals with lived experience; and training board and committee members to ensure an inclusive environment at meetings and engagements, including offering training on authentic engagement of people with lived experience, trauma-informed care, and related issues. The Leadership Board agreed to hold itself and each committee/workgroup chair accountable for achieving and maintaining the 33% metric.

In addition, individuals with lived experience are involved in a number of CoC related activities to ensure their expertise is embedded throughout our work. This includes pilot testing surveys for the Point in Time Count and other data collection efforts to ensure language and questions are understandable, thoughtful and trauma informed, providing feedback on the homeless response system in focus groups and community meetings, participating in workgroups of ongoing committees as well as the NOFO Committee to ensure lived experience informs strategic planning and decision making, and participating in strategic planning sessions to support the Home Together Plan.

1D-11a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
	NOFO Section VII.B.1.r.	

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the five categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included and provide input that is incorporated in the local planning process.	9	5
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	9	5
3.	Participate on CoC committees, subcommittees, or workgroups.	9	5
4.	Included in the decisionmaking processes related to addressing homelessness.	9	5
5.	Included in the development or revision of your CoC's local competition rating factors.	5	5

1D-11b.	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section VII.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)**

As described above, efforts are underway within our Continuum of Care to uplift and enhance representation of individuals with lived expertise in our CoC’s governance structure, including the CoC board, committees and ad hoc working groups. These efforts include recruiting, training, and supporting members with lived expertise to participate fully in CoC governance. Our recently adopted CoC governance charter calls for one-third of all CoC board seats be dedicated to people with lived expertise. A new program facilitated by our CoC support agency – the Emerging Leaders Program - supports cohorts of people with lived expertise with the needed training and mentorship to fill these seats ongoingly and have access to information and decision-making, as well as technology to facilitate engagement. Four graduates of the Emerging Leaders are currently serving on the CoC Leadership Board. A number of Emerging Leaders graduates have also recently been employed by local homeless service providers as Housing Navigators and shelter staff due to connections built through their work with the CoC. The CoC encouraged people with lived experience to apply for positions at the CoC. The CoC hired a person with lived experience of homelessness for the Systems Planning Coordinator role in 2021. The Systems Planning Coordinator was responsible for supporting the work of the Emerging Leaders Program.

Through our CoC’s recent Youth Homelessness Demonstration Project grant, Our Office of Homeless Care and Coordination along with other CoC partners are also collaborating closely with members of our Youth Advisor Board (YAB) that have lived experience of homelessness.

For all individuals with lived experience that participate in committees, workgroups, review of materials and policies, and other CoC related work, they are paid stipends of \$25 an hour to honor their time and expertise.

1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section VII.B.1.r.	

Describe in the field below how your CoC:

1. how your CoC routinely gathered feedback from people experiencing homelessness and people who have received assistance through the CoC or ESG program on their experience receiving assistance; and
2. the steps your CoC has taken to address challenges raised by people with lived experience of homelessness

**(limit 2,500 characters)**



1. **ROUTINELY GATHERING FEEDBACK FROM PEOPLE EXPERIENCING HOMELESSNESS:** The biennial PIT Count includes a survey administered to a sample of individuals counted. This survey includes questions regarding the person’s experience receiving or attempting to receive mainstream or homelessness-specific services, including barriers encountered. This information is used to make recommendations for system improvements. The system-wide Centering Racial Equity (CRE) needs analysis conducted in 2019-2020 and updated in 2021 focused on racial equity in homelessness response system design included focus groups with people of color who have experienced homelessness. Our CoC Emerging Leaders Program that trains persons with lived experience of homelessness to participate in CoC governance provides an additional opportunity for people with lived experience to provide feedback on the system, and barriers to participation in CoC governance in particular. In addition, strategic planning sessions related to the finalization and implementation of the Home Together Plan included individuals with lived experience. Finally, the CoC is about to launch a series of targeted focus groups on the Coordinated Entry System for people with lived experience of homelessness.

2. **STEPS CoC HAS TAKEN TO ADDRESS CHALLENGES RAISED:** The feedback provided by CRE focus group participants helped to inform the needs analysis which culminated in recommendations for several new types of interventions, including supportive housing for people who need increased supports (older and vulnerable adults), shallow and flexible rental assistance to fill gaps for people with limited incomes, expanded access to behavioral health services, and improved and expanded homelessness prevention services. Feedback received from focus group participants of those with lived experience helped to refine and revise the 2022 Point in Time Count Survey for sheltered and unsheltered individuals experiencing homelessness. Due to feedback received by Emerging Leaders participants, the HMIS Lead developed a new policy and procedure to support the ease and increase the clarity around the process of an individual requesting their own personal records from the HMIS system. In addition, feedback from board and committee members in the CoC with lived experience of homelessness has helped to drive strategic planning and thinking, most recently the strategic direction of the NOFO processes and governance transition issues.

1D-12.	Increasing Affordable Housing Supply. NOFO Section VII.B.1.t.	
Describe in the field below at least 2 steps your CoC has taken in the past 12 months that 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. REFORMING ZONING AND LAND USE POLICIES TO PERMIT MORE HOUSING DEVELOPMENT:** Through its Leadership Board and Advisory Councils, the CoC regularly supports changes to zoning and land use policies to permit more housing development. For example, in 2021, Alameda County revised its Density Bonus Ordinance, which encourages development of affordable housing for very low and lower income households and senior households within the unincorporated area of Alameda County. Alameda County Housing & Community Development, the CoC's collaborative applicant, has for the past 18 months convened a workgroup of city partners that are working on their Housing Elements to ensure that additional land is zoned for new affordable housing projects.

**2. REDUCING REGULATORY BARRIERS TO HOUSING DEVELOPMENT:** Also through its Leadership Board and Advisory Councils, the CoC regularly supports efforts to reduce regulatory barriers to housing development. The State of California has provided much leadership around this in recent years due to the state-wide housing crisis. Since 2016, the State legislature has passed several bills to reduce restrictions on the development of Accessory Dwelling Units (ADUs). Due to their relatively low cost to develop and small size, ADUs are often affordable to very low or low-income households. As a result of the legislation, the Alameda County Planning Department has seen a substantial increase in the number of inquiries and applications for ADUs throughout the unincorporated areas of the County. In 2017, California passed SB 35, which allowed a streamlined approval process for residential developments that meet certain defined criteria, including affordability criteria, in jurisdictions that have not met their Regional Housing Needs Allocation (RHNA) targets. Alameda County released its Streamlined Ministerial Approval Process in 2021. The County continues to monitor State legislative efforts to reduce regulatory barriers such as SB 375, which streamlined the California Environmental Quality Act (CEQA) review for projects meeting certain criteria, and SB 10, which makes it easier for cities to zone for smaller, lower-cost housing developments. The CoC is supportive generally of the recommendations of Plan Bay Area 2050, which included allowing a greater mix of housing densities and types, encouraging development in transit-rich and high-resource areas, and requiring new market-rate developments to include a percentage of affordable units.

## 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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1E-1.	Web Posting of Your CoC's Local Competition Deadline–Advance Public Notice.	
	NOFO Section VII.B.2.a. and 2.g.	
	You must upload the Local Competition Deadline attachment to the 4B. Attachments Screen.	

	Enter the date your CoC published the deadline for project applicants to submit their applications to your CoC's local competition.	08/12/2022
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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 VII.B.2.a., 2.b., 2.c., and 2.d.	

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:

1.	Established total points available for each project application type.	Yes
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).	Yes
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).	Yes
4.	Provided points for projects that addressed specific severe barriers to housing and services.	Yes
5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes

1E-2a.	Scored 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.	
	NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	

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:

1.	What were the maximum number of points available for the renewal project form(s)?	100
2.	How many renewal projects did your CoC submit?	38
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section VII.B.2.d.	

- Describe in the field below:
- |    |   |
|----|---|
| 1. | how your CoC collected and analyzed data regarding each project that has successfully housed program participants in permanent housing;   |
| 2. | how your CoC analyzed data regarding how long it takes to house people in permanent housing;  |
| 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 |
| 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.  |

(limit 2,500 characters)

1. DATA ON EXITS TO PH: The scoring criteria for all projects include whether the project has successfully housed participants in permanent housing. For renewals, the scoring is based on rate of exit to PH (or rate of retention for PSH) and having met locally established performance benchmarks for their project type (TH, RRH, PSH). For new projects, applicants are asked to provide data from a comparable project and are also scored based on having met local performance benchmarks. The data is pulled from HMIS by the CoC Lead and Collaborative applicant, who then calculate preliminary scores.
2. ANALYSIS OF HOW LONG IT TAKES: Up to 8 points were awarded for renewals' description of how they have operationalized CE participation and steps taken to resolve enrollment barriers, including shortening the time from referral to move in. The scoring criteria for all projects also include whether the project is aligned to Housing First practices, including housing participants as rapidly as possible. This factor is scored by the NOFO rating and ranking Committee and is worth up to 8 points out of 100.
3. SEVERITY OF NEEDS/VULNERABILITIES: All renewal projects are scored based on performance measures that evaluate APR data in relation to locally established benchmarks. If an applicant's project does not meet established benchmarks and receives less than full points on any of the performance measures, they have the opportunity to provide a supplemental narrative to receive some points back. One of the factors considered in these narratives is whether the project is serving a population with particularly high needs and vulnerabilities. Applicants are also scored on the extent to which their project is low-barrier, in questions regarding Housing First alignment and CE participation.
4. CONSIDERATION TO PROJECTS SERVING HARDEST TO SERVE: If an applicant's project does not meet established benchmarks and receives less than full points on any of the performance measures, they have the opportunity to provide a supplemental narrative to receive some points back. One of the factors considered in these narratives is whether the project is serving a hard to serve population. Applicants are also scored on whether their project is low-barrier, in questions regarding Housing First alignment and CE participation. As part of their deliberations the NOFO Committee gives consideration to projects that provided resources to under-served populations such as LGBTQ+ and TAY.

1E-3.	Promoting Racial Equity in the Local Competition Review and Ranking Process.	
	NOFO Section VII.B.2.e.	
	Describe in the field below:	
1.	how your CoC obtained input and included persons of different races, particularly those over-represented in the local homelessness population;	
2.	how the input from persons of different races, particularly those over-represented in the local homelessness population, affected how your CoC determined the rating factors used to review project applications;	
3.	how your CoC included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process; and	
4.	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.	

**(limit 2,500 characters)**

1. INCLUDED PEOPLE OF DIFFERENT RACES/OVER-REPRESENTED: The CoC performed outreach within the community to solicit the participation of members who are of different races and ethnicities and who reflect those over-represented in the homeless population. In 2022, the 11-person NOFO Committee (which is responsible for developing and adopting the rating and ranking policy and for scoring and ranking applications) had 4 Black American members and 5 members who have lived experience of homelessness.

2. HOW THE INPUT IMPACTED RATING FACTORS AND PROCESSES: The NOFO Committee, including members who are people of color and/or have lived experience, determined that this year’s scoring factors should more heavily weight questions about advancing racial equity and meaningfully involving people with lived experience in decision-making. The Committee members also advocated for finding ways to make the application process more accessible in future rounds to make it less technically challenging for smaller organizations that work in communities most impacted by homelessness.

3. HOW THE CoC INCLUDED PERSONS OF DIFFERENT RACES IN THE REVIEW, SELECTION AND RANKING PROCESS: The NOFO Committee described in #1 above (which includes people of color and people with lived experience), applies the scoring tool to applications submitted, conducts the annual HUD Competition’s local rating and ranking process for projects seeking Continuum of Care funds, and prepares ranked recommendations for funding. In closed sessions, the Committee provides final approval and vote on all conflicts and unanticipated challenges during review and selection, in discussions of projects’ performance, and in the final Rating and Ranking session.

4. HOW PROJECTS RATED AND RANKED: The rating factors for both new and renewal projects included criteria assessing the degree to which applicants have taken steps to identify and address barriers in access and/or to ongoing program participation for people of different races and ethnicities. Applicants were required to respond to narrative questions describing their efforts, including any data analysis or qualitative information gathering to understand barriers and disparities, as well as steps taken to remedy the issues identified. The NOFO Committee members are responsible for reviewing and scoring these narratives prior to the rating and ranking meeting. At the meeting, committee members discuss and deliberate on each project’s scores on this measure.

<b>1E-4.</b>	<b>Reallocation—Reviewing Performance of Existing Projects.</b>	
	NOFO Section VII.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 projects through this process during your 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.

**(limit 2,500 characters)**

1. REALLOCATION PROCESS: This year, the HUD CoC Committee directed the NOFO Committee not to pursue involuntary reallocations and instead to encourage any projects that have a history of underspending to voluntarily reduce their grant award to support other projects in the CoC “that strengthens our system and application package and is aligned with our guiding principles. The 2022 Review and Ranking Process states “that any projects that have underspending of their grant funds will be encouraged to voluntarily offer to reduce their grant award to support other projects in our continuum of care.”
2. IDENTIFIED PROJECTS: The CoC NOFO committee evaluated whether there was underspending for each renewal project submitted and scored each one on spending as an objective factor. Several projects received lower scores due to underspending but none were identified for reallocation. The Committee did not identify any projects there were deemed to not be needed in the system.
3. RELLOCATED PROJECTS: One project elected to voluntarily re-allocate \$7,000 from their services budget due to consistent underspending. The CoC NOFO Committee decided to merge these funds with CoC bonus funds in a new PH project.
4. WHY DID NOT REALLOCATE: The CoC did not involuntarily reallocate any low performing projects or identify any projects as no longer needed during this year’s local competition. After review objective performance factors and narrative explanations for any lower performance, the Committee felt it was important to retain all of the existing projects and did not feel that reallocation would strengthen the homelessness response system.

1E-4a.	Reallocation Between FY 2017 and FY 2022.	
	NOFO Section VII.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2017 and FY 2022?	No
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1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section VII.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject or reduce any project application(s)?	Yes
2.	Did your CoC inform applicants why their projects were rejected or reduced?	Yes
3.	If you selected Yes for element 1 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 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/15/2022

1E-5a.	Projects Accepted–Notification Outside of e-snaps.	
	NOFO Section VII.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings 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 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/15/2022
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1E-5b.	Local Competition Selection Results–Scores for All Projects.	
	NOFO Section VII.B.2.g.	
	You must upload the Final Project Scores for All Projects attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Applicant Names; 2. Project Names; 3. Project Scores; 4. Project Rank–if accepted; 5. Award amounts; and 6. Projects accepted or rejected status.	Yes
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1E-5c.	1E-5c. Web Posting of CoC-Approved Consolidated Application.	
	NOFO Section VII.B.2.g.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website–which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	09/26/2022
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1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section VII.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application has been posted on the CoC’s website or partner’s website.	09/26/2022
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## 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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2A-1.	HMIS Vendor.	
	Not Scored–For Information Only	

	Enter the name of the HMIS Vendor your CoC is currently using.	BitFocus
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored–For Information Only	

	Select from dropdown menu your CoC’s HMIS coverage area.	Single CoC
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section VII.B.3.a.	

	Enter the date your CoC submitted its 2022 HIC data into HDX.	05/06/2022
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2A-4.	Comparable Database for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section VII.B.3.b.	

	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 databases that meet HUD’s comparable database requirements; and	
2.	state whether your CoC is compliant with the 2022 HMIS Data Standards.	

**(limit 2,500 characters)**

1. **COMPARABLE DATABASE THAT MEETS HUD'S COMPARABLE DATABASE REQUIREMENTS:** As part of the HIC review, the CoC and HMIS Lead work with DV providers to collect their comparable databases. This is an ongoing practice and includes a review to ensure data accuracy of data and compliance with HUD requirements. Reports are requested annually from DV providers in HUD format produced by their comparable database. Collaborative projects request CSV files for consolidated uploads. Consistency of data elements is monitored according to ability to provide the requested reports and according to HUD guidance. When HMIS fields are updated by HUD, comparable database fields are also updated. APRs are requested in CSV zipped file formats for upload along with accompanying human readable reports from their comparable databases. The new DV-CES will add a more standard and robust data system for housing navigation and coordinated entry prioritization.

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

2A-5.	Bed Coverage Rate—Using HIC, HMIS Data—CoC Merger Bonus Points.	
	NOFO Section VII.B.3.c. and VII.B.7.	

Enter 2022 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2022 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	3,277	253	2,075	68.62%
2. Safe Haven (SH) beds	53	0	24	45.28%
3. Transitional Housing (TH) beds	762	26	513	69.70%
4. Rapid Re-Housing (RRH) beds	1,550	0	1,550	100.00%
5. Permanent Supportive Housing	4,169	21	3,794	91.47%
6. Other Permanent Housing (OPH)	0	0	0	

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

1. STEPS TO INCREASE COVERAGE: CoC RRH COVERAGE IS AT 100%. CoC PSH bed coverage is at 91%. Areas requiring increase in coverage rates are ES, SH, and TH. Many of the beds not included in HMIS, while tracked in the HIC, are not funded through the CoC, County, or State and therefore cannot be required to participate in HMIS. Many of our seasonal shelter beds are provided by faith-based partners who do not receive funding through the CoC. The CoC continues to work with these providers to ensure that they are entering their clients in Coordinated Entry and HMIS so that they are able to access housing and services.

2. IMPLEMENTING STEPS TO INCREASE BED COVERAGE: Over the next year, the CoC will work with its partners to provide outreach and training to providers on HMIS policies and procedures, data reporting, and issuing regular reminders to projects on requirements of timely and accurately entering data into the HMIS. For the CoC's faith-based partners not required to use the HMIS, the CoC will work to provide more targeted outreach and education on the benefits of the HMIS as a tool and resource to strengthen overall homeless response in the community and to support bed coverage growth. The County will make HMIS participation a requirement for every new project seeking a support services commitment letter.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section VII.B.3.d.	

Did your CoC submit LSA data to HUD in HDX 2.0 by February 15, 2022, 8 p.m. EST?	Yes
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## 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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section VII.B.4.b	

	Enter the date your CoC conducted its 2022 PIT count.	02/23/2022
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section VII.B.4.b	

	Enter the date your CoC submitted its 2022 PIT count data in HDX.	05/06/2022
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2B-3.	PIT Count–Effectively Counting Youth.	
	NOFO Section VII.B.4.b.	

Describe in the field below how during the planning process for the 2022 PIT count your CoC:

1.	engaged stakeholders that serve homeless youth;
2.	involved homeless youth in the actual count; and
3.	worked with stakeholders to select locations where homeless youth are most likely to be identified.

(limit 2,500 characters)

1.ENGAGED STAKEHOLDERS THAT SERVE HOMELESS YOUTH: The County has instituted a dedicated youth count to improve the representation of unaccompanied children and transition-age youth under the age of 25 experiencing homelessness. In 2022 Covenant House Oakland, Youth UpRising, UC Berkeley Suitcase Clinic, YEAH! Covenant House, REACH Ashland Youth Center, Beyond Emancipation, VOICES Youth Center, and the Alameda County Youth Action Board led the recruitment of youth guides and of their staff to accompany and transport youth guides during the count.

2.INVOLVED HOMELESS YOUTH IN THE ACTUAL COUNT: To conduct the count, service providers recruited youth with lived experience of homelessness and knowledge of where to locate other young people experiencing homelessness to serve as youth guides. Youth guides were compensated for their time, including time spent in training immediately prior to deployment. We aim to increase the number of these teams in the next count.

3.WORKED WITH STAKEHOLDERS TO SELECT LOCATIONS WHERE HOMELESS YOUTH ARE MOST LIKELY TO BE IDENTIFIED: The youth guides recruited to participate in the 2022 count helped specify locations where other young people who are experiencing homelessness were likely to be found.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section VII.B.5.a and VII.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 2021 and 2022, if applicable;	
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022, 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 2022.	

(limit 2,500 characters)

1.CHANGES TO SHELTERED PIT COUNT IMPLEMENTATION: New HUD guidance regarding people in RVs in Safe Parking programs with amenities for showers, toilets and meals were included in the sheltered count.

2.CHANGES TO UNSHELTERED PIT COUNT IMPLEMENTATION: To improve our adult point-in-time count methodology, we recruited more individuals to participate in the count and are increasingly incorporating people with lived experience, alongside known and trusted community providers, into our street count teams. These teams are generally comprised of at least one guide with lived experience of homelessness and up to three community volunteers. Guides assist the team in navigating their assigned count area and identifying locations where unsheltered individuals are likely to be encountered and providing additional support in identifying people experiencing homelessness for inclusion in the tally. To improve the count of unsheltered families, providers and school districts working directly with unsheltered families contacted these families in the week following the PIT Count to ask where that family slept the night of the PIT Count. Outreach to victim service providers helped promote the need for survivors to be volunteers in the PIT Count so that they are included and accounted for. Finally, data from safe parking programs for cars, vans and RVs with no hook-ups/amenities was provided about participants in those programs in the unsheltered count.

3.HOW CHANGES AFFECTED COC'S PIT COUNT RESULTS: The direct outreach and data collection improved our tracking of families and led to a higher count of families overall than previous counts due to the expanded methodology.

## 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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

<b>2C-1.</b>	<b>Reduction in the Number of First Time Homeless–Risk Factors Your CoC Uses.</b>	
	NOFO Section VII.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. DETERMINING RISK FACTORS: The CoC, the County and the cities of Fremont and Oakland as recipients of federal Emergency Rental Assistance Program (ERAP) funding have collaborated to identify risk factors for people most at risk of homelessness. Households earning under 30% of Area Median Income were prioritized for ERAP. In 2022 Alameda County was awarded Opportunity Accelerator technical assistance to create a homeless prevention hub, improve data infrastructure, and streamline services coordination in the highest risk census tracts in the City of Oakland and Alameda County. This project is based on the Urban Institute’s Emergency Rental Assistance Priority Index, which estimates the level of need in a census tract based prevalence of low-income renters, neighborhood conditions, demographics, eviction rates, and the economic impacts of COVID-19.

2. ADDRESSING FAMILIES/INDIVIDUALS AT RISK: Over the past few years, the CoC has seen increased investment in prevention services. A specific example is Keep Oakland Housed, a collaboration of three nonprofit partners that provides legal representation, eviction prevention, benefits advocacy, emergency financial assistance, and supportive services to break the cycle of poverty. 211 and Coordinated Entry assessors are trained to engage in housing problem solving conversations. The CoC also added flexible funding pools to identify rapid solutions that involve light financial support. A new intervention, shallow rent subsidies, will help people with fixed or limited incomes relieve their rent burdens and reduce risk of becoming homeless. Other strategies focus on preventing discharge from mainstream systems to homelessness: increasing medical and mental health respite, stabilizing the board and care system for people with behavioral health needs, implementing an exit strategy for unhoused criminal justice clients, and connecting transition-age youth leaving foster care to youth-dedicated rapid and supportive housing programs.

3. NAME RESPONSIBLE: Our revised CoC governance charter includes a new committee, Housing Stability and Homelessness Prevention, that will improve existing homelessness prevention efforts and develop additional strategies to prevent new homelessness through cross-sector collaboration. Chairs of this committee will be responsible for overseeing our CoC strategy to reduce the first-time homelessness with support of the Performance and Data Analyst from EveryOne Home.

2C-2.	Length of Time Homeless—CoC’s Strategy to Reduce.	
	NOFO Section VII.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. STRATEGY TO REDUCE LOT HOMELESS: The median length of time homeless for persons in emergency shelter and transitional housing increased from FY 2020 to FY 2021, due to conditions related to the COVID-19 pandemic causing longer stays. The CoC continues to try to reduce average length of time homeless through coordinated entry by prioritizing all types of housing and support resources to households with the longest duration of homelessness and highest barriers to housing. This prioritization strategy has increased the resources that are accessible to households experiencing long durations of homelessness in order to end their homelessness. The CoC provides technical assistance and training to build housing-first culture that effectively engages vulnerable persons who historically have been the most difficult to house. The CoC continues to increase RRH units to assist individuals and families to obtain stable housing faster. In addition, the CoC has increased the number of Housing Navigators in the system so that everyone who has been matched to a housing opportunity can be located and connected. Finally, the CoC continues to create additional low-barrier housing opportunities such as non-congregate shelters that target unsheltered individuals and focus on permanent housing exits, thereby decreasing the total length of time homeless.

2. IDENTIFYING AND HOUSING LONGEST TIME HOMELESS: Alameda County’s Coordinated Entry System has a system in place through its Crisis Assessment and Housing Assessment process to identify the household’s length of time homeless. This information, along with other information gathered during assessment, is used to develop a Threshold Score, which determines whether a household is added to the Housing Queue and matched to housing resources, and in what order of priority. The length of time it takes to match households to housing resources is based on current housing inventory and anticipated vacancies.

3. NAME RESPONSIBLE: EveryOne Home’s Data and Performance Analyst with support from CoC Systems Coordination Committee.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing–CoC’s Strategy	
NOFO Section VII.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.	

(limit 2,500 characters)

1. **INCREASING ES/SH/TH/RRH EXITS TO PSH:** To increase the proportion of people exiting homelessness to permanent housing, the CoC has expanded housing navigation resources through a partnership with the County Health Care Services Agency. Housing navigation is prioritized and matched to the most vulnerable households through coordinated entry. The CoC also continues to expand RRH and Landlord Liaison services with an eye toward quick and flexible housing options in the private market. To further facilitate exits to permanent housing, the County’s Home Together 2026 Plan calls for a significant increase in new permanent housing resources by 2026. This will include 4,195 new supportive housing units and 3,190 supportive housing units for older/frail adults. It will also include new interventions such as 10,070 new dedicated affordable units created in part with a flexible local operating subsidy program; 5,240 new shallow subsidies for those with fixed incomes unlikely to increase who need longer-term support; and 1,645 additional rapid rehousing slots for those who can pay full rent over time.
2. **INCREASING RETAIN PH/EXIT TO PH:** The CoC rate of exits to permanent housing and permanent housing retention among persons enrolled in permanent housing remained at 98% in FY 2021 (was the same in FY 2020). The CoC continues to grow the spectrum of prevention resources and working to prioritize households at highest risk of homelessness. The County’s Home Together 2026 Plan introduced a new intervention, tenancy sustaining services, targeted to households that face obstacles to housing retention. This intervention will be funded in part through Medi-Cal Managed Care, part of the Medicaid reform initiative in California focused on social determinants of health known as CalAIM.
3. **NAME RESPONSIBLE:** Everyone Home’s Performance and Data Analyst with support from CoC Systems Coordination Committee

<b>2C-4.</b>	<b>Returns to Homelessness—CoC’s Strategy to Reduce Rate.</b>	
	NOFO Section VII.B.5.e.	
	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.	

**(limit 2,500 characters)**

1. ID RETURNS TO HOMELESSNESS: The CoC carefully tracks returns to homelessness using HMIS, Stella P and Longitudinal Systems Analysis data. This data has shown that chronically homeless persons tend to return to homelessness at a higher rate than those who are not. Historically, RRH projects showed higher returns to homelessness than other types of permanent housing programs, prompting changes to program models and system policies. However, permanent housing exits from emergency shelter and transitional housing more often are to unsubsidized rentals, permanent housing with family, and permanent housing with friends. There is also a racial disparity in who returns to homelessness. The system-wide average for returns to homelessness is 18%, but it is 21% for African Americans and 23% for Native Hawaiian/Pacific Islanders.

2. STRATEGY TO REDUCE RATE OF RETURNS TO HOMELESSNESS: The CoC Systems Coordination Committee has flagged people in time limited subsidy programs as a priority population for housing problem solving and prevention resources and is working on system policies to provide more support to individuals who exit to unassisted permanent housing placements. Currently, the CoC has increased landlord liaison and tenancy sustaining services to mediate landlord relationships and provide support to tenants. The CoC has also developed the 211 operators' capacity to provide housing problem-solving conversations and referrals to prevent homelessness. The CoC worked with the Health Care Services Agency to dedicate bridge subsidies to persons in RRH programs who were at risk of homelessness until they could be awarded Emergency Housing Vouchers. The Centering Racial Equity process showed that more must be done to avoid housing placements that are unsustainable, provide ongoing or renewed support to people who have been homeless in the past, and ensure linkage to support services such as behavioral health care and case management for people who have transitioned from homelessness to permanent housing. The CoC is tracking demographics of matches to the most highly resourced housing (e.g., PSH) to ensure there is equity in who is referred to these resources.

3. NAME RESPONSIBLE: EveryOne Home's Performance and Data Analyst with support from CoC Systems Coordination Committee.

2C-5.	Increasing Employment Cash Income—CoC's Strategy.	
	NOFO Section VII.B.5.f.	

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 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. **INCREASING EMPLOYMENT INCOME:** The CoC utilizes a range of strategies to increase access to employment income. Rapid rehousing programs, such as Linkages, focus on connecting participants to income by partnering with local resource centers, employment programs, one-stops, and educational and licensure programs. Furthermore, the CoC assists clients to enroll in and retain public benefits, which ensures access to a wide range of employment, training programs, and supportive services available for public benefits recipients.

2. **WORKING WITH MAINSTREAM EMPLOYMENT ORGS:** Service coordinators connect participants to available opportunities according to their abilities and needs and provide direct support in resume development and interviewing skills through trainings, workshops and job counseling. Project staff also assist in applying to job openings and share information about upcoming job fairs. The Alameda Point Collaborative (APC), a permanent supportive housing project, has a strong focus on employment services. APC also has a long-standing workforce development program and has created multiple social enterprises, including a plant nursery, an urban farm, a commercial kitchen, and bike shop that provide work readiness, training and employment opportunities for residents. The City of Berkeley contracts with Downtown Streets (DTS), an agency that supports volunteers who are homeless or at risk with employment services to find jobs. DTS attends the By Name List meetings and partners with the Shelter Plus Care program to connect participants interested in increasing job and leadership skills to volunteer and non-cash stipend opportunities to help cover cost of basic needs.

Employment and training programs provided through public benefit programs also offer a wide range of services to homeless clients, including the CalWORKs Welfare-to-Work (WTW) and the CalFresh Employment and Training programs. The WTW program is the employment and training component of the CalWORKs program and provides clients with the tools to become self-reliant through employment. The CalFresh Employment & Training (CF E&T) program provides participants with a variety of job training, supportive services, job placement and education programs that are administered by Alameda County Social Services Agency and community partners.

3. **NAME RESPONSIBLE:** Assistant Agency Director for Workforce and Benefits Administration at the Social Services Administration.

2C-5a.	Increasing Non-employment Cash Income—CoC's Strategy	
	NOFO Section VII.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. INCREASING NON-EMPLOYMENT INCOME: The rate of adult stayers who increased their non-employment cash income in FY 2021 grew to 24% from 22% in FY2020. The CoC directs programs to assess income and non-cash benefits of all participants at intake and upon annual assessment to ensure they are informed of and supported to access all resources for which they are eligible. Participants are connected to non-CoC funded homeless-specific and general employment services. Mainstream partners fund legal assistance that sends staff to housing programs to assist with benefits applications and hearings. Health Care for the Homeless funds a contract with LifeLong Medical Care for integrated primary and behavioral health care for people with serious health issues on GA while applying for SSI. The Alameda County Social Services Agency (ACSSA) and Alameda County Behavioral Health Care Services Agency oversee strategies to increase client incomes through SSI Advocacy. SSI Advocacy assists Alameda County residents who are aged, blind, and/or disabled successfully transition from General Assistance (GA) or CalWORKs to programs that provide superior benefits, including Supplemental Security Income (SSI), Social Security Disability Income (SSDI), or the Cash Assistance Program for Immigrants (CAPI). ACSSA Social Workers or attorneys from the Homeless Action Center or Bay Area Legal Aid provide application assistance to GA and CalWORKs clients throughout the entire SSI application and appeal processes. They also assist clients with referrals to physical or mental health providers to obtain a physical or mental health evaluation that may be required to accompany the application.

2. NAME RESPONSIBLE: Assistant Agency Director for Workforce and Benefits Administration at the Social Services Administration.

### 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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

<b>3A-1.</b>	<b>New PH-PSH/PH-RRH Project–Leveraging Housing Resources.</b>	
	NOFO Section VII.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
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<b>3A-2.</b>	<b>New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.</b>	
	NOFO Section VII.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
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<b>3A-3.</b>	<b>Leveraging Housing/Healthcare Resources–List of Projects.</b>	
	NOFO Sections VII.B.6.a. and VII.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.

Project Name	Project Type	Rank Number	Leverage Type
	PH-PSH		Both

### **3A-3. List of Projects.**

**1. What is the name of the new project?**

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

**3. Select the new project type:** PH-PSH

**4. Enter the rank number of the project on your  
CoC's Priority Listing:**

**5. Select the type of leverage:** Both

### 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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

<b>3B-1.</b>	<b>Rehabilitation/New Construction Costs–New Projects.</b>	
	NOFO Section VII.B.1.s.	

Is your CoC requesting funding for any new project application requesting \$200,000 or more in funding for housing rehabilitation or new construction?	No
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<b>3B-2.</b>	<b>Rehabilitation/New Construction Costs–New Projects.</b>	
	NOFO Section VII.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)**

Not applicable



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

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 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.	
	NOFO Section VII.C.	

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

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)

Not applicable

## 4A. DV Bonus Project Applicants

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

4A-1.	New DV Bonus Project Applications.	
	NOFO Section II.B.11.e.	

	Did your CoC submit one or more new project applications for DV Bonus Funding?	Yes
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4A-1a.	DV Bonus Project Types.	
	NOFO Section II.B.11.e.	

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 2022 Priority Listing.

	Project Type	
1.	SSO Coordinated Entry	No
2.	PH-RRH or Joint TH and PH-RRH Component	Yes

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

4A-3.	Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area.	
	NOFO Section II.B.11.(e)(1)(c)	

1.	Enter the number of survivors that need housing or services:	1,072
2.	Enter the number of survivors your CoC is currently serving:	300
3.	Unmet Need:	772

4A-3a.	How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section II.B.11.e.(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. HOW COC CALCULATED NUMBER OF DV SURVIVORS NEEDING HOUSING OR SERVICES: The Point in Time survey conducted in 2022 estimated that 11% of people who are currently homeless were fleeing domestic violence. Our CoC PIT was 9,747 people, so 11% is approximately 1,072. Additionally, up to 31% of respondents indicated they had experienced domestic violence at some point.

2. DATA SOURCE: This is calculated based on the Point in Time Count with Survey from 2022. Services provided are based on the HIC for 2022.

3. BARRIERS TO MEETING NEEDS OF ALL SURVIVORS: The CoC currently has very limited resources for people fleeing violence. The CoC is currently launching a DV Coordinated Entry System that will comply with VAWA and privacy needs and ensure that DV survivors have access to the same housing and services as other individuals and families. The community still needs more dedicated housing resources with services tailored to this population. While training and coordination have been significantly improved in the provider community in recent years, the ongoing escalation of calls has highlighted the need for coordinated access with flexible resources and housing connections.

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section II.B.11.e.(1)(d)		
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.		

<b>Applicant Name</b>
Ruby's Place
Ruby's Place

## Project Applicants Applying for New PH-RRH and Joint TH and PH-RRH DV Bonus Projects

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	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 2022 Priority Listing:

1.	Applicant Name	Ruby's Place
2.	Project Name	Rapid Rehousing Expansion
3.	Project Rank on the Priority Listing	
4.	Unique Entity Identifier (UEI)	
5.	Amount Requested	
6.	Rate of Housing Placement of DV Survivors–Percentage	
7.	Rate of Housing Retention of DV Survivors–Percentage	

**You must enter a response for elements 1 through 7 in question 4A-3b.**

4A-3b.1.	Applicant Experience in Housing Placement and Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(c)	

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.HOW PROJECT CALCULATED RATE OF HOUSING PLACEMENT AND RETENTION:** The rate of housing placements is calculated as the number of clients placed in units with RRH support to the number of clients referred to the program. The rate of housing retention is calculated as the number of clients currently receiving RRH support for housing compared to the number of clients placed in housing. As a new program, no clients have yet reached the expiration of their RRH contract.

**2. WHETHER THE RATES ACCOUNTS FOR EXITS TO SAFE HOUSING DESTINATIONS:**

**3.DATA SOURCE:** As a victims' service provider, Ruby's Place cannot share confidential client information directly in the HMIS data system. Client information, including the rates of housing placement and retention, is tracked in an HMIS comparable database: Apricot. Apricot is a secure, cloud-based social services database program operated by Social Solutions, a leading provider of case management software since 2000. A three-person data team ensures data integrity and maintains the database to HMIS standards.

4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section II.B.11.e.(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.ENSURES SURVIVORS MOVE QUICKLY INTO HOUSING: Ruby’s Place (RP) works with each program participant to determine the appropriate housing strategy, and the average time from rapid re-housing (RRH) program enrollment to move-in is two months. Participants requiring immediate stabilization reside in RP’s emergency shelter for an average of four months before moving into permanent housing. RRH is provided for up to 24 months.
- 2.PRIORITIZED SURVIVORS: RP TAY RRH will provide RRH for victims residing in any of the three RP homeless shelter sites, among their network of VSPs and eligible individuals and families referred by the coordinated entry system. Every type of housing service within the system has projects that target trauma and DV survivors. The CoC has voluntary transfer policies to protect client safety and prevent homelessness due to safety concerns. If a client accesses the system through CE, intake begins with an anonymous Safety Screening to connect households to VSPs. DV survivors are informed of the options to seek services through the DV system.
3. DETERMINED WHICH SUPPORTIVE SERVICES SURVIVORS NEEDED: Ruby’s Place Case Managers provide wrap-around intensive support for the clients enrolled in the program. All clients participating in support services receive assistance in obtaining benefits in health, social and employment programs. Commonly those programs include Medicare, Medicaid, SSI, Food Stamps, and child care subsidies. Case Managers work directly with victims to help them complete applications, follow up, and provide step-by-step support with appeals, including referral to agencies that provide pro-bono legal services to victims. Ruby’s Place maintains a formal relationship with the local Workforce office, Rubicon Programs, to a warm hand-off and partnership around employment programs. In addition, Ruby’s Place maintains a relationship with a local dentist who provides pro bono services for any client in need.
- 4.CONNECTED SURVIVORS TO SUPPORTIVE SERVICES: RP case managers receive training and support to provide accurate and timely advice on a variety of mainstream benefits. RP has a case manager dedicated to supporting clients’ application for mainstream benefits, including Medicare, Medi-Cal (Medicaid), SSI, early childhood development services, CalFresh (food stamps), and other programs.
- 5.MOVED CLIENTS INTO SUSTAINABLE HOUSING: Case plans focus on transition into a permanent housing option, sometimes in the same unit without a re

4A-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(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. **STEPS TO ENSURE PRIVACY/CONFIDENTIALITY DURING THE INTAKE AND INTERVIEW PROCESS TO MINIMIZE POTENTIAL COERCION OF SURVIVORS:** Staff safety plans with program participants and community members who call RP’s 24-hour crisis hotline. The intake space is entirely private. As a trauma-informed agency, the organization does not require that participants immediately reveal the nature of their trauma or exploitation and allows that information to be shared over several intake sessions, if needed.
2. **MAKING DETERMINATIONS AND PLACEMENTS INTO SAFE HOUSING:** Case Managers work with every participant to help them safety plan and identify what will constitute safe housing for them. This decision is arrived at through close collaboration with the participant.
3. **KEEPING INFORMATION AND LOCATIONS CONFIDENTIAL:** The locations of all Ruby’s Place facilities and scattered site housing are kept confidential and the utmost care is taken in using electronic note systems to ensure that the information cannot be hacked.
4. **TRAINING STAFF ON SAFETY AND CONFIDENTIALITY POLICIES AND PRACTICES:** All RP staff receive 60 hours of training on working with victims of domestic violence which includes rigorous instruction on safety planning.
5. **TAKING SECURITY MEASURES FOR UNITS (CONGREGATE OR SCATTERED SITE) THAT SUPPORT SURVIVORS’ PHYSICAL SAFETY AND LOCATION CONFIDENTIALITY:** The RP’s emergency shelter and site-based transitional housing programs are fenced and gated with a security camera entrance system and 24-hour on-site staff.

4A-3d.1.	Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(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)**

**PROJECT EVALUATED TO ENSURE SAFETY OF SURVIVORS:** RP has been providing trauma-informed, victim-centered support for victims of domestic violence since 1972 and a continuum of housing choices for its participants, including emergency shelter, site-based transitional housing, and scattered-site rapid re-housing. In the more than 20 years it has been operational, the location of the emergency shelter and transitional housing facility have successfully been maintained as confidential. RP regularly seeks anonymous feedback from clients and staff through surveys and/or third-party-managed focus groups in Spanish and English that addresses, among other topics, actual and perceived survivor and staff safety.

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

	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. PARTICIPANT CHOICE AND RAPID PLACEMENT STABILIZATION IN PH: Participants are encouraged to access whichever level of housing they feel is appropriate for themselves and their families, and staff work with them to access and maintain that housing. In addition, participant's choice and rapid placement and stabilization in permanent housing, when chosen, are the cornerstones of the successful RRH program RP has been operating since 2017.

2. ESTABLISHING AND MAINTAINING MUTUAL RESPECT: Policies are designed to minimize power differentials, and therefore, the agency has consistent rules for staff and participants, such as the ability go offsite and bring food back, and staff-only meetings and events are discouraged in the presence of clients. All services staff receive at least 40 hours of training on working in a trauma-informed and victim-centered approach with victims of domestic violence and an additional 40 hours of training for working with victims of human trafficking.

3. PROVIDING PARTICIPANTS ACCESS TO INFORMATION ON TRAUMA: Participants are provided psychoeducation on the effects of childhood trauma and coping with trauma responses during their clinical sessions with a licensed Marriage and Family Therapist.

4. EMPHASIZING PROGRAM PARTICIPANT STRENGTH: Clinical services and case management work from a strength-based model of services and in close partnership with participants to identify each person's individual strengths in order to assist them in building goals and support their unique plans.

5. CENTERING CULTURAL RESPONSIVENESS AND INCLUSIVITY: RP serves a diverse clientele of individuals who have survived human trafficking and domestic violence, and strives to ensure that its programs and services are effective, equitable, understandable, respectful, and responsive to diverse cultural beliefs, practices, preferred languages, and other communication needs. For example, staff speak eight different languages, and over 80% of staff are bilingual, particularly in English and Spanish. All participants are informed of the availability of language assistance. The agency's governance and leadership promote culturally and linguistically appropriate, sensitive, and relevant services through policies, practices and partnerships developed. RP recruits, promotes and supports a diverse governance board, staff leadership, and general workforce that represent the populations served and are educated on policies and best practices on an ongoing basis. 53% of the workforce is African American, 33% Latinx, 11% White, 2% Asian, and 2% LGBTQ.

6. PROVIDING OPPORTUNITIES FOR CONNECTION FOR PROGRAM PARTICIPANTS: RP offers weekly support groups and monthly social activities that include participants from all shelter and housing programs, although attendance at group activities is not required for any program participant. It also partners with Mujeres Unidas y Activas to provide peer-to-peer support for mono-lingual Spanish speaking immigrants. Although residents of scattered-site permanent housing rarely travel to participate in group activities, they do form a strong connection with their respective case manager, who visits them regularly.

7. OFFERING SUPPORT FOR PARENTING: The organization offers weekly children's programs with play-and-art-therapy activities for children while parents participate in a support group for parents. Child development information and positive parenting techniques are discussed in the support group, which also offers opportunities for self-care.

4A-3f.	Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

Describe in the field below examples of supportive services the project provided to domestic violence survivors while quickly moving them into permanent housing and addressing their safety needs.

**(limit 5,000 characters)**

**SUPPORTIVE SERVICES APPLICANT PROVIDED TO DOMESTIC VIOELNCE SURVIVORS WHILE MOVING INTO PERMANENT HOUSING AND ADDRESSING SAFETY NEEDS:** The clinical and case management staff at RP provide trauma-informed, wrap-around services to victim of domestic violence to prepare them to be successful in permanent housing and to help the process of healing from trauma. Individual case plans, arrived at in partnership between the case manager and the participant, can address service needs including bad credit history, housing search and counseling, education services, etc.

**EXAMPLES OF HOW PROJECT APPLICANT PROVIDES SUPPORTIVE SERVICES TO SURVIVORS:** RP provides legal services to help DV survivors pursue child custody, legal protection, and resolve outstanding legal matters through partnership with pro-bono attorneys at the Alameda County Family Justice Center, Asian Pacific Islander Legal Outreach (APILO), and Justice at Last. RP offers job training and employment support services through partnership with Rubicon Services at the America’s Job Center of California in Hayward. In addition to accepting referrals, Rubicon visits RP sites monthly to offer workshops and encourage participation in employment programs. Two licensed clinicians at RP provide mental health care services at no cost to program participants and their children. Case Managers quickly assess whether survivors need credit repair services and assist them in restoring their credit, which is often necessary to obtain affordable housing for survivors whose credit has been damaged. They also work with participants to access mainstream benefits including income subsidy programs, food programs, utility discount programs, and medical insurance. Case Managers also provide warm referrals and follow-ups to low-or-no-cost community services, including education programs, drug and alcohol treatment programs, childcare, and accessing medical care. RP has an exclusive relationship with a local dentist who provides pro-bono dental care to program participants.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Approaches for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(e)	

Provide examples in the field below of how the new project 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 works 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. **PARTICIPANT CHOICE AND RAPID PLACEMENT STABILIZATION IN PH:** The housing preferences of program participants are solicited early in the case management process. If preferences cannot be met within the program, case managers will work with participants to narrow down their priorities or will be assisted with seeking housing outside of the program. Participants will never be offered housing that does not meet their stated preferences and needs. In four years of operations, all clients have been realistic and helpful in the housing search. The program goal is to have enrolled participants housed within 2 months. If emergency support is needed during that time, RP can provide it through its shelter or hotel voucher programs.

2. **ESTABLISHING AND MAINTAINING MUTUAL RESPECT:** The program will not use punitive interventions. Case Managers and housing program staff receive 60 hours of training in providing trauma-informed care in a relational (mutual respect) model. Interactions are based on equality and minimizing power differentials. The RP housing forms and procedures have been reviewed by third-party experts and any language that was found to be punitive, un-egalitarian, not victim-centered, or culturally insensitive was removed. RP continues to refine these processes as staff deepen their expertise in trauma-informed care.

3. **PROVIDING PARTICIPANTS ACCESS TO INFORMATION ON TRAUMA:** Participants can receive information about trauma in group settings and one-on-one with any member of the direct services staff. Clients wishing to explore trauma in their own lives or to learn more can do so in groups or one-on-one with trained RP clinicians who are available in person and who move from site to site within the RP programs to be available either for appointments or for casual interactions.

4. **EMPHASIZING PROGRAM PARTICIPANT STRENGTH:** Case Management at RP is a strengths-based process that includes exploring strengths, goals and aspirations. The case plan is individual to each participant and is made up of their own goals paired with the resources that the case manager can bring to help in the achievement of those goals. In several years of operating under a trauma-informed, relational model, RP staff see that almost all program participants are able to recognize a path toward their goals once they have had sufficient time in a secure, safe, and healthy place with supportive and healthy relationships.

5. **CENTERING CULTURAL RESPONSIVENESS AND INCLUSIVITY:** RP provides staff with training on equal access and cultural competence. The organization creates its print materials in Spanish, English, and other languages as needed, and is in the process of transitioning digital materials to multiple languages. Signage is posted in English, Spanish, Standard Chinese, and Braille. The board, leadership, and direct staff is racially, ethnically, culturally, and linguistically diverse to reflect the participants served. To continually address cultural competence issues, RP has a staff Racial Equity Collective (REC) which includes third-party experts, that can help to educate staff peer-to-peer and to coordinate formal trainings.

6. **PROVIDING OPPORTUNITIES FOR CONNECTION FOR PROGRAM PARTICIPANTS:** Participants in the rapid re-housing program live in scattered sites. They are invited to travel to in-person groups or to participate in online groups. Participation is not a condition for program continuation. Turn out among scattered-site clients is generally low. Referrals to affinity groups, mentoring programs, and other opportunities to create connections with non-staff individuals are presented and encouraged. At a minimum, clients connect with a staff member with whom they can form a positive relationship.

7. **OFFERING SUPPORT FOR PARENTING:** Participants are provided with

child care resources including direct funding, vouchers, and support locating quality and affordable providers in their personal price range by their Case Manager. RP offers weekly parenting classes with child care provided which focus on resiliency factors, child development information, and self-care opportunities.

4A-3h.	Plan for Involving Survivors in Policy and Program Development of New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(f)	

Describe in the field below how the new project(s) will involve survivors with a range of lived expertise in policy and program development throughout the project's operation.

**(limit 2,500 characters)**

Ruby's Place is primarily staffed with survivors of gender-based violence and other violent crimes. Ruby's Place keeps one seat on its Board of Directors for a formerly homeless program participant with an interest in advocating for clients with leadership. Currently, that member is fewer than 7 years from her experience of homelessness. She has been a guide to the Ruby's Place Director of Programs in the development of trauma-informed, victim-centered practices. Ruby's Place also surveys clients regularly anonymously and through focus groups for program improvement feedback.

## Project Applicants Applying for New PH-RRH and Joint TH and PH-RRH DV Bonus Projects

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	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 2022 Priority Listing:

1.	Applicant Name	Ruby's Place
2.	Project Name	TH/RRH
3.	Project Rank on the Priority Listing	
4.	Unique Entity Identifier (UEI)	
5.	Amount Requested	
6.	Rate of Housing Placement of DV Survivors-Percentage	
7.	Rate of Housing Retention of DV Survivors-Percentage	

**You must enter a response for elements 1 through 7 in question 4A-3b.**

4A-3b.1.	Applicant Experience in Housing Placement and Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(c)	

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)**

4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(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)**

4A-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(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)**

4A-3d.1.	Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(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)**

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

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)**

4A-3f.	Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

Describe in the field below examples of supportive services the project provided to domestic violence survivors while quickly moving them into permanent housing and addressing their safety needs.

**(limit 5,000 characters)**

4A-3g.	Plan for Trauma-Informed, Victim-Centered Approaches for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(e)	

Provide examples in the field below of how the new project 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 works 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)

4A-3h.	Plan for Involving Survivors in Policy and Program Development of New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(f)	

Describe in the field below how the new project(s) will involve survivors with a range of lived expertise in policy and program development throughout the project's operation.

(limit 2,500 characters)



## 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.   |
|    | <ul style="list-style-type: none"> <li>. 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).</li> <li>. We must be able to read everything you want us to consider in any attachment.</li> </ul>                          |
| 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.  |

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No		
1E-1. Local Competition Deadline	Yes		
1E-2. Local Competition Scoring Tool	Yes		
1E-2a. Scored Renewal Project Application	Yes		
1E-5. Notification of Projects Rejected-Reduced	Yes		
1E-5a. Notification of Projects Accepted	Yes		
1E-5b. Final Project Scores for All Projects	Yes		
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		
1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
3A-1a. Housing Leveraging Commitments	No		

3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		

## **Attachment Details**

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## Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/19/2022
1B. Inclusive Structure	09/25/2022
1C. Coordination and Engagement	09/25/2022
1D. Coordination and Engagement Cont'd	Please Complete
1E. Project Review/Ranking	09/25/2022
2A. HMIS Implementation	09/25/2022
2B. Point-in-Time (PIT) Count	09/25/2022
2C. System Performance	09/25/2022
3A. Coordination with Housing and Healthcare	Please Complete
3B. Rehabilitation/New Construction Costs	09/25/2022
3C. Serving Homeless Under Other Federal Statutes	09/25/2022

**4A. DV Bonus Project Applicants**

Please Complete

**4B. Attachments Screen**

Please Complete

**Submission Summary**

No Input Required

**Notes:**

3A. Coordination with Housing and Healthcare list contains 1 incomplete item.

4A. DV Bonus Project Applicants list contains 2 incomplete items.