

## 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 2021 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2021 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 2021 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

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

**1A-1. CoC Name and Number:** CA-508 - Watsonville/Santa Cruz City & County CoC

**1A-2. Collaborative Applicant Name:** County of Santa Cruz

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

**1A-4. HMIS Lead:** County of Santa Cruz

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

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

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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.n., and VII.B.1.p.	

In the chart below for the period from May 1, 2020 to April 30, 2021:

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

19.	Mental Illness Advocates	Yes	No	Yes
20.	Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
21.	Non-CoC-Funded Victim Service Providers	Yes	No	Yes
22.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
23.	Organizations led by and serving LGBT persons	Yes	Yes	Yes
24.	Organizations led by and serving people with disabilities	Yes	No	Yes
25.	Other homeless subpopulation advocates	Yes	Yes	Yes
26.	Public Housing Authorities	Yes	Yes	Yes
27.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
28.	Street Outreach Team(s)	Yes	Yes	Yes
29.	Substance Abuse Advocates	No	No	No
30.	Substance Abuse Service Organizations	Yes	Yes	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Service Providers	Yes	Yes	Yes
Other:(limit 50 characters)				
33.	Health Advocates	Yes	Yes	No
34.	Neighborhood Community Groups	Yes	Yes	No

1B-2.	Open Invitation for New Members.	
	NOFO Section VII.B.1.a.(2)	

Describe in the field below how your CoC:	
1.	communicated the invitation process annually to solicit new members to join the CoC;
2.	ensured effective communication with individuals with disabilities, including the availability of accessible electronic formats;
3.	conducted outreach to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join your CoC; and
4.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, persons with disabilities).

**(limit 2,000 characters)**

1. The CoC invites new members when it issues notices of full CoC meetings. As the meetings are every biannual, new member invitations occur 2 times per year. Invitations are sent out via e-mail list serve to a long list of organizations and persons in the county known to be interested in homelessness issues and are posted on the CoC Facebook page. This list is regularly updated when an interested person or group requests to be added, or when CoC staff otherwise become aware of an interested person or group.

2. Invitations are sent in accessible format PDF. The CoC also improves accessibility through linear content design that works well with assistive devices, logical tab order, consistent navigation structure, and alt attributes.

3. Special outreach through e-mail correspondence, phone calls, and in-person meetings takes place every year to encourage participation by persons experiencing homelessness or formerly homeless. CoC staff have contacted and engaged a broad range of mainstream public and nonprofit organizations, and encouraged them to identify clients who are interested in the CoC and to

bring them to meetings. Invitations are sent to all YAB members and every adult experiencing homelessness known to be interested in the CoC.

4. Finally, the following CoC members serving diverse groups receive every invitation: Community Action Board, FIT, Pajaro Valley Shelter Services, and Salvation Army (Latinx); Mental Health Community Action Network, Central Coast Center for Independent Living and Encompass (disabilities), and the Diversity Center (LGBTQ).

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 2,000 characters)**

1. Despite the challenges of COVID-19, the CoC has solicited opinions by inviting a broad list of organizations and persons, representative of a range of opinions, knowledge, and interests, to attend and participate in every virtual meeting of the full CoC. All CoC committees, e.g., for Coordinated Entry System (CES), Youth Homelessness Demonstration (YHDP), Youth Advisory Board (YAB), Care Coordination Pilot, HMIS, Governance planning, and State funding planning, have invited interested many non-CoC members.

Working with Focus Strategies consultants, the CoC completed a comprehensive planning process to inform system redesign and our new Strategic Homelessness Plan, called Housing for a Healthy Santa Cruz. This past year, the process included advisory committee meetings, surveys, posting key documents on the CoC website for comment; requesting comments through list serve mails and social media, presenting at County Board and City Council virtual meetings; and speaking at non-CoC virtual community meetings.

The CoC engaged stakeholders during the intensive process of standing up emergency responses to COVID-19, including a Shelter and Care Task Force, a policy leadership team, and weekly virtual meetings with health system providers, shelter providers, and elected officials.

2. During public meetings, the CoC communicates orally and in writing in the form of written staff memoranda or presentations and background information for each agenda item. The agenda and written materials are sent to our list serve a few days before the meeting

3. The CoC has is used the input gathered to inform non-congregate shelters and health and social distancing protocols; revision of the strategic plan with lessons from the COVID-19 response; governance design and system rightsizing, changes to CES prioritization; expansion of HMIS; program and funding priorities for State and COVID-19 funding sources; emergency

interventions and a rehousing wave strategy, public engagement and information, and more.

<b>1B-4.</b>	<b>Public Notification for Proposals from Organizations Not Previously Funded.</b>	
	NOFO Section VII.B.1.a.(4)	

Describe in the field below how your CoC notified the public:	
1.	that your CoC’s local competition was open and accepting project applications;
2.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;
3.	about how project applicants must submit their project applications;
4.	about how your CoC would determine which project applications it would submit to HUD for funding; and
5.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.

**(limit 2,000 characters)**

1. On September 1, 2021, the CoC issued a public solicitation of CoC applications and invitation to participate in an applicant orientation session open to all interested applicants. The invitation, process timeline, and application materials were also posted on the CoC’s publicly available website. The notice was sent to the CoC’s list serve of all known interested organizations.

2. The solicitation and application policies and procedures manual specifically highlighted the process was OPEN TO NEW APPLICANTS. A section on p. 27 specifically invited new applicants and offered them technical assistance. One new applicant did apply, Community Bridges, although its application did not meet threshold eligibility.

3. The virtual general applicant orientation took place September 10, and included a briefing on HUD and local application process, priorities, and requirements, how to apply for funding, the deadlines for and how to submit both local scoring applications and e-snaps applications, and the process and objective criteria for scoring, ranking, and selecting applications for submission to HUD.

4. Proposals were reviewed and rated with a 100-point rating tool using objective criteria and HMIS-based performance benchmarks. On October 29, the CoC Homeless Action Partnership (HAP) Review and Ranking Committee met virtually to review the applications, staff-tabulated scores, and project performance data, and to make project selection and ranking decisions. Project selections and ranking were unanimous and written decisions were sent to applicants on November 1. The meeting minutes and ranking list were posted online and public notification sent out on November 2.

5. The CoC uses the following to improve information accessibility: accessible PDF documents, linear content design that works well with assistive devices, logical tab order, consistent navigation structure, and alt attributes. No requests for accommodation were received.

# 1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

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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 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)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBT 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.	Landlord Incentive Programs	Yes
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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 2,000 characters)**

1. The CoC regularly consults with the State of California ESG Program (only ESG recipient in the CoC) through ESG workshops, webinars, conference calls, phone/email interactions, written comment, and survey input on policy and funding allocations. This past year, the CoC members participated in public hearings on the Consolidated Plan, annual action plans, and substantial amendments relating to ESG-CV; provided feedback through surveys, a housing listening session, and written comments on annual action plans; took part in webinars and trainings on ESG funding, Cares Act ESG-CV funding, and rehousing strategies; and weekly Cares Act ESG-CDBG office hours.

2. The CoC works with the State ESG Program to evaluate ESG project performance. Per State procedures, competitive ESG projects are ranked by the CoC and submitted to the State competition, while the CoC directly selects non-competitive RRH projects. The CoC Board makes project decisions based on need, priorities, performance, and design.

This past year, the CoC also received \$9.5 million in ESG-CV funds through direct allocation from the State. The CoC sub-awarded these funds to critically needed programs for COVID-19 non-congregate and semi-congregate shelter, emergency food; outreach services, HMIS, and a rapid rehousing program to rehouse people from CIVID-19 shelters. The CoC manages the funds, monitors grantees, compiles HMIS data, and submits performance reports to the State.

3. Santa Cruz County HIC, PIT, and HMIS performance data were provided each consolidated plan jurisdiction: the State, Santa Cruz, and Watsonville.

4. Each year, CoC staff provide data gathering and written text for Santa Cruz and Watsonville Con Plan updates and provide input HIC, PIT, project HMIS performance, and financial data when submitting applications and reports for the ESG and ESG-CV program.

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 gender:

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	No
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)	
	Reviewed programs to verify compliance anti-discrimination policies.	Yes

1C-4.	CoC Collaboration Related to Children and Youth—SEAs, LEAs, Local Liaisons & State Coordinators.	
	NOFO Section VII.B.1.d.	

Describe in the field below:

1.	how your CoC collaborates with youth education providers;
2.	your CoC's formal partnerships with youth education providers;
3.	how your CoC collaborates with State Education Agency (SEA) and Local Education Agency (LEA);
4.	your CoC's formal partnerships with SEAs and LEAs;
5.	how your CoC collaborates with school districts; and
6.	your CoC's formal partnerships with school districts.

**(limit 2,000 characters)**

1. The CoC collaborates with youth education providers through CoC meetings and Santa Cruz County Office of Education (SCCOE) meetings, youth educators attend some CoC membership meetings, and family and youth providers regularly attend both HAP CoC and SCCOE meetings.

2. Formal partnerships between CoC agencies and youth educators include Foster Youth and Homeless student advocacy, training and case management, the Backpack Project, the annual School Needs Assessment Survey, Restorative Practices Diversion for police and probation referrals, mental health prevention and intervention support in collaboration with the County Children's Behavioral Health Department.

3. The CoC collaborates with LEAs through CoC meetings, SCCOE meetings, and project activities. The SCCOE Students in Transition (SIT) program has a seat on and regularly attends the CoC HAP.

4. Formal partnerships with LEAs include: (1) the SCCOE SIT's participation in the YHDP-funded Youth Homelessness Response Team; (2) Cabrillo College's participation in HEAP-funded housing assistance students; and (3) the CoC's participation in the SCCOE SIT's 30-year-old McKinney-Vento Education of Homeless Children and Youth (EHCY) program. The EHCY grant funds positions to furnish more intensive case management and advocacy for

homeless students, coordination of staff training on legal rights, and trauma-informed care and inclusive responses to homeless youth.

5. CoC programs serving homeless families collaborate closely with school districts through meetings with school liaisons and administrators, support for teacher-family relationships, and efforts to provide services.

6. Formal partnerships with school districts include working with Pajaro Valley School District's Healthy Start program, providing homeless families with backpacks, school supplies, CalFresh enrollment, clothing assistance, assistance with completing forms, family advocacy, case management, and shelter search assistance.

1C-4a.	CoC Collaboration Related to Children and Youth—Educational Services—Informing Individuals and Families Experiencing Homelessness about Eligibility.	
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 2,000 characters)**

The CoC has policies and procedures to inform individuals and families who become homeless of their eligibility for education services. The following quotes the relevant policies and procedures as excerpted from the CoC's adopted CoC and ESG program standards document, updated by the CoC in 2017:

Educational policies and liaison:

All programs that serve households with children or unaccompanied youth, must:

- Take the educational needs of children into account when placing families in housing and will, to the maximum extent practicable, place families with children as close as possible to their school of origin so as not to disrupt such children's education
- Inform families with children and unaccompanied youth of their educational rights, including providing written materials, help with enrollment, and linkage to McKinney Vento Liaisons as part of intake procedures.
- Not require children and unaccompanied youth to enroll in a new school as a condition of receiving services.
- Allow parents or the youth (if unaccompanied) to make decisions about school placement.
- Not require children and unaccompanied youth to attend after-school or educational programs that would replace/interfere with regular day school or prohibit them from staying enrolled in their original school.
- Post notices of student's rights at each program site that serves homeless children and families in appropriate languages.
- Designate staff that will be responsible for:
  - oEnsuring that homeless children and youth in their programs are in school and are receiving all educational services they are entitled to; and
  - oCoordinating with the CoC, the Department of Social Services, the County Office of Education, the McKinney Vento Coordinator, the McKinney Vento Educational Liaisons, and other mainstream providers as needed.

1C-4b.	CoC Collaboration Related to Children and Youth–Educational Services–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	Yes	No
2.	Child Care and Development Fund	No	Yes
3.	Early Childhood Providers	Yes	No
4.	Early Head Start	Yes	No
5.	Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	Yes
6.	Head Start	Yes	No
7.	Healthy Start	Yes	No
8.	Public Pre-K	Yes	No
9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.	First 5 Starlight Center - Infant/Toddler Program	Yes	No

1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Annual Training–Best Practices.	
	NOFO Section VII.B.1.e.	

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

1.	Project staff that addresses safety and 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 safety and 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 2,000 characters)**

1. The CoC coordinates with local DV providers on DV training. Walnut Avenue Family Women’s Center (WAFWC) provides CoC providers, CES staff, and interested community members with free in-service trainings (currently virtual) MONTHLY, covering DV services, safety planning, rights, children’s needs, and supporting survivors. WAFWC also provides an annual Safety Strategies During Holidays training; monthly school-based workshops, quarterly Advocate certification training; and takes part in the following annual events: Project Homeless Connect, trauma training at Encompass, and annual healthy relationship fair. Monarch Services invites CoC and CES providers to free monthly online workshops covering e.g., Sexual Health and Boundaries, Causes and Community Response to Violence, Commercial Exploitation of Children, and more. Encompass invites CoC providers to a yearly training on trauma-informed care. Also, the County informed and encouraged all CoC agencies to attend the October 15 all-day Fall Trauma Conference held in Santa Cruz.

2. CES trainings for assessor staff of CES participating agencies are held quarterly. CES staff also can attend all of the above DV trainings. These comprehensive trainings include trauma-informed care, crisis intervention, cultural competency, and special policies and procedures for persons fleeing DV. These trainings include Smart Path’s separate, confidential process for individuals and families who are fleeing/attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking who are receiving services from designated domestic violence service agencies. This process provides for the confidentiality and safety of participants, while ensuring they receive the same opportunities for accessing housing opportunities as other Smart Path participants.

1C-5a.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Using De-identified Aggregate Data.	
NOFO Section VII.B.1.e.		

Describe in the field below how your CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking survivors.

**(limit 2,000 characters)**

WAFWC (applying for both renewal and DV bonus funds) uses the Social Solutions Apricot comparable data system, while Monarch Services uses Osnum. The CoC uses aggregate non-identifiable data from these databases to assess homelessness among individuals and families fleeing DV and other forms of violence, to track services and housing outcomes, to improve programs and services for survivors, to inform grant funding decisions and progress reporting, to provide data for the biennial PIT and annual HIC, to inform the public about DV survivors needs, and to inform the improvement of the safety planning and privacy procedures in our CES policies and CoC standards.

Using data from these comparable databases and DV services crisis call numbers, the CoC and DV providers have found that COVID-19 has driven a large increase in domestic violence in Santa Cruz County. For example, between 2019 and 2020 Monarch Services found that DV crisis calls jumped from 1,661 to 5,792 and that their delivery of services such as counseling, emergency shelter, housing aid, financial aid, transportation, and support increase by 75%. These data were a key factor in the CoC’s decision to award Monarch Services \$350,000 on State HEAP funds for shelter improvements and rental assistance.

In addition, HMIS data (not including comparable data) found that in the period between October 2019 and September 2020 596 persons identified as being a DV victim or survivor, while our most complete sheltered and unsheltered PIT count (January 2019) found that of the persons enumerated 10%, or 217 people, cited domestic violence as their primary cause of homelessness, 32%, or 693 people had experienced past domestic violence, and 5% or 108 people were experiencing current domestic violence. These facts were an important reason that the CoC has prioritized WAFWC’s DV programs for CoC funding, including ranking its renewal second and approving it new project for the DV bonus.

1C-5b.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Coordinated Assessment—Safety, Planning, and Confidentiality Protocols.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC’s coordinated entry system protocols incorporate trauma-informed, victim-centered approaches while maximizing client choice for housing and services that:	
1.	prioritize safety;
2.	use emergency transfer plan; and
3.	ensure confidentiality.

**(limit 2,000 characters)**

The CoC’s DV providers, Monarch Services and WAFWC, are trained in safety and trauma-informed and victim-centered services. Santa Cruz agencies work directly with these DV providers to link DV survivors to the range of housing and service options, and raising the awareness of all about the special security and confidentiality challenges of DV victims. The CES Steering Committee developed, and CoC agencies have implemented DV policies and procedures to prioritize and protect DV survivors, including the following:

1. All homeless agencies are trained on the experience of DV survivors, and ask about DV in a sensitive, trauma-informed way. When a person as a DV survivor safety and confidentiality protocols are immediately implemented. DV survivors are offered a warm handoff to DV providers who offer DV shelter and inform survivors of the housing/service options including risk information to inform and maximize the household’s choice.
  
2. The local Housing Authority, which maintains many of the housing programs such as S+C and a Housing Choice Voucher homeless preference, has adopted a VAWA-compliant emergency transfer plan. The CoC does not currently have a CoC-wide transfer plan, but intends to adopt one in the coming year. However, CoC agencies do implement transfer procedures as follows: (1) the survivor makes a request for transfer and provides supporting information for verification, and (2) the agency helps the survivor to move to another unit, if available. Both Monarch and Walnut Ave. coordinate with CoC providers and the survivors to provide shelter, housing resources, and support, and to expedite safety-related transfers.
  
3. When person presents as a DV survivor, confidentiality protocols are followed. As required by the CES policies and procedures, anonymity and security are protected, and HMIS data entry is prohibited. Furthermore, CES assessment, and waitlist information are maintained as anonymous without identifying information.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender—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 LGBT individuals and families receive supportive services, shelter, and housing free from discrimination?	Yes
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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 to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	Yes

1C-7.	Public Housing Agencies within Your CoC's Geographic Area--New Admissions--General/Limited Preference--Moving On Strategy. You Must Upload an Attachment(s) to the 4B. Attachments Screen.	
	NOFO Section VII.B.1.g.	

Enter information in the chart below for the two largest PHAs highlighted in gray on the CoC-PHA Crosswalk Report at <https://files.hudexchange.info/resources/documents/FY-2020-CoC-PHA-Crosswalk-Report.pdf> 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 2020 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 the County of Santa Cruz	22%	Yes-HCV	Yes

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	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 2,000 characters)**

1. The CoC has worked very closely with the Santa Cruz County Housing Authority (only HA in the area to establish these homeless preferences in the HA Administrative Plan:

a. Limited HCV preference for Disabled and Medically Vulnerable (DMV) homeless persons in the Housing Choice Voucher (HCV) Program. Up to 150 households can be assisted under the DMV limited preference at a given time. Referrals come from Housing Matters, are assessed through CES, and must have a case management plan with a services provider.

b. Limited HCV preference for homeless families with minor children, from families already on the HCV waitlist. Up to 40 families may be assisted under the preference at a given time.

c. Limited HCV preference for homeless families with minor children for the Brommer Street Supportive Housing units. Families are referred by the Human Services Department (HSD).

d. Temporary Mainstream Voucher preference for non-elderly persons with disabilities at high risk of COVID-19, who are staying in time-limited non-congregate shelters (NCS). Up to 75 vouchers are available at a given time. Additional vouchers may be used to avoid delay if other homeless targeted voucher preferences are fully utilized. Referrals come directly from HSD, which uses NCS and CES data provides case management and housing navigation services.

e. HCV preference for Shelter Plus Care (S+C) participants who have been in good standing for two years (case management continues with Health Services Agency) and for YHDP New Roots PSH participants who have been good standing for two years or to make room in New Roots for “younger” youth (case management continues with Encompass).

The CoC also works closely with the HA on special purpose voucher programs: 368 HUD VASH voucher for homeless veteran, 218 FUP vouchers (including a preference for homeless youth identified through CES), and 263 Emergency Housing Vouchers.

2. N/A

1C-7b.	Moving On Strategy with Affordable Housing Providers.	
	Not Scored—For Information Only	

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

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

1C-7c.	Including PHA-Funded Units in Your CoC’s Coordinated Entry System.	
	NOFO Section VII.B.1.g.	

Does your CoC include PHA-funded units in the CoC’s coordinated entry process?	Yes
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1C-7c.1.	Method for Including PHA-Funded Units in Your CoC’s Coordinated Entry System.	
	NOFO Section VII.B.1.g.	

If you selected yes in question 1C-7c., describe in the field below:

1.	how your CoC includes the units in its Coordinated Entry process; and
2.	whether your CoC's practices are formalized in written agreements with the PHA, e.g., MOUs.

**(limit 2,000 characters)**

1. The CoC and Housing Authority (HA) have established a process for including all homeless-preference and homeless special purpose units (see above) in the Smart Path CES. The HA is responsible for providing Smart Path with the eligibility requirements for each program and regularly reporting program openings. When the HA has an opening, Smart Path uses the housing match feature in HMIS to filter participants by appropriate VI/SPDAT score and by HA program eligibility criteria. Based on the results of the match, Smart Path then makes a referral in HMIS to the HA and services provider for the relevant HA program. The Smart Path Housing Workgroup (HA participates) is sometimes used to share program related information including new openings and to help in the process of locating the participant.

Once the referral has been made, the service provider for the relevant HA program is responsible for contacting and assisting the participant to complete HA paperwork, helping the participant to locate and move into a unit, and providing case management.

2. These practices are formalized in written MOUs for each HA program, which specify the roles and responsibilities of the HA and service providers, the program eligibility requirements, CES use and prioritization requirements, and case management plan requirements. These MOUS include those with the Human Services Department (HSD) for homeless families, Brommer Street, mainstream vouchers, FUP-youth preference, and EHV; Health Services Agency (HAS) for Shelter Plus Care; Housing Matters for DMV vouchers; Encompass for YHDP New Roots PSH; and the VA for HUD VASH.

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

Did your CoC coordinate with a PHA(s) to submit a joint application(s) for funding of projects serving families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other non-federal programs)?	Yes
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1C-7d.1.	CoC and PHA Joint Application–Experience–Benefits.	
	NOFO Section VII.B.1.g.	

If you selected yes to question 1C-7d, describe in the field below:

1.	the type of joint project applied for;
2.	whether the application was approved; and
3.	how your CoC and families experiencing homelessness benefited from the coordination.

**(limit 2,000 characters)**

1. In 2019, the CoC and Housing Authority applied jointly for 37 Family Unification Program (FUP) vouchers for child welfare-involved families lacking adequate housing, with a set aside for homeless former foster youth ages 18-24

identified through Smart Path and referred by HSD. In 2020, the CoC and Housing Authority applied jointly for 75 Mainstream vouchers for non-elderly persons with disabilities at high risk of COVID-19, who are staying in time-limited non-congregate shelters (NCS).

2. Both applications were awarded funds.

3. CoC and HA coordination on these program is responsible for very substantial benefits to the CoC and families experiencing homelessness. This coordination not only helped to apply for and secure the funds, but also design programs that have a maximum positive impact in reducing and eliminating homelessness in Santa Cruz County as follows:

a. The FUP vouchers are benefiting the CoC and families by: providing new resources to help reduce family homelessness; leveraging our YHDP initiative with new housing resources to help reduce youth homelessness; meeting the housing need needs of child welfare-involved families; and by providing new housing resources for former foster youth experiencing homelessness.

b. The mainstream vouchers are benefiting the CoC and households by providing new resources to reduce family and adult homelessness; addressing the housing needs of families and adults with disabilities; leveraging our COVID-19 NCS programs with resources to move people out into permanent housing; and helping persons who are most at risk of severe COVID-19 illness due to their health-related disabilities.

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including American Rescue Plan Vouchers.	
	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.	Coordinating with PHA(s) to Administer Emergency Housing Voucher (EHV) Program–List of PHAs with MOUs.	
	Not Scored–For Information Only	

Did your CoC enter into a Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
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If you select yes, you must use the list feature below to enter the name of every PHA your CoC has entered into a MOU with to administer the Emergency Housing Voucher Program.

<b>PHA</b>
Housing Authority...

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

**Name of PHA:** Housing Authority of the County of Santa Cruz

## 1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

1C-8.	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

1C-9.	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 2021 CoC Program Competition.	10
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 2021 CoC Program Competition that have adopted the Housing First approach.	10
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-coordinated entry projects the CoC has ranked in its CoC Priority Listing in the FY 2021 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1C-9a.	Housing First–Project Evaluation.	
	NOFO Section VII.B.1.i.	

Describe in the field below how your CoC regularly evaluates projects to ensure those that commit to using a Housing First approach are prioritizing rapid placement and stabilization in permanent housing and are not requiring service participation or preconditions of program participants.

**(limit 2,000 characters)**

Each year, the CoC assesses fidelity with Housing First through the CoC local competition. Project scoring criteria reward applicants to the extent that they can demonstrate compliance with Housing First practices and steps to eliminate barriers to housing. New and renewal projects that check boxes for all of the

Housing First practices receive more competitive points and are more likely to ranked high and receive funds. In addition, the CoC has learned that high rates of housing stability and low rates of returns to homelessness are associated with agency’s strong commitment to Housing First and a “whatever it takes” approach to service. Therefore, renewal applicants are assessed based upon the extent to which HMIS data show they maintain high rates of housing stability and prevent returns to homelessness, and new projects are assessed based upon the quality of their plans to maintain high rates of housing stability and prevent returns to homelessness.

The CoC also informs and trains providers on its CoC written program standards. Among other thing, these standards require that all CoC- and ESG-funded programs adhere to the following Housing First practices:

- Ensuring low-barrier, easily accessible assistance to all people, including, but not limited to, people with no income or income history, and people with active substance abuse or mental health issues;
- Helping participants quickly identify and resolve barriers to obtaining and maintaining housing;
- Seeking to quickly resolve the housing crisis before focusing on other non-housing related services;
- Allowing participants to choose the services and housing that meets their need, as practical;
- Connecting participants to services available in the community that foster long-term housing stability; and
- Offering financial assistance and supportive services in a manner that offers a minimum amount of assistance initially, adding more assistance over time if needed to quickly resolve the housing crisis.

<b>1C-9b.</b>	<b>Housing First–Veterans.</b>	
	Not Scored–For Information Only	

Does your CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?	No
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<b>1C-10.</b>	<b>Street Outreach–Scope.</b>	
	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 2,000 characters)**

1. The purpose of street outreach in Santa Cruz County is to engage and assist all homeless persons, including those populations least likely to access services without outreach. Outreach workers use a harm reduction approach to build trust, offer basic healthcare and personal care items, and make referrals to

shelter, housing, health clinics, and mainstream programs, providing transportation when needed. Outreach teams provide on-the-spot CES assessments, safety assessments, psychosocial assessments, and stay engaged with the person to help facilitate housing referral and placement. Key goals are to connect each person to a healthcare and housing.

Specific subpopulations are the focus of different teams as follows: 1) HPHP mobile outreach teams visit 23 sheltered and unsheltered locations per month countywide, offering services and referrals; 2) the Encompass Downtown Outreach Team engages 30 homeless individuals per month in the downtown Santa Cruz area and connects them to a range of resources; 3) the HOPES program in downtown Santa Cruz focuses on justice system-involved and addicted homeless persons; and 4) Encompass offers TAY outreach and County Veterans Services offers veteran outreach.

2. Street outreach covers the entire CoC geography (Santa Cruz County).

3. Operating hours are: HPHP, M-F, 8 am-5 pm; Downtown Outreach Team, M-F, 9 am-6 pm; HOPES, M-F, 8 am-5 pm; Encompass TAY, M-F, flex hours; and County Veteran Services, M-Th, 8 am -12 pm, 1 pm – 5 pm.

4. Outreach team use peer contacts and services providers to identify the locations of the most hard-to-find encampments. Harm reduction and trauma-informed engagement approaches build trust among those least likely to ask for help. All outreach programs provide bilingual/bicultural services (Spanish-English), referrals, and transportation when needed. CAB has a bilingual toll-free shelter hotline. 2-1-1 I&R is available 24/7/365 by phone or Internet in more than 170 languages.

<b>1C-11.</b>	<b>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 prevent the criminalization of homelessness in your CoC's geographic area:

<b>1.</b>	<b>Engaged/educated local policymakers</b>	Yes
<b>2.</b>	<b>Engaged/educated law enforcement</b>	Yes
<b>3.</b>	<b>Engaged/educated local business leaders</b>	Yes
<b>4.</b>	<b>Implemented communitywide plans</b>	Yes
<b>5.</b>	<b>Other:(limit 500 characters)</b>	
	Downtown police and social services networking and coordination	Yes

<b>1C-12.</b>	<b>Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC).</b>	
	NOFO Section VII.B.1.I.	

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.”	420	522
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1C-13.	Mainstream Benefits and Other Assistance—Healthcare—Enrollment/Effective Utilization.	
	NOFO Section VII.B.1.m.	

Indicate in the chart below whether your CoC assists persons experiencing homelessness with enrolling in health insurance and effectively using Medicaid and other benefits.

	Type of Health Care	Assist with Enrollment?	Assist with Utilization of Benefits?
1.	Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
2.	Private Insurers	Yes	Yes
3.	Nonprofit, Philanthropic	Yes	Yes
4.	Other (limit 150 characters)		

1C-13a.	Mainstream Benefits and Other Assistance—Information and Training.	
	NOFO Section VII.B.1.m	

Describe in the field below how your CoC provides information and training to CoC Program-funded projects by:

1.	systemically providing 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.	communicating information about available mainstream resources and other assistance and how often your CoC communicates this information;
3.	working with projects to collaborate with healthcare organizations to assist program participants with enrolling in health insurance; and
4.	providing assistance with the effective use of Medicaid and other benefits.

**(limit 2,000 characters)**

1. The CoC HMIS cover the Santa Cruz County geography and includes a benefits eligibility module that systematically updates program staff regarding mainstream benefits, such as CalFresh, CalWorks, SSI, and General Assistance, and facilitates the application process. HSD also maintains a 24-hour automated benefits call center, which program staff can call to get updated information and to assist clients to apply.

2. County HSD and HSA staff distribute written materials to projects at semi-annual CoC membership meetings and monthly Human Care Alliance meetings that include program toolkits, fact sheets, partner agency resources, and updates. CoC staff send similar information via e-blast upon request of HSD or HSA staff. Also, HSD directs program staff to its website, which is regularly updated with current information on all mainstream benefits.

3. The CoC collaborates with the Health Improvement Partnership, Central Coast Alliance for Health, Dignity Health, First Five Santa Cruz, and Santa Cruz Community Health Centers To assist homeless people to take advantage of opportunities for health insurance enrollment. Providers refer participants to

these programs, each of which promotes enrolling qualified participants in Medi-Cal, Medicare, and Covered California insurance under the ACA.

4. Supported by HUD’s H2 Initiative and CSH assistance, the CoC and healthcare agencies have collaborate on expansion of Medi-Cal reimbursement for services in PSH. HPHP uses Healthcare for Homeless, SAMSHA, and SSA funds to help CoC program participants apply EBT, GA, SSI, SSDI, Medi-Cal, ACA insurance, and more. HSD s pays to outstation a benefits worker at FIT to assist families to receive TANF, Medicaid, SNAP, and other benefits. HSA and HSD attend Project Homeless Connect, assisting persons on the spot to apply for benefits.

1C-14.	Centralized or Coordinated Entry System–Assessment Tool. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.1.n.	

Describe in the field below how your CoC’s coordinated entry system:	
1.	covers 100 percent of your CoC’s geographic area;
2.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;
3.	prioritizes people most in need of assistance; and
4.	ensures people most in need of assistance receive assistance in a timely manner.

**(limit 2,000 characters)**

1. Smart Path CES uses an “any door” access strategy to cover the CoC geography. Homeless persons can complete the Smart Path assessment by calling 2-1-1 or visiting any of these “Access Points”: Santa Cruz area - Homeless Services Center (HSC), Mental Health Client Action Network (MHCAN), Santa Cruz Public Library – Downtown, and Veteran Resource Center (VRC); Watsonville area - Families in Transition (FIT), and Salvation Army Day Center; Encompass Community Services Youth Program. County of Santa Cruz Human Services Department employs contract mobile roaming assessor (with tablet) to provide assessment services at meal sites, shelters, encampments, outreach sites, or wherever needed.

2. Special outreach reaches those least likely to apply. Marketing flyers and assessments are translated into Spanish. Most Access Points offer bilingual services and are ADA accessible. Persons with SMI are reached though MHCAN. Roaming Assessors and outreach teams reach CH and other unsheltered persons. Veterans are reached through the VRC. Youth are reached by the YHDP-connected Encompass TAY Program. Immigrants and farmworkers are reached through outreach and roaming assessors. DV survivors are assessed and connected to DV providers.

3. Smart Path uses the VI-SPDAT to prioritize people based upon vulnerability and level of need: PSH – must be CH and have the highest VI-SPDAT scores in the range from 8-17 adults and TAY, and 9-22 families; RRH and TH - based upon highest scores in the range of 4-7 adults and TAY, and 4-8 families. Beginning in 2020, the CoC adopted a temporary policy prioritizing persons who face increased risk of mortality from COVID-19 for vacancies in participating PSH programs

4. Smart Path Policies and Procedures require agencies to make multiple

attempts to contact referred persons within 5 business days, and timeliness is an evaluation metric.

<b>1C-15.</b>	<b>Promoting Racial Equity in Homelessness–Assessing Racial Disparities.</b>	
	NOFO Section VII.B.1.o.	

Did your CoC conduct an assessment of whether disparities in the provision or outcome of homeless assistance exists within the last 3 years?	No
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<b>1C-15a.</b>	<b>Racial Disparities Assessment Results.</b>	
	NOFO Section VII.B.1.o.	

Select yes or no in the chart below to indicate the findings from your CoC’s most recent racial disparities assessment.

1.	People of different races or ethnicities are more likely to receive homeless assistance.	No
2.	People of different races or ethnicities are less likely to receive homeless assistance.	Yes
3.	People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	No
4.	People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	Yes
5.	There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	No
6.	The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	No

<b>1C-15b.</b>	<b>Strategies to Address Racial Disparities.</b>	
	NOFO Section VII.B.1.o.	

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.	No
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.	No
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.	No
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	No
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.	CES continually evaluates prioritization process to ensure equity in race and ethnicity.	No

1C-15c.	Promoting Racial Equity in Homelessness Beyond Areas Identified in Racial Disparity Assessment.	
	NOFO Section VII.B.1.o.	

Describe in the field below the steps your CoC and homeless providers have taken to improve racial equity in the provision and outcomes of assistance beyond just those areas identified in the racial disparity assessment.

**(limit 2,000 characters)**

Expanding additional funding opportunities for these small, non-traditional, often-BIPOC-led organizations representing underserved or marginalized communities by specifically calling them out and encouraging them in CoC and ESG funding solicitations and by offering special one-on-one technical assistance.

1C-16.	Persons with Lived Experience–Active CoC Participation.	
	NOFO Section VII.B.1.p.	

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.	50	10
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	50	10
3.	Participate on CoC committees, subcommittees, or workgroups.	11	2
4.	Included in the decisionmaking processes related to addressing homelessness.	1	1
5.	Included in the development or revision of your CoC’s local competition rating factors.	1	1

1C-17.	Promoting Volunteerism and Community Service.	
	NOFO Section VII.B.1.r.	

Select yes or no in the chart below to indicate steps your CoC has taken to promote and support community engagement among people experiencing homelessness in the CoC's geographic area:

1.	The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.	Yes
2.	The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery, data entry).	Yes
3.	The CoC works with organizations to create volunteer opportunities for program participants.	Yes
4.	The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	Yes
5.	Provider organizations within the CoC have incentives for employment and/or volunteerism.	Yes
6.	Other:(limit 500 characters)	
	Hold 2 annual Project Homeless Connect events - north and south county (paused due to COVID-19)	Yes

## 1D. Addressing COVID-19 in the CoC’s Geographic Area

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1D-1.	<b>Safety Protocols Implemented to Address Immediate Needs of People Experiencing Unsheltered, Congregate Emergency Shelter, Transitional Housing Homelessness.</b>	
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NOFO Section VII.B.1.q.	
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Describe in the field below protocols your CoC implemented during the COVID-19 pandemic to address immediate safety needs for individuals and families living in:	
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1.	unsheltered situations;	
2.	congregate emergency shelters; and	
3.	transitional housing.	

**(limit 2,000 characters)**

The CoC worked closely with County Public Health staff, partner agencies, and consultants to develop and implement protocols and processes to address the immediate safety needs for persons staying in unsheltered and temporary sheltered situations.

1. Unsheltered: Public Health staff in coordination with the CoC and other partner agencies created outreach teams to educate persons living unsheltered on preventing exposure to COVID-19 including safe camping set-ups and provided resources to support these prevention activities including masks, handwashing stations and sanitizer, and vaccine outreach. The outreach teams both went out to locations where persons unsheltered reside and set up regular pop-up sites for persons to visit to receive education and resources. The County’s Health Care for the Homeless Program known as the Homeless Persons Health Project coordinated these efforts and conducted informational meetings with other outreach providers in the community.

2. Congregate Emergency Shelter: The CoC worked closely with the County’s Public Health staff to advise emergency shelter and transitional housing (TH) providers on protocols for preventing the transmission of COVID-19 including the spacing of sleeping and eating areas and regular temperature checks. The CoC with County Public Health and consultants developed a detailed protocols document for shelter and transitional housing providers to use for all aspects of their work. The County delivered three meals daily to all shelter and transitional housing sites, helped fund 24 hour, 7-day per week shelter to prevent the need for guests to leave the sites, and regularly provided items such as masks and

cleaning supplies to help prevent the transmission of COVID-19.

3. Transitional Housing: The above steps and protocols also applied to TH.

<b>1D-2.</b>	<b>Improving Readiness for Future Public Health Emergencies.</b>	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC improved readiness for future public health emergencies.

**(limit 2,000 characters)**

To keep persons safe during the pandemic, the CoC worked closely with the County in the development and implementation of a strong emergency response organizational structure during the pandemic. The County’s Human Services Department oversees shelter and care emergency response activities during an emergency. In November 2020, during the pandemic, the County created a new Housing for Health Division within the Human Services Department to take on responsibility for staffing the CoC, administering HMIS, and acting as the Coordinated Entry lead. The County also established a new Office of Response, Recovery, and Resiliency (OR3) to coordinate emergency response preparedness and prevention activities year-round.

Staff members to the CoC participated in regular Emergency Operations Center (EOC) planning and check-in meetings and now have an established role in emergency response activities within the County. CoC, public health, and Homeless Persons Health Project staff have established strong communication links and a deeper understanding of their roles and responsibilities during a public health emergency. While specific to the COVID-19 pandemic, the CoC and its partner agencies will be able to build on this structure for future public health emergencies.

<b>1D-3.</b>	<b>CoC Coordination to Distribute ESG Cares Act (ESG-CV) Funds.</b>	
	NOFO Section VII.B.1.q	

Describe in the field below how your CoC coordinated with ESG-CV recipients to distribute funds to address:

<b>1.</b>	<b>safety measures;</b>
<b>2.</b>	<b>housing assistance;</b>
<b>3.</b>	<b>eviction prevention;</b>
<b>4.</b>	<b>healthcare supplies; and</b>
<b>5.</b>	<b>sanitary supplies.</b>

**(limit 2,000 characters)**

The County’s new Housing for Health Division as staff to the CoC worked with CoC Board members to prioritize the distribution of ESG-CV funding for safe sheltering and rehousing activities. ESG-CV funding has been utilized to support the creation of three new rehousing wave, strength-based case management and housing navigation teams working to help guests from COVID-19 sheltering sites to secure permanent homes. These programs

include housing assistance funding to help with application fees, security deposits, and short-term rental assistance. These teams and the CoC partnered with the Housing Authority of the County of Santa Cruz to set aside prioritized use of Emergency Housing Vouchers (EHVs) and Mainstream COVID-19 vouchers for guests at COVID-19 sheltering sites. Funds have also been utilized to cover shelter operational expenses not covered by Federal Emergency Management Agency (FEMA) authorization including sanitary and some health care supplies. With the creation of the new Housing for Health Division, staffing of the CoC and distribution of ESG-CV funding were coordinated by the same organization resulting in a more integrated and systematic use of available resources.

<b>1D-4.</b>	<b>CoC Coordination with Mainstream Health.</b>	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC coordinated with mainstream health (e.g., local and state health agencies, hospitals) during the COVID-19 pandemic to:

1.	decrease the spread of COVID-19; and
2.	ensure safety measures were implemented (e.g., social distancing, hand washing/sanitizing, masks).

**(limit 2,000 characters)**

The County Human Services Department and its new Housing for Health Division worked closely with the County Health Services Agency and mainstream health partners throughout the pandemic. The Housing for Health Division provides staffing to the CoC and participates in regular emergency operation center and public health planning sessions with mainstream health providers. Public health and human services staff organized regular meetings with shelter operators and outreach staff to ensure implementation of appropriate health and safety measures. Staff collaborated to establish dedicated isolation and quarantine beds at County-leased hotels in partnership with public health and mainstream health providers. A shelter referral system was established in partnership with mainstream health providers to prioritize access to county-leased non-congregate shelter for households at greatest risk for severe COVID-19 disease. This referral system included health care screening and triage of referrals and a tiered health risk system based on clinician review of health care records and completion of health assessments.

<b>1D-5.</b>	<b>Communicating Information to Homeless Service Providers.</b>	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC communicated information to homeless service providers during the COVID-19 pandemic on:

1.	safety measures;
2.	changing local restrictions; and
3.	vaccine implementation.

**(limit 2,000 characters)**

1. The CoC provided multiple venues for providers to receive timely information on COVID-19 related safety measures, changing local restrictions, and vaccine implementation, including:

•Twice monthly conference calls with all CoC agencies and other organizations, with information provided by staff from the County’s HSD, Public Health and the County HPHP, and the leads for the County’s COVID-19 homeless response in the areas of:

Motels for persons experiencing homelessness

Expanded congregate shelters

Outreach

Shelter referral system

•The development of a COVID-19 homeless response website that was regularly updated with information on available resources including shelters, practices to prevent the transmission of COVID-19, on-line replacements for in-person resources such as substance use supports, and information on COVID-19 protections such as eviction moratoriums.

•Regular Shelter Provider meetings to discuss protocols, processes, and available resources to prevent the transmission of COVID-19 amongst shelter guests

•Timely e-mails to CoC agencies and other partner agencies on the availability of new resources or information.

2. The CoC forwarded all Public Health notices regarding changed local restrictions, as well as CDC and State changes, as soon as released to the list serve of CoC agencies, posted changes on the COVID-19 website, and communicated them during provider conference calls and weekly Shelter Provider meetings.

3. The CoC forwarded all Public Health information regarding vaccine availability, target groups, and locations, as soon as released to the list serve of CoC participating agencies, linked the changes on the COVID-19 website, and communicated them during provider conference call and weekly Shelter Provider meetings. Public Health worked with the CoC and homeless providers to identify, prioritize, and make available vaccines for all persons experiencing homelessness as well other underserved or vulnerable persons.

1D-6.	Identifying Eligible Persons Experiencing Homelessness for COVID-19 Vaccination.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC identified eligible individuals and families experiencing homelessness for COVID-19 vaccination based on local protocol.

**(limit 2,000 characters)**

The County’s Homeless Persons Health Project (HHP) worked closely with the CoC agencies to identify persons experiencing homelessness who were eligible for a COVID-19 vaccination. HHP coordinated with shelter providers, including those implemented as part of the County’s COVID-19 homeless response, to do on-site vaccination clinics. HHP also implemented drive-through vaccination clinics that it advertised with CoC and other related agencies, and provided vaccines in the field and at other places where persons experiencing homelessness frequent. The CoC attained gift cards to incentivize persons experiencing homelessness to get vaccinated which were distributed at HHP vaccination sites. HMIS data matching was utilized to assess locations

for vaccination rates among guests and to target efforts to areas with lower vaccine rates.

1D-7.	Addressing Possible Increases in Domestic Violence.	
NOFO Section VII.B.1.e.		

Describe in the field below how your CoC addressed possible increases in domestic violence calls for assistance due to requirements to stay at home, increased unemployment, etc. during the COVID-19 pandemic.

**(limit 2,000 characters)**

The local CoC partnered with domestic violence providers to ensure they received the same information about health and safety protocols as other community providers. In addition, Emergency Housing Voucher (EHV) CoC prioritization specifically called out victims of domestic violence as a prioritized population. The County of Santa Cruz and local foundations also provided additional resources to support increased demand for services among domestic violence providers.

1D-8.	Adjusting Centralized or Coordinated Entry System.	
NOFO Section VII.B.1.n.		

Describe in the field below how your CoC adjusted its coordinated entry system to account for rapid changes related to the onset and continuation of the COVID-19 pandemic.

**(limit 2,000 characters)**

The CoC developed a new shelter referral system to identify and prioritize persons experiencing homelessness who were vulnerable to COVID-19, per the CDC guidance, for available shelter spots. Staff met regularly with County Public Health Nurses to triage all persons for which shelter referrals were received according to their COVID-19 health risk; persons were triaged as not vulnerable or vulnerable with an Absolute, High, Medium, or Low risk. Persons were further prioritized for available shelter spots according to age in each triage range.

In alignment with HUD's recommendations, the CoC approved a temporary change to its coordinated entry system policies to prioritize eligible persons most vulnerable to COVID-19 to participating housing program openings. The coordinated entry system used the triage information developed through the shelter referral system for this purpose.

# 1E. Project Capacity, Review, and Ranking–Local Competition

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1E-1.	Announcement of 30-Day Local Competition Deadline–Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.a. and 2.g.	

1.	Enter the date your CoC published the 30-day submission deadline for project applications for your CoC’s local competition.	09/01/2021
2.	Enter the date your CoC publicly posted its local scoring and rating criteria, including point values, in advance of the local review and ranking process.	09/01/2021

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. You Must Upload an Attachment to the 4B. Attachments Screen. We use the response to this question as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criteria listed below.	
	NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	

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.	Used data from a comparable database to score projects submitted by victim service providers.	Yes
5.	Used objective criteria to evaluate how projects submitted by victim service providers improved safety for the population they serve.	Yes
6.	Used a specific method for evaluating projects based on the CoC’s analysis of rapid returns to permanent housing.	No

1E-2a.	Project Review and Ranking Process–Addressing Severity of Needs and Vulnerabilities.	
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NOFO Section VII.B.2.d.

Describe in the field below how your CoC reviewed, scored, and selected projects based on:

1.	the specific severity of needs and vulnerabilities your CoC considered when ranking and selecting projects; and
2.	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 2,000 characters)**

1. The specific severity of needs and vulnerabilities prioritized by the CoC when rating and selecting projects were chronic homelessness (CH), long histories of homelessness and severity of need, and DV experience.

2. Our CoC has identified a very high level of need for projects that might have lower performance due to the hard-to-serve nature of the vulnerable client populations. To address this problem, their potentially lower score in the Performance Measures area worth 20 of 100 points is counteracted by scoring factors in need, severity, and vulnerability related areas worth 30 of 100 points as follows:

a. Highest points (10 of 10) for the Project Type scoring category were given to PSH projects serving 100% CH or DedicatedPlus populations with the longest homeless histories and most severe needs;

b. Highest points (10 of 10) for Priority Population served were given to projects that serve 100% CH or 100% DV;

c. Highest points (10 of 10) for the Housing First and Severity of Needs category were given to projects that serve people with the most barriers and vulnerabilities such as: long duration of homelessness, current substance use, mental illness, criminal history, lack of employment or income, lack of ID, lack of transportation, and more.

Also, PSH projects serving 100% CH or DedicatedPlus with the longest homeless histories and most severe needs were specifically called out and encouraged to apply in the 2021 public solicitation of applications. Special application procedures encouraged DV agencies to apply for the DV bonus to meet the gap for vulnerable persons fleeing violence.

Finally, these scores and vulnerability of the population were key issues when the Review and Ranking Committee met to review, discuss, rank and select projects on October 29, 2021. As a result, 9 of 10 ranked projects (excluding HMIS and CES projects) were PSH projects targeting 100% CH with the longest homeless histories and most severe needs or 100% DV survivors.

1E-3.	Promoting Racial Equity in the Local Review and Ranking Process.	
	NOFO Section VII.B.2.e.	

Describe in the field below how your CoC:

1.	obtained input and included persons of different races, particularly those over-represented in the local homelessness population, when determining the rating factors used to review project applications;
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2.	included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process;
3.	rated and ranked projects based on the degree to which their program participants mirror the homeless population demographics (e.g., considers how a project promotes racial equity where individuals and families of different races are over-represented).

**(limit 2,000 characters)**

1. Efforts to include and center the voices of Black, Latinx, Asian, Pacific Islander and Indigenous communities have been discussed at all levels, including the County Board of Supervisors, CoC Board Board, CoC Executive Committee, CoC general membership and steering committees, and H4H staff. The input received from BIPOC persons, especially members of the traditionally underserved Latinx community is South County, was instrumental in the CoC’s decision to add racial equity scoring factors to its rating and ranking tools.

2. The CoC Board, which oversees and sets rating and ranking policies, has two Latinx members out of 9 current members. The CoC Review and Ranking Committee, which rated and selected projects, had one Latinx voting member out of 4. Other CoC Board members and staff, including one Latinx and one Black person, were present and provided input, but were not voting members of the committee.

3. The racial equity scoring criteria adopted by the CoC were used in the review and ranking process to assess projects’ implementation or commitment to implement changes such as: (a) increasing representation of persons who mirror participant demographics on the Board of Directors and managerial and leadership positions, (b) reviewing and revising internal policies and procedures with an equity lens, (c) reviewing participant outcomes for racial disparities, (d) identifying program changes needed to reduce any disparities identified; and (e) working with the HMIS lead to set a schedule HMIS data reports on racial demographics and outcomes.

1E-4.	Reallocation–Reviewing Performance of Existing Projects. We use the response to this question as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criterion below.	
	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;
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable; and
5.	how your CoC communicated the reallocation process to project applicants.

**(limit 2,000 characters)**

1. The CoC reallocates funds from renewal projects that are under-performing, obsolete, ineffective, not cost efficient, not spending all funds, no longer needed, or if reallocation to another project type such as PSH for CH persons, that would better reduce homelessness. The CoC Board sets the written reallocation policy, and it is implemented by the Review and Ranking Committee based upon its review, scoring, and assessment of the of the

project. TH projects are no longer viewed as good use of funds, and projects which score below 80, or which show especially poor performance in a key area such as housing stability or spend down rates, will be considered for reallocation. Also, the CoC has a self-reallocation policy allowing otherwise well-performing providers that voluntarily give up TH (or other less effective projects) to create a more effective project type.

2. The CoC identified one project requesting self-reallocation, and several projects with performance issues (under-spending).

3. The Review and Ranking Committee reallocated only one project - Housing Matters' request to self-reallocate its Page Smith TH-RRH program (site soon to be demolished to build new affordable housing) to a transition grant shifting the funds to its new 801 River St. PSH project for persons experiencing CH.

4. No projects scored below 80 points this year, but the committee did consider the spend-down performance of a several PSH renewal projects. After careful consideration the committee did not reallocate any funds but lowered the rank of those projects. The CoC will also provide technical assistance to increase future spend down rates.

5. The CoC communicated the reallocation policies and process through its written public solicitation of applications sent via list serve on September 1, 2021 to all known interested persons and posted on the CoC webpage. The applicant orientation session held on September 10 included information and discussion of the reallocation policies.

1E-4a.	Reallocation Between FY 2016 and FY 2021. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.	
NOFO Section VII.B.2.f.		

Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2016 and FY 2021?	Yes
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1E-5.	Projects Rejected/Reduced–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen if You Select Yes.	
NOFO Section VII.B.2.g.		

1.	Did your CoC reject or reduce any project application(s)?	Yes
2.	If you selected yes, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps.	11/01/2021

1E-5a.	Projects Accepted–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen.	
NOFO Section VII.B.2.g.		

<b>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.</b>	11/01/2021
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1E-6.	<b>Web Posting of CoC-Approved Consolidated Application. You Must Upload an Attachment to the 4B. Attachments Screen.</b>	
	NOFO Section VII.B.2.g.	

<b>Enter the date your CoC's Consolidated Application was posted on the CoC's website or affiliate's website—which included: 1. the CoC Application; 2. Priority Listings; and 3. all projects accepted, ranked where required, or rejected.</b>	11/12/2021
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## 2A. Homeless Management Information System (HMIS) Implementation

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:  
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 - 24 CFR part 578

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

Enter the name of the HMIS Vendor your CoC is currently using.	BitFocus Clarity
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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 2021 HIC data into HDX.	05/13/2021
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2A-4.	HMIS Implementation—Comparable Database for DV.	
	NOFO Section VII.B.3.b.	

Describe in the field below actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC:

- |    |   |
|----|---|
| 1. | have a comparable database that collects the same data elements required in the HUD-published 2020 HMIS Data Standards; and             |
| 2. | submit de-identified aggregated system performance measures data for each project in the comparable database to your CoC and HMIS lead. |

**(limit 2,000 characters)**

1. CoC, ESG, and local funding policies and selections tools require that any DV agency requesting or receiving funds to agree to enter funds into a separate HMIS-comparable database. (DV providers are also prohibited under VAWA from entering data into HMIS.) Our HMIS vendor, BitFocus, has assisted DV agencies to understand the requirement and select a comparable database that complies with HUD’s HMIS standards. WAFWC (applying for both renewal and DV bonus funds) uses the Social Solutions Apricot comparable database and Monarch Services uses Osnum.

2. BitFocus provides technical assistance to these agencies help ensure they collect all the data elements required by the updated HMIS standards and to help them submit de-identified performance reports to the CoC and funders. The CoC uses non-identifiable data from these databases to assess homelessness among individuals and families fleeing DV and other forms of violence, to track services and housing outcomes, to improve programs and services for survivors, to inform grant funding decisions and progress reporting, to provide data for the biennial PIT and annual HIC, to inform the public about DV survivors needs, and to inform the improvement of DV safety planning and privacy procedures.

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

Enter 2021 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2021 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	409	0	389	95.11%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	138	0	138	100.00%
4. Rapid Re-Housing (RRH) beds	522	0	518	99.23%
5. Permanent Supportive Housing	544	0	163	29.96%
6. Other Permanent Housing (OPH)	0	0	0	

<b>2A-5a.</b>	<b>Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.</b>	
	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 2,000 characters)**

1. Our bed coverage is significantly above 85% in all areas except PSH. This is due primarily to one program, the 368-voucher HUD VASH program, which is not required by the VA to submit data into HMIS. Without this program our PSH coverage would be near 100%. In the next 12 months the CoC will take steps to

(1) encourage the VA to start entering HUD VASH data into HMIS, and (2) provide them with needed support, licenses, and training.

2. To implement these steps, the CoC will: (1) present information about the benefits of HMIS and HMIS bed coverage rates to local VA staff, (2) request a formal meeting with local VA staff to determine the barriers to using HMIS and possible solutions, (3) assist the local VA to develop and implement a written plan for starting to use HMIS; (4) coordinate with Bitfocus to provide licenses, training, and start up support; and (6) report progress to the CoC Board.

2A-5b.	Bed Coverage Rate in Comparable Databases.	
	NOFO Section VII.B.3.c.	

Enter the percentage of beds covered in comparable databases in your CoC's geographic area.	100.00%
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2A-5b.1.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Question 2A-5b.	
	NOFO Section VII.B.3.c.	

If the bed coverage rate entered in question 2A-5b. is 84.99 percent or less, describe in the field below:

- |    |  |
|----|--|
| 1. | steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent; and |
| 2. | how your CoC will implement the steps described to increase bed coverage to at least 85 percent.               |

**(limit 2,000 characters)**

N/A

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 January 15, 2021, 8 p.m. EST?	Yes
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## 2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

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2B-1.	Sheltered and Unsheltered PIT Count—Commitment for Calendar Year 2022	
	NOFO Section VII.B.4.b.	

Does your CoC commit to conducting a sheltered and unsheltered PIT count in Calendar Year 2022?	Yes
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2B-2.	Unsheltered Youth PIT Count—Commitment for Calendar Year 2022.	
	NOFO Section VII.B.4.b.	

Does your CoC commit to implementing an unsheltered youth PIT count in Calendar Year 2022 that includes consultation and participation from youth serving organizations and youth with lived experience?	Yes
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## 2C. System Performance

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

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- 24 CFR part 578

<b>2C-1.</b>	<b>Reduction in the Number of First Time Homeless—Risk Factors.</b>	
	NOFO Section VII.B.5.b.	

Describe in the field below:	
1.	how your CoC determined which risk factors your CoC uses to identify persons becoming homeless for the first time;
2.	how your CoC addresses 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 or to end homelessness for individuals and families.

**(limit 2,000 characters)**

1. The CoC determines risk factors for identifying first-time homelessness by assessing and integrating pertinent PIT information, HMIS data, and provider feedback on the risk factors they are seeing. The CoC’s most recent 399-person random survey for the PIT count asked several first-time time homeless risk factor questions. Key risk factors were: lost job (26%), eviction (18%), substance abuse (13%), domestic violence (10%), and landlord raised rent (10%). Smart Path CES has used HMIS data to identify first-time homelessness risk factors, including: DV; job loss or loss of benefits, leading to eviction; and health issues, e.g., substance use and emergency hospitalizations. Providers have noted all of the above, as well as the high cost of rental housing and rising evictions connected to the pandemic.

2. The CoC’s plan to prevent first-time homelessness includes: setting and tracking system performance targets for reducing first-time homelessness; using risk factors to prioritize those most in need of limited prevention resources; steadily expanding resources for prevention programs (TANF housing subsidies/SSVF prevention) and connecting them with services such as preventative health care; maximizing utilization of new Cares Act and ARPA rental assistance among household at risk of eviction; building new problem solving and diversion strategies into Smart Path; emphasizing job services (CalFresh Employment Training and Workforce Santa Cruz linkages) and connecting them to housing and stabilization services; expanding both health insurance enrollment and community health services.

3. Responsible: Housing for Health Director, Human Services Department.

2C-2.	Length of Time Homeless–Strategy to Reduce.	
NOFO Section VII.B.5.c.		
Describe in the field below:		
1.	your CoC’s strategy to reduce the length of time individuals and persons in families remain homeless;	
2.	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 2,000 characters)**

1. The CoC’s strategy to reduce the length-of-time (LOT) individuals and families remain homeless involves addressing systems barriers and the lack of affordable housing and PSH, all of which slow or prevent exits from homelessness. To address these issues, the CoC has set LOT homeless performance targets by program type; made serving persons with the longest LOT homeless a high priority for CoC-funded PSH; asked all PSH to ID and prioritize this group; increased resources for RRH programs; recruited volunteer housing navigators; and established a Housing Authority Landlord Incentive Program to incentivize speedy rentals to homeless households by covering some costs for damages, missed rent, and vacancies.

2. In addressing needs of persons with the longest LOT homeless, Smart Path CES uses the VI-SPDAT and a by-name registry to identify and prioritize persons with the longest LOT homeless for PSH, building upon Project 180/2020 surges, which have housed more than 1,000 persons. Also, the CoC has prioritizes creating new PSH; adopted CPD 16-11, established the Housing Authority Section 8 preference for Disabled Medically Vulnerable Homeless; and made use of the Housing Authority moving on programs to frees S+C and DMV vouchers spaces for persons with very long LOT homeless.

3. Responsible: Project 180/2020 Team.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing.	
NOFO Section VII.B.5.d.		
Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in:		
1.	emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and	
2.	permanent housing projects retain their permanent housing or exit to permanent housing destinations.	

**(limit 2,000 characters)**

1. The CoC has successfully improved both its rate of exit to PH in spite of the extremely high cost rental market in Santa Cruz. Key CoC strategies include: implementation of Smart Path CES in ES and TH sites; CoC-wide implementation of Housing First; persistent focus on locating housing by the CES and Housing Work Group; the addition of housing navigators or housing-focused case management in all ES, TH, and RRH programs; housing surge strategies through Project 180/2020 that have housed 1,000 persons; the use in housing surges of volunteer housing navigators through Wings Homeless Advocates; the establishment of the 150-HCV preference for Disabled Medically

Vulnerable Homeless and new homeless-targeted FUP and Mainstream vouchers; the implementation of master leasing in CoC-funded PSH programs, such as MATCH; the continued prioritization of new PSH and RRH for CoC funds and RRH for ESG funds; the freeing of S+C space through the Housing Authority S+C-to-HCV Move On program; the encouragement of private landlords through the Housing Authority Landlord Incentive Program; and the accessing of new pandemic related resources, such ESG-CV and EHV.

2. Strategies that have contributed to 95% PH retention include: steady increases in the number of PH subsidies (making staying PH possible for extremely low-income persons) through HCV preferences for Disabled Medically Vulnerable Homeless and special purpose homeless-targeted program such as FUP and mainstream vouchers; the stabilization of CH persons in PSH through ongoing integrated service teams connected to health clinics and public health funding sources such as Healthcare for the Homeless; the CoC-wide Housing First implementation, which has reduced evictions for program issues; and the attention all CoC programs place on identifying and finding solutions for residents at risk of housing loss.

2C-4.	Returns to Homelessness–CoC’s Strategy to Reduce Rate.	
	NOFO Section VII.B.5.e.	

Describe in the field below:	
1.	how your CoC identifies individuals and families who return to homelessness;
2.	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 2,000 characters)**

1 The CoC’s rate of returns to homelessness over 6 -12 months remained very low – 5%. The CoC uses HMIS, PIT survey questions, and provider input to assess the common factors among those who returning to homelessness, e.g., abusive relationships, roommate problems, rent increases, income loss, incarceration, substance abuse relapse, mental health crises, and health problems. In addition, the Smart Path has developed metrics and reporting for returns to homelessness. Providers report similar factors regarding the few participants who do return to homelessness despite great efforts to assist the person to overcome challenges to remaining housed.

2. The CoC plan for reducing homelessness recidivism as follows: the implementation of a CoC returns to homelessness performance scoring standard of no more than 20% for all program types; CoC program and Smart Path Housing Work Group case conferencing focused on identifying and finding solutions for residents at risk of housing loss; the CoC-wide harm reduction and Housing First implementation, which reduces evictions for program issues; the increased use of housing subsidies and affordability strategies that help keep vulnerable person housed; the deployment of integrated services teams in PH that help stabilize persons with health, mental health, and co-occurring conditions; and the increase in resources for prevention and the connection of prevention and diversion strategies to CES.

3. Responsible: Housing for Health Director, Human Services Department.

2C-5.	Increasing Employment Cash Income-Strategy.	
	NOFO Section VII.B.5.f.	

Describe in the field below:	
1.	your CoC's strategy to increase employment income;
2.	how your CoC works with mainstream employment organizations to help individuals and families 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 2,000 characters)**

1. The CoC works in a variety of ways to help homeless persons not only to access a range of employment opportunities in the first place, but also to increase their incomes when they are employed through job advance support and education and training activities for career advancement and higher paying jobs. Important strategies include: setting annual performance targets for increasing employment (this year 25% employed); closely monitoring CoC-funded program employment performance as reported in the APR; supporting homeless-targeted employment programs such Homeless Garden Project and Downtown Streets Team, which offer supportive employment environments that often are the first step toward a future of employment; and supporting Housing Matters' job training jobs program on its Coral Street campus, funded by the SNAP FSET (Food Stamp Employment Training) Program.

2. The CoC also has strategies to work with mainstream employment organizations, e.g.: actively brokering partnerships between homeless programs (such as FIT and CAB) and Workforce Career Centers and Goodwill programs in North and South County to benefit homeless job seekers with a broad array of job services; encouraging PSH providers to partner with the Community Connections, which helps SMI consumers with employment; and fostering a range of links to Cabrillo College for career education especially for youth and young adults served by the YHDP initiative, which has funded Cabrillo College to provide rental assistance to homeless students.

3. Responsible: Senior Human Services Analyst, County Human Services.

2C-5a.	Increasing Employment Cash Income-Workforce Development-Education-Training.	
	NOFO Section VII.B.5.f.	

Describe in the field below how your CoC:	
1.	promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and
2.	is working with public and private organizations to provide meaningful education and training, on-the-job training, internships, and employment opportunities for program participants.

**(limit 2,000 characters)**

1. CoC agencies partner with Workforce Santa Career Centers in Santa Cruz, Watsonville, Capitola, Goodwill-Santa Cruz, and Watsonville-Youth in order to connect homeless persons to a broad range of skills education, job training, job

search, and employer linkages. CoC members CAB and County HSD have a specific MOU with the local Workforce Development Board and many other workforce agencies. The MOU makes homeless persons, among other groups, a shared customer population of the MOU signatory agencies, and assures direct access for homeless persons to services such as employment assessments, subsidized employment, job readiness workshops, job search and retention assistance, career planning and counseling, supportive services, job fairs and labor exchanges, support for employers, and emergency assistance for food and shelter. The MOU specifically grants a service priority for homeless persons to the services of all the MOU partners.

2. The CoC and its agencies also collaborate with: (1) Veterans employment programs, including a Goodwill program and VSRI, Inc.; (2) Community Connections, which provides pre-employment, employment, education, community integration and peer support for mental health consumers; (3) Cabrillo College, which provides career education; and (4) Access 2 Employment, which sponsors job fairs and events in Santa Cruz County. Each CoC-funded PSH program emphasizes and tracks employment as a key strategy to increase income. PSH providers have traditionally partnered very closely with Community Connection to connect their high vulnerability clients to services uniquely tailored for persons with significant behavioral barriers to employment.

<b>2C-5b.</b>	<b>Increasing Non-employment Cash Income.</b>	
	NOFO Section VII.B.5.f.	

Describe in the field below:	
1.	your CoC's strategy to increase non-employment cash income;
2.	your CoC's strategy to increase access to non-employment cash sources; and
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.

**(limit 2,000 characters)**

1. The CoC works to help homeless persons to both gain access to mainstream income benefits and apply for and receive all the cash benefits to which they are entitled in order to maximize their incomes. In the area of increasing income, the CoC: sets annual performance targets for increasing total overall income (75% maintained or increased income); closely monitors CoC-funded program non-employment income performance; and requires all CoC- and ESG- programs help participants to apply for as many appropriate mainstream income and non-income benefits as possible, e.g., CalWORKS, SSI, SNAP, and WIC.

2. In the area of access, the following are key CoC strategies: training case managers at all agencies on how participants to identify, apply for, and receive cash benefits, gather documents, to attend benefits appointments, and to overcome any barriers to program access that client may be experiencing; supporting the County Homeless Persons Health Project funding use of SSA funding for an SSI specialist, who assists residents of S+C and other PSH to apply for and receive SSI benefits; using volunteer mentors to help clients apply for benefits, employment, and housing; links Vets to VA benefits; and using an HMIS benefits eligibility module and the HSD benefits eligibility call center.

3. Responsible: Senior Analyst, County Human Services.

### 3A. Coordination with Housing and Healthcare Bonus Points

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:  
 - Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition  
 - FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload  
 - 24 CFR part 578

<b>3A-1.</b>	<b>New PH-PSH/PH-RRH Project—Leveraging Housing Resources.</b>	
	<b>NOFO Section VII.B.6.a.</b>	

<b>Is your CoC applying for a new PSH or RRH project(s) 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?</b>	Yes
--	-----

<b>3A-1a.</b>	<b>New PH-PSH/PH-RRH Project—Leveraging Housing Commitment. You Must Upload an Attachment to the 4B. Attachments Screen.</b>	
	<b>NOFO Section VII.B.6.a.</b>	

Select yes or no in the chart below to indicate the organization(s) that provided the subsidies or subsidized housing units for the proposed new PH-PSH or PH-RRH project(s).

1.	Private organizations	No
2.	State or local government	No
3.	Public Housing Agencies, including use of a set aside or limited preference	Yes
4.	Faith-based organizations	No
5.	Federal programs other than the CoC or ESG Programs	No

<b>3A-2.</b>	<b>New PSH/RRH Project—Leveraging Healthcare Resources.</b>	
	<b>NOFO Section VII.B.6.b.</b>	

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

<b>3A-2a.</b>	<b>Formal Written Agreements–Value of Commitment–Project Restrictions. You Must Upload an Attachment to the 4B. Attachments Screen.</b>	
	NOFO Section VII.B.6.b.	

<b>1.</b>	Did your CoC obtain a formal written agreement that includes: (a) the project name; (b) value of the commitment; and (c) specific dates that healthcare resources will be provided (e.g., 1-year, term of grant, etc.)?	Yes
<b>2.</b>	Is project eligibility for program participants in the new PH-PSH or PH-RRH project based on CoC Program fair housing requirements and not restricted by the health care service provider?	Yes

<b>3A-3.</b>	<b>Leveraging Housing Resources–Leveraging Healthcare Resources–List of Projects.</b>	
	NOFO Sections VII.B.6.a. and VII.B.6.b.	

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

Project Name	Project Type	Rank Number	Leverage Type
Shelter + Care Ex...	PSH	10	Both

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

**1. What is the name of the new project?** Shelter + Care Expansion

**2. Select the new project type:** PSH

**3. Enter the rank number of the project on your CoC's Priority Listing:** 10

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

### 3B. New Projects With Rehabilitation/New Construction Costs

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

Is your CoC requesting funding for any new project application requesting \$200,000 or more in funding for housing rehabilitation or new construction?	No
--	----

<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 2,000 characters)**

N/A

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

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

<b>3C-2.</b>	<b>Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. You Must Upload an Attachment to the 4B. Attachments Screen.</b>	
	NOFO Section VII.C.	

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 2,000 characters)**

N/A

## 4A. DV Bonus Application

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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
--	-----

4A-1a.	DV Bonus Project Types.	
	NOFO Section II.B.11.	

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 2021 Priority Listing.

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

**You must click “Save” after selecting Yes for element 1 SSO Coordinated Entry to view questions 4A-3 and 4A-3a.**

4A-2.	Number of Domestic Violence Survivors in Your CoC's Geographic Area.	
	NOFO Section II.B.11.	

1.	Enter the number of survivors that need housing or services:	5,792
2.	Enter the number of survivors your CoC is currently serving:	1,615
3.	Unmet Need:	4,177

4A-2a.	Calculating Local Need for New DV Projects.	
	NOFO Section II.B.11.	

Describe in the field below:

1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and
2.	the data source (e.g. comparable database, 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 2,000 characters)**

1. We calculated the numbers needing services from Monarch data showing that 5,792 crisis calls requesting services or housing were received in the most recent program year. We calculated the number currently being served by combining Monarch data on the estimated numbers of persons receiving their services (1,000) with HMIS data showing that 615 persons served during the year answer “yes” about whether they had experienced DV.

2. HMIS, LSA data as reported in Stella, and Monarch comparable database.

3. The barriers to meeting the needs of all DV survivors include: lack of available housing options for persons fleeing DV, including emergency shelter, motel/hotel vouchers, transitional housing, and rapid rehousing; the lack of funding for DV service programs; economic hardship leading survivors to stay with the abuser; the stresses of the pandemic which have led to a dramatic increase in both the prevalence of DV and the demand for DV services; COVID-19 stay-at-home orders which have limited safe options for escape from the abuser.

4A-4.	New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects–Project Applicant Information.	
	NOFO Section II.B.11.	

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>
Walnut Avenue Fam...

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

<b>4A-4.</b>	<b>New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects–Project Applicant Information–Rate of Housing Placement and Rate of Housing Retention–Project Applicant Experience.</b>	
	NOFO Section II.B.11.	

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 2021 Priority Listing:

1.	Applicant Name	Walnut Avenue Family & Women's Center
2.	Rate of Housing Placement of DV Survivors–Percentage	73.00%
3.	Rate of Housing Retention of DV Survivors–Percentage	100.00%

<b>4A-4a.</b>	<b>Calculating the Rate of Housing Placement and the Rate of Housing Retention–Project Applicant Experience.</b>	
	NOFO Section II.B.11.	

Describe in the field below:

1.	how the project applicant calculated the rate of housing placement and rate of housing retention reported in question 4A-4; and
2.	the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects).

**(limit 1,000 characters)**

WAFWC operates a DV Housing Program, which launched February 4, 2019. Over the course of year WAFWC served 11 households, with 8 households obtaining housing (1 household left the CoC with referral, 2 households elected to return to the person who chooses to do harm) for a total rate of 73% of participant households obtaining housing. 100% of participating households who remained in the program retained housing. WAFWC utilizes Apricot Social Solutions data management.

<b>4A-4b.</b>	<b>Providing Housing to DV Survivor–Project Applicant Experience.</b>	
	NOFO Section II.B.11.	

Describe in the field below how the project applicant:

1.	ensured DV survivors experiencing homelessness were assisted to quickly move 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.	connected survivors to supportive services; and
4.	moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.

**(limit 2,000 characters)**

Participants have received individualized assessment of housing needs, barriers and preferences with a focus on survivor-stated safety and security needs. Staff have assisted each participant with a housing affordability plan, identification of housing, with rental application completion, tenant counseling, utility set up and moving arrangements. Case management has been provided to support participant self-sufficiency, including obtaining mainstream benefits, education and employment services, community connection and financial assistance during the stabilization period.

4A-4c.	Ensuring DV Survivor Safety–Project Applicant Experience.	
	NOFO Section II.B.11.	

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

1.	training staff on safety planning;
2.	adjusting intake space to better ensure a private conversation;
3.	conducting separate interviews/intake with each member of a couple;
4.	working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance;
5.	maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant; and
6.	keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors.

**(limit 5,000 characters)**

WAFWC provides 40-hour DV Advocate Certification Training twice yearly, employing DV Advocates who can train staff, independent of scheduled trainings, with a long-standing history of providing this training, in the County, due to agency’s primary mission as a DV agency. Trauma-informed and safety design has been implemented within the agency offices, with additional meeting space being provided by a recent remodel; WAFWC remains committed to meeting the needs of survivors in confidential, safe spaces, both inside our main offices, in the community and in project participant’s selected residences. Participants have received individualized assessment of housing needs, barriers and preferences with focus to survivor-stated safety and security needs. WAFWC is not seeking dedicated units; instead we are using a Housing First scattered-site leasing concept so there will be no set-aside units. In furthering services to survivors, agency became a Safe-at-Home Enrolling Agency in Spring of 2019, to continue protecting survivor’s confidentiality in living spaces.

4A-4c.1.	Evaluating Ability to Ensure DV Survivor Safety–Project Applicant Experience.	
	NOFO Section II.B.11.	

Describe in the field below how the project evaluated its ability to ensure the safety of DV survivors the project served.

**(limit 2,000 characters)**

WAFWC conducts regular evaluations of all of our programs including housing.

Survivors’ safety-related empowerment is a critical measure. We ask survivors safety empowerment questions at three points during the program, at entry, one month later, and at exit. We have found that average feelings of safety-related empowerment actually go down at first but then increase by the time of program exit.

4A-4d.	Trauma-Informed, Victim-Centered Approaches–Project Applicant Experience.	
	NOFO Section II.B.11.	

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

1.	prioritizing program participant choice and rapid placement and stabilization in permanent housing consistent with participants’ preferences;
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 trauma;
4.	emphasizing program participants’ strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;
6.	providing opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for parenting, e.g., parenting classes, childcare.

**(limit 5,000 characters)**

WAFWC is committed to providing best practice services for participants. This requires personnel who are well educated, receive the appropriate training, and have the qualities necessary to work with high-risk, often traumatized individuals. The project is designed to support direct services and accomplish the objective of providing survivor-driven advocacy including; housing assistance, supportive services, community engagement and financial assistance. Because WAFWC has an existing Advocacy and Prevention Department funded by a CalOES Domestic Violence Assistance Program grant, many of the supportive services required can be met by our existing services. As a DV-focused agency, our Advocacy and Prevention Department is the heart of our services and is a survivor-driven support, skilled at prioritizing survivor needs, completing and supporting safety planning and providing support and information regarding trauma. WAFWC has a cultural competency plan that is regularly reviewed, with input from participants. Agency services include support and peer groups within the agency as well as referral to outside services, as needed and identified by survivors.

4A-4e.	Meeting Service Needs of DV Survivors–Project Applicant Experience.	
	NOFO Section II.B.11.	

Describe in the field below:

1.	supportive services the project applicant provided to domestic violence survivors experiencing homelessness while quickly moving them into permanent housing and addressing their safety needs; and
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2.	provide examples of how the project applicant provided the supportive services to domestic violence survivors.
----	--

**(limit 5,000 characters)**

WAFWC is aware that finding housing is only one small step in to maintaining safe and sustainable living situations. Our intention has been to work with participants around employment, childcare, integrated behavioral health, and debt issues to provide the best chance of thriving in their new situation, while service needs and desires are identified by survivor and project staff. The agency is already assisting participants with application for and advocacy to obtain mainstream health, social services and employment programs, as participants are eligible and desire. The agency will continue to work to build connections through participation in CoC and community initiatives, outreach events and through individual introductions to other service providers. In addition to support groups and a 24-hour crisis support hotline, WAFWC provides free Positive Discipline Parenting Classes and a financial literacy course for all participants. Our plan includes establishing a next-step financial support for graduates of the financial literacy classes by connecting participants with local financial management professionals to aid with credit issues. Child custody and legal services are already built into agency goals, with a dedicated team of DV Advocates focusing on meeting these needs. WAFWC does not require drug or alcohol treatment for participants however does provide support, if participant identifies that as a need, in obtaining coordination and referral into services. WAFWC is currently working to support the needs of our community through Early Childhood Education Center, a childcare program that takes children through age 5, and frequently assists participants in accessing before and after school childcare programs for older children.

4A-4f.	Trauma-Informed, Victim-Centered Approaches–New Project Implementation.	
	NOFO Section II.B.11.	

Provide examples in the field below of how the new project will:	
1.	prioritize program participant choice and rapid placement and stabilization in permanent housing consistent with participants’ preferences;
2.	establish and maintain 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 trauma;
4.	place emphasis on program participants’ strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;
6.	provide opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for parenting, e.g., parenting classes, childcare.

**(limit 5,000 characters)**

As mentioned above, WAFWC is committed to providing best practice services for participants. Examples of the steps we will take include:

- Employing personnel who are well educated, receive the appropriate training, and have the qualities necessary to work with high-risk, often traumatized individuals.

- Designing the project to support direct services and accomplish the objective of providing survivor-driven advocacy including; housing assistance, supportive services, community engagement and financial assistance.
- Link the program to our existing Advocacy and Prevention Department funded by a CalOES Domestic Violence Assistance Program grant, many of the supportive services required can be met by our existing services.
- Taking a survivor-driven approach to support, skilled at prioritizing survivor needs, completing and supporting safety planning and providing support and information regarding trauma.
- Using our cultural competency plan that is regularly reviewed, with input from participants. Tapping various service modes including support and peer groups within the agency as well as referral to outside services, as needed and identified by survivors.

## 4B. Attachments Screen For All Application Questions

We prefer that you use PDF files, though other file types are supported. Please only use zip files if necessary.

Attachments must match the questions they are associated with.

Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.

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).

Document Type	Required?	Document Description	Date Attached
1C-14. CE Assessment Tool	Yes	Smart Path Assess...	11/12/2021
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	11/12/2021
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	11/12/2021
1E-1. Local Competition Announcement	Yes	Local Public Comp...	11/12/2021
1E-2. Project Review and Selection Process	Yes	Project Review an...	11/12/2021
1E-5. Public Posting—Projects Rejected-Reduced	Yes	Public Posting Pr...	11/12/2021
1E-5a. Public Posting—Projects Accepted	Yes	Public Posting Pr...	11/12/2021
1E-6. Web Posting—CoC-Approved Consolidated Application	Yes		
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin...	11/12/2021
3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	11/12/2021
3C-2. Project List for Other Federal Statutes	No		

## **Attachment Details**

**Document Description:** Smart Path Assessment Tool

## **Attachment Details**

**Document Description:** PHA Homeless Preferences

## **Attachment Details**

**Document Description:** PHA Moving On Preferences

## **Attachment Details**

**Document Description:** Local Public Competition Announcement

## **Attachment Details**

**Document Description:** Project Review and Selection Process

## **Attachment Details**

**Document Description:** Public Posting Project Rejected

## **Attachment Details**

**Document Description:** Public Posting Projects Accepted

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** Housing Leveraging Commitment

## **Attachment Details**

**Document Description:** Healthcare Formal Agreements

## **Attachment Details**

**Document Description:**

## Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/30/2021
1B. Inclusive Structure	11/10/2021
1C. Coordination	11/11/2021
1C. Coordination continued	11/11/2021
1D. Addressing COVID-19	11/12/2021
1E. Project Review/Ranking	11/11/2021
2A. HMIS Implementation	11/11/2021
2B. Point-in-Time (PIT) Count	09/30/2021
2C. System Performance	11/12/2021
3A. Housing/Healthcare Bonus Points	11/11/2021
3B. Rehabilitation/New Construction Costs	10/27/2021

FY2021 CoC Application	Page 62	11/12/2021
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<b>3C. Serving Homeless Under Other Federal Statutes</b>	10/27/2021
<b>4A. DV Bonus Application</b>	11/12/2021
<b>4B. Attachments Screen</b>	Please Complete
<b>Submission Summary</b>	No Input Required

## **1C-8. Centralized or Coordinated Assessment Tool**



**Smart Path Assessment- Single Adult**

## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

SINGLE ADULTS

AMERICAN VERSION 2.01

### Administration

<b>Interviewer's Name</b> _____	<b>Agency</b> _____	<input type="radio"/> Team <input type="radio"/> Staff <input type="radio"/> Volunteer
<b>Survey Date</b> DD/MM/YYYY ___/___/___	<b>Survey Time</b> _____	<b>Survey Location</b> _____

### Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question or the assessor does not understand the question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

### Basic Information

<b>First Name</b> _____	<b>Nickname</b> _____	<b>Last Name</b> _____	
<b>In what language do you feel best able to express yourself?</b> _____			
<b>Date of Birth</b> DD/MM/YYYY ___/___/___	<b>Age</b> _____	<b>Social Security Number</b> _____	<b>Consent to participate</b> <input type="radio"/> Yes <input type="radio"/> No

IF THE PERSON IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.

SCORE:

0

**VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)**

SINGLE ADULTS

AMERICAN VERSION 2.01

## A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)

- Shelters
- Transitional Housing
- Safe Haven
- Outdoors**
- Other (specify):** \_\_\_\_\_
- Refused**

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.

**SCORE:**

**0**

2. How long has it been since you lived in permanent stable housing? \_\_\_\_\_ Years  Refused

3. In the last three years, how many times have you been homeless? \_\_\_\_\_  Refused

IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.

**SCORE:**

**0**

## B. Risks

4. In the past six months, how many times have you...

- a) Received health care at an emergency department/room? \_\_\_\_\_  Refused
- b) Taken an ambulance to the hospital? \_\_\_\_\_  Refused
- c) Been hospitalized as an inpatient? \_\_\_\_\_  Refused
- d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? \_\_\_\_\_  Refused
- e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along? \_\_\_\_\_  Refused
- f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? \_\_\_\_\_  Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.

**SCORE:**

**0**

5. Have you been attacked or beaten up since you've become homeless?  Y  N  Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.

**SCORE:**

**0**

## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

SINGLE ADULTS

AMERICAN VERSION 2.01

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live?  Y  N  Refused

IF "YES," THEN SCORE 1 FOR LEGAL ISSUES.

SCORE:

0

8. Does anybody force or trick you to do things that you do not want to do?  Y  N  Refused
9. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION.

SCORE:

0

### C. Socialization & Daily Functioning

10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?  Y  N  Refused
11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?  Y  N  Refused

IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 FOR MONEY MANAGEMENT.

SCORE:

0

12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?  Y  N  Refused

IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY.

SCORE:

0

13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?  Y  N  Refused

IF "NO," THEN SCORE 1 FOR SELF-CARE.

SCORE:

0

14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted?  Y  N  Refused

IF "YES," THEN SCORE 1 FOR SOCIAL RELATIONSHIPS.

SCORE:

0

**VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)**

SINGLE ADULTS

AMERICAN VERSION 2.01

**D. Wellness**

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?  Y  N  Refused
16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?  Y  N  Refused
17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?  Y  N  Refused
18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?  Y  N  Refused
19. When you are sick or not feeling well, do you avoid getting help?  Y  N  Refused
20. FOR FEMALE RESPONDENTS ONLY: Are you currently pregnant?  Y  N  N/A or Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH.

SCORE:

0

21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past?  Y  N  Refused
22. Will drinking or drug use make it difficult for you to stay housed or afford your housing?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE USE.

SCORE:

0

23. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:
- a) A mental health issue or concern?  Y  N  Refused
- b) A past head injury?  Y  N  Refused
- c) A learning disability, developmental disability, or other impairment?  Y  N  Refused
24. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALTH.

SCORE:

0

IF THE RESPONDENT SCORED 1 FOR PHYSICAL HEALTH AND 1 FOR SUBSTANCE USE AND 1 FOR MENTAL HEALTH, SCORE 1 FOR TRI-MORBIDITY.

SCORE:

0

## VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

SINGLE ADULTS

AMERICAN VERSION 2.01

25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?  Y  N  Refused

26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS.

SCORE:

0

27. YES OR NO: Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced?  Y  N  Refused

IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.

SCORE:

0

### Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	0 /1	<b>Score: Recommendation:</b> 0-3: no housing intervention 4-7: an assessment for Rapid Re-Housing 8+: an assessment for Permanent Supportive Housing/Housing First
A. HISTORY OF HOUSING & HOMELESSNESS	0 /2	
B. RISKS	0 /4	
C. SOCIALIZATION & DAILY FUNCTIONS	0 /4	
D. WELLNESS	0 /6	
<b>GRAND TOTAL:</b>	<b>0 /17</b>	

### Follow-Up Questions

<b>On a regular day, where is it easiest to find you and what time of day is easiest to do so?</b>	place: _____ time: ____ : ____ or Night
<b>Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?</b>	phone: (____) _____ - _____ email: _____
<b>Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Refused

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- military service and nature of discharge
- legal status in country
- children that may reside with the adult at some point in the future
- ageing out of care
- income and source of it
- current restrictions on where a person can legally reside
- safety planning
- mobility issues



**Smart Path Assessment- Family**

**VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)**

FAMILIES

AMERICAN VERSION 2.0

## Administration

<b>Interviewer's Name</b>	<b>Agency</b>	<input type="radio"/> Team <input type="radio"/> Staff <input type="radio"/> Volunteer
<b>Survey Date</b> DD/MM/YYYY ___/___/_____	<b>Survey Time</b> ____:____	<b>Survey Location</b> _____

## Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

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- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

## Basic Information

<b>PARENT 1</b>	<b>First Name</b>	<b>Nickname</b>	<b>Last Name</b>
	In what language do you feel best able to express yourself? _____		
	<b>Date of Birth</b> DD/MM/YYYY ___/___/_____	<b>Age</b>	<b>Social Security Number</b> _____ <input type="radio"/> Yes <input type="radio"/> No
<b>PARENT 2</b>	<input type="checkbox"/> No second parent currently part of the household		
	<b>First Name</b>	<b>Nickname</b>	<b>Last Name</b>
	In what language do you feel best able to express yourself? _____		
	<b>Date of Birth</b> DD/MM/YYYY ___/___/_____	<b>Age</b>	<b>Social Security Number</b> _____ <input type="radio"/> Yes <input type="radio"/> No
IF EITHER HEAD OF HOUSEHOLD IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.			<b>SCORE:</b> <div style="border: 1px solid black; width: 50px; height: 20px; display: inline-block;"></div>

**VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)**

FAMILIES

AMERICAN VERSION 2.0

## Children

1. How many children under the age of 18 are currently with you? \_\_\_\_\_  Refused
2. How many children under the age of 18 are not currently with your family, but you have reason to believe they will be joining you when you get housed? \_\_\_\_\_  Refused
3. *IF HOUSEHOLD INCLUDES A FEMALE:* Is any member of the family currently pregnant?  Y  N  Refused
4. Please provide a list of children's names and ages:

First Name	Last Name	Age	Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

IF THERE IS A SINGLE PARENT WITH 2+ CHILDREN, AND/OR A CHILD AGED 11 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR <b>FAMILY SIZE</b> .	<b>SCORE:</b> <b>0</b>
IF THERE ARE TWO PARENTS WITH 3+ CHILDREN, AND/OR A CHILD AGED 6 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR <b>FAMILY SIZE</b> .	

## A. History of Housing and Homelessness

5. Where do you and your family sleep most frequently? (check one)
  - Shelters
  - Transitional Housing
  - Safe Haven
  - Outdoors
  - Other (specify): \_\_\_\_\_
  - Refused

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.	<b>SCORE:</b> <b>0</b>
---	---------------------------

6. How long has it been since you and your family lived in permanent stable housing? \_\_\_\_\_ Years  Refused
7. In the last three years, how many times have you and your family been homeless? \_\_\_\_\_  Refused

IF THE FAMILY HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.	<b>SCORE:</b> <b>0</b>
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**VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)**

FAMILIES

AMERICAN VERSION 2.0

**B. Risks**

8. In the past six months, how many times have you or anyone in your family...

- a) Received health care at an emergency department/room?  Refused
- b) Taken an ambulance to the hospital?  Refused
- c) Been hospitalized as an inpatient?  Refused
- d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines?  Refused
- e) Talked to police because they witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told them that they must move along?  Refused
- f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between?  Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.

SCORE:

0

9. Have you or anyone in your family been attacked or beaten up since they've become homeless?  Y  N  Refused

10. Have you or anyone in your family threatened to or tried to harm themselves or anyone else in the last year?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.

SCORE:

0

11. Do you or anyone in your family have any legal stuff going on right now that may result in them being locked up, having to pay fines, or that make it more difficult to rent a place to live?  Y  N  Refused

IF "YES," THEN SCORE 1 FOR LEGAL ISSUES.

SCORE:

0

12. Does anybody force or trick you or anyone in your family to do things that you do not want to do?  Y  N  Refused

13. Do you or anyone in your family ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone they don't know, share a needle, or anything like that?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION.

SCORE:

0

### C. Socialization & Daily Functioning

14. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you or anyone in your family owe them money?  Y  N  Refused

15. Do you or anyone in your family get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?  Y  N  Refused

IF "YES" TO QUESTION 14 OR "NO" TO QUESTION 15, THEN SCORE 1 FOR MONEY MANAGEMENT. SCORE: 0

16. Does everyone in your family have planned activities, other than just surviving, that make them feel happy and fulfilled?  Y  N  Refused

IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY. SCORE: 0

17. Is everyone in your family currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?  Y  N  Refused

IF "NO," THEN SCORE 1 FOR SELF-CARE. SCORE: 0

18. Is your family's current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because other family or friends caused your family to become evicted?  Y  N  Refused

IF "YES," THEN SCORE 1 FOR SOCIAL RELATIONSHIPS. SCORE: 0

### D. Wellness

19. Has your family ever had to leave an apartment, shelter program, or other place you were staying because of the physical health of you or anyone in your family?  Y  N  Refused

20. Do you or anyone in your family have any chronic health issues with your liver, kidneys, stomach, lungs or heart?  Y  N  Refused

21. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you or anyone in your family?  Y  N  Refused

22. Does anyone in your family have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?  Y  N  Refused

23. When someone in your family is sick or not feeling well, does your family avoid getting medical help?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH. SCORE: 0

**VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)**

FAMILIES

AMERICAN VERSION 2.0

24. Has drinking or drug use by you or anyone in your family led your family to being kicked out of an apartment or program where you were staying in the past?  Y  N  Refused

25. Will drinking or drug use make it difficult for your family to stay housed or afford your housing?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SUBSTANCE USE**.

SCORE:

0

26. Has your family ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

a) A mental health issue or concern?  Y  N  Refused

b) A past head injury?  Y  N  Refused

c) A learning disability, developmental disability, or other impairment?  Y  N  Refused

27. Do you or anyone in your family have any mental health or brain issues that would make it hard for your family to live independently because help would be needed?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **MENTAL HEALTH**.

SCORE:

0

28. IF THE FAMILY SCORED 1 EACH FOR PHYSICAL HEALTH, SUBSTANCE USE, AND MENTAL HEALTH: Does any single member of your household have a medical condition, mental health concerns, and experience with problematic substance use?  Y  N  N/A or Refused

IF "YES", SCORE 1 FOR **TRI-MORBIDITY**.

SCORE:

0

29. Are there any medications that a doctor said you or anyone in your family should be taking that, for whatever reason, they are not taking?  Y  N  Refused

30. Are there any medications like painkillers that you or anyone in your family don't take the way the doctor prescribed or where they sell the medication?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **MEDICATIONS**.

SCORE:

0

31. YES OR NO: Has your family's current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you or anyone in your family have experienced?  Y  N  Refused

IF "YES", SCORE 1 FOR **ABUSE AND TRAUMA**.

SCORE:

0

## E. Family Unit

32. Are there any children that have been removed from the family by a child protection service within the last 180 days?  Y  N  Refused

33. Do you have any family legal issues that are being resolved in court or need to be resolved in court that would impact your housing or who may live within your housing?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY LEGAL ISSUES.

SCORE:

0

34. In the last 180 days have any children lived with family or friends because of your homelessness or housing situation?  Y  N  Refused

35. Has any child in the family experienced abuse or trauma in the last 180 days?  Y  N  Refused

36. IF THERE ARE SCHOOL-AGED CHILDREN: Do your children attend school more often than not each week?  Y  N  N/A or Refused

IF "YES" TO ANY OF QUESTIONS 34 OR 35, OR "NO" TO QUESTION 36, SCORE 1 FOR NEEDS OF CHILDREN.

SCORE:

0

37. Have the members of your family changed in the last 180 days, due to things like divorce, your kids coming back to live with you, someone leaving for military service or incarceration, a relative moving in, or anything like that?  Y  N  Refused

38. Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY STABILITY.

SCORE:

0

39. Do you have two or more planned activities each week as a family such as outings to the park, going to the library, visiting other family, watching a family movie, or anything like that?  Y  N  Refused

40. After school, or on weekends or days when there isn't school, is the total time children spend each day where there is no interaction with you or another responsible adult...

a) 3 or more hours per day for children aged 13 or older?  Y  N  Refused

b) 2 or more hours per day for children aged 12 or younger?  Y  N  Refused

41. IF THERE ARE CHILDREN BOTH 12 AND UNDER & 13 AND OVER: Do your older kids spend 2 or more hours on a typical day helping their younger sibling(s) with things like getting ready for school, helping with homework, making them dinner, bathing them, or anything like that?  Y  N  N/A or Refused

IF "NO" TO QUESTION 39, OR "YES" TO ANY OF QUESTIONS 40 OR 41, SCORE 1 FOR PARENTAL ENGAGEMENT.

SCORE:

0

**VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)**

FAMILIES

AMERICAN VERSION 2.0

## Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	0 /2	<b>Score: Recommendation:</b> 0-3 no housing intervention 4-8 an assessment for Rapid Re-Housing 9+ an assessment for Permanent Supportive Housing/Housing First
A. HISTORY OF HOUSING & HOMELESSNESS	0 /2	
B. RISKS	0 /4	
C. SOCIALIZATION & DAILY FUNCTIONS	0 /4	
D. WELLNESS	0 /6	
E. FAMILY UNIT	0 /4	
<b>GRAND TOTAL:</b>	<b>0 /22</b>	

## Follow-Up Questions

<b>On a regular day, where is it easiest to find you and what time of day is easiest to do so?</b>	place: _____ time: ____ : ____ or <b>Night</b>
<b>Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?</b>	phone: (____) _____ - _____ email: _____
<b>Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Refused

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- military service and nature of discharge
- ageing out of care
- mobility issues
- legal status in country
- income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the adult at some point in the future
- safety planning



**Smart Path**  
to Housing and Health  
Santa Cruz County Coordinated  
Assessment and Referral System

**Smart Path Assessment- Transition Age Youth**

**NEXT STEP TOOL FOR HOMELESS YOUTH**

SINGLE YOUTH

AMERICAN VERSION 1.0

### Administration

<b>Interviewer's Name</b> _____	<b>Agency</b> _____	<input type="checkbox"/> Team <input type="checkbox"/> Staff <input type="checkbox"/> Volunteer
<b>Survey Date</b> DD/MM/YYYY ____/____/____	<b>Survey Time</b> ____ : ____ AM/PM	<b>Survey Location</b> _____

### Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

### Basic Information

<b>First Name</b> _____	<b>Nickname</b> _____	<b>Last Name</b> _____	
<b>In what language do you feel best able to express yourself?</b> _____			
<b>Date of Birth</b> DD/MM/YYYY ____/____/____	<b>Age</b> _____	<b>Social Security Number</b> _____	<b>Consent to participate</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

IF THE PERSON IS 17 YEARS OF AGE OR LESS, THEN SCORE 1.

SCORE:

**NEXT STEP TOOL FOR HOMELESS YOUTH**

SINGLE YOUTH

AMERICAN VERSION 1.0

## A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)

- Shelters                       Couch surfing                       Other (specify): \_\_\_\_\_  
 Transitional Housing       Outdoors  
 Safe Haven                       Refused

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1. **SCORE:**

2. How long has it been since you lived in permanent stable housing? \_\_\_\_\_  Refused

3. In the last three years, how many times have you been homeless? \_\_\_\_\_  Refused

IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1. **SCORE:**

## B. Risks

4. In the past six months, how many times have you...

- a) Received health care at an emergency department/room? \_\_\_\_\_  Refused
- b) Taken an ambulance to the hospital? \_\_\_\_\_  Refused
- c) Been hospitalized as an inpatient? \_\_\_\_\_  Refused
- d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? \_\_\_\_\_  Refused
- e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along? \_\_\_\_\_  Refused
- f) Stayed one or more nights in a holding cell, jail, prison or juvenile detention, whether it was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? \_\_\_\_\_  Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE. **SCORE:**

5. Have you been attacked or beaten up since you've become homeless?  Y  N  Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM. **SCORE:**

**NEXT STEP TOOL FOR HOMELESS YOUTH**

SINGLE YOUTH

AMERICAN VERSION 1.0

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live?  Y  N  Refused

8. Were you ever incarcerated when younger than age 18?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR LEGAL ISSUES.

SCORE:

9. Does anybody force or trick you to do things that you do not want to do?  Y  N  Refused

10. Do you ever do things that may be considered to be risky like exchange sex for money, food, drugs, or a place to stay, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION.

SCORE:

**C. Socialization & Daily Functioning**

11. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?  Y  N  Refused

12. Do you get any money from the government, an inheritance, an allowance, working under the table, a regular job, or anything like that?  Y  N  Refused

IF "YES" TO QUESTION 11 OR "NO" TO QUESTION 12, THEN SCORE 1 FOR MONEY MANAGEMENT.

SCORE:

13. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?  Y  N  Refused

IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY.

SCORE:

14. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?  Y  N  Refused

IF "NO," THEN SCORE 1 FOR SELF-CARE.

SCORE:

**NEXT STEP TOOL FOR HOMELESS YOUTH**

SINGLE YOUTH

AMERICAN VERSION 1.0

15. Is your current lack of stable housing...

- a) Because you ran away from your family home, a group home or a foster home?  Y  N  Refused
- b) Because of a difference in religious or cultural beliefs from your parents, guardians or caregivers?  Y  N  Refused
- c) Because your family or friends caused you to become homeless?  Y  N  Refused
- d) Because of conflicts around gender identity or sexual orientation?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SOCIAL RELATIONSHIPS**.

SCORE:

- e) Because of violence at home between family members?  Y  N  Refused
- f) Because of an unhealthy or abusive relationship, either at home or elsewhere?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **ABUSE/TRAUMA**.

SCORE:

## D. Wellness

- 16. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?  Y  N  Refused
- 17. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?  Y  N  Refused
- 18. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?  Y  N  Refused
- 19. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?  Y  N  Refused
- 20. When you are sick or not feeling well, do you avoid getting medical help?  Y  N  Refused
- 21. Are you currently pregnant, have you ever been pregnant, or have you ever gotten someone pregnant?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **PHYSICAL HEALTH**.

SCORE:

**NEXT STEP TOOL FOR HOMELESS YOUTH**

SINGLE YOUTH

AMERICAN VERSION 1.0

22. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past?  Y  N  Refused
23. Will drinking or drug use make it difficult for you to stay housed or afford your housing?  Y  N  Refused
24. If you've ever used marijuana, did you ever try it at age 12 or younger?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SUBSTANCE USE**.

SCORE:

25. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:
- a) A mental health issue or concern?  Y  N  Refused
- b) A past head injury?  Y  N  Refused
- c) A learning disability, developmental disability, or other impairment?  Y  N  Refused
26. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **MENTAL HEALTH**.

SCORE:

IF THE RESPONENT SCORED 1 FOR **PHYSICAL HEALTH** AND 1 FOR **SUBSTANCE USE** AND 1 FOR **MENTAL HEALTH**, SCORE 1 FOR **TRI-MORBIDITY**.

SCORE:

27. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?  Y  N  Refused
28. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication?  Y  N  Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **MEDICATIONS**.

SCORE:

## Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	/1	<b>Score: Recommendation:</b> 0-3: no moderate or high intensity services be provided at this time 4-7: assessment for time-limited supports with moderate intensity 8+: assessment for long-term housing with high service intensity
A. HISTORY OF HOUSING & HOMELESSNESS	/2	
B. RISKS	/4	
C. SOCIALIZATION & DAILY FUNCTIONS	/4	
D. WELLNESS	/6	
<b>GRAND TOTAL:</b>	<b>/17</b>	

**NEXT STEP TOOL FOR HOMELESS YOUTH**

SINGLE YOUTH

AMERICAN VERSION 1.0

**Follow-Up Questions**

<b>On a regular day, where is it easiest to find you and what time of day is easiest to do so?</b>	place: _____ time: ___ : ___ or Morning/Afternoon/Evening/Night
<b>Is there a phone number and/or email where someone can get in touch with you or leave you a message?</b>	phone: (____) _____ - _____ email: _____
<b>Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Refused

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- military service and nature of discharge
- ageing out of care
- mobility issues
- legal status in country
- income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the youth at some point in the future
- safety planning



**Smart Path**  
to Housing and Health  
Santa Cruz County Coordinated  
Assessment and Referral System

**Assessment Specialist**

*Field for the Assessment Specialist, not a required field:*

1. There are significant concerns with this VI-SPDAT score. It is suggested that a full SPDAT be conducted should this client be referred to a housing program.

This score seems significantly high.  This score seems significantly low.

Comment:

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2. Is this client a participant in the Dignity Health Passport to Health High Utilizer Program?

Yes  No



Date \_\_\_\_/\_\_\_\_/\_\_\_\_

### Smart Path Non-Housing Resources

Select all categories of non-housing resources to which you referred the participant:

- Basic Needs (meals, food pantry, clothing, showers, emergency shelter)
- Health Services (medical services, mental health services, dental services, substance use disorder services)
- Government Benefits (Medi-Cal, SSI, General Assistance, TANF, CalFresh)
- Other (employment programs, personal identification (ID, birth certificate, Social Security Card), free phone, mail services, transportation (bus passes))



**Smart Path**  
to Housing and Health  
Santa Cruz County Coordinated  
Assessment and Referral System

**Smart Path Check In**

Date ___/___/___	Date ___/___/___	Date ___/___/___
Date ___/___/___	Date ___/___/___	Date ___/___/___
Date ___/___/___	Date ___/___/___	Date ___/___/___
Date ___/___/___	Date ___/___/___	Date ___/___/___
Date ___/___/___	Date ___/___/___	Date ___/___/___



**Smart Path**  
to Housing and Health  
Santa Cruz County Coordinated  
Assessment and Referral System

Date     /     /    

**Client Notes**

A large rectangular box containing 20 horizontal lines for writing notes.



**Smart Path**  
 to Housing and Health  
 Santa Cruz County Coordinated  
 Assessment and Referral System

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Smart Path Additional Questions**

**First Name** \_\_\_\_\_

**Middle** \_\_\_\_\_

**Last Name** \_\_\_\_\_

1. Who is in your household?

- One or more adults with children over 18 in the household, select one VI-SPDAT per person
- One or more adults with minor children in custody, select one VI-F-SPDAT
- Single adult, select the VI-SPDAT
- Adult couple, select two separate VI-SPDATs
- Young adult 18-24, select the VI-TAY-SPDAT

2. Are you expecting any changes in your family structure?

- Yes    No

Comment:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Are you willing to participate in a drug and alcohol-free housing program?

- Yes    No

4. Are you working with a case manager at any agencies?

- Yes    No

a. If so, what is the name of the agency and case manager?

Agency: \_\_\_\_\_

Case Manager: \_\_\_\_\_

**Santa Cruz County**  
**Homeless Management Information System**  
**CLIENT INFORMED CONSENT &**  
**RELEASE OF INFORMATION AUTHORIZATION**

\_\_\_\_\_ is a Partner Agency in the Homeless Management Information System (HMIS). HMIS is a computerized system that can improve programs for homeless persons by allowing information to be shared among partner agencies that provide services such as shelter and health care and/or homelessness research or administrative services. The system is Internet-based and uses many security protections to ensure confidentiality. Partner agencies currently include:

- Association of Faith Communities
- City of Santa Cruz
- Community Action Board
- Community Bridges – Mountain Community
- Community Technology Alliance
- County Administrative Office - Santa Cruz County
- County of Santa Cruz Homeless Services
- Downtown Streets Team
- Encompass Community Services
- Families in Transition
- Front St. Inc
- Homeless Garden Project
- Homeless Persons Health Project
- Homeless Services Center
- Housing Authority of Santa Cruz County
- Housing Choices
- Janus Santa Cruz County
- Mental Health Client Action Network
- Mountain Community Resources
- Pajaro Rescue Mission
- Pajaro Valley Shelter Services
- Salud Para La Gente
- Salvation Army
- Santa Cruz Community Health Center
- Santa Cruz County Health Services Agency
- Santa Cruz Human Services Department
- Santa Cruz Public Libraries
- Veteran Resource Center
- Wing Homeless Advocacy

Participation in the HMIS program is important to our community's ability to provide you with the best services and housing possible. As you receive services, information will be collected about you, the services provided to you, and the outcomes these services help you to achieve. Your name and other identifying information will not be shared with any agency not participating in the system (unless required to do so by law.) Authorizing your information to be entered into the HMIS is voluntary. Refusing to do so will not limit your access to shelter or services.

I give authorization for my basic and relevant information to be entered \_\_\_\_\_ (please initial) and shared \_\_\_\_\_ (please initial) between Partner Agencies in order to help assist me in obtaining permanent housing, employment, financial assistance, vocational services, counseling and medical/mental health treatment and for research and administrative purposes. (Basic information includes intake date, name, gender, birth date, ethnicity, marital status, number in household, military status, primary language spoken, and non-confidential services requested and received.) I understand that I have the right to receive a copy of all information shared between the Partner Agencies.

I understand that the current list of participating Partner Agencies may change over time to include other agencies who provide housing or services to the homeless population, and I give authorization for my information to be shared with any new Partner Agency. \_\_\_\_\_ (please initial)

I understand that I may request a current list of all Partner Agencies at any time. I understand that I may cancel this authorization at any time by written request, but that the cancellation will not be retroactive. I understand that this release is valid for three years from the date of my signature below.

\_\_\_\_\_  
Print Name of Client or Guardian

\_\_\_\_\_  
Signature Of Client Or Guardian

\_\_\_\_\_  
Date

Note: A separate, HIPAA-compliant authorization is required for disclosure of any patient health information, including mental health and drug and alcohol information protected by any State or Federal privacy law including, but not limited to, Health Insurance Portability and Accountability Act ("HIPAA"), 45 C.F.R. parts 160 and 164, California Confidentiality of Medical Information Act ("CMIA"), Civil Code sections 56-56.16, Welfare and Institutions Code section 5328, or 42 C.F.R. part 2.1, et seq.

July 2018



HMIS # _____
CM Name _____
Date ____/____/____

### Santa Cruz County HMIS- New Client Form

This form is designed to be completed by a service provider while interviewing a client.  
 A separate form should be completed for each member of the household.

**Household Information** Is client:  Single Adult     Adult in Household

<b>If checked Single Adult</b>	Go to Client Profile																		
<b>If checked Adult in Household</b>	Are you the Head of Household (HoH)? <input type="checkbox"/> Yes <input type="checkbox"/> No																		
<b>If you are in a household, what is your relationship to the HoH?</b>	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"><input type="checkbox"/> Wife</td> <td style="width: 50%; border: none;"><input type="checkbox"/> Aunt</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Daughter</td> <td style="border: none;"><input type="checkbox"/> Uncle</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Son</td> <td style="border: none;"><input type="checkbox"/> Niece</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Father</td> <td style="border: none;"><input type="checkbox"/> Nephew</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Mother</td> <td style="border: none;"><input type="checkbox"/> Grandparent</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Sister</td> <td style="border: none;"><input type="checkbox"/> Significant Other</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Brother</td> <td style="border: none;"><input type="checkbox"/> Domestic Partner</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Roommate</td> <td style="border: none;"><input type="checkbox"/> Spouse</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Grandchild</td> <td style="border: none;"><input type="checkbox"/> Other</td> </tr> </table>	<input type="checkbox"/> Wife	<input type="checkbox"/> Aunt	<input type="checkbox"/> Daughter	<input type="checkbox"/> Uncle	<input type="checkbox"/> Son	<input type="checkbox"/> Niece	<input type="checkbox"/> Father	<input type="checkbox"/> Nephew	<input type="checkbox"/> Mother	<input type="checkbox"/> Grandparent	<input type="checkbox"/> Sister	<input type="checkbox"/> Significant Other	<input type="checkbox"/> Brother	<input type="checkbox"/> Domestic Partner	<input type="checkbox"/> Roommate	<input type="checkbox"/> Spouse	<input type="checkbox"/> Grandchild	<input type="checkbox"/> Other
<input type="checkbox"/> Wife	<input type="checkbox"/> Aunt																		
<input type="checkbox"/> Daughter	<input type="checkbox"/> Uncle																		
<input type="checkbox"/> Son	<input type="checkbox"/> Niece																		
<input type="checkbox"/> Father	<input type="checkbox"/> Nephew																		
<input type="checkbox"/> Mother	<input type="checkbox"/> Grandparent																		
<input type="checkbox"/> Sister	<input type="checkbox"/> Significant Other																		
<input type="checkbox"/> Brother	<input type="checkbox"/> Domestic Partner																		
<input type="checkbox"/> Roommate	<input type="checkbox"/> Spouse																		
<input type="checkbox"/> Grandchild	<input type="checkbox"/> Other																		

### Client Profile

<b>Social Security Number</b>	
<b>First Name</b>	<b>Middle</b>
<b>Last Name</b>	
<b>Alias</b> (If multiple aliases, separate by commas)	
<b>Quality of Name</b>	<input type="checkbox"/> Full Name Reported <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Partial, Street Name, or Code Name Reported <input type="checkbox"/> Client Refused
<b>U.S. Military Veteran</b> (If Yes, complete Veteran Information below)	<input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> No <input type="checkbox"/> Client Refused
<b>Disabling Condition</b>	<input type="checkbox"/> Yes <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> No <input type="checkbox"/> Client Refused
<b>Primary Phone Number</b>	

**Client Demographics**

<b>Date of Birth</b>	_____ / _____ / _____	
<b>Gender</b>	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Trans Female (MTF or Male to Female) <input type="checkbox"/> Trans Male (FTM or Female to Male)	<input type="checkbox"/> Gender Non-Conforming (i.e. not exclusively male or female) <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused
<b>Ethnicity</b>	<input type="checkbox"/> Non-Hispanic/Non-Latino <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused	<b>Race</b> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused

**Veteran Information**

<b>U.S. Military Veteran</b> If yes, answer questions below	<b>Year Entered in Military Service (Year)</b>	<b>Separated (Year)</b>
<b>Theater of Operations: World War II</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused
<b>Theater of Operations: Korean War</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused
<b>Theater of Operations: Vietnam War</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused
<b>Theater of Operations: Persian Gulf War</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused
<b>Theater of Operations: Afghanistan</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused
<b>Theater of Operations: Iraq (Iraqi Freedom)</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused
<b>Theater of Operations: Iraq (New Dawn)</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused
<b>Theater of Operations: Other Operations</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused
<b>Branch of Military</b>	<input type="checkbox"/> Army <input type="checkbox"/> Air Force <input type="checkbox"/> Navy <input type="checkbox"/> Marine	<input type="checkbox"/> Coast Guard <input type="checkbox"/> Client Doesn't Know <input type="checkbox"/> Client Refused
<b>Discharge Status</b>	<input type="checkbox"/> Honorable <input type="checkbox"/> General Under Honorable Conditions <input type="checkbox"/> Under Other Than Honorable Conditions (OTH) <input type="checkbox"/> Bad Conduct	<input type="checkbox"/> Dishonorable <input type="checkbox"/> Uncharacterized <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client Refused

**Client Location**

<b>Address Type</b>	<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School <input type="checkbox"/> Mailing <input type="checkbox"/> Emergency <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Spouse	<input type="checkbox"/> Temporary <input type="checkbox"/> Other <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Message <input type="checkbox"/> Management Company <input type="checkbox"/> Forwarding Address <input type="checkbox"/> Encampment <input type="checkbox"/> Tunnel
<b>Name of Location</b>		
<b>Address (line 1)</b>		
<b>Address (line 2)</b>		
<b>City</b>	<b>State</b>	
<b>Zip Code</b>		
<b>Email</b>		
<b>Phone #1</b>		
<b>Phone #2</b>		

**Additional Client Location**

<b>Address Type</b>	<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School <input type="checkbox"/> Mailing <input type="checkbox"/> Emergency <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Spouse	<input type="checkbox"/> Temporary <input type="checkbox"/> Other <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Message <input type="checkbox"/> Management Company <input type="checkbox"/> Forwarding Address <input type="checkbox"/> Encampment <input type="checkbox"/> Tunnel
<b>Name of Location</b>		
<b>Address (line 1)</b>		
<b>Address (line 2)</b>		
<b>City</b>	<b>State</b>	
<b>Zip Code</b>		
<b>Email</b>		
<b>Phone #1</b>		
<b>Phone #2</b>		

I, (Adult client or Head of Household) certify that the information I have provided here is true/correct to the best of my knowledge.

\_\_\_\_\_

Print Name of Client

\_\_\_\_\_

Signature of Client

\_\_\_\_\_

Date

\_\_\_\_\_

Print Name of Intake Worker

\_\_\_\_\_

Signature of Intake Worker

\_\_\_\_\_

Date

# **PHA Homeless Preferences**

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**ADMINISTRATIVE PLAN**

**Section 8 Housing Choice Voucher Program**

**Housing Authority of the County of Santa Cruz**



The Administrative Plan contains those policies of the Housing Authority of the County of Santa Cruz that have been adopted by the Board of Commissioners, as required by 24CFR 982.54, governing the establishment and administration of a waiting list, the issuance of Section 8 Housing Choice Vouchers, and overall program administration. The Housing Authority reserves the right to amend the Administrative Plan.

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**June 2021**

*Please note that the electronic copy of this document contains hyperlinks to applicable HUD regulations and other references. An electronic copy of this document is available at the following website: <http://www.hacosantacruz.org/agency.htm>. If you cannot access the electronic copy of this document, copies of the referenced links and regulations will be available upon request.*

### Waiting List Preferences for Designated Groups on the Housing Choice Voucher Waiting List

Waiting list preferences are described below. All preferences are verified. These preferences will not have the purpose or effect of delaying or otherwise denying admission to the program based on the race, color, ethnic origin, gender, gender identity, sexual orientation, religion, disability, or age of any member of an applicant family. Unless otherwise stated, waiting list preferences apply to the Santa Cruz County Housing Choice Voucher Waiting List. All preferences adopted by the Housing Authority are based on local housing needs and priorities as determined by the Housing Authority. With the exception of these waiting list preferences, all other applicants on the Housing Choice Voucher waiting lists will be assisted by either date of placement or random number sequence lottery.

1. Live/Work Residency Preference

The Housing Authority has established a partial live/work residency preference, such that at least 75% of the families selected from the waiting list will either currently live or work in the jurisdiction of the waiting list. The residency preference is applicable to the Santa Cruz County Housing Choice Voucher Waiting List (for households with a head of household, spouse or registered domestic partner that lives/works in Santa Cruz County) and the Hollister/San Juan Bautista Housing Choice Voucher Waiting List (for households with a head of household, spouse or registered domestic partner that lives/works in San Benito County.) The residency preference ensures that the majority of the Housing Choice Vouchers, which have been awarded to the Housing Authority by HUD to serve our jurisdiction, will be made available to those who live or work in the jurisdiction.

2. Disabled and Medically Vulnerable Homeless Persons (DMV)

The Housing Authority has adopted a limited waiting list preference for disabled and medically vulnerable homeless persons. Housing Matters [using prioritization through Smart Path, the Coordinated Entry System for persons experiencing homelessness, (as administered by the County Human Services Department, Housing for Health Division)] provides referrals for persons who meet all of the following criteria:

- a) Disabled as defined by HUD at 24CFR 5.403.
- b) Medically vulnerable as defined by a Homeless Action Partnership approved Vulnerability Index.
- c) Homeless as defined by HUD per the HEARTH Act in Federal Register / Vol. 76, No. 233.
- d) Have established a case management plan with a provider of housing supportive services within Santa Cruz County.

A maximum of 150 households may be assisted by this preference program at any given time. The Housing Authority may continue to accept referrals for persons eligible for this preference while the waiting list is closed. DMV voucher holders who have been stably housed for 2 years may “graduate” into the regular voucher program if they are in good standing with the program and there are vouchers/funding available. At that time, the DMV voucher would be available for the next eligible family referred to the Housing Authority.

3. Homeless Families with Minor Children

The Housing Authority has adopted a limited waiting list preference for homeless families

with minor children. The preference is for applicants already on the Santa Cruz County Section 8 waiting list who meet the following criteria:

- a) Homeless as defined by HUD per the HEARTH Act in Federal Register / Vol. 76, No. 233.
- b) Head of household or spouse lives or works in Santa Cruz County
- c) Head of household or spouse has at least one minor child residing with household

The Housing Authority will identify potentially eligible families who are already on the Santa Cruz County Section 8 waiting list. Eligible families will be referred to the Human Services Department (HSD) of the County of Santa Cruz. HSD will provide an appropriate level of case management to the homeless family, including assistance with the voucher eligibility application and paperwork and rental search assistance. Although the homeless family is not required to accept case management, HSD will offer case management for at least one year. A maximum of 40 households may be assisted by this preference program at any given time. If there are no eligible homeless families that can be identified on the Santa Cruz County Section 8 waiting list, or that respond to Housing Authority requests for application, the Housing Authority may accept referrals for persons eligible for this preference. Homeless family preference voucher holders who have been stably housed for 2 years may “graduate” into the regular voucher program if they are in good standing with the program and there are vouchers/funding available. At that time, the homeless family preference voucher would be available for the next eligible family.

4. Vulnerable Homeless Persons in San Benito County

The Housing Authority is working with San Benito County to develop a limited waiting list preference for persons who are experiencing homelessness or at risk of homelessness and have other vulnerability factors. This preference may be implemented following the establishment of a formal agreement with San Benito County and/or a lead service agency identified by San Benito County. The preference will be limited to 24 households, with a maximum of 2 new households per month.

5. Homeless Families with Minor Children for Brommer Street Supportive Housing Units

The Housing Authority has adopted a limited waiting list preference for homeless families with minor children for residency of six supportive housing units at the Brommer Street Supportive Housing Program. The Housing Authority will accept direct referrals from the County of Santa Cruz Human Services Department (HSD) of homeless families with minor children in accordance with the MOU.

6. Disabled Transitioning from Institutions (DTI)

The Housing Authority has adopted a limited waiting list preference for disabled persons transitioning from institutions into community-based settings, and persons at serious risk of institutionalization for persons who meet the following criteria:

- a) Disabled as defined by HUD at 24CFR 5.403.
- b) Transitioning – Individuals must either be currently living in, or at serious risk of being admitted to, a qualified institution at the time of referral to the Housing Authority, or must have been living in a qualified institution no more than 90 days prior to the referral to the Housing Authority.

On a case-by-case basis, the Housing Authority may issue a DTI voucher to an individual who is at imminent risk of death or who will not be able to receive lifesaving medical care without housing. Such cases will be approved by the Executive Director.

Qualifying institutions include intermediate care facilities, licensed residential facilities, and specialized institutions that care for the intellectually disabled, developmentally disabled, physically disabled or mentally ill. This definition does not include board and care facilities (such as adult homes, adult day care, and adult congregate living).

Referral Agency / Supportive Services – Qualifying individuals must be referred by a service provider agency that has entered into a memorandum of understanding (MOU) with the Housing Authority. The service provider will document and certify the eligibility criteria above (disability status and transition from qualifying institution). The service provider must also certify that the individual is ready to transition out of an institutional environment and must have a case management plan to assist the individual with the transition. Additionally, the service provider must assist the individual with all aspects of the Housing Choice Voucher program, including completing applications, obtaining documentation of income, attending Housing Authority appointments with the client, and assisting the client in finding and maintaining housing.

A maximum of 12 households may be assisted by this preference program at any given time. The Housing Authority may continue to accept referrals for persons who would be eligible for this preference while the waiting list is closed. DTI voucher holders who have been stably housed for 2 years may “graduate” into the regular voucher program if they are in good standing with the program and there are vouchers/funding available. At that time, the DTI voucher would be available for the next eligible family referred to the Housing Authority.

#### 7. Mainstream Vouchers

The Housing Authority has received 240 Mainstream Vouchers. These Mainstream Vouchers are available to waiting list applicants that meet the following eligibility criteria:

- The Household must include a family member between the age of 18 and 62 who is a person with a disability.

Assistance will be offered to applicants eligible for the program based on date of placement or lottery number. If the Section 8 HCV waiting list does not contain a sufficient number of eligible households, the Housing Authority may accept referrals for persons eligible for this preference. Eligible persons include those who are transitioning from institutions, at serious risk of institutionalization, homeless or at risk of homelessness.

The Housing Authority has established a temporary Mainstream Voucher preference of up to 75 vouchers for non-elderly persons with disabilities who are at high-risk of severe COVID-19 disease and are staying in time-limited shelters in Santa Cruz County. Referrals will be provided by the Human Services Department (HSD) Housing for Health Division using the SCC COVID-19 shelter and Smart Path data. HSD will provide the applicants with supportive services and housing navigation assistance. The COVID-19 Mainstream Voucher preference will automatically expire 180 days after the Governor lifts the state of emergency

# **PHA Moving On Preferences**

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**ADMINISTRATIVE PLAN**

**Section 8 Housing Choice Voucher Program**

**Housing Authority of the County of Santa Cruz**



The Administrative Plan contains those policies of the Housing Authority of the County of Santa Cruz that have been adopted by the Board of Commissioners, as required by 24CFR 982.54, governing the establishment and administration of a waiting list, the issuance of Section 8 Housing Choice Vouchers, and overall program administration. The Housing Authority reserves the right to amend the Administrative Plan.

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**June 2021**

*Please note that the electronic copy of this document contains hyperlinks to applicable HUD regulations and other references. An electronic copy of this document is available at the following website: <http://www.hacosantacruz.org/agency.htm>. If you cannot access the electronic copy of this document, copies of the referenced links and regulations will be available upon request.*

### Waiting List Preferences for Designated Groups on the Housing Choice Voucher Waiting List

Waiting list preferences are described below. All preferences are verified. These preferences will not have the purpose or effect of delaying or otherwise denying admission to the program based on the race, color, ethnic origin, gender, gender identity, sexual orientation, religion, disability, or age of any member of an applicant family. Unless otherwise stated, waiting list preferences apply to the Santa Cruz County Housing Choice Voucher Waiting List. All preferences adopted by the Housing Authority are based on local housing needs and priorities as determined by the Housing Authority. With the exception of these waiting list preferences, all other applicants on the Housing Choice Voucher waiting lists will be assisted by either date of placement or random number sequence lottery.

#### 1. Live/Work Residency Preference

The Housing Authority has established a partial live/work residency preference, such that at least 75% of the families selected from the waiting list will either currently live or work in the jurisdiction of the waiting list. The residency preference is applicable to the Santa Cruz County Housing Choice Voucher Waiting List (for households with a head of household, spouse or registered domestic partner that lives/works in Santa Cruz County) and the Hollister/San Juan Bautista Housing Choice Voucher Waiting List (for households with a head of household, spouse or registered domestic partner that lives/works in San Benito County.) The residency preference ensures that the majority of the Housing Choice Vouchers, which have been awarded to the Housing Authority by HUD to serve our jurisdiction, will be made available to those who live or work in the jurisdiction.

#### 2. Disabled and Medically Vulnerable Homeless Persons (DMV)

The Housing Authority has adopted a limited waiting list preference for disabled and medically vulnerable homeless persons. Housing Matters [using prioritization through Smart Path, the Coordinated Entry System for persons experiencing homelessness, (as administered by the County Human Services Department, Housing for Health Division)] provides referrals for persons who meet all of the following criteria:

- a) Disabled as defined by HUD at 24CFR 5.403.
- b) Medically vulnerable as defined by a Homeless Action Partnership approved Vulnerability Index.
- c) Homeless as defined by HUD per the HEARTH Act in Federal Register / Vol. 76, No. 233.
- d) Have established a case management plan with a provider of housing supportive services within Santa Cruz County.

A maximum of 150 households may be assisted by this preference program at any given time. The Housing Authority may continue to accept referrals for persons eligible for this preference while the waiting list is closed. DMV voucher holders who have been stably housed for 2 years may “graduate” into the regular voucher program if they are in good standing with the program and there are vouchers/funding available. At that time, the DMV voucher would be available for the next eligible family referred to the Housing Authority.

#### 3. Homeless Families with Minor Children

The Housing Authority has adopted a limited waiting list preference for homeless families

with minor children. The preference is for applicants already on the Santa Cruz County Section 8 waiting list who meet the following criteria:

- a) Homeless as defined by HUD per the HEARTH Act in Federal Register / Vol. 76, No. 233.
- b) Head of household or spouse lives or works in Santa Cruz County
- c) Head of household or spouse has at least one minor child residing with household

The Housing Authority will identify potentially eligible families who are already on the Santa Cruz County Section 8 waiting list. Eligible families will be referred to the Human Services Department (HSD) of the County of Santa Cruz. HSD will provide an appropriate level of case management to the homeless family, including assistance with the voucher eligibility application and paperwork and rental search assistance. Although the homeless family is not required to accept case management, HSD will offer case management for at least one year. A maximum of 40 households may be assisted by this preference program at any given time. If there are no eligible homeless families that can be identified on the Santa Cruz County Section 8 waiting list, or that respond to Housing Authority requests for application, the Housing Authority may accept referrals for persons eligible for this preference. Homeless family preference voucher holders who have been stably housed for 2 years may "graduate" into the regular voucher program if they are in good standing with the program and there are vouchers/funding available. At that time, the homeless family preference voucher would be available for the next eligible family.

4. Vulnerable Homeless Persons in San Benito County

The Housing Authority is working with San Benito County to develop a limited waiting list preference for persons who are experiencing homelessness or at risk of homelessness and have other vulnerability factors. This preference may be implemented following the establishment of a formal agreement with San Benito County and/or a lead service agency identified by San Benito County. The preference will be limited to 24 households, with a maximum of 2 new households per month.

5. Homeless Families with Minor Children for Brommer Street Supportive Housing Units

The Housing Authority has adopted a limited waiting list preference for homeless families with minor children for residency of six supportive housing units at the Brommer Street Supportive Housing Program. The Housing Authority will accept direct referrals from the County of Santa Cruz Human Services Department (HSD) of homeless families with minor children in accordance with the MOU.

6. Disabled Transitioning from Institutions (DTI)

The Housing Authority has adopted a limited waiting list preference for disabled persons transitioning from institutions into community-based settings, and persons at serious risk of institutionalization for persons who meet the following criteria:

- a) Disabled as defined by HUD at 24CFR 5.403.
- b) Transitioning – Individuals must either be currently living in, or at serious risk of being admitted to, a qualified institution at the time of referral to the Housing Authority, or must have been living in a qualified institution no more than 90 days prior to the referral to the Housing Authority.

for California. Once the temporary waiting list preference expires, all Mainstream Vouchers will be available to eligible waiting list applicants.

Additionally, to the extent that any homeless targeted referral voucher programs become fully utilized during the COVID-19 pandemic, the Housing Authority may issue Mainstream Vouchers to Mainstream eligible homeless persons referred for other voucher programs to avoid a delay in their housing placement. This temporary authority will automatically expire 180 days after the Governor lifts the state of emergency for California.

8. Graduates of the Continuum of Care (CoC) Shelter Plus Care (S+C) and Youth Homeless Demonstration Program (YHDP) Permanent Supportive Housing (PSH) Programs

The Housing Authority has been awarded competitive grants for permanent supportive housing for people experiencing chronic homelessness. A program known as Shelter Plus Care is a partnership between the Housing Authority and the County Health Services Agency to provide wrap-around services from outreach and eligibility to housing stabilizing services. A program known as New Roots is a partnership between the Housing Authority and Encompass Community Services to provide supportive services and housing to homeless youth ages 18-24 with disabilities.

S+C recipients who have been stably housed for 2 years may “graduate” into the regular voucher program if they are in good standing with the program and there are vouchers/funding available. At that time, the S+C assistance would be available for the next eligible family referred to the Housing Authority by the Health Services Agency.

The Housing Authority may graduate Youth Homeless Demonstration Project participants when these four conditions apply: 1.) The young adult has been stably housed for two or more years. 2.) The Case Manager agrees that the young adult has sufficiently benefitted from supportive services. 3.) The young adult is in good standing with the Housing Authority. 4.) There are vouchers/funding available. The Housing Authority may transfer the young adult to regular HCV so “younger” youth can have access to the permanent supportive housing.

9. Admission of Low-Income Families

Low-income families (up to 80% median household income) may be admitted to the program if they are working families (defined as a family in which the head, spouse or sole member is employed). In addition, low-income families in which the head and spouse or sole member is age 62 or over or is a person with disabilities may be admitted under this section. Such low-income families will not be admitted ahead of non-low-income families but will be placed on the waiting list according to the random number sequence lottery of their application.

10. Temporary Measures during Periods of Low Utilization Rate

During times of low voucher or funding utilization (under 97%), the Housing Authority may utilize the following measures:

1. Lease In-Place Option. This preference will only be applicable to applicants already on the waiting list who currently live in the Housing Authority jurisdiction, reside in a unit that meets HQS standards, with a landlord who is willing to accept a voucher.

4. providing orientation to the Section 8 Housing Choice Voucher Program
5. offering training to HSD and other HSD-subcontract agencies on HCV procedures
6. convening regular meetings with HSD and the Consortium of Care (CoC) Homeless Action Partnership
7. approving rental agreements for FUP and processing HAP contracts.

The Human Services Department will be responsible wholly or in part for

1. seeking and identifying eligible families and making referrals to the Housing Authority;
2. certifying special program eligibility;
3. assisting in identifying and securing housing appropriate to the family's size and needs;
4. offering training on HSD referral procedures to the Housing Authority and HSD-subcontractors
5. providing case management and some or all of the following supportive services:
  - a. child welfare and family reunification services
  - b. vocational training and educational assistance
  - c. childcare assistance
  - d. health, mental health, and substance abuse services
  - e. renter education
  - f. job search and placement assistance

The Continuum of Care will be responsible for

1. utilizing the Smart Path to Housing and Health, Coordinated Entry System (CES) to identify youth, including those who were previously on a child welfare caseload, who may be eligible for FUP
2. using Smart Path CES, to provide assessments and prioritization.

Once a family has been certified as eligible and accepted into the Family Unification Program, they will attend an orientation session provided by the Housing Authority, during which Section 8 procedures and regulations will be explained in detail. All FUP families and youth will be offered the opportunity to join the Family Self Sufficiency program.

The HSD will be responsible for case management for the FUP Youth Family Self-Sufficiency (FSS) for the first 18 months from the start of the FSS Contract. Case Management is intended to assist the youth fulfill their FSS plan toward independence and self-sufficiency. HSD will be responsible for a Transitional Independent Living Plan developed with each FUP-Youth as well as providing basic life skills, counseling, providing assurances to property owners, job preparation, and educational advancement opportunities.

FUP recipients who have been stably housed for 2 years may "graduate" into the regular voucher program if they are in good standing with the program and there are vouchers/funding available. At that time, the FUP assistance would be available for the next eligible family referred to the Housing Authority by the Human Services Department.

Issuance as a Reasonable Accommodation

A Housing Choice Voucher may be issued as a reasonable accommodation to persons with disabilities who live in a unit owned or managed by the Housing Authority if

not be issued based on placement on Housing Authority waiting lists. EHV's will be issued based on referrals from the County Continuum of Care (CoC) in accordance with an MOU with the County Human Services Department (HSD), who act as the lead agency for the CoC. Additionally, criteria for admission into the voucher program will be more flexible for EHV's, in accordance with PIH 2021-15. Based on HUD's waiver of 24CFR982.552 and 982.553, the Housing Authority will only deny admission for the EHV program based on criminal history in the following circumstances:

- If any member of the household has ever been convicted of a drug-related criminal activity for manufacture or production of methamphetamine on the premises of federally assisted housing; or
- If any member of the household is subject to a lifetime registration requirement under a State sex offender registration program to EHV applicants.

The Housing Authority may "graduate" EHV households into the regular HCV program, or any applicable HCV preference or voucher type, in order to maximize utilization and provide assistance to the maximum number of homeless applicants.

The EHV program will sunset on September 30, 2023. At that time, all households housed through the EHV program will continue to receive rental assistance for as long as they remain eligible and as long as HUD funding allows. However, new EHV vouchers may not be issued after this date. Therefore, as EHV program participants leave the program, turnover vouchers will not be issued, and the program will eventually end through attrition.

#### **IV. Occupancy Policies**

##### **Definition of a Family**

A family is a person or group of people related by blood, marriage, adoption or affinity that live together in a stable family relationship. Furthermore, the Housing Authority has adopted HUD's definition of "family" as defined in 24 CFR 5.403. This definition of family includes single individuals as well as groups of people residing together, regardless of actual or perceived sexual orientation, gender identity, or marital status.

Each family contains a head of household, who must be at least eighteen years old, or if under 18, they must be an emancipated minor. Additionally, each family member must reside in the assisted unit at least 51% of the time (at least 184 days out of the year). Children who are temporarily away from the home because of placement in foster care and military servicepersons on active duty are considered part of the family if they would otherwise be living in the assisted unit. However, they will not be considered for the purposes of determining voucher size while they are out of the unit. Households with children who have been placed in foster care will keep their voucher size for at least 12 months after the child is removed. However, at the annual review following 12 months after removal (the second annual reexamination after removal) the Household will be downsized. When the child returns from foster placement, the household will be upsized at the interim and the payment standard will be updated at that time. The household will not be required to wait until their next annual re-examination to be upsized or to have their payment standard updated.

# **Local Competition Announcement**

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## Funding Opportunity Announcement: HUD Continuum of Care (CoC) 2021 Notice of Funding Opportunity and Local Process Info Session

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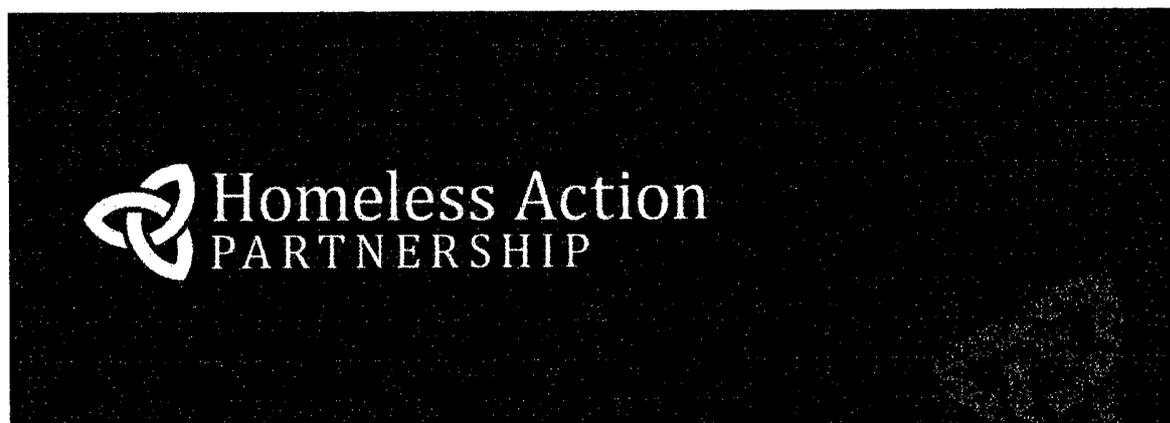
From: Homeless Action Partnership (hap@santacruzcounty.us)

To: tonygardnerconsulting@yahoo.com

Date: Wednesday, September 1, 2021, 5:45 PM PDT

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[View this email in your browser](#)



### Community Notice

Please be advised that the U.S. Department of Housing and Urban Development's (HUD) Notice of Funding Opportunity (NOFO) for the 2021 Continuum of Care (CoC) Program Competition was released on August 18, 2021. The CoC Program Competition provides ongoing and new funding opportunities for projects focused on preventing and ending homelessness around the country. The NOFO can be found here: [www.grants.gov/web/grants/view-opportunity.html?oppId=335322](http://www.grants.gov/web/grants/view-opportunity.html?oppId=335322).

This Public Solicitation of Applications for projects within the Santa Cruz County CoC area provides a summary of the 2021 CoC NOFO, the local process for reviewing and selecting projects, and the local timeline for applying for CoC funding.

**A virtual Applicant Orientation Session for all interested parties will be held on Friday, September 10, from 2:30-5:00 p.m. via Teams meeting.** The session agenda will include:

- Overview of the HUD CoC Program Competition
  - Local Process and Timeline
-

- Local Applications and Scoring
- Question and Answer
- Special Training on Matching Requirements
- Special Youth Homelessness Demonstration Program (YHDP) breakout session (for YHDP agencies only)

**The Teams link for the meeting is:**

Microsoft Teams meeting

**Join on your computer or mobile app**

[Click here to join the meeting](#)

**Or call in (audio only)**

[+1 916-318-9542,,920400133#](#) United States, Sacramento

Phone Conference ID: 920 400 133#

[Find a local number](#) | [Reset PIN](#)

The information session will be recorded and a link to the recording will be posted on the [HAP website](#) after the session.

Attendance is highly recommended for representatives of any organization that is a:

- Current CoC grantee
- Current YHDP grantee
- Non-CoC funded agency interested in applying for CoC funding, including nonprofit organizations, local governments, instrumentalities of local governments, and public housing agencies. The CoC encourages applications from organizations that have not previously received CoC Program funding.

We would appreciate you forwarding this [Public Solicitation](#) to any interested parties, posting it on relevant listserves, and posting it on relevant public bulletin boards. [Click here for additional information.](#)

**Frequently Asked Questions**

**What is the Role of the Homeless Action Partnership (HAP) and the Housing for Health (H4H) Division?** Our CoC, known locally as the HAP, is the local body charged by HUD with carrying out a collaborative process for prioritizing and selecting local projects for CoC funding. Further local process details will be provided at the Applicant Orientation Session. The County Human Services Department H4H Division staffs the HAP and is the HUD-required Collaborative Applicant for the CoC,

responsible for coordinating the process and submitting the consolidated funding application to HUD. More details on the local process will be provided at the Applicant Orientation Session. The H4H contact e-mail is [housingforhealth@santacruzcounty.us](mailto:housingforhealth@santacruzcounty.us).

**How Much CoC Funding is Available and How can it be Used?** As described in more detail in the attached Public Solicitation, the possible overall competitive funding for the Santa Cruz County CoC is **\$5,381,998**, which includes the following:

- **\$3,575,155** for one-year *renewal* of existing CoC projects, or *reallocation* to the following allowable new project types: permanent supportive housing (PSH), rapid rehousing (RRH), joint transitional housing and rapid rehousing (TH-RRH), coordinated entry system (CES), and/or homeless management information system (HMIS).
- **\$1,269,188** for one-year *renewal* of existing YHDP projects, or *replacement* of the projects by their existing grantees with new projects that better meet youth needs.
- **\$242,268** for one or more new CoC bonus projects of the following allowable types: PSH, RRH, TH-RRH, CES, and HMIS.
- **\$149,015** for one or more Domestic Violence (DV) bonus projects of the following allowable types serving a 100% DV population: RRH, TH-RRH, and CES.

**What is New with YHDP?** This year's NOFO funds YHDP project non-competitively and allows YHDP grantees to *replace* their projects with new YHDP projects that better meet youth needs. The NOFO contains a long list of program flexibilities that YHDP projects can implement. We will discuss these possibilities during the above Applicant Orientation, YHDP breakout.

Thank you very much for your interest in the HUD CoC Program Competition. Please do not hesitate to contact H4H at [housingforhealth@santacruzcounty.us](mailto:housingforhealth@santacruzcounty.us) or me at [tonygardnerconsulting@yahoo.com](mailto:tonygardnerconsulting@yahoo.com) if you have any questions.

Sincerely,

Tony Gardner, HAP CoC Consultant

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**Federal HUD Continuum of Care (CoC)**

The CoC Program is designed to promote community-wide commitment to the goal of ending homelessness, provide funding for efforts by nonprofit providers, and State and local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; promote access to and effect utilization of mainstream programs by homeless individuals and families; and optimize self-sufficiency among individuals and families experiencing homelessness.

Please be advised that the U.S. Department of Housing and Urban Development's (HUD) Notice of Funding Opportunity (NOFO) for the 2021 Continuum of Care (CoC) Program Competition was released on August 18, 2021. The CoC Program Competition provides ongoing and new funding opportunities for projects focused on preventing and ending homelessness around the country. The NOFO can be found here: [www.grants.gov/web/grants/view-opportunity.html?oppId=3255122](http://www.grants.gov/web/grants/view-opportunity.html?oppId=3255122)

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Attendance is highly recommended for representatives of any organization that is a

- Current CoC grantee
- Current YHDP grantee
- Non-CoC funded agency interested in applying for CoC funding, including nonprofit organizations, local governments, instrumentalities of local governments, and public housing agencies. The CoC encourages applications from organizations that have not previously received CoC Program funding.

[Click here for a detailed, print-ready version of the Public Solicitation for Applications.](#)

# **Project Review and Selection Process**

## ***Funding Available and Tiered Funding Approach***

**\$5,381,998** is the possible total (before FMR adjustments) for Santa Cruz County projects. This includes:

- **\$4,845,354** is our Annual Renewal Demand (ARD), the amount needed for one-year **renewal** of all expiring grants of two categories:
  - **\$3,576,166** for expiring CoC grants and/or for **reallocation** to eligible new projects that better meet our needs
  - **\$1,269,188** for expiring YHDP grants and/or for **replacement** with new YHDP projects that better meet youth needs (not competitively ranked).
- **\$242,268** is our total possible amount for **new CoC bonus** projects (5% of ARD). Eligible types of CoC bonus projects: permanent supportive housing (PSH), rapid rehousing (RRH), joint TH and RRH (TH-RRH), Coordinated Entry (CES), and dedicated HMIS.
- **\$149,015** is our total possible amount for nationally competitive **Domestic Violence (DV) bonus** projects. Eligible types of DV bonus projects:
  - RRH
  - TH-RRH
  - CES project focused on DV, demonstrating trauma-informed and victim-centered approach
- **\$145,361** for one **CoC planning** project (not competitively ranked).

**In 2021, funds are NOT available for:**

- Emergency shelter
- Homelessness prevention projects
- New TH only
- New supportive service only projects (except coordinated entry).

Tiering: HUD requires CoCs to rank projects that are subject to competition into two tiers, which are financial thresholds. **Tier 1** is 100% of the ARD amount minus the ARD amount for YHDP renewal or replacement projects. **Tier 2** is the difference between Tier 1 and the maximum possible amount of CoC bonus funds. (Note DV bonus project amounts don't add to the Tier 2 amount, but they must be ranked and tiered (more about that below). YHDP renewal or replacement projects and CoC planning grant projects are non-competitive and therefore do not need to be ranked or tiered. In summary:

- **\$3,576,166** is our Tier 1 amount
- **\$242,268** is our possible maximum Tier 2 amount
- **\$3,818,434** total of Tier + Tier 2

The purpose of tiering is for CoCs to indicate which projects are its highest priorities for funding. Although the Tier 1 threshold is determined by the ARD for expiring CoC renewal projects, it does not mean renewal must be ranked and placed in Tier 1. The CoC can decide to put one or more renewals into Tier 2, while elevating new CoC or DV bonus projects into Tier 1.

## ***Eligible Project Applicants***

Eligible project applicants for the CoC Program Competition are **nonprofit organizations, States, local governments, and instrumentalities of State and local governments, and public housing agencies**. For-profit entities are not eligible to apply for grants, or to be subrecipients of grant funds.

## ***CoC Renewal Funding***

Projects that have existing CoC grants that are expiring can apply for a continuation (renewal) grant under the following parameters.

- Which Grants Can be Renewed: To apply for renewal funding, the existing grant must be expiring in the calendar year 2022 (January 1 – December 31, 2022). A grant agreement for the project being renewed must be in place no later than December 31, 2021
- Applicants That Can Renew: The applicant must be the same entity that signed the expiring grant agreement with HUD
- Activities That Can Be Renewed: A project can only request renewal of term activities:
  - Leasing
  - Rental assistance
  - Operations
  - Supportive services
  - HMIS
  - Project administration
- Amount That Can be Renewed (GIW): A project's request cannot exceed the Annual Renewal Amount for the project approved by HUD in the Grant Inventory Worksheet (GIW)
- First-Time S+C Renewals: S+C projects renewing for the first time, can request more units than the original grant if the units are documented with leases and approved in advance by HUD through the CoC Registration and GIW process
- FMR issues: Eligible renewal projects requesting rental assistance are permitted to request a per-unit amount less than the Fair Market Rent (FMR), based on the actual rent costs per unit (but not more than). This will help to reduce the number of projects receiving rental assistance that have large balances of unspent funds remaining at the end of the operating year. Renewal project applicants must ensure that the amount requested will be sufficient to cover all eligible costs, as HUD cannot provide funds beyond what is awarded through the competition. HUD will adjust leasing, operating, and rental assistance budget line items based on changes to the Fair Market Rents (FMR). All adjustments will be made prior to award announcement.
- Renewal term: **1 year for all renewal projects.**

### Renewing PSH and DedicatedPLUS

A renewal project that is PSH 100% dedicated to chronically homeless people may either become a DedicatedPLUS project or may continue to dedicate 100 percent of its beds to chronically homeless individuals and families. If a renewal project that has 100 percent of its beds dedicated to chronically homeless individuals and families elects to become a DedicatedPLUS project, the project will be required to adhere to all fair housing requirements.

A DedicatedPLUS project is defined as a project where 100 percent of the beds are dedicated to serve

individuals with disabilities and families in which one adult or child has a disability, including unaccompanied homeless youth, that at intake are:

- Experiencing chronic homelessness
- Residing in a TH project that will be eliminated and meets the definition of chronically homeless in effect at the time in which the individual or family entered the TH project
- Residing in a place not meant for human habitation, emergency shelter, or safe haven, but the individuals or families experiencing chronic homelessness had been admitted and enrolled in a PH project within the last year and were unable to maintain a housing placement
- Residing in TH funded by a Joint TH and PH-RRH component project and who were experiencing chronic homelessness prior to entering the project
- Residing and has resided in a place not meant for human habitation, a safe haven, or emergency shelter for at least 12 months in the last 3 years, but has not done so on 4 separate occasions OR
- Receiving assistance through a Department of Veterans Affairs (VA)-funded homeless assistance program and met one of the above criteria at initial intake to the VA system.

### Consolidating Renewal Projects

Eligible renewal project applicants may consolidate up to ten eligible renewal projects into one project application during the application process. This means that a CoC Program recipient no longer must wait for a grant agreement amendment to be executed to consolidate two or more grants before it can apply for a single consolidated project in the CoC Program Competition. The projects being combined during a grant consolidation will continue uninterrupted.

To be eligible for consolidation, the projects must have the same recipient and be for the same component; and will be funded in this competition only with FY 2021 funds (meaning no funds recaptured from prior years will be awarded to the project). HUD will not permit projects with outstanding problems, such as monitoring findings or financial management issues, to consolidate. HUD will not permit a transitional housing and a permanent housing project to consolidate to form a Joint TH and PH-RRH project and will not permit a transition grant to be consolidated with any other project.

To apply for a consolidated grant, applicants must submit separate renewal project applications in e-snaps for each of the grants that are proposed to be consolidated, and an application for the new consolidated grant with the combined budget and information of all grants proposed for consolidation. Project applications for the grants that are proposed to be consolidated will be ranked, and if all those grants are selected, HUD will award the single consolidated grant. If one of the grants proposed to be consolidated is found to be ineligible for consolidation or is not selected, HUD will award all grants that are eligible for renewal and selected as separate grants.

### YHDP Renewals

YHDP renewal projects are not subject to competition this year. Also, YHDP renewal projects may not use the above consolidation option to consolidate with non-YHDP projects.

### ***Creating New Projects***

In 2021, CoCs may submit new projects created through (1) reallocation, (2) CoC bonus, (3) combination of reallocation and CoC bonus, (4) DV bonus, and (5) YHDP replacement. To be eligible for any new project, a CoC must use system performance measures (see above) in ranking and selecting projects.

Also, new projects typically can request grant terms of one or more years depending on the project type, but maximizing future funding for the CoC favors requesting only one year (e.g., renewal of a one-year \$100,000 grant would be \$100,000 per year, while a three-year \$100,000 grant would be only \$33,333 per year).

- **New Stand-alone vs. expansion grants** - Generally, a new project can be either a stand-alone project or an expansion of an existing renewal in order to increase the numbers served, beds/units provided, services provided, HMIS services, etc. The new expansion applications must be submitted separately from the renewal application being expanded, although if both are funded HUD will issue a single contract. The expansion grant can be **funded only if the underlying renewal is also funded**. **YHDP projects are not eligible** for the expansion process this year. **DV bonus projects can be created** using the expansion process.
- **Transition grant** option - Applicants may opt to use the grant year to transition a renewal project from one CoC Program component to another (e.g., TH to RRH, RRH to PSH). To create a transition grant, the CoC must agree to wholly eliminate the original projects and use those funds to create the single, new transition grant. No more than 50% of the funds may be used on the original project activities being transitioned. See below for more details.

#### New Reallocation and/or CoC Bonus Projects

The following project types are eligible in 2021 to be created through **reallocation** of existing renewal funding (amount varies based upon Board reallocation decisions) and/or the **CoC bonus**, which can be no more than 5% of ARD (**242,268** in our case). One or more projects can be created, but the overall amount requested cannot exceed the funds being reallocated and/or the maximum CoC bonus.

1. **PSH** projects that will serve the qualified chronically homeless or DedicatedPLUS population
2. **RRH** projects that will serve homeless categories 1, 2, and 4.
3. **TH-RRH** projects that will serve homeless categories 1, 2, and 4.
4. **CES** project that will serve homeless categories 1, 2, and 4.
5. **HMIS** project.

#### Domestic Violence Bonus Projects

The 2021 NOFO provides a set-aside of **\$102 million** nationally for a DV bonus competition for new projects that serve a 100% DV population. Each CoC can receive a DV bonus amount of no more than 15% of its Preliminary Pro Rata Need (in our case **\$149,015**). The minimum single application amount is \$50,000. Also, a DV bonus project can be an expansion of a non-DV renewal (e.g., a RRH project expands to serve an exclusively DV population in the expansion). Eligible project types:

1. **RRH** following Housing First, one or more projects
2. **TH-RRH** following Housing First, one or more projects
3. **CES focused on DV** priorities, trauma-informed, client centered, no more than one project.

HUD competitive scoring for DV bonus funds will include:

- **CoC Score**. Up to **50 points** in direct proportion to the score received on the CoC Application
- **Need for the Project**. Up to **25 points** based on the extent the CoC quantifies the need
- **Quality of the Project Applicant**. Up to **25 points** based on the previous performance.

Because CoCs must **rank** all new DV Bonus projects, care must be taken to avoid unintended consequences for lower projects. This because if **HUD selects** a project for the bonus, it will **remove the project from the CoC Priority Listing** and all **projects below the DV bonus project will slide up one rank** position. However, if **HUD does not select** the project, it will remain on the CoC Priority Listing, **may get selected as a regular new project**, which could negatively impact **projects ranked below it**.

YHDP Replacement Projects

In 2021, a YHDP renewal applicant may opt to **replace** its current project with a new project. The new project can include **activities ineligible under the CoC Program** and can retain parts of its old program, provided the replacement project demonstrates it will directly address youth homelessness, and includes approval by the CoC. Eligible replacement project types:

- **PSH**
- **TH-RRH**
- TH or **Crisis Residential TH**
- **CES** focused on youth
- **Supportive Services Only (SSO)** – e.g., housing search, case management, drop-in centers, legal services, or street outreach (SO)
- **Host homes and kinship care**
- **Other innovative project** approved by YAB and CoC that provides evidence it will achieve positive outcomes and be cost effective.

Replacement projects cannot request capital costs (i.e., new construction, acquisition, or rehabilitation).

The NOFO has a long list of **special program flexibilities** detailed below. In sum, the flexibilities relate to issues such as subsidizing housing costs, paying for a range of other youth living costs, and relaxed lease and housing inspection-type requirements. For further details, please see the CoC NOFO, especially pp. 36-40.

**Summary of Eligible New Project Types in 2021**

<b>CoC bonus and/or Reallocation</b>	<b>DV Bonus</b>	<b>YHDP Replacement</b>
1. PSH – CH or DedicatedPlus	1. RRH projects	1. PSH
2. RRH	2. Joint TH-RRH	2. TH-RRH
3. Joint TH-RRH	3. CES	3. TH or Crisis Residential TH
4. CES		4. CES focused on youth
5. HMIS		5. Supportive Services Only (SSO)
		6. Host homes and kinship care
		7. Other innovative project

***More About Reallocation, CoC Bonus, and Combined Projects***

- **\$242,268** is the maximum CoC bonus amount this year, but again this amount can be combined with reallocated funds, if available, to form a larger project.

- The availability of reallocated funds in any amount is not guaranteed and depends upon whether the HAP Board reallocated funds from one or more renewals for performance reasons or if reallocation would better end homelessness.
- Reallocated, CoC bonus, and combination projects must be ranked and tiered with other projects; there is no separate competition.

PSH bonus and/or reallocation projects:

- May use grant funds for:
  - Acquisition
  - Rehabilitation
  - New Construction
  - Leasing
  - Operations
  - Rental Assistance
  - Supportive Services
  - HMIS
  - Administration
- Must be fully dedicated to (100%) to chronically homeless individuals and families or to the populations allowed by the DedicatedPLUS project type
- Should use a Housing First approach. Housing First is a model of housing assistance that is offered without preconditions (such as sobriety or a minimum income threshold). Service participation requirements are now allowed. Rapid placement and stabilization in permanent housing are primary goals
- May be single site or scattered site
- Services must be offered based on residents needs
- A tenant lease is required, must be for at least one year, must be renewable, and terminable only for cause.

RRH bonus and/or reallocation projects:

- May use grant funds for:
  - Short term (up to 3 months) and/or medium-term (3-24 months) tenant-based rental assistance (must be at full FMR)
  - Supportive services
  - HMIS
  - Administration
- May serve homeless individuals and families, including unaccompanied youth
- Lease is required; must be renewable, for a term of at least one year (regardless of the length of assistance provided), and terminable only for cause.
- Project must:
  - Limit rental assistance to no more than 24 months per household
  - Limit services to no more than 6 months after rental assistance stops
  - Re-evaluate at least once per year whether the project participant continues to lack the resources and support networks necessary to retain housing without CoC assistance
  - Offer supportive services (may include any eligible CoC Program supportive service). Project participants should have access to a wide array of supportive services designed to help them retain stable, long-term housing
  - Require project participants to meet with a case manager at least monthly.

- Project may (in line with written RRH program standards adopted by the HAP):
  - Set a maximum amount of rental assistance that a project participant may receive
  - Set a maximum number of months (up to 24 months) that a project participant may receive rental assistance
  - Set a maximum number of times that a participant may receive rental assistance
  - Require project participants to share in the costs of rent.

Joint TH and RRH bonus and/or reallocation projects:

- May use grant funds for:
  - Leasing of a structure or units
  - Operating costs to provide transitional housing
  - Short or medium-term tenant-based rental assistance on behalf of program participants to pay for the RRH portion of the project
  - Supportive services
  - HMIS
  - Project administrative costs
- May serve homeless families and/or individuals
- Must use Housing First
- Must be able to provide both components, including the units supported by the TH component and the rental assistance and services provided through the RRH component, to all participants
- A participant may choose to receive only the TH unit or the assistance provided through the RRH component, but the project must make both types of assistance available
- Must provide enough rapid rehousing assistance to ensure that at any given time a program participant may move from transitional housing to permanent housing. This may be demonstrated by identifying a budget that has twice as many resources for the rapid rehousing portion of the project than the TH portion, by having twice as many PH-RRH units at a point in time as TH units, or by demonstrating that the budget and units are appropriate for the population being served by the project
- Must limit total assistance to 24 months.

HMIS bonus and/or reallocation projects:

- Grant funds may be used for: HMIS and Administration
- The CoC's HMIS Lead Agency is the only agency that can apply for this funding.

CES bonus and/or reallocation projects:

- Coordinated entry is defined to mean a centralized or coordinated process designed to coordinate program participant intake, assessment, and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool
- Grant funds may be used for: Supportive services and Administration.

## ***More About Transitional Grants***

Applicants may transition renewal projects from one CoC Program component to another (e.g., TH to RRH, RRH to PSH) during the competition. To be eligible to receive a transition grant, the renewal project applicant must have the consent of its CoC. To create a transition grant, the CoC must wholly

eliminate one or more projects and use those funds to create the single, new transition grant. No more than 50% of the funds may be used on the original project activities being transitioned.

For a new project to be considered a transition grant, the applicant for the new project must be the same recipient for the eligible renewal grant(s) being eliminated, and the applicant must provide the grant number(s) of the projects being eliminated to create the new project and attach a copy of the most recently awarded project application (e.g., if the project was last funded in the FY 2020 CoC Program Competition, a copy of the FY 2020 CoC Program Competition project application must be attached to the project application).

### ***More About New Projects Created Through Expansion of Existing Projects***

HUD will allow applicants to apply for a new expansion project under the reallocation process, new CoC bonus, and new DV bonus to expand and eligible renewal project by adding units or beds, persons served, services provide to existing participants, or to add additional activities in the case of HMIS or CE projects. For the new expansion project to be selected for conditional award the renewal project application must also be selected for conditional award. Expansion requests may only be for a one-year term and HUD will not fund capital development activities.

If both the new expansion project and the renewal it expands are selected for funding, one grant agreement incorporating both project applications will be executed. If the renewal project application is not conditionally selected for funding, the expansion project application will not be selected.

Project applicants may use the DV bonus to expand an existing renewal project that is not currently dedicated to serving survivors of domestic violence, dating violence, or stalking that meet the definition of homeless in order to dedicate additional beds, units, persons served, or services provided to existing program participants to this population. **YHDP projects are not eligible** for the expansion process this year.

To apply for an expansion grant, project applicants must submit separate renewal and new project applications and a renewal application that includes the information from the renewal new project application that combines the activities, and budgets into one renewal project application. While the renewal and new projects will be ranked by the CoC, the combined expansion project will not be ranked and, if selected for conditional award, will take the ranked position of the stand-alone renewal project, and the separate new project will be removed from the ranking resulting in project applications below to slide up one ranked position. However, if the combined renewal expansion project is also part of a consolidation project application, HUD will follow the ranking process for consolidated projects outlined in the NOFO, and if the combined expansion and consolidation is selected for conditional award, the ranked position of the stand-alone renewal project and the new project will be removed from the ranking, resulting in project applications below to slide up. If HUD determines the combined expansion project is ineligible, HUD will review the renewal and new project applications separately as these projects will retain their ranked position on the CoC Project listings

### ***More About YHDP Replacement Projects***

This year, a renewing YHDP project may choose to replace its current program project with a new project, which may include activities ineligible under the CoC Program, or portions of its current

program design, to conduct activities that are ineligible with CoC Program funds provided the replacement project demonstrates it will directly address youth homelessness.

If an eligible YHDP renewal project applicant wants to submit a YHDP replacement project application in lieu of submitting a renewal project application, it must include the grant number from the YHDP renewal project being replaced in the YHDP replacement project application. The CoC's Collaborative Applicant is responsible for ensuring that only a renewal YHDP or replacement YHDP project application is submitted through the CoC Priority Listing. If the Collaborative Applicant submits both a renewal and replacement YHDP project application for the same project, HUD will only select the renewal YHDP project application.

If a renewing YHDP project chooses to replace some or all current activities, it must submit a YHDP replacement project application and it will be reviewed by HUD to ensure that the activities requested are eligible and do not exceed the ARA of the renewal project that is being replaced; however, the replacement YHDP project will not be rejected (unless a renewal YHDP project application has been submitted for the same project being replaced). If needed, HUD will work with replacement YHDP recipients to correct or revise information submitted after the final FY 2021 award announcement prior to executing the grant agreement.

HUD will only fund YHDP replacement projects as described below:

1. Permanent Housing, including **PSH** and **RRH** projects.
2. Joint **TH-RRH** Component.
3. **Transitional Housing (TH)** or **Crisis Residential Transitional Housing** which is a form of transitional housing that is short-term, low-barrier, utilizes a congregate living setting, and provides access to the following supportive services in particular: family engagement and unification, case management, emergency triage services and other supportive services whose purpose is to move youth rapidly into stable housing.
4. **SSO**, including, but not limited to, projects dedicated to coordinated entry, housing search and placement services, case management, drop-in centers which are a physical location that offers a variety of services to individuals and families experiencing homelessness that can be funded through the drop-in center grant or through another grant, legal services, or street outreach.
5. **SSO-CE**.
6. **HMIS**.
7. **Host Homes and Kinship Care**, a model in which a family agrees to permit a youth to reside with them. Recognizing that the addition of another person in the home may increase costs to the family, HUD will entertain applications that propose to house youth with families and to subsidize the additional costs attributable to housing the youth. The residence is in a community-based setting. The family could be related to the youth and the length of stay may be time-limited or without time limits. YHDP replacement projects may be used to subsidize the increased costs to the family that are attributable to housing the youth. An example of eligible costs would be additional food or transportation costs.
8. **Shared Housing**, a model of housing assistance where rental assistance is provided for a youth to reside with a family. The youth leases from the property owner and shares the unit with the family. The unit may be a house or an apartment. Under this NOFO "immediate family member" is defined to mean parents, grandparents, siblings, and legal guardians.

CoC funds may be used to provide replacement YHDP projects with tenant-based rental assistance for a youth to reside with a family. The FMR will be adjusted to the **youth's pro-rata share of the FMR** for the

shared housing unit size. For example, in the case of a single youth who will occupy one bedroom in a 4-bedroom house, the FMR used would be the youth's pro-rata share of the 4-bedroom FMR (i.e., ¼ of the 4-bedroom FMR).

YHDP replacement projects may also choose to submit applications for the following special YHDP activities ineligible under the CoC program. Recipients may:

1. Have **leases** for a minimum term of **1 month** under rental assistance
2. Use **leasing, sponsor-based rental assistance, and project-based** rental assistance in RRH
3. Use **Admin funds** to support costs associated with involving **youth with lived experience**
4. Use **Admin funds** to attend relevant **conferences and trainings** that are **not HUD-sponsored**
5. **Employ youth** who are receiving services or housing from the recipient organization.
6. Use **habitability standards**, not Housing Quality Standards, in short or medium term assistance
7. Provide **moving expenses more than one-time** to a program participant
8. Provide **payments of up to \$500** per month for families under a host home model
9. Use the following:
  - a. **Security deposits** for units in an amount not to exceed **2 months** of rent
  - b. **Housing damages** while the **youth is still in the unit** up to **two-months'** rent
  - c. Household **cleaning supplies** for clients
  - d. Housing **start-up expenses**, including furniture, pots and pans, linens, toiletries, and other household goods, not to exceed **\$300**
  - e. One-time cost of purchasing a **cellular phone** and service for program participant use
  - f. Cost of **internet** in a program participant's unit
  - g. Payment of **rental arrears of up to 6 months**, including any late fees on those arrears
  - h. Payment of **utility arrears of up to 6 months** per service
  - i. Up to **three months of utilities** for a program participant
  - j. **Gas and mileage** costs for a program participant's **personal vehicle** for trips to and from medical care, employment, childcare, or other services eligible under this section
  - k. **Legal fees**, including court fees, bail bonds, and required courses and equipment.
  - l. **Driving fines** and fees that prevent driver's license renewal and impacting housing
  - m. Costs for **car insurance and registration**, if the personal vehicle is necessary to reach medical care, employment, childcare, or other services eligible
10. Provide up to **36 months of RRH** rental assistance
11. Continue providing **supportive services for up to 24 months after exit** from homelessness, transitional housing or after the end of housing assistance
12. Continue providing **supportive services for up to 36 months after exit from homelessness**
13. **Rental assistance** may be combined with **leasing or operating** funds in the **same building**
14. Provide **payments of up to \$1000 per month for families** that provide housing under a host home and kinship care model, if the additional cost is necessary to recruit hosts to the program
15. Carry out other **innovative activities**, provided the activity meets the following criteria:
  - a. Approved by both the **Youth Action Board (YAB) and CoC**
  - b. Tests or likely to achieve a **positive outcome** in at least **core outcomes area**
  - c. Is **cost effective**
  - d. Is **not in conflict with fair housing**, civil rights, or environmental regulations.

## ***Additional New Project Design and Implementation Issues***

### Funding Levels and Adjustments

- New project applications must request the full FMR amount per unit
- HUD will adjust leasing, operating, and rental assistance budget line items based on changes to the Fair Market Rents (FMR). All adjustments will be made prior to award announcement
- If the recipient has a subrecipient, it is required to share at least 50% of project administrative funds with its subrecipient(s).

### Timeliness

- Proof of site control, match, environmental review, and the documentation of financial feasibility must be completed within 12 months of the announcement of the award, or 24 months in the case of funds for acquisition, rehabilitation, or new construction. The 12-month deadline may be extended by HUD for up to 12 additional months upon a showing of compelling reasons for delay due to factors beyond the control of the recipient or subrecipient
- For recipients of funds for rehabilitation or new construction:
  1. Construction activities must begin within 9 months of the later of signing of the grant agreement or of signing an addendum to the grant agreement authorizing use of grant funds for the project.
  2. Construction activities must be completed within 24 months of signing the grant agreement.
  3. Activities that cannot begin until after construction activities are completed must begin within 3 months of the date that construction activities are completed
- In order to expend funds within statutorily required deadlines, applicants funded for new sponsor-based and project-based rental assistance must execute the grant agreement and begin providing rental assistance within 2 years. However, HUD strongly encourages all rental assistance to begin within 12 months of award. Applicants unable to begin within 12 months should consult with the local HUD CPD Field Office.

### New Project Grant Terms

It makes sense for new and renewal projects apply for **1 year** renewable yearly to maximize funding. However, the following the following terms are allowable under the 2021 CoC NOFO:

New Projects can request 1, 2, 3, 4, 5, or 15 year grant terms, with the following exceptions:

1. Any new projects that request tenant-based rental assistance may request a **1-year, 2-year, 3-year, 4-year, or 5-year** grant term.
2. Any new project application that includes leasing could only request **up to a 3-year** grant term.
3. Any new projects requesting project-based rental assistance or sponsor-based rental assistance, or operating costs could request up to a 15-year grant term, but request up to **5 years** of funds.
4. Any of the following new projects could request **1-year, 2-year, 3-year, 4-year, or 5-year** grant terms: operating costs, supportive services only, HMIS, and project administration.
5. Any new project applications that requested new construction, acquisition, or rehabilitation had to request a minimum of a **3-year grant term and could request up to a 5-year** grant terms.
6. If an applicant requested funds for new construction, acquisition, or rehabilitation in addition to requesting funds for operating, supportive services, or HMIS, the term had to be **3 years plus the time** necessary to acquire the property, complete construction, and begin operating the project

7. Expansion proposals are limited to **1 year**.
8. YHDP replacement projects are limited to **1 year**.
9. HUD will allow new projects that request a **1 year** of funding to request a longer initial grant term not to exceed 18 months. HUD has determined that most new projects requesting 1 year of funding normally take approximately 3 to 6 months to begin fully operating the new project (e.g., hiring staff, developing partnerships with landowners if leasing or renting). Therefore, a new project requesting 1 year of funding may request a grant term of 12 months to 18 months.

## ***Match Requirements***

All eligible funding costs, except leasing, must be matched with no less than a **25 percent cash or in-kind contribution. No match is required for leasing.** The match requirements apply to project administration funds, CoC planning costs, and UFA costs, along with the traditional expenses—operations, rental assistance, supportive services, and HMIS.

New this year, YHDP renewal or replacement projects will not be required to meet the 25 percent match requirement if the applicant is able to demonstrate it has taken reasonable steps to maximize resources available for youth experiencing homelessness.

Cash match: A recipient or subrecipient may use funds from any source, including any other federal sources (excluding CoC program funds), as well as State, local, and private sources, provided that funds from the source are not statutorily prohibited to be used as a match. (The recipient must ensure that the rules governing match funds allow them to be match for the CoC Program.) The cash must be used for activities that are eligible under the CoC Interim Rule.

- **NOTE: Program income CAN be used as match.**
- Funds from other federal programs (e.g., HUD VASH) are eligible sources of match and are considered government sources. Project applicants are encouraged to include funds from these sources, whenever possible.

In-kind Match: The recipient or subrecipient may use the value of **property, equipment, goods, or services** contributed to the project, provided that, if the recipient or subrecipient had to pay for such items with grant funds, the costs would have been eligible. If third-party services are to be used as a match, the recipient or subrecipient and the **third-party service provider** that will deliver the services must enter into a **memorandum of understanding (MOU)**—before the grant is executed—documenting that the third party will provide such services and value towards the project.

- Services provided by individuals must be valued at rates consistent with those ordinarily paid for similar work in the recipient's or subrecipient's organization
- The MOU must establish the unconditional commitment, except for selection to receive a grant, by the third party to provide services, the specific service to be provided, the profession of the persons providing the service, and the hourly cost of the service to be provided.

## ***Electronic Application (e-snaps)***

The following e-snaps information is a just a brief summary. Project applicants should rely on HUD's very detailed e-snaps materials as authoritative on e-snaps matters.

CoCs and applicants are required to apply for CoC funds electronically through HUD's *e-snaps* system.

Santa Cruz County projects must participate in the Santa Cruz CoC application through *e-snaps*. The *e-snaps* online grant application and management system, training materials, Frequently Asked Questions, and additional resources are available at: <https://www.hudexchange.info>.

Questions may be submitted to HUD through the *e-snaps* Virtual Helpdesk also at: <https://www.hudexchange.info>.

E-snaps can be directly accessed at: <https://esnaps.hud.gov/grantium/frontOffice.jsf>

In essence, applicants will:

1. Create a User Profile (new users only): First, create a user name and password
2. Project Applicant Profile: Second, fill out and submit a Project Applicant Profile form AND
3. Project Application: Finally, register for, fill out and submit a Project Application form for each project and provide applicable attachments.

H4H lead staff will have access in *e-snaps* to each Project Application in order to review the applications. Any changes needed will be returned to applicants for correction. H4H lead staff will not be able to directly edit Project Applications.

In 2021, the HAP Board must approve (or reject), rank, and place into Tier 1 or Tier 2 all projects correctly submitted in *e-snaps*. This includes CoC bonus and DV bonus projects, but does not include YHDP projects or CoC planning projects. If not correctly submitted, projects cannot be approved or ranked in *e-snaps* and thus cannot be funded.

Applicants using *e-snaps* must have a valid **DUNS** number and up-to-date federal **System for Award Management (SAM)** registration.

Again, only basic information is about *e-snaps* (subject to change and correction) is provided above. Therefore, it is critical that you access and review *e-snaps* materials at: <https://www.hudexchange.info>.

The Santa Cruz County Homeless Action Partnership's CoC Consultant will be available to answer questions about *e-snaps* at [tonygardnerconsulting@yahoo.com](mailto:tonygardnerconsulting@yahoo.com). ***Before contacting the consultant, please attempt to answer your own question by reading the applicable e-snaps information or training materials.***

## LOCAL SANTA CRUZ COUNTY 2021 CoC PROJECT EVALUATION PROCESS

### ***Role of the Santa Cruz County Homeless Action Partnership (HAP)***

Applicants for new and/or renewal CoC funding in 2021 must participate in the local consolidated application being coordinated by the Santa Cruz HAP. The process includes applying for funds, providing information as needed for the consolidated application, and participating in planning meetings. The key local deadlines and requirements are listed in the attached CoC Process Timeline. Please note that the dates and requirements are subject to change. The best way to keep track of such changes is to attend all the meetings; however, we will make our best effort to keep everyone informed! Technical assistance is available from the CoC Consultant at [tonygardnerconsulting@yahoo.com](mailto:tonygardnerconsulting@yahoo.com).

### ***Types of Projects Encouraged***

All eligible projects are encouraged to apply for CoC funds in the local competition. Based upon HUD priorities and Santa Cruz CoC priorities the following proposal types are being encouraged:

#### Renewal Proposals:

- Renewal of existing CoC and YHDP projects (those expiring in 2022) that are high performing and are an effective use of funds for reducing homelessness.

#### Reallocation Proposals:

- Voluntary or transitional reallocation of TH projects to (1) new PSH exclusively targeted to CH with emphasis on the longest histories of homelessness and most severe needs,<sup>1</sup> (2) new DedicatedPLUS projects, (3) new Joint TH and RRH projects, (4) new RRH for homeless individuals or families, including unaccompanied youth, and (4) expansion CE or HMIS proposals to the extent justified by unmet operational costs for those programs, or to improve program or administrative efficiency
- Other proposals requesting reallocation of funds for new PSH exclusively targeted to CH with emphasis on the longest histories of homelessness and most severe needs, new DedicatedPLUS projects, new Joint TH and RRH projects, or new RRH for homeless individuals or families, including unaccompanied youth
- Proposals requesting reallocation of funds for expansion of coordinated entry and HMIS projects to the extent justified by unmet operational costs for those programs, or to improve program or administrative efficiency.

#### New CoC Bonus Proposals

- New PSH serving exclusively CH individuals and families with emphasis on the longest histories of homelessness and most severe needs
- New PSH DedicatedPLUS projects
- New Joint TH and RRH projects
- New RRH for homeless individuals or families, including unaccompanied youth

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<sup>1</sup> See CPD Notice 14-012 on prioritizing persons with experiencing chronic homelessness for more details at: <https://www.hudexchange.info/resources/documents/Notice-CPD-14-012-Prioritizing-Persons-Experiencing-Chronic-Homelessness-in-PSH-and-Recordkeeping-Requirements.pdf>. The CoC has adopted this policy.

- Proposals requesting reallocation of funds for expansion of coordinated entry and HMIS projects to the extent justified by unmet operational costs for those programs, or to improve program or administrative efficiency.

#### New DV Bonus Proposals

- RRH projects following Housing First
- Joint TH and RRH projects following Housing First
- CE project that better equips CE to meet the needs of DV survivors and that are demonstrating trauma-informed and victim-centered.

#### YHDP Replacement Proposals

- All eligible types, provided that the HAP Board and YHDP initiative agree to the new project.

The following types of projects are not eligible for CoCs like ours under HUD’s rules:

- Emergency shelter
- Homelessness prevention
- New transitional housing
- New supportive services only.

### ***Notice Regarding Potential Reallocation of Funds***

Please be aware that the HAP Board will review all renewal grants and may reallocate funds if it finds that the renewal project is under performing, obsolete, or ineffective, or that reallocation would reduce homelessness or improve program or administrative efficiency. See above for the types of projects that are eligible to receive reallocated funds.

### ***Encouragement of Voluntary or Transitional Reallocation to Better Align the CoC***

In order to encourage projects to voluntarily align themselves with HUD priorities and local priorities under *Housing for a Healthy Santa Cruz: A Strategic Framework for Addressing Homelessness in Santa Cruz County*, existing transitional housing projects, or other projects components that are no longer needed, that no longer match the agency’s mission, or that are underperforming, wishing to convert their project to one of the eligible new reallocation project types described above, will be given priority by the HAP Board in accessing the funds reallocated from their existing project. If desired, such projects may use the transitional grant procedure allowed this year under the 2021 CoC NOFA.

Any such project must complete a new project application as part of the local competition and will be scored on the basis of that application.

### ***Specific Methods of Evaluating Proposals From Victim Service Providers***

The HAP encourages applications from victim service providers and other providers for DV bonus projects and other projects that will help meet the housing, safety, and other needs of survivors of domestic violence, dating violence, and stalking. The following specific evaluation methods apply to proposals from victim service providers:

#### Renewal Proposals:

- Use of comparable database: Victim service providers are prohibited from entering data into HMIS, and instead must use a comparable database that meets HMIS requirements. Therefore, all relevant performance and data questions in the local supplemental application and the HUD e-snaps application must be answered using aggregate (non-identifiable) data from a comparable database.
- Addressing safety needs: The project quality, readiness, and appropriateness section of the local supplemental application and the project description section of HUD e-snaps application must include a description of how the project will improve the safety of participants, and the performance metrics section of local supplemental application must propose at least one relevant measure of the degree of participant safety.

#### New Project Proposals

- Use of comparable database: Victim service providers are prohibited from entering data into HMIS, and instead must use a comparable database that meets HMIS requirements. Therefore, victim service providers proposing new projects must agree to use a comparable database and to provide the CoC with aggregate (non-identifiable) data from the comparable database.
- Addressing safety needs: The project quality, readiness, and appropriateness section of the local supplemental application and the project description section of HUD e-snaps application must include a description of how the project will improve the safety of participants, and the program goals to be measured annually section of local supplemental application must propose at least one relevant measure of the degree of participant safety.

### ***Encouragement of New Applicants and Technical Assistance for Applicants***

The HAP is open to and encourages applications from entities that have not previously been awarded CoC funds. Any prospective or new applicants are requested to contact at [tonygardnerconsulting@yahoo.com](mailto:tonygardnerconsulting@yahoo.com) to learn more about the CoC application goals, requirements and process. In addition, prospective and new applicants will be invited to participate in all of the process steps below, including the Applicant Technical Assistance Session and on-call technical assistance being made available to all applicants.

### ***Basic Local Evaluation Process Steps, Local Deadlines, Decision Minutes, Notice to Applicants, and Website Posting of Priority Listings***

- H4H staff issue an internal (Santa Cruz County) notice of funding with an application timeline specifying key requirements, criteria including system performance measures, dates, and deadlines.
- CoC Consultant holds a Technical Assistance Session to brief all prospective, new, and existing applicants about the requirements and process and to make sure every applicant has the necessary information and evaluation and application-related materials to apply.
- CoC Consultant furnishes on-going technical assistance to all applicants e-mail regarding technical requirements and *e-snaps*.
- H4H requires that local Project Proposals using HAP-created evaluation forms with required attachments (such as renewal APRs) be submitted along with e-snaps applications for review and ranking by the HAP Board (at least 30 days before the HUD deadline).

- The HAP Board meets to approve or reject, score, rank, and place in Tier 1 or Tier 2 renewal and new project applications (including CoC and DV bonus projects), and to hear applicant presentations.
- H4H staff provide notice to applicants regarding project approval or rejection, rank order, tier placement, and any reduction (at least 15 days before the HUD deadline). Minutes of the decisions will be made available to all CoC Members, and will be posted online with the Project Priority listings.
- H4H requires that complete and accurate Project Applications be submitted in *e-snaps* with all HUD-required forms (CoC staff will conduct a thorough technical review of the Project Applications and may amend them back in *e-snaps* for correction and re-submission).
- H4H posts the CoC Application and Project Priorities submission online for public review (at least two days before the HUD deadline).
- H4H submits the final 2021 CoC application in *e-snaps* to HUD, including the CoC Application, Project Applications, and Project Priority Listings.

Please see the attached 2021 CoC Process Timeline for further details about the process steps.

### ***HAP Board Rating and Ranking and Publicly Announced Objective Criteria***

HUD requires that the community review, approve (or reject), rank, and place into Tiers 1 and 2 (if applicable) all projects submitted (including CoC and DV bonus projects, but not including YHDP projects and the CoC planning project, which are not ranked). As in previous years, this process will be carried out by the HAP Board with members selected for (1) lack of conflict of interest, (2) knowledge of the community and homelessness issues, and (3) representative of varied sector interests.

HAP Board members will engage in a fair, objective decision process that may include the following:

1. Signing the HAP Board's No Conflict of Interest Policy and recusal in any cases of conflict.
2. Reviewing, rating, and evaluating local projects using previously publicly announced objective criteria that include system performance measures (please see the accompanying Review Criteria sheet for further details).
3. The local applications and Evaluation Criteria will include project HMIS data used to measure project and system performance in line with national HEARTH Act performance objectives.
4. Proposal question and answer with applicants (if needed).
5. Discussion of the local applications in the context of local strategic plan and HUD priorities and needs, performance metrics, etc.
6. Vote on the approval (or rejection), rank order, and tier placement (if applicable) of each new and renewal project (including bonus projects).
7. As mentioned above, all applicants will receive notice regarding project approval (or rejection), rank order, Tier placement, and any reduction (at least 15 days before the HUD deadline). Minutes of the rating and ranking decisions, and bonus selection, will be made available to all CoC Members, and will be posted online with the Project Priority listings (at least two days before the HUD deadline).

### ***Deadlines and Proposal Requirements***

Please see the attached Process Timeline and Local Proposal Instructions/Checklist.

## ***On-Call Technical Assistance: New and Existing Applicants***

If you need on-call technical assistance please don't hesitate to contact the HAP CoC Consultant at [tonygardnerconsulting@yahoo.com](mailto:tonygardnerconsulting@yahoo.com).

### ***Resource Information***

1. 2021 CoC NOFA Competition Page: <https://www.hudexchange.info/programs/e-snaps/fy-2021-coc-program-nofa-coc-program-competition/>
2. 2021 CoC NOFA: [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition)
3. HUD Announcement of 2021 NOFA Release: <https://www.hudexchange.info/news/fy-2021-coc-program-competition/>
4. CoC Program Interim Rule (24 CFR part 578): <https://www.hudexchange.info/resource/2035/cocprogram-interim-rule-formatted-version/>
5. Training and Resources: [www.hudexchange.info/homelessness-assistance/](http://www.hudexchange.info/homelessness-assistance/)
6. Code of Conduct for HUD Grant Programs: [www.hud.gov/program\\_offices/spm/gmomgmt/grantsinfo/conduct](http://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/conduct)
7. Subscribe to HUD Listserv: [www.hudexchange.info/maillinglist](http://www.hudexchange.info/maillinglist)
8. HUD Exchange, Ask A Question (AAQ): <https://www.hudexchange.info/program-support/myquestion/>
9. HUD Websites: [www.hud.gov](http://www.hud.gov); [www.hudexchange.info](http://www.hudexchange.info)
10. Application Pages:
11. Access E-snaps Application System: <https://esnaps.hud.gov>
12. E-snaps Information: <https://www.hudexchange.info/programs/e-snaps/>
13. Santa Cruz County HAP webpage: <http://homelessactionpartnership.org/>

### Attachments:

1. Local CoC Process Timeline
2. Local Objective Project Rating and Scoring Criteria
3. Scoring Tools
4. Local Proposal Instructions and Checklist
5. Local New and Renewal Application Forms

## ATTACHMENTS

### *Local CoC Process Timeline*

Each year, the Homeless Action Partnership (HAP) administers the Continuum of Care (CoC) Program Competition for HUD funds. This calendar serves as a guide for CoC applicants who are considering applying for new or renewal funds from HUD. Please note that the dates are tentative and may change. Please do not hesitate to contact H4H at [housingforhealth@santacruzcounty.us](mailto:housingforhealth@santacruzcounty.us) or me at [tonygardnerconsulting@yahoo.com](mailto:tonygardnerconsulting@yahoo.com) if you have any questions.

<b>Event</b>	<b>Date/Deadline</b>
<b>HUD releases 2021 CoC NOFO &amp; E-snaps Applications</b>	<b>August 19, 2021</b>
<b>HAP issues initial local notice of CoC NOFO to agencies</b>	<b>August 19, 2021</b>
<b>HAP releases Public Solicitation of Applications for CoC funds &amp; invitation to Applicant Orientation Session</b>	<b>September 1, 2021</b>
<b>Virtual Applicant Orientation Session (recorded)</b>	<b>September 10, 2021, 2:30-5:00</b> via Teams
<b>Deadline to submit local supplemental application materials (via e-mail) and HUD applications (via e-snaps) (at least 30 days before HUD deadline)</b>	<b>October 13, 2021 5:00</b>
<b>HAP Board decision meeting to evaluate, approve or reject, and rank/tier projects/may include applicant presentations</b>	<b>October 22, 2021, 1:00-5:00 (latest)</b> via Teams
<b>Written decisions sent to applicants (at least 15 days before HUD deadline)</b>	<b>November 1, 2021</b>
<b>Applicant appeals period</b>	<b>November 1-4, 2021.</b>
<b>Deadline for HAP to send appeals decisions to applicants</b>	<b>November 5, 2021</b>
<b>Technical review of e-snaps project applications and coordination with applicants to make corrections</b>	<b>November 1 – 9, 2021</b>
Complete CoC Application and Project Priorities submission posted on website (at least 2 days before HUD deadline)	November 10, 2021
<b>HUD deadline for submission of CoC Application</b>	<b>November 16, 2021, 4:59 PST</b>

## **Local Objective Project Rating and Scoring Criteria – 100 Points Possible**

The following objective rating and scoring criteria are aligned with the priorities of *Housing for a Healthy Santa Cruz: A Strategic Framework for Addressing Homelessness in Santa Cruz County*. They were developed by the HAP for use by the HAP Board in rating and ranking new and renewal proposals CoC funds. Each Local Project Proposal will be scored using the following publicly announced objective criteria. The HAP Board will use the scores to help determine whether each proposal is approved (or rejected), its rank order, and whether it is placed in Tier 1 or Tier 2 (if applicable), or is selected for the PSH bonus (if applicable). Each scoring criterion relates to a particular question in the Local Project Proposal Form (new and renewal).

### **1. Housing/Project Type (10 points possible)**

10 points, including –

10 points for:

- (a) Renewal projects of the following types:
  - a. PSH serving 100% chronically homeless persons with emphasis on the longest histories of homelessness and most severe needs
  - b. PSH serving 100% DedicatedPLUS project type with emphasis on the longest histories of homelessness and most severe needs
  - c. RRH for homeless individuals or families, including unaccompanied youth
  - d. Joint TH and RRH projects
  - e. CE projects
  - f. HMIS projects.
- (b) New projects of the following types proposing to use funds reallocated (including voluntary or transitional reallocations) from renewals and/or CoC bonus funds:
  - a. PSH serving 100% chronically homeless persons with emphasis on the longest histories of homelessness and most severe needs
  - b. PSH serving 100% DedicatedPLUS project type with emphasis on the longest histories of homelessness and most severe needs
  - c. Joint TH and RRH projects
  - d. RRH for homeless individuals or families, including unaccompanied youth
  - e. Expansion of CE or HMIS to the extent justified by unmet operational costs for these programs, or to improve program or administrative efficiency.
- (c) New DV bonus projects of the following types:
  - a. RRH projects that must follow a Housing First approach
  - b. Joint TH and RRH projects that must follow a Housing First approach
  - c. CE project to meet the needs of DV survivors, demonstrating trauma-informed and victim-centered approach.

5 points for:

- (a) Renewal projects of the following types:
  - a. TH projects
  - b. PSH projects that are not dedicated 100% to chronically homeless persons with the longest histories of homelessness and most severe needs or are not DedicatedPLUS projects.
- (b) New projects of the following types proposing to use funds reallocated from renewals or CoC bonus funds:

- a. PSH projects that are not dedicated 100% to chronically homeless persons or DedicatedPLUS population with the longest histories of homelessness and most severe needs.

0 points for:

- All other projects.

## **2. Population Served - Addresses Chronic Homeless Population or DV population (10 points possible)**

*CES and HMIS Projects will automatically get 10 points.*

- a. Points will be for the percentage of clients to be served who are homeless under HUD's definition of chronically homeless as follows:

10 points – 100% served are chronically homeless

7.5 points – 70-99%

5 points – 50-69%

2.5 points – 25-49%

1 point – 1-24%

0 points – 0%.

Or

- b. Points will be for the percentage of clients to be served who are domestic violence (DV) survivors under HUD's definition:

10 points – 100% served are DV survivors (note – DV bonus projects must be 100%)

7.5 points – 70-99%

5 points – 50-69%

2.5 points – 25-49%

1 point – 1-24%

0 points – 0%.

## **3. Performance Measures (Renewals Only) or Program Design (New Projects Only) (20 points possible)**

*HMIS projects and first-year projects without a full year of HMIS data will automatically get 15 points.*

- 3A. For Renewal Projects: Please provide the performance metric information requested from HMIS-generated data for the year from *July 1, 2020 to June 30, 2021* (or comparable database for victim service providers) relating to these questions:

3A1. Housing Stability: (7 points)

- For PSH, did you meet the standard in helping leavers and stayers combined retain permanent housing for 7 months or more? HUD and CoC Performance Standard – **at least 90%**
- For transitional housing and RRH, did you meet the standard in helping leavers find and move into permanent housing? HUD and CoC Performance Standard – **at least 90%**

3A2. Income: (5 points - 2.5 pts. per question)

- For all projects except HMIS, did you meet the standard in helping leavers and stayers combined maintain or increase income from employment AND non-cash benefits from mainstream sources? CoC Performance Standard – **at least 75%**
- For all projects except HMIS, did you meet the standard in helping ADULT leavers and stayers combined maintain or increase income from employment ONLY? CoC Performance Standard – **at least 25%**

3A3. Non-Cash Mainstream Benefits: (2 points)

- For all projects except HMIS, did you meet the standard in helping leavers and stayers combined maintain or increase at least one source of non-cash benefits? CoC Performance Standard – **at least 50%**

3A4. Program Occupancy (bed utilization): (2 points)

- For all projects except HMIS, did you meet the standard in ensuring that average program occupancy met CoC standard. CoC Performance Standard – **at least 90% for the year**

3A5. Returns to Homelessness: (2 points)

- For all projects except HMIS, did you meet the standard in ensuring that leavers did not exit to non-permanent destinations (e.g., shelters, transitional housing, hotels, motels, and the streets)? CoC Performance Standard – **no more than 20%**

3A6. Length of Stay: (2 points)

- For PSH only, did you meet the standard by increasing the annual average LOS in permanent housing for leavers and stayers combined? – **higher LOS average than previous APR year**
- For TH and RRH only, did you meet the standard by decreasing the annual average LOS in TH or RRH for leavers? – **lower LOS average than previous APR year**

3A7. *Victim Service Providers only - Safety: (not scored this year):*

- *Please propose at least one relevant measure of the degree of participant safety that you will commit to using in the future.*

3A. For New Housing Projects Only: Please briefly identify:

3A1. Your program goals to be measured annually in the HUD Annual Performance Report (APR);

3A2. Where your homeless participants will come from;

3A3. Your outreach plan to bring participants in;

3A4. The types and frequency of services participants will receive;

3A5. How participants will be helped to obtain and remain in permanent housing;

3A6. How participants will be helped to increase their employment and income and live independently;

3A7. *Victim Service Providers only* – Is the plan to increase the **safety** of project participants appropriate and feasible: and

3A8. *Victim Service Providers only* – Does the application clearly describe a feasible plan to implement a Housing First strategy.

3B. For New Coordinated Entry Projects Only: Please briefly identify:

3B1. The geographic accessibility of the proposed system for all persons within the CoC's geographic area who are seeking information regarding homeless assistance;

3B2. The strategy for advertising the project that is designed specifically to reach homeless persons with the highest barriers within the CoC's geographic area;

3B3. The standardized assessment process proposed (or the process to choose a standardized assessment system);

3B4. Whether/how the system will ensure that program participants are directed to the appropriate housing and services to fit their needs; and

3B5. The strategy for implement a trauma-informed, client-centered approach.

#### **4. Program Effectiveness (20 points possible)**

*CES and HMIS projects will automatically get 15 points.*

4A. Coordinated entry participation (10 points)

Minimum percent of new clients since 1/1/20 from Smart Path CES referral, or for a new project, commits to taking from Smart Path CES referral:

10 points – 95% - 100% from Smart Path CES referral

8 points – 90% - 94%

6 points – 85% - 89%

4 points – 80% - 84%

- 2 points – 75% - 79%
- 1 points – 70% - 74%
- 0 points – below 70%.

4B. Housing First fidelity assessment (10 points possible)

Serving People with the Highest Barriers to Housing (6 points):

To what extent does your project embrace the following Housing First approaches?

1. Does the project prioritize client selection based on duration of homelessness and vulnerability?
2. Does the project accept all clients regardless of substance use history, or current use?
3. Does the project accept clients who are diagnosed with, or show symptoms of, a mental illness?
4. Does the project accept clients regardless of criminal history?
5. Does the project accept clients regardless of income or financial resources?
6. Does the project use a harm-reduction model for drugs and/or alcohol use?

Each “yes” response receives 1 point; each “no” response receives 0 points.

Removing Barriers to Housing (4 points)

To what extent does your project eliminate the following barriers to housing?

1. No minimum income
2. No required current employment
3. No required state issued photo id
4. Need not show sobriety (drugs or alcohol)
5. OK to have symptoms of mental illness
6. Need not have transportation
7. No required specific disabling condition (e.g., MH, SA, HIV/AIDS)
8. Need not show use medication.

Each “yes” response receives 1 point; each “no” response receives 0 points.

**5. Financial and Cost Effectiveness (10 points possible)**

5A. Housing vs. service funding (5 points renewal, 10 points new)

*HMIS and CES projects will automatically get 4 points (renewals) or 8 points (new).*

Percentage of *program* funding (not including admin) proposed to be used on housing activities (acquisition, construction, rehab, and housing operations) vs. percentage funding used on non-housing activities (supportive services, services-only operations, and HMIS).

- 5 points renewal 10 points new – 90% - 100% housing activities
- 4 points renewal 8 points new – 80% - 89%
- 3 points renewal 6 points new – 70% - 79%
- 2 points renewal 4 points new – 60% - 69%
- 1 point renewal 2 points new – 50% - 99%
- 0 points – below 50%.

5B. Renewals only: Drawdown completeness in the most recently completed program year (5 points)

Percentage of overall HUD grant actually drawn down in the most recent completed program year.

- 5 points – 100% of budgeted funds successfully drawn down
- 4 points – 98% - 99%
- 3 points – 96% - 97%
- 2 points – 94% - 95%
- 1 points – 92% - 93%
- 0 points – below 92%.

**6. Agency Experience/Capacity (10 points possible)**

6A. Agency Experience: Years of experience in implementing the proposed program or similar program types (e.g., RRH or PSH) (10 points)

- 10 points – 8+ years
- 8 points – 5 to 7 years
- 6 points – 4 to 6 years
- 4 points – 2 to 3 years
- 2 points – 1 to 2 years
- 0 points – below 1 year.

6B. Capacity Issues: Points will be deducted if in the past year (9/10/20-present): (1) HUD has disencumbered funds from the agency’s CoC programs, (2) the agency has unresolved HUD monitoring findings in CoC programs, or (3) the agency has been late in submitting a CoC APR. (10-point deduction possible)

- 4 points deduction – disencumbered funds
- 4 points deduction – unresolved findings
- 4 points deduction – late APR.

**7. Mainstream Resources (10 points possible)**

Please check each strategy your program uses to help clients access federal mainstream benefits, including Medicaid; State Children’s Health Insurance Program; TANF (CalWORKS); Food Stamps; SSI; Workforce Investment Act; *Employment Income*; Welfare to Work Grant Programs; and, Veterans Health Care. Points will be allocated as follows:

- 10 points – 7 - 8 strategies used
- 8 points – 5 - 6 strategies used
- 6 point – 3 - 4 strategies used
- 4 points – 2 strategies used
- 2 point – 1 strategy used
- 0 points – 0 strategies used.

**8. Equity Factors (7 points possible)**

Check each factor below that your agency has implemented or commits to implement within one year.

Agency leadership, governance, and policies:

- 1 point - Agency has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions
- 1 point - Agency board of directors includes representation from more than one person with lived experience
- 1 point - Agency has relational process for receiving and incorporating feedback from persons with lived experience
- 1 point - Agency has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers.

Program participant outcomes:

- 1 point - Agency has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age
- 1 point - Agency has identified programmatic changes needed to make program participant outcomes more equitable and developed a plan to make those changes

1 point - Agency is working with HMIS lead to develop a schedule for reviewing HMIS data with disaggregation by race, ethnicity, gender identity, and or/age.

**10. Community Collaboration and Participation (3 points possible)** *Sub-scores will be determined by H4H staff based upon appropriate HAP and documentation for the period from September 1, 2020 to the present time.*

Does the applicant agency participate in Homeless Action Partnership activities mandated by HUD, as follows?

1. HAP general membership meeting participation: 2 points possible
  - a. 0 points: Agency attends 0% to 50% of HAP general membership meetings.
  - b. 1 point: Agency attends 51% to 74% of HAP general membership meetings.
  - c. 2 points: Agency attends 75% to 100% of HAP general membership meetings.
2. HMIS participation: 1 points possible
  - a. 0 point: Has data in HMIS for less than 100% of agency housing programs listed in the 2021 homeless housing inventory (HIC)
  - b. 1 points: Has data in HMIS for all (100%) of housing programs listed in the 2021 HIC.

***No question/response on the applications*** (staff have already totaled these points for you using relevant data on the applicant's HAP and HMIS participation)

**Scoring Tools**

**2021 SANTA CRUZ COUNTY CONTINUUM OF CARE  
Renewal Project Rating and Scoring Criteria and Scoring Tool**

No.	Scoring Criteria	Points Possible	Points
1	<p><b>Housing/Project Type</b> Points will be awarded based upon local priority for the following housing/project types: <b>10 points for:</b> (d) Renewal projects of the following types: a. PSH serving 100% chronically homeless persons with emphasis on the longest histories of homelessness and most severe needs b. PSH serving 100% DedicatedPLUS project type c. RRH for homeless individuals or families, including unaccompanied youth d. Joint TH and RRH projects e. CE projects f. HMIS projects.</p> <p><b>5 points for:</b> (c) Renewal projects of the following types: a. TH projects b. PSH projects <u>not</u> dedicated 100% to chronically homeless or DedicatedPLUS populations.</p> <p><b>0 points for:</b> – All other projects.</p>	<p><b>10 POINTS POSSIBLE</b> 10 points: • PSH – 100% CH • PSH – 100% Det.+ • RRH • TH-RRH • CE • HMIS 5 points: • TH • PSH – &lt;100% CH or Det.+ 0 points: • All other projects</p>	
2	<p><b>Priority Population Served - Addresses Chronic Homeless Population or DV population</b> Projects will received points based on the percentage of beds dedicated in the application to clients who are experiencing chronic homelessness OR who are survivors or domestic violence.</p>	<p><b>10 POINTS POSSIBLE</b> CH dedicated beds: • 10 points – 100% CH dedicated • 7.5 points – 70-99% • 5 points – 50-69% • 2.5 points – 25-49% • 1 point – 1-24% • 0 points – 0%. OR DV dedicated beds: • 10 points – 100% DV dedicated • 0 points – &lt;100%. (CES &amp; HMIS projects will receive 10 points)</p>	
3A	<p><b>PERFORMANCE MEASURES</b></p>	<p><b>20 POINTS POSSIBLE</b> (CES, HMIS, and first-year projects without a full year of HMIS data will receive 15 points)</p>	

3A 1	<b>Housing Stability:</b> <ul style="list-style-type: none"> <li>For PSH, did you meet the standard in helping leavers and stayers combined retain permanent housing for 7 months or more? HUD and CoC Performance Standard – <b>at least 90%</b></li> <li>For transitional housing and RRH, did you meet the standard in helping leavers find and move into permanent housing? HUD and CoC Performance Standard – <b>at least 90%</b></li> </ul>	<b>7 Points Available</b> <ul style="list-style-type: none"> <li>7 points – 90% or more</li> <li>3½ points – 80%-89%</li> <li>0 points - &lt;80%</li> </ul>	
3A 2	<b>Income:</b> <ul style="list-style-type: none"> <li>For all projects except HMIS, did you meet the standard in helping leavers and stayers combined maintain or increase income from employment AND non-cash benefits from mainstream sources? CoC Performance Standard – <b>at least 75%</b></li> <li>For all projects except HMIS, did you meet the standard in helping ADULT leavers and stayers combined maintain or increase income from employment ONLY? CoC Performance Standard – <b>at least 25%</b></li> </ul>	<b>5 Points Available</b> <b>All Income</b> <ul style="list-style-type: none"> <li>2½ points – 75% or more</li> <li>1½ points – 65%-74%</li> <li>0 points - &lt;65%</li> </ul> <b>Employment Income</b> <ul style="list-style-type: none"> <li>2½ points – 25% or more</li> <li>1½ points – 15%-24%</li> <li>0 points - &lt;15%</li> </ul>	
3A 3	<b>Non-Cash Mainstream Benefits:</b> <ul style="list-style-type: none"> <li>For all projects except HMIS, did you meet the standard in helping leavers and stayers combined maintain or increase at least one source of non-cash benefits? CoC Performance Standard – <b>at least 50%</b></li> </ul>	<b>2 Points Available</b> <ul style="list-style-type: none"> <li>2 points – 50% or more</li> <li>1 points – 40%-49%</li> <li>0 points - &lt;40%</li> </ul>	
3A 4	<b>Program Occupancy (bed utilization):</b> <ul style="list-style-type: none"> <li>For all projects except HMIS, did you meet the standard in ensuring that average program occupancy met CoC standard. CoC Performance Standard – <b>at least 90% for the year</b></li> </ul>	<b>2 Points Available</b> <ul style="list-style-type: none"> <li>2 points – 90% or more</li> <li>1 points – 80%-89%</li> <li>0 points - &lt;80%</li> </ul>	
3A 5	<b>Returns to Homelessness:</b> <ul style="list-style-type: none"> <li>For all projects except HMIS, did you meet the standard in ensuring that leavers did not exit to non-permanent destinations (e.g., shelters, transitional housing, hotels, motels, and the streets)? CoC Performance Standard – <b>no more than 20%</b></li> </ul>	<b>2 Points Available</b> <ul style="list-style-type: none"> <li>2 points – 20% or less</li> <li>1 points – 21%-30%</li> <li>0 points - &gt;30%</li> </ul>	
3A 6	<b>Length of Stay:</b> <ul style="list-style-type: none"> <li>For PSH only, did you meet the standard by <u>increasing</u> the annual average LOS in permanent housing for leavers and stayers combined? – <b>higher LOS average than previous APR year</b></li> <li>For TH and RRH only, did you meet the standard by <u>decreasing</u> the annual average LOS in TH or RRH for leavers? – <b>lower LOS average than previous APR year</b></li> </ul>	<b>2 Points Available</b> <b>PSH:</b> <ul style="list-style-type: none"> <li>2 points – higher LOS than previous year</li> <li>0 points – lower LOS than previous year</li> </ul> <b>TH &amp; RRH:</b> <ul style="list-style-type: none"> <li>2 points – lower LOS than previous year</li> <li>0 points – higher LOS</li> </ul>	

		than previous year	
3A 7	Victim Service Providers only - Safety: <ul style="list-style-type: none"> <li>Please propose at least one relevant measure of the degree of participant safety that you will commit to using in the future.</li> </ul>	<b>Not Scored This Year</b>	
<b>4</b>	<b>PROGRAM EFFECTIVENESS</b>	<b>20 POINTS POSSIBLE</b> (CES & HMIS projects will receive 15 points)	
<b>4A</b>	Coordinated Entry Participation: The minimum percentage of new clients since 1/1/20 who came from Smart Path CES referral.	<b>10 Points Available</b> <ul style="list-style-type: none"> <li>10 points – 95% - 100% from CES referral</li> <li>8 points – 90% - 94%</li> <li>6 points – 85% - 89%</li> <li>4 points – 80% - 84%</li> <li>2 points – 75% - 79%</li> <li>1 points – 70% - 74%</li> <li>0 points – below 70%.</li> </ul>	
<b>4B</b>	Housing First Fidelity Assessment: Serving People with the Highest Barriers to Housing: To what extent does your project embrace the following Housing First approaches? <ol style="list-style-type: none"> <li>Does the project prioritize client selection based on duration of homelessness and vulnerability?</li> <li>Does the project accept all clients regardless of substance use history, or current use?</li> <li>Does the project accept clients who are diagnosed with, or show symptoms of, a mental illness?</li> <li>Does the project accept clients regardless of criminal history?</li> <li>Does the project accept clients regardless of income or financial resources?</li> <li>Does the project use a harm-reduction model for drugs and/or alcohol use?</li> </ol> Removing Barriers to Housing: To what extent does your project eliminate the following barriers to housing? <ol style="list-style-type: none"> <li>No minimum income</li> <li>No required current employment</li> <li>No required state issued photo id</li> <li>Need not show sobriety (drugs or alcohol)</li> <li>OK to have symptoms of mental illness</li> <li>Need not have transportation</li> <li>No required specific disabling condition (e.g., MH, SA, HIV/AIDS)</li> <li>Need not show use medication.</li> </ol>	<b>10 Points Available</b> Housing First approaches: <ul style="list-style-type: none"> <li>1 point “yes” response</li> <li>0 points “no” response</li> </ul> Removing housing barriers: <ul style="list-style-type: none"> <li>1/2 point per “yes” response</li> <li>0 points per “no” response</li> </ul>	

<b>5</b>	<b>FINANCIAL AND COST EFFECTIVENESS</b>	<b>10 POINTS POSSIBLE</b>	
<b>5A</b>	Housing vs. Service Funding: The percentage of <i>program</i> funding (not including admin) proposed to be used on housing activities (acquisition, construction, rehab, and housing operations) vs. percentage funding used on non-housing activities (supportive services, services-only operations, and HMIS).	<b>5 Available</b> <ul style="list-style-type: none"> <li>• 5 points renewal – 90% - 100% housing activities</li> <li>• 4 points renewal – 80% - 89%</li> <li>• 3 points renewal – 70% - 79%</li> <li>• 2 points renewal – 60% - 69%</li> <li>• 1 point renewal – 50% - 99%</li> <li>• 0 points – below 50%. (CES &amp; HMIS projects will receive 4 points)</li> </ul>	
<b>5B</b>	Drawdown completeness: The percentage of overall HUD grant actually drawn down in the most recent completed program year recorded in the most recent APR.	<b>5 Points Available</b> <ul style="list-style-type: none"> <li>• 5 points – 100% of budgeted funds successfully drawn</li> <li>• 4 points – 98% - 99%</li> <li>• 3 points – 96% - 97%</li> <li>• 2 points – 94% - 95%</li> <li>• 1 points – 92% - 93%</li> <li>• 0 points – below 92%.</li> </ul>	
<b>6</b>	<b>AGENCY EXPERIENCE/CAPACITY</b>	<b>10 POINTS POSSIBLE</b>	
<b>6A</b>	<b>Agency Years of Experience</b> Number of years of agency experience in implementing the proposed program OR similar program type (e.g., RRH or PSH)	<b>10 Points Available</b> <ul style="list-style-type: none"> <li>• 10 points – 8+ years</li> <li>• 8 points – 5 to 7 years</li> <li>• 6 points – 4 to 6 years</li> <li>• 4 points – 2 to 3 years</li> <li>• 2 points – 1 to 2 years</li> <li>• 0 points – below 1 year</li> </ul>	
<b>6B</b>	<b>Capacity Issues</b> Points will be deducted if in the past year (9/10/20-present): (1) HUD has disencumbered funds from the agency’s CoC programs, (2) the agency has unresolved HUD monitoring findings in CoC programs, or (3) the agency has been late in submitting a CoC APR.	<b>10 Pts Deduction Possible</b> <ul style="list-style-type: none"> <li>• 4 points deduction – disencumbered funds</li> <li>• 4 points deduction – unresolved findings</li> <li>• 4 points deduction – late APR</li> </ul>	
<b>7</b>	<b>Mainstream Resources</b> The number of strategies the program has identified to help clients access federal mainstream benefits, including Medicaid; State Children’s Health Insurance Program; TANF (CalWORKS); Food Stamps; SSI; Workforce Investment Act; <i>Employment Income</i> ;	<b>10 POINTS POSSIBLE</b> <ul style="list-style-type: none"> <li>• 10 points – 7 - 8 strategies used</li> <li>• 8 points – 5 - 6 used</li> </ul>	

	Welfare to Work Grant Programs; and, Veterans Health Care.	<ul style="list-style-type: none"> <li>• 6 point – 3 - 4 used</li> <li>• 4 points – 2 used</li> <li>• 2 point – 1 used</li> <li>• 0 points – 0 used</li> </ul>	
<b>8</b>	<p><b>Equity Factors (7 points possible)</b></p> <p>Agency will receive one point for each of the following factors that it has implemented OR commits to implement within one year:</p> <p>Agency leadership, governance, and policies:</p> <ol style="list-style-type: none"> <li>1. Agency has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions</li> <li>2. Agency board of directors includes representation from more than one person with lived experience</li> <li>3. Agency has relational process for receiving and incorporating feedback from persons with lived experience</li> <li>4. Agency has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers</li> </ol> <p>Program participant outcomes</p> <ol style="list-style-type: none"> <li>5. Agency has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age</li> <li>6. Agency has identified programmatic changes needed to make program participant outcomes more equitable and developed a plan to make those changes</li> <li>7. Agency is working with HMIS lead to develop a schedule for reviewing HMIS data with disaggregation by race, ethnicity, gender identity, and or/age</li> </ol>	<p><b>7 POINTS POSSIBLE</b></p> <ul style="list-style-type: none"> <li>• 1 point per “yes” response</li> <li>• 0 points “no” response</li> </ul>	
<b>9</b>	<p><b>Community Collaboration and Participation (3 points possible)</b></p> <p>To what extent does the applicant agency support the Homeless Action Partnership (HAP) by participating in meetings of the HAP general membership, and participate in HMIS by entering client data into HMIS for 100% of its programs that are listed in the 2021 Housing Inventory Chart (HIC)?</p> <p><i>Sub-scores will be determined by HAP staff based upon appropriate HAP and documentation for the period from September 1, 2020 to the present time.</i></p>	<p><b>3 POINTS POSSIBLE</b></p> <p>HAP meeting participation:</p> <ul style="list-style-type: none"> <li>• 2 points: Agency attends 75% to 100%</li> <li>• 1 point: Agency attends 51% to 74%</li> <li>• 0 points: Agency attends 0% to 50%</li> </ul> <p>HMIS participation:</p> <ul style="list-style-type: none"> <li>• 1 point: Has data for 100% HIC</li> <li>• 0 points: Has data for less than 100% HIC</li> </ul>	
	<b>TOTAL</b>	<b>100 POINTS POSSIBLE</b>	

**2021 SANTA CRUZ COUNTY CONTINUUM OF CARE  
New Project Rating and Scoring Criteria and Scoring Tool**

No.	Scoring Criteria	Points Possible	Points
1	<p><b>Housing/Project Type</b> Points will be awarded based upon local priority for the following housing/project types: <b>10 points for:</b> (e) New projects of the following types proposing to use funds reallocated (including voluntary or transitional reallocations) from renewals and/or new project bonus funds:</p> <ul style="list-style-type: none"> <li>a. PSH serving 100% chronically homeless persons with emphasis on the longest histories of homelessness and most severe needs</li> <li>b. PSH serving 100% DedicatedPLUS project type with emphasis on the longest histories of homelessness and most severe needs</li> <li>c. Joint TH and RRH projects</li> <li>d. RRH for homeless individuals or families, including unaccompanied youth</li> <li>e. Expansion of CE or HMIS to the extent justified by unmet operational costs for these programs, or to improve program or administrative efficiency.</li> </ul> <p>(f) New DV bonus projects of the following types:</p> <ul style="list-style-type: none"> <li>a. RRH projects that must follow a Housing First approach</li> <li>b. Joint TH and RRH projects that must follow a Housing First approach</li> <li>c. CE project to meet the needs of DV survivors, demonstrating trauma-informed and victim-centered approach.</li> </ul> <p><b>5 points for:</b> (d) New projects of the following types proposing to use funds reallocated from renewals or CoC bonus funds:</p> <ul style="list-style-type: none"> <li>a. PSH projects <u>not</u> dedicated 100% to chronically homeless DedicatedPLUS populations.</li> </ul> <p><b>0 points for:</b> – All other projects.</p>	<p><b>10 POINTS POSSIBLE</b> 10 points: New realloc or bonus:</p> <ul style="list-style-type: none"> <li>• PSH – 100% CH</li> <li>• PSH – 100% Det.+</li> <li>• RRH</li> <li>• TH-RRH</li> <li>• CE</li> <li>• HMIS</li> </ul> <p>New DV Bonus:</p> <ul style="list-style-type: none"> <li>• RRH - Housing 1st</li> <li>• TH-RRH - Housing 1st</li> <li>• CE – DV focused</li> </ul> <p>5 points: New realloc or bonus:</p> <ul style="list-style-type: none"> <li>• PSH – &lt;100% CH or Det.+</li> </ul> <p>0 points:</p> <ul style="list-style-type: none"> <li>• All other projects</li> </ul>	
2	<p><b>Priority Population Served - Addresses Chronic Homeless Population or DV population</b> Projects will received points based on the percentage of beds dedicated in the application to clients who are experiencing chronic homelessness OR who are survivors or domestic violence.</p>	<p><b>10 POINTS POSSIBLE</b> CH dedicated beds:</p> <ul style="list-style-type: none"> <li>• 10 points – 100% CH dedicated</li> <li>• 7.5 points – 70-99%</li> <li>• 5 points – 50-69%</li> <li>• 2.5 points – 25-49%</li> <li>• 1 point – 1-24%</li> <li>• 0 points – 0%.</li> </ul> <p>OR DV dedicated beds:</p> <ul style="list-style-type: none"> <li>• 10 points – 100% DV dedicated</li> </ul>	

		<ul style="list-style-type: none"> <li>• 7.5 points – 70-99%</li> <li>• 5 points – 50-69%</li> <li>• 2.5 points – 25-49%</li> <li>• 1 point – 1-24%</li> <li>• 0 points – 0%.</li> </ul> <p>(CES &amp; HMIS projects will receive 10 points)</p>	
<b>3A</b>	<b>NEW HOUSING PROJECTS ONLY – PROGRAM DESIGN</b>	<b>20 POINTS POSSIBLE</b>	
	<p>Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services. Consider:</p> <ol style="list-style-type: none"> <li>1. Are the program annual measurable goals appropriate to the program type and sufficiently challenging?</li> <li>2. Will the majority of homeless participants come from the streets, emergency shelters, or other appropriate setting given population served and project type?</li> <li>3. Is the program’s outreach plan sufficient and feasible population served and project type?</li> <li>4. Are the types and frequency of services appropriate for the population served and project type?</li> <li>5. Are the strategies to help participants obtain and remain in permanent housing appropriate for the population served and project type?</li> <li>6. Are the strategies to help participants increase their employment and income and live independently appropriate for the population served and project type?</li> <li>7. <i>Victim Service Providers only</i> – Is the plan to increase the <b>safety</b> of project participants appropriate and feasible?</li> <li>8. <i>Victim Service Providers only</i> – Does the application clearly describe a feasible plan to implement a Housing First strategy?</li> </ol>	<p>Non-DV projects:</p> <ul style="list-style-type: none"> <li>• 4 points – measurable goals</li> <li>• 4 points – majority come from streets or shelters</li> <li>• 3 points – outreach plan</li> <li>• 3 points – supportive services</li> <li>• 3 points – obtain PH</li> <li>• 3 points – income &amp; live independently</li> </ul> <p>DV projects:</p> <ul style="list-style-type: none"> <li>• 3 points – measurable goals</li> <li>• 3 points – majority come from streets or shelters</li> <li>• 2 points – outreach plan</li> <li>• 2 points – supportive services</li> <li>• 2 points – obtain PH</li> <li>• 2 points – income &amp; live independently</li> <li>• 3 points – safety plan</li> <li>• 3 points Housing First</li> </ul>	
<b>3B</b>	<b>NEW COORDINATED ENTRY PROJECTS ONLY – PROGRAM DESIGN</b>	<b>20 POINTS POSSIBLE</b>	
	<p>The application clearly describes feasible approaches or plans for all of the following CES program design factors:</p> <ol style="list-style-type: none"> <li>1. The geographic accessibility of the proposed system for all persons within the CoC’s geographic area who are seeking information regarding homeless assistance;</li> <li>2. The strategy for advertising the project that is designed specifically to reach homeless persons with the highest barriers within the CoC’s geographic area;</li> </ol>	<p>Non-DV CES projects:</p> <ul style="list-style-type: none"> <li>• 5 points – geographic access</li> <li>• 5 points - Advertising</li> <li>• 5 points – Standard assessment</li> <li>• 5 points – directing to housing &amp; services</li> </ul>	

	<p>3. The standardized assessment process proposed (or the process to choose a standardized assessment system);</p> <p>4. Whether/how the system will ensure that program participants are directed to the appropriate housing and services to fit their needs; and</p> <p>5. <i>Victim Service Providers only</i> – The strategy for implement a trauma-informed, client-centered approach.</p>	<p>DV CES projects:</p> <ul style="list-style-type: none"> <li>• 4 points – geographic access</li> <li>• 4 points - Advertising</li> <li>• 4 points – Standard assessment</li> <li>• 4 points – directing to housing &amp; services</li> <li>• 4 points – trauma informed, client centered</li> </ul>	
<b>4</b>	<b>PROGRAM EFFECTIVENESS</b>	<b>20 POINTS POSSIBLE</b> (CES & HMIS projects will receive 15 points)	
<b>4A</b>	<p>Coordinated Entry Participation: The minimum percentage of new clients the program commits to taking from Smart Path CES referral.</p>	<p><b>10 Points Available</b></p> <ul style="list-style-type: none"> <li>• 10 points – 95% - 100% CES commitment</li> <li>• 8 points – 90% - 94%</li> <li>• 6 points – 85% - 89%</li> <li>• 4 points – 80% - 84%</li> <li>• 2 points – 75% - 79%</li> <li>• 1 points – 70% - 74%</li> <li>• 0 points – below 70%.</li> </ul>	
<b>4B</b>	<p>Housing First Fidelity Assessment: Serving People with the Highest Barriers to Housing: To what extent does your project embrace the following Housing First approaches?</p> <p>13. Does the project prioritize client selection based on duration of homelessness and vulnerability?</p> <p>14. Does the project accept all clients regardless of substance use history, or current use?</p> <p>15. Does the project accept clients who are diagnosed with, or show symptoms of, a mental illness?</p> <p>16. Does the project accept clients regardless of criminal history?</p> <p>17. Does the project accept clients regardless of income or financial resources?</p> <p>18. Does the project use a harm-reduction model for drugs and/or alcohol use?</p> <p>Removing Barriers to Housing: To what extent does your project eliminate the following barriers to housing?</p> <p>17. No minimum income</p> <p>18. No required current employment</p> <p>19. No required state issued photo id</p>	<p><b>10 Points Available</b></p> <p>Housing First approaches:</p> <ul style="list-style-type: none"> <li>• 1 point “yes” response</li> <li>• 0 points “no” response</li> </ul> <p>Removing housing barriers:</p> <ul style="list-style-type: none"> <li>• 1/2 point per “yes” response</li> <li>• 0 points per “no” response</li> </ul>	

	<p>20. Need not show sobriety (drugs or alcohol)</p> <p>21. OK to have symptoms of mental illness</p> <p>22. Need not have transportation</p> <p>23. No required specific disabling condition (e.g., MH, SA, HIV/AIDS)</p> <p>24. Need not show use medication.</p>		
<b>5</b>	<b>FINANCIAL AND COST EFFECTIVENESS</b>	<b>10 POINTS POSSIBLE</b>	
<b>5A</b>	<p>Housing vs. Service Funding: The percentage of <i>program</i> funding (not including admin) proposed to be used on housing activities (acquisition, construction, rehab, and housing operations) vs. percentage funding used on non-housing activities (supportive services, services-only operations, and HMIS).</p>	<p><b>10 Points Available</b></p> <ul style="list-style-type: none"> <li>• 10 points – 90% - 100% housing activities</li> <li>• 8 points – 80% - 89%</li> <li>• 6 points – 70% - 79%</li> <li>• 4 points – 60% - 69%</li> <li>• 2 points – 50% - 99%</li> <li>• 0 points – below 50%.</li> </ul> <p>(CES &amp; HMIS projects will receive 8 points)</p>	
<b>6</b>	<b>AGENCY EXPERIENCE/CAPACITY</b>	<b>10 POINTS POSSIBLE</b>	
<b>6A</b>	<p><b>Agency Years of Experience</b></p> <p>Number of years of agency experience in implementing the proposed program OR similar program type (e.g., RRH or PSH)</p>	<p><b>10 Points Available</b></p> <ul style="list-style-type: none"> <li>• 10 points – 8+ years</li> <li>• 8 points – 5 to 7 years</li> <li>• 6 points – 4 to 6 years</li> <li>• 4 points – 2 to 3 years</li> <li>• 2 points – 1 to 2 years</li> <li>• 0 points – below 1 year</li> </ul>	
<b>6B</b>	<p><b>Capacity Issues</b></p> <p>Points will be deducted if in the past year (9/10/20-present): (1) HUD has disencumbered funds from the agency’s CoC programs, (2) the agency has unresolved HUD monitoring findings in CoC programs, or (3) the agency has been late in submitting a CoC APR.</p>	<p><b>10 Pts Deduction Possible</b></p> <ul style="list-style-type: none"> <li>• 4 points deduction – disencumbered funds</li> <li>• 4 points deduction – unresolved findings</li> <li>• 4 points deduction – late APR</li> </ul>	
<b>7</b>	<p><b>Mainstream Resources</b></p> <p>The number of strategies the program has identified to help clients access federal mainstream benefits, including Medicaid; State Children’s Health Insurance Program; TANF (CalWORKS); Food Stamps; SSI; Workforce Investment Act; <i>Employment Income</i>; Welfare to Work Grant Programs; and, Veterans Health Care.</p>	<p><b>10 POINTS POSSIBLE</b></p> <ul style="list-style-type: none"> <li>• 10 points – 7 - 8 strategies used</li> <li>• 8 points – 5 - 6 used</li> <li>• 6 point – 3 - 4 used</li> <li>• 4 points – 2 used</li> <li>• 2 point – 1 used</li> <li>• 0 points – 0 used</li> </ul>	
<b>8</b>	<p><b>Equity Factors (7 points possible)</b></p> <p>Agency will receive one point for each of the following factors that it has implemented OR commits to implement within one year: Agency leadership, governance, and policies:</p>	<p><b>7 POINTS POSSIBLE</b></p> <ul style="list-style-type: none"> <li>• 1 point per “yes” response</li> <li>• 0 points “no” response</li> </ul>	

	<p>5. Agency has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions</p> <p>6. Agency board of directors includes representation from more than one person with lived experience</p> <p>7. Agency has relational process for receiving and incorporating feedback from persons with lived experience</p> <p>8. Agency has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers</p> <p>Program participant outcomes</p> <p>8. Agency has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age</p> <p>9. Agency has identified programmatic changes needed to make program participant outcomes more equitable and developed a plan to make those changes</p> <p>10. Agency is working with HMIS lead to develop a schedule for reviewing HMIS data with disaggregation by race, ethnicity, gender identity, and or/age</p>		
9	<p><b>Community Collaboration and Participation</b></p> <p>To what extent does the applicant agency support the Homeless Action Partnership (HAP) by participating in meetings of the HAP general membership, and participate in HMIS by entering client data into HMIS for 100% of its programs that are listed in the 2021 Housing Inventory Chart (HIC)?</p> <p><i>Sub-scores will be determined by HAP staff based upon appropriate HAP and documentation for the period from September 1, 2020 to the present time.</i></p>	<p><b>3 POINTS POSSIBLE</b></p> <p>HAP meeting participation:</p> <ul style="list-style-type: none"> <li>• 2 points: Agency attends 75% to 100%</li> <li>• 1 point: Agency attends 51% to 74%</li> <li>• 0 points: Agency attends 0% to 50%</li> </ul> <p>HMIS participation:</p> <ul style="list-style-type: none"> <li>• 1 point: Has data for 100% HIC</li> <li>0 points: Has data for less than 100% HIC</li> </ul>	
	<b>TOTAL</b>	<b>100 POINTS POSSIBLE</b>	

## ***Local Evaluation/Application Instructions and Checklist***

### **1. LOCAL PROJECT PROPOSAL**

Deadline: **Wednesday, October 13, 5 pm**

Submit via e-mail (no paper copies) to: [housingforhealth@santacruzcounty.us](mailto:housingforhealth@santacruzcounty.us) AND [tonygardnerconsulting@yahoo.com](mailto:tonygardnerconsulting@yahoo.com)

Completed Local Evaluation/Application for your type of project: (1) renewal project, or (2) new project.

#### ***Local Attachments:***

- Most recently completed CoC Annual Progress Report (APR) (*renewal projects only*)
- Any HUD Letters with HUD Monitoring Findings, dated 1/1/17 or later, relating to your project including follow correspondence (*renewal projects only*)
- Latest Independent Audit, only if available (*all projects*)
- Summary of any agency client surveys or focus groups conducted in the previous two program years, only if available (*all projects*)
- Match letters, need not be submitted but must available for HUD review.

### **2. HUD ELECTRONIC APPLICATION (E-SNAPS)**

Deadline: **Wednesday, October 13, 5 pm**

Submit via e-snaps: <https://esnaps.hud.gov/grantium/frontOffice.jsf> (**No need to submit paper to H4H staff or CoC Consultant**)

Project Application, including all required charts, narratives, certifications, and attachments.

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Please do not hesitate to contact H4H at [housingforhealth@santacruzcounty.us](mailto:housingforhealth@santacruzcounty.us) or [tonygardnerconsulting@yahoo.com](mailto:tonygardnerconsulting@yahoo.com) if you have any questions.

**Local Application Forms**

**HAP 2021 CoC RENEWAL APPLICATION (10-Point Font, New Times Roman only) 100 points possible**

**1. a. Applicant Organization Name & Mission (25 words maximum):**

**2. b. Project Name and Service Site Address:**

**c. Brief Project Description, Including Housing and Services, Population Served, Clients Needs, Service Approach, Service Partnerships, Innovations, and Outcomes and Success**

**d. Estimated Total Homeless Persons Served Per Day (point-in-time):**

Estimated Total Number Served	Per day (point-in-time)
<b>a. Homeless Individuals</b>	
1. Total of individuals	
2. Total of disabled persons	
<b>b. Homeless Families</b>	
1. Total of families	
2. Total adults	
3. Total children (under 18)	
4. Total disabled persons	
<b>c. Total Homeless (a.1+b.2+b.3)</b>	

**e. Estimated Percentage Homeless Subpopulation(s) Served:**

Homeless Subpopulations	Approximate Percentages (%) can be more than 100%
a. Chronically Homeless (as defined by HUD inc. families)	
b. Severely Mentally Ill	
c. Chronic Substance Abusers	
d. Veterans	
e. Persons with HIV/AIDS	
f. Victims of Domestic Violence	
g. Unaccompanied Youth (Under 18 years of age)	

**f. Please List Supportive Services With Estimated Frequency: daily, weekly, bi-weekly monthly, bi-monthly, or semi-annually**

Service Type	Frequency	Service Type	Frequency
1.		5.	
2.		6.	
3.		7.	
4.		8.	

**g. Total HUD Dollar Request: \$ . Please Complete Summary Project Budget:**

a. Project Activity	b. HUD Dollar Request	c. Cash Match	d. Total Project Budget (HUD+Match)
1. Real Property Leasing			
2. Rental Assistance (from chart below)			
3. Supportive Services			
4. Operations			
5. HMIS			
6. Admin (HUD Approved Amount)			

b. Rental Assistance Worksheet	FMR rent	No. of mos.	Total
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Size/no. Units			
No. 0-bed units:	\$	x mos. =	\$
No. 1-bed units:	\$	x mos. =	\$
No. 2-bed units:	\$	x mos. =	\$
No. 3-bed units:	\$	x mos. =	\$
<b>Total</b>			\$

**h. Written Leverage Commitments if Any (not required this year – no points)**

Written Leverage Commitments	Total Amount	Percentage of Total HUD Dollar Request (see 8 above)
Cash and In-Kind Commitments	\$	

**SCORING QUESTIONS**

**1. Housing/Project Type (check only 1) (10 points possible)**

<input type="checkbox"/> PSH serving 100% CH or Dedicated PLUS with longest histories of homelessness and most severe barriers, 10 pts <input type="checkbox"/> RRH, 10 pts <input type="checkbox"/> joint TH-RRH, 10 pts <input type="checkbox"/> Coordinated Entry, 10 pts <input type="checkbox"/> HMIS, 10 pts <input type="checkbox"/> PSH not serving 100% CH or Dedicated PLUS with longest histories of homelessness and most severe barriers, 5 pts <input type="checkbox"/> TH, 5 pts <input type="checkbox"/> Other project types, 0 pts
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**2. Priority Population Served Addresses Chronic Homeless Population or DV Population (check only 1) (N/A for CES or HMIS) (10 points possible)**

Please respond to either the chronic homeless population OR the DV population chart below.

What percentage of clients served will be chronically homeless as defined by HUD (must match response to 6.a above)?
<input type="checkbox"/> 100%, 10 pts <input type="checkbox"/> 70-99%, 7.5 pts <input type="checkbox"/> 50-69%, 5 pts <input type="checkbox"/> 25-49%, 2.5 pts <input type="checkbox"/> 1-24%, 1 pt <input type="checkbox"/> 0%, 0 pts

OR

What percentage of clients served will be chronically homeless as defined by HUD (must match response to 6.a above)?
<input type="checkbox"/> 100%, 10 pts <input type="checkbox"/> 0-99%, 0 pts

**3. Performance Measures – Based HMIS (or Comparable Database for Victim Service Providers) (20 points possible)**

(N/A for HMIS or CES) Please use the attach worksheet to answer the following questions based upon data an HMIS or DV Comparable Database APR report for the year from 7/1/20 – 6/30/21.

**3A1. Housing Stability:**

For PSH project only, what percentage of your leavers and stayers remained in permanent housing for at least 7 months? \_\_\_%

For TH and RRH projects only, what percentage of your program leavers exited to permanent destinations? \_\_\_%

**3A2. Income:**

For all projects, what percentage of program leavers and stayers combined had earned income, other income, or both earned income and other income? \_\_\_%

For all projects, what percentage of ADULT program leavers and stayers combined had earned income? \_\_\_%

**3A3. Non-Cash Mainstream Benefits:**

For all projects, what percentage of program of program leavers (at exit) and stayers (at follow-up) combined had at least one non-cash benefit source?  
\_\_\_\_%

**3A4. Program Occupancy (bed utilization):**

For all projects, what was the average bed utilization rate for the operating year?  
\_\_\_\_%

**3A5. Returns to Homelessness:**

For all projects, what percentage of program leavers exited to non-permanent housing destinations?  
\_\_\_\_%

**3A6. Length of Stay (LOS):**

For PSH only, what was the average length of stay in the permanent housing days for leavers?  
\_\_\_\_ Ave. # days

Was this figure higher than the previous program year?  
Yes \_\_\_\_ No \_\_\_\_

For TH and RRH only, what was the average length of stay in TH or RRH measured in days for leavers?  
\_\_\_\_ Ave. # days

Was this figure lower than the previous program year?  
Yes \_\_\_\_ No \_\_\_\_

**3A7. Victim Service Providers only - Safety:**

Please identify at least one relevant measure of the degree of participant safety that you will commit to using in the future:

**4. Program Effectiveness (N/A for HMIS or CES) (20 points possible)**

**4A. Coordinated Entry Participation:**

Identify the percentage of NEW clients who came from Smart Path CES referral.

<input type="checkbox"/> 95-100%, 10 pts	<input type="checkbox"/> 90-94%, 8 pts	<input type="checkbox"/> 85-89%, 6 pts	<input type="checkbox"/> 80-84%, 4 pts	<input type="checkbox"/> 75-79%, 2 pts	<input type="checkbox"/> 70-74%, 1 pt	<input type="checkbox"/> <70% 0 pts
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**4B. Housing First Fidelity Assessment:**

Serving People with the Highest Barriers to Housing: Housing First criteria that are used by the project. Check all that apply:

1. Does the project prioritize client selection based on duration of homelessness and vulnerability?  
 Yes  No
2. Does the project accept all clients regardless of substance use history, or current use?  
 Yes  No
3. Does the project accept clients who are diagnosed with, or show symptoms of, a mental illness?  
 Yes  No
4. Does the project accept clients regardless of criminal history?  
 Yes  No
5. Does the project accept clients regardless of income or financial resources?  
 Yes  No
6. Does the project use a harm-reduction model for drugs and/or alcohol use?  
 Yes  No

Total number of the Housing First criteria used ("yes" responses): \_\_\_\_\_ # Yes

Removing Barriers to Housing: Please indicate which of the following criteria/barriers is required for clients to be accepted into this project. Check all that apply:

1. No minimum income required  
 Yes  No
2. No required current employment

- Yes       No
3. No required state issued photo ID  
 Yes  No
  4. Need not show sobriety (drugs or alcohol)  
 Yes  No
  5. OK to have symptoms of mental illness  
 Yes  No
  6. Need not have transportation  
 Yes  No
  7. No required specific disabling condition (e.g., MH, SA, HIV/AIDS)  
 Yes  No
  8. Need not show use medication  
 Yes  No

Total number of the criteria/barriers removed (checked responses): \_\_\_\_\_ # Yes

**5. Financial and Cost Effectiveness (10 points possible)**

**5.A Housing vs. Service Funding (N/A for HMIS or CES):**

Percentage of *program* funding (not including admin) proposed to be used on housing activities (acquisition, construction, rehab, and housing operations) vs. percentage funding used on non-housing activities (supportive services, services-only operations, and HMIS). (N/A for CES and HMIS)

Enter HUD funds for Housing Activities	Enter Total of Housing + Services (not including Admin)	% of HUD funds used on Housing (Total Housing /Total Housing+Services = % Housing Funds)
\$ Leasing		
\$ Rental Assistance		
\$ Housing Operations		
<b>\$ TOTAL Housing Funds</b>	<b>\$ TOTAL Housing +Service Funds</b>	<b>% Housing Funds</b>

**5B. Drawdown Completeness:**

1. Percentage of HUD grant actually drawn down in the **most recent completed program year** recorded in the most recent APR.

Enter Total Amount Budgeted	Enter Total Amount Drawn Down	Enter Total Unspent, If Any	Enter Percentage Actually Drawn Down (Total Drawn Down/Total Budget = % Drawn Down)
\$	\$	\$	% Drawn Down

b. Answer the following for the percentage actually drawn down (4<sup>th</sup> column above):

<input type="checkbox"/> 100%, 5 pts	<input type="checkbox"/> 98-99%, 4 pts	<input type="checkbox"/> 96-97%, 3 pts	<input type="checkbox"/> 94-95%, 2 pts	<input type="checkbox"/> 92-93%, 1 pts	<input type="checkbox"/> <92% 0 pts
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**6. Agency Experience/Capacity (10 points possible)**

**6A. Years of Experience (check only 1):**

Check the number of years of agency experience in implementing the proposed program OR similar program (e.g., RRH or PSH).

<input type="checkbox"/> 8+ years experience, 10 pts	<input type="checkbox"/> 5-7 years experience, 8 pts	<input type="checkbox"/> 4-6 years experience, 6 pts	<input type="checkbox"/> 2-3 years experience, 4 pts	<input type="checkbox"/> 1-2 years experience, 2 pts	<input type="checkbox"/> <1 year experience, 0 pts
--	--	--	--	--	--

**6B Capacity Issues (answer all that apply):**

Please answer the following questions based upon the past year from September 10, 2020 to the present date:

1. Has HUD disencumbered funds from the agency's CoC programs?  Yes  No
2. Does the agency have unresolved HUD monitoring findings in CoC programs?  Yes  No
3. Has the agency been late in submitting a CoC APR?  Yes  No

**7. Mainstream Resources (10 points possible)**

Please check each activity your project implements to help clients access mainstream benefits, including Medicaid; State Children’s Health Insurance Program; TANF (CalWORKS); Food Stamps; SSI; Workforce Investment Act; *Employment Income*; Welfare to Work Grant Programs; and, Veterans Health Care.

<input type="checkbox"/>	1. Project case managers systematically assist clients in completing applications for mainstream benefit programs.
<input type="checkbox"/>	2. Agency systematically analyzes its projects’ APR and other data to assess and improve access to mainstream programs.
<input type="checkbox"/>	3. Agency leadership meets at least three times a year to discuss and improve clients’ participation in mainstream programs.
<input type="checkbox"/>	4. Project staff are trained at least once per year on how to identify eligibility and mainstream program changes.
<input type="checkbox"/>	5. Project has specialized staff whose primary responsibility is to identify, enroll, and follow-up with homeless persons on participation in mainstream programs.
<input type="checkbox"/>	6. Agency supplies transportation to clients to attend mainstream benefit appointments, employment training, or jobs.
<input type="checkbox"/>	7. Project staff systematically follow-up to ensure that mainstream benefits are received.
<input type="checkbox"/>	8. Agency coordinates with the local departments administering mainstream programs (e.g., Human Services and Health Services) to reduce or remove barriers to accessing mainstream services.

**8. Equity Factors (check all that apply) (7 points possible)**

Please identify which of the following equity factors your program has implemented OR commits to implement within one year:

	<b>Agency leadership, governance, and policies:</b>
<input type="checkbox"/>	1. Agency has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions
<input type="checkbox"/>	2. Agency board of directors includes representation from more than one person with lived experience
<input type="checkbox"/>	3. Agency has relational process for receiving and incorporating feedback from persons with lived experience
<input type="checkbox"/>	4. Agency has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers
	<b>Program participant outcomes</b>
<input type="checkbox"/>	5. Agency has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age
<input type="checkbox"/>	6. Agency has identified programmatic changes needed to make program participant outcomes more equitable and developed a plan to make those changes
<input type="checkbox"/>	7. Agency is working with HMIS lead to develop a schedule for reviewing HMIS data with disaggregation by race, ethnicity, gender identity, and or/age

*Please note that an additional 3 points is possible for Community Collaboration and Participation. There is no need to submit a response. Scores will be tabulated by HAP staff. Please see the Evaluation Criteria item 9 for details.*

Attachment:  
Worksheet for Completing Question 3 Renewal HMIS Performance Metrics

**Worksheet for Completing Question 3 Performance Measures Based on APR Generated from HMIS (or Comparable Database for DV) for the year from July 1, 2020 to June 30, 2021.**

Please answer the following using and HMIS (or DV comparable database) APR generated for the year from **July 1, 2020 to June 30, 2021**. Transfer your answers (the last line of the formula for each response) to Question 3 of the application. If you are a first year renewal without a complete year of data, you do not need to complete this form. If you have any questions, please contact Tony Gardner at [tonygardnerconsulting@yahoo.com](mailto:tonygardnerconsulting@yahoo.com).

**3A1. Housing Stability:**

For PSH project only, what percentage of your leavers and stayers (combined) remained in permanent housing for at least 7 months?

Data Source: APR Q22a1

Formula:

- a. Enter total number of program participants (APR Q22a1, Total column, row 12):

\_\_\_\_\_ Participants

- b. Enter total numbers of leavers and stayers combined who stayed 181 days or longer (APR Q22a1, Total column, rows 5 – 10):

\_\_\_\_\_ > 181  
Days

- c. **Percentage participants stayed 7 mos. (b/a x 100=%):**

\_\_\_\_\_ %

For TH and RRH projects only, what percentage of your program leavers (those who have stayed more than 90 days and those who have stayed less than 90 days combined) exited to permanent destinations?

Data Source: APR Q23a & Q23b

Formula:

- a. Total number of leavers combined (APR Q23a & 23b, Total column, Total row):

\_\_\_\_\_ Leavers

- b. Total number of leavers who exited to permanent destinations (APR Q23a & 23b, Total column, Total Persons Exiting to a Positive Destination row):

\_\_\_\_\_ Perm  
Destin.

- c. **Percentage leavers to permanent destinations (b/a x 100=%):**

\_\_\_\_\_ %

**3A2. Income:**

For all projects, what percentage of adult program leavers and stayers combined had earned income, other income, or both earned income and other income at the time of assessment or exit?

Data Source: APR Q18

Formula:

- a. Total number of adult program participants who were required to have an annual assessment or exited (APR Q18, Adults at Annual Assessment and Adults at Exit columns, "Total Adults" row):

\_\_\_\_\_ Adults

- b. Total adults had earned income, other income, or both earned income and other income (APR Q18, Adults at Annual Assessment and Adults at Exit columns, "1 or More Source of Income" row):

\_\_\_\_\_ Had Income

c. **Percentage adults with income (b/a x 100=%):** \_\_\_\_\_%

For all projects, what percentage of adult program leavers and stayers combined had earned income?

Data Source: APR Q18

Formula:

a. Total number of adult program participants who were required to have an annual assessment or exited (APR Q18, Adults at Annual Assessment and Adults at Exit columns, "Total Adults" row)

\_\_\_\_\_ Adults

b. Total adults with earned income (APR Q18, Adults at Annual Assessment and Adults at Exit columns, "Adults with Only Earned Income" and "Adults with Both Earned and Other Income" rows combined):

\_\_\_\_\_ Had Earned  
Income

c. **Percentage adults participants with earned income (b/a x 100=%):** \_\_\_\_\_%

**3A3. Non-Cash Mainstream Benefits:**

For all projects, what percentage of program leavers (at exit) and stayers (at follow-up) combined had at least one non-cash benefit source?

Data Source: APR Q20b

Formula:

a. Total number of program participants who were required to have an annual assessment or exited (APR Q20b, Benefit at Annual Assessment and Benefit at Exit columns, "Total" row):

\_\_\_\_\_ Participants

b. Total program participants with at least 1 non-cash benefit source (APR Q20b, Benefit at Annual Assessment and Benefit at Exit columns, "1+ Source(s)" row):

\_\_\_\_\_ 1 or more  
Non-Cash Benefit

c. **Percentage participants one or more non-cash (b/a x 100=%):** \_\_\_\_\_%

**3A4. Program Occupancy (bed utilization):**

For all projects except HMIS, what was the average bed utilization rate for the operating year?

Data Source: APR Q2

Formula:

a. **Average bed utilization rate during operating year** (Q2 PIT Actual Bed and Unit Utilization chart, bed utilization rate subsection) Add the 4 quarterly rates and then divide by 4 to reach the average bed utilization rate [e.g.,  $85.50 + 90.5 + 90.5 + 100 = 366.6/4 = 91.63\%$  average bed utilization rate]:

\_\_\_\_\_%

**3A5. Returns to Homelessness:**

For all projects, what percentage of program leavers (those who have stayed more than 90 days and those who have stayed less than 90 days combined) exited to non-permanent housing destinations (e.g., Emergency Shelter, Place Not Meant for Human Habitation, Don't Know/Refused, Information Missing, etc.?)

Data Source: APR Q23a & Q23b

Formula:

a. Total number of leavers combined (APR Q23a & 23b, Total column, Total row):

Leavers \_\_\_\_\_ Total

b. Total number of leavers who exited to non-permanent destinations (APR Q23a & 23b, Total column, Total Persons Exiting to a Positive Destination row subtracted from Total row = total leavers who exited to non-permanent destinations):

\_\_\_\_\_ Leaver Non-Perm. Destin.

c. **Percentage leavers existed to non-permanent destinations** (e.g., emergency shelter, place not meant for human habitation, don't know/refused, information missing, etc.)

**(b/a x 100=%)**: \_\_\_\_\_%

**3A6. Length of Stay (LOS):**

For PSH only, what was the average length of stay in the permanent housing measured in days for leavers? Was this figure higher than the previous program year?

Data Source: APR Q22b

Formula:

a. Average length of stay in days for program leavers (Leavers column, *Average Length* row):

*Average length of stay*: \_\_\_\_\_ days

b. **Was this figure higher than the previous operating year** \_\_\_\_\_ Yes \_\_\_\_\_ No

For TH and RRH only, what was the average length of stay in TH or RRH leavers? Was this figure lower than the previous program year?

Data Source: APR Q22b

Formula:

a. Average length of stay in days for program leavers (Leavers column, *Average Length* row):

*Average length of stay*: \_\_\_\_\_ days

a. **Was this figure lower than the previous operating year** \_\_\_\_\_ Yes \_\_\_\_\_ No

**3A7. Victim Service Providers only - Safety:**

**HAP 2021 NEW PROJECT APPLICATION (10-Point Font, New Times Roman) 100 pts. possible**

**a. Applicant Organization Name & Mission (25 words maximum):**

**b. Project Name and Service Site Address:**

**c. Brief Project Description, Including Housing and Services, Population Served, Clients Needs, Service Approach, Service Partnerships, Innovations, and Outcomes and Success**

**d. Estimated Total Homeless Persons Served Per Day (point-in-time):**

Estimated Total Number Served	Per day (point-in-time)
<b>a. Homeless Individuals</b>	
1. Total of individuals	
2. Total of disabled persons	
<b>b. Homeless Families</b>	
1. Total of families	
2. Total adults	
3. Total children (under 18)	
4. Total disabled persons	
<b>c. Total Homeless (a.1+b.2+b.3)</b>	

**e. Estimated Percentage Homeless Subpopulation(s) Served:**

Homeless Subpopulations	Approximate Percentages (%) can be more than 100%
a. Chronically Homeless (as defined by HUD inc. families)	
b. Severely Mentally Ill	
c. Chronic Substance Abusers	
d. Veterans	
e. Persons with HIV/AIDS	
f. Victims of Domestic Violence	
g. Unaccompanied Youth (Under 18 years of age)	

**f. Please List Supportive Services With Estimated Frequency: daily, weekly, bi-weekly monthly, bi-monthly, or semi-annually**

Service Type	Frequency	Service Type	Frequency
1.		5.	
2.		6.	
3.		7.	
4.		8.	

**g. Total HUD Dollar Request: \$ \_\_\_\_\_. Please Complete Summary Project Budget:**

a. Project Activity	b. HUD Dollar Request	c. Cash Match	d. Total Project Budget (HUD+Match)
1. Real Property Leasing			
2. Rental Assistance (from chart below)			
3. Supportive Services			
4. Operations			
5. HMIS			
6. Admin (HUD Approved Amount)			

b. Rental Assistance Worksheet Size/no. Units	FMR rent	No. of mos.	Total
No. 0-bed units:	\$	x mos. =	\$

No. 1-bed units:	\$	x mos. =	\$
No. 2-bed units:	\$	x mos. =	\$
No. 3-bed units:	\$	x mos. =	\$
<b>Total</b>			\$

**h. Written Leverage Commitments if Any (not required this year – no points)**

Written Leverage Commitments	Total Amount	Percentage of Total HUD Dollar Request (see 8 above)
Cash and In-Kind Commitments	\$	

**SCORING QUESTIONS**

**1. Housing/Project Type (10 points possible)**

1A. Identify the source of funds (Check all that apply):

<input type="checkbox"/> CoC Bonus <input type="checkbox"/> Reallocation <input type="checkbox"/> CoC Bonus & Reallocation <input type="checkbox"/> DV Bonus
--

2B. Identify the types of project (Check only 1):

<b>Bonus and/or Reallocation:</b> <input type="checkbox"/> PSH serving 100% CH or Dedicated PLUS with longest histories of homelessness and most severe barriers, 10 pts <input type="checkbox"/> RRH, 10 pts <input type="checkbox"/> joint TH-RRH, 10 pts <input type="checkbox"/> Coordinated Entry, 10 pts <input type="checkbox"/> HMIS, 10 pts <input type="checkbox"/> PSH not serving 100% CH or Dedicated PLUS with longest histories of homelessness & most severe barriers, 5 pts <input type="checkbox"/> Other project types, 0 pts
<b>DV Bonus:</b> <input type="checkbox"/> RRH Housing 1 <sup>st</sup> , 10 pts <input type="checkbox"/> TH-RRH Housing 1 <sup>st</sup> , 10 pts, <input type="checkbox"/> CES-DV, trauma-informed, client-centered, 10 pts

**2. Priority Population Served Addresses Chronic Homeless Population or DV Population (check only 1) (N/A for CES or HMIS) (10 points possible)**

Please respond to either the chronic homeless population OR the DV population chart below.

What percentage of clients served will be chronically homeless as defined by HUD (must match response to 6.a above)?
<input type="checkbox"/> 100%, 10 pts <input type="checkbox"/> 70-99%, 7.5 pts <input type="checkbox"/> 50-69%, 5 pts <input type="checkbox"/> 25-49%, 2.5 pts <input type="checkbox"/> 1-24%, 1 pt <input type="checkbox"/> 0%, 0 pts

OR

What percentage of clients served will be chronically homeless as defined by HUD (must match response to 6.a above)?
<input type="checkbox"/> 100%, 10 pts <input type="checkbox"/> 0-99%, 0 pts

**3. Program Design (up to 20 points possible) (Use only the space provided)**

**3A. Program Design - Housing Projects Only:**

**3A1. Program Goals to be Measured Annually**

HUD requires all CoC projects to help homeless people participants (a) obtain and remain in permanent housing, (b) increase their skills and/or income, and (c) achieve greater self-determination. Please set forth below your annual

1. Obtain/remain in permanent housing:  2. Increase skills and income:  3. Achieve greater self-determination:  4. <u>Victim Service Providers only</u> - Safety: (not scored this year): Please identify at least one safety-related measure:
--

measurable goals:

**3A2. Where Participants Will Come From:**

Enter the percentage of homeless participants(s) that will come from the following places (should equal 100%):

- \_\_\_\_% Persons who came from the street or other locations not meant for human habitation.
- \_\_\_\_% Persons who came from Emergency Shelters.
- \_\_\_\_% Persons in TH who came directly from the street or Emergency Shelters.
- \_\_\_\_% Persons who came from other place fitting HUD homeless definition. List places: \_\_\_\_\_

**3A3. Outreach Plan:**

Briefly describe the **outreach plan** to bring homeless people into the project:

**3A4. Type and Frequency of Services:**

Types of Services Participants Will Receive With Frequency: daily, weekly, bi-weekly monthly, bi-monthly, or semi-annually:

Service Type	Frequency	Service Type	Frequency
1.		5.	
2.		6.	
3.		7.	
4.		8.	

**3A5. Obtaining and Remaining in Permanent Housing:**

Briefly describe how participants will be assisted both to **obtain and also remain in permanent housing**:

**3A6. Increasing Incomes and Self-Sufficiency:**

Briefly describe how participants will increase their **employment** and income **and** maximize their ability to **live independently**:

**3A7. Safety Plan (Victim Service Providers only):**

Briefly describe how the project will increase the **safety** of project participants:

**3A8. Housing First (Victim Service Providers only):**

Briefly describe how the project will implement a Housing First service approach:

**3B. Program Design - Coordinated Entry Expansion Projects Only:**

**3B1. Geographic Accessibility:**

Briefly describe how the proposed project will increase the geographic accessibility of Coordinated Entry for all persons within the CoC’s geographic area who are seeking information regarding homeless assistance:

**3B2. Advertising:**

Briefly describe how the proposed project will add to the strategy for advertising the project that is designed specifically to reach homeless persons with the highest barriers within the CoC’s geographic area:

**3B4. Referral to Appropriate Housing or Services:**

Briefly address whether/how the proposed project will increase Coordinated Entry's ability to ensure that program participants are directed to the appropriate housing and services to fit their needs:

**3B5. Trauma-Informed, Client-Centered Approach (Victim Service Providers only):**

Briefly describe how the project will implement a trauma-informed, client-centered service approach:

**4. Program Effectiveness (N/A for HMIS or CES) (20 points possible)**

**4A. Coordinated Entry Participation:**

Identify the percentage of clients who you commit will come from Smart Path CES referral.

<input type="checkbox"/> 95-100%, 10 pts	<input type="checkbox"/> 90-94%, 8 pts	<input type="checkbox"/> 85-89%, 6 pts	<input type="checkbox"/> 80-84%, 4 pts	<input type="checkbox"/> 75-79%, 2 pts	<input type="checkbox"/> 70-74%, 1 pt	<input type="checkbox"/> <70% 0 pts
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**4B. Housing First Fidelity Assessment:**

Serving People with the Highest Barriers to Housing: Housing First criteria that are used by the project. Check all that apply:

- 7. Does the project prioritize client selection based on duration of homelessness and vulnerability?  
 Yes  No
- 8. Does the project accept all clients regardless of substance use history, or current use?  
 Yes  No
- 9. Does the project accept clients who are diagnosed with, or show symptoms of, a mental illness?  
 Yes  No
- 10. Does the project accept clients regardless of criminal history?  
 Yes  No
- 11. Does the project accept clients regardless of income or financial resources?  
 Yes  No
- 12. Does the project use a harm-reduction model for drugs and/or alcohol use?  
 Yes  No

Total number of the Housing First criteria used ("yes" responses): \_\_\_\_\_ # Yes

Removing Barriers to Housing: Please indicate which of the following criteria/barriers is required for clients to be accepted into this project. Check all that apply:

- 9. No minimum income required  
 Yes  No
- 10. No required current employment  
 Yes  No
- 11. No required state issued photo ID  
 Yes  No
- 12. Need not show sobriety (drugs or alcohol)  
 Yes  No
- 13. OK to have symptoms of mental illness  
 Yes  No
- 14. Need not have transportation  
 Yes  No
- 15. No required specific disabling condition (e.g., MH, SA, HIV/AIDS)  
 Yes  No
- 16. Need not show use medication  
 Yes  No

Total number of the criteria/barriers removed (checked responses): \_\_\_\_\_ # Yes

**5. Financial and Cost Effectiveness (10 points possible)**

**5.A Housing vs. Service Funding (N/A for HMIS or CES):**

Percentage of *program* funding (not including admin) proposed to be used on housing activities (acquisition, construction, rehab, and housing operations) vs. percentage funding used on non-housing activities (supportive services, services-only operations, and HMIS). (N/A for CES and HMIS)

Enter HUD funds for Housing Activities	Enter Total of Housing + Services (not including Admin)	% of HUD funds used on Housing (Total Housing /Total Housing+Services = % Housing Funds)
\$ Leasing		
\$ Rental Assistance		
\$ Housing Operations		
<b>\$ TOTAL Housing Funds</b>	<b>\$ TOTAL Housing +Service Funds</b>	<b>% Housing Funds</b>

**6. Agency Experience/Capacity (10 points possible)**

**6A. Years of Experience (check only 1):**

Check the number of years of agency experience in implementing the proposed program OR similar program (e.g., RRH or PSH).

<input type="checkbox"/> 8+ years experience, 10 pts <input type="checkbox"/> 5-7 years experience, 8 pts <input type="checkbox"/> 4-6 years experience, 6 pts <input type="checkbox"/> 2-3 years experience, 4 pts <input type="checkbox"/> 1-2 years experience, 2 pts <input type="checkbox"/> <1 year experience, 0 pts
---

**6B Capacity Issues (answer all that apply):**

Please answer the following questions based upon the past year from September 10, 2020 to the present date:

4. Has HUD disencumbered funds from the agency’s CoC programs?  Yes  No
5. Does the agency have unresolved HUD monitoring findings in CoC programs?  Yes  No
6. Has the agency been late in submitting a CoC APR?  Yes  No

**7. Mainstream Resources (10 points possible)**

Please check each activity your project implements to help clients access mainstream benefits, including Medicaid; State Children’s Health Insurance Program; TANF (CalWORKS); Food Stamps; SSI; Workforce Investment Act; *Employment Income*; Welfare to Work Grant Programs; and, Veterans Health Care.

<input type="checkbox"/>	1. Project case managers systematically assist clients in completing applications for mainstream benefit programs.
<input type="checkbox"/>	2. Agency systematically analyzes its projects’ APR and other data to assess and improve access to mainstream programs.
<input type="checkbox"/>	3. Agency leadership meets at least three times a year to discuss and improve clients’ participation in mainstream programs.
<input type="checkbox"/>	4. Project staff are trained at least once per year on how to identify eligibility and mainstream program changes.
<input type="checkbox"/>	5. Project has specialized staff whose primary responsibility is to identify, enroll, and follow-up with homeless persons on participation in mainstream programs.
<input type="checkbox"/>	6. Agency supplies transportation to clients to attend mainstream benefit appointments, employment training, or jobs.
<input type="checkbox"/>	7. Project staff systematically follow-up to ensure that mainstream benefits are received.
<input type="checkbox"/>	8. Agency coordinates with the local departments administering mainstream programs (e.g., Human Services and Health Services) to reduce or remove barriers to accessing mainstream services.

**8. Equity Factors (check all that apply) (7 points possible)**

Please identify which of the following equity factors your program has implemented OR commits to implement within one year:

<b>Agency leadership, governance, and policies:</b>	
<input type="checkbox"/>	8. Agency has under-represented individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions
<input type="checkbox"/>	9. Agency board of directors includes representation from more than one person with lived experience
<input type="checkbox"/>	10. Agency has relational process for receiving and incorporating feedback from persons with lived

	experience
<input type="checkbox"/>	11. Agency has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers
	<b>Program participant outcomes</b>
<input type="checkbox"/>	12. Agency has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age
<input type="checkbox"/>	13. Agency has identified programmatic changes needed to make program participant outcomes more equitable and developed a plan to make those changes
<input type="checkbox"/>	14. Agency is working with HMIS lead to develop a schedule for reviewing HMIS data with disaggregation by race, ethnicity, gender identity, and or/age

*Please note that an additional 3 points is possible for Community Collaboration and Participation. There is no need to submit a response. Scores will be tabulated by HAP staff. Please see the Evaluation Criteria item 9 for details.*

# **Public Posting Project Rejected**

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## Community Bridges: Notification of 2021 CoC Project Priority Listing

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From: tony gardner (tonygardnerconsulting@yahoo.com)

To: ashaw@cbridges.org; rayc@cbridges.org

Cc: robert.ratner@santacruzcounty.us; sheryl.norteye@santacruzcounty.us

Date: Monday, November 1, 2021, 4:51 PM PDT

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Dear Asha and Ray,

Attached please find your CoC project notification letter, Review and Ranking Committee minutes, approved 2021 CoC Project Listing, and CoC Appeals Policy.

Best wishes,

Tony Gardner  
Consultant, Santa Cruz County Continuum of Care

*Tony Gardner Consulting*

415.458.2460 land

415.717.9336 mobile tonygardnerconsulting@yahoo.com



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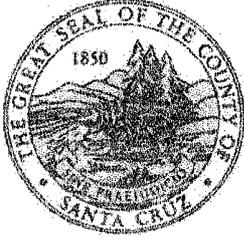
Final 2021 Santa Cruz CoC Project Rank Order Listing Santa Cruz CoC Ranking.pdf  
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CoC Appeals Policy.pdf  
117kB



Community Bridges HUD CoC NOFO application letter 11-1-2021.pdf  
315.3kB



# County of Santa Cruz

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## HUMAN SERVICES DEPARTMENT

Housing for Health Division

Robert Ratner, Director

1000 Emeline Avenue Santa Cruz, CA 95060

(831) 454-4130 FAX: (831) 454-4642

November 1, 2021

Re: Community Bridges – Notification of 2021 CoC Project Priority Listing

Dear Community Bridges:

Thank you for participating in the 2021 Santa Cruz County Continuum of Care (CoC) local program competition. We appreciate the time you and your staff devoted to preparing and submitting your funding application.

Attached please find the Review and Ranking Committee minutes and approved 2021 CoC Priority Listing. As noted in the minutes, the committee declined to approve your Homeless Prevention Program Coordinated Entry System (CES) project because it did not meet threshold CoC requirements as follows:

- Not a HUD-allowable project type:
  - Although submitted as a CES project, the text described a supportive service only prevention program not eligible under CoC rules.
  - It would not be eligible as a CES since it does not propose a CES process covering the entire CoC geography.
  - The local Public Solicitation of Applications encouraged only a CES project by the existing CES lead agency that represents an “expansion” of the existing CES renewal grant; the proposal said “no” to whether it was an expansion grant.
  
- Not a HUD-allowable population type:
  - Persons who are at risk of homelessness in need of prevention services are not an allowable target population under CoC rules. The text describes a program that will serve persons who are at risk of homelessness along with persons experiencing homelessness.
  
- Did not meet local application submission requirements:
  - Did not submit a *local new project application*, which was required by the local Public Solicitation of Applications.

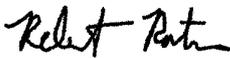
Because your project was not approved, you are eligible to appeal. The appeals process and grounds for appeal are included in the CoC Appeals Policy attached.

- **Please note that if you intend to appeal you must submit your appeal to housingforhealth@santacruzcounty.us and Tonygardnerconsulting@yahoo.com no later than NOON on Wednesday, November 6, 2021.**
- **All appeals will be considered by the Appeals Panel by Friday, November 8.**

Please let us know if you have any questions.

Again, thank you very much for your participation in the 2021 CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,



Robert Ratner, MPH, MD  
Housing for Health Director

Cc: Tony Gardner

Attachments

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**MEETING MINUTES**  
**Santa Cruz County Homeless Action Partnership (HAP)**  
**Review and Ranking Committee (Committee) Meeting**

**Virtual Meeting via Teams**  
**Friday, October 29, 2021, 1:00 p.m. – 3:00 p.m.**

Committee Members Present: Kelly Conway, Jamie Goldstein, Judy Hutchinson, Larry Imwalle, Tamara Vides

Committee Members Absent: None

Housing for Health (H4H) Staff/Consultant Present: Robert Ratner, Tony Gardner, Sheryl Norteye

Others Present: Paz Padilla, Linda Lemaster

**1. Overview of the Committee Role & Process**

The committee heard and discussed a briefing regarding U.S. Department of Housing and Urban Development (HUD) Continuum of Care (CoC) Program requirements and policies, and the local CoC process and the committee's role in approving, rating, ranking, and tiering new and renewal CoC project proposals; approving renewal and replacement Youth Homelessness Demonstration (YHDP) project proposals; and approving the CoC planning grant project proposal. The group also discussed local challenges and priorities, as well as CoC strategic considerations.

Committee members had been previously asked to submit certifications relating to conflict of interest. There were no conflicts disclosed. Although not a committee member, Robert Ratner nonetheless disclosed potential conflicts relating managing County Human Services Department (HSD) renewal projects and partnering with County Health Services Agency on their grants. As staff, he did not vote or take part in the project decision process.

**2. Review and Evaluation of Projects**

The committee then reviewed and discussed project aggregate scores (which were based on the previously announced objective rating criteria), and a summary of comments made by committee members, who had previously prepared a brief written evaluation of each project. Comments included evaluation of the strengths and weaknesses of each project, suggestions for enhancements to projects, and recommendations relating to approval, ranking, tiering, spending issues, and budget amounts.

**3. Project Approval, Ranking, and Tiering Decisions**

The committee then engaged in a discussion and decision process including consideration of:

- a. Project aggregate objective scores that were based on previously publicly announced objective scoring criteria that included HMIS-generated performance measures.
- b. Committee members written evaluations of each project proposal.
- c. Consideration of ranking scenarios in the context HUD priorities, local strategic plan priorities, performance metrics, tiering considerations, funding factors, etc.

After careful consideration, the committee unanimously approved the project proposal selection, ranking, and tiering decisions reflected in the attached project list.

The following provides further details regarding the decisions made:

#### CoC Bonus Project

This year, Santa Cruz County agencies were eligible to competitively apply for \$242,268 as a bonus for new permanent supportive housing (PSH) projects, new joint transitional housing (TH) and rapid rehousing (RRH) projects, new RRH only projects, a new coordinated entry system (CES) project, or a new homeless management information system (HMIS) project. Two proposals for the CoC bonus funds were submitted: (1) the Housing Authority of the County of Santa Cruz Shelter Plus Care (S+C) Expansion new PSH project requesting \$299,335 in funding from the bonus and reallocation (see below), and (2) the Community Bridges Homeless Prevention Program new CES project requesting \$158,976. The committee approved the S+C Expansion PSH project for the full amount of the CoC bonus; the Homeless Prevention Program CES project did not meet CoC threshold requirements.

#### Reallocation

HUD rules allow CoC's to reallocate funding from one or more renewal projects to one or more new eligible projects when doing so would help to end homelessness by addressing key program type, priority, or performance issues. In addition, the HAP has a local voluntary reallocation policy to encourage reallocations by giving priority for reallocated funds to applicants that voluntarily request to reallocate their own TH or other projects that are no longer needed, no longer match the agency's mission, or are underperforming.

Under the above rules and policies, the County of Santa Cruz Human Services Department (HSD) voluntarily relinquished its \$57,067 Brommer Street PSH renewal grant and the committee reallocated these funds the S+C Expansion PSH project, thereby increasing the project's funding above the CoC bonus amount to \$299,335. Also, the committee accepted Housing Matters' request to voluntarily reallocate its \$154,343 Page Smith TH/RRH renewal grant to the new 801 River Street PSH project.

#### DV Bonus

This year, HUD made available \$102 million nationally for a competitive Domestic Violence (DV) Bonus, to provide housing and services 100% for survivors of domestic violence, dating violence, and stalking. Each CoC can receive a DV bonus of up to 15% of its Preliminary Pro Rata Need (PPRN), \$149,015 in our case. Only one project proposal was submitted for the DV bonus. Thus, the committee approved the Walnut Avenue Family and Women's Center (WAFWC) new RRH project for the entire bonus amount of \$149,051.

#### Ranking and Tiering

This year, HUD required CoCs' to give each competitive CoC projects a unique numerical rank number and to place the competitive projects into two tiers. Tier 1 is equal to the Annual Renewal Demand (ARD) for CoC renewals, or \$3,576,166. Tier 2 is equal to the value of the CoC bonus, or \$242,268. The purpose of tiering is to allow CoCs to clearly indicate to HUD which projects are of highest priority for limited 2021 CoC funds. HUD will select Tier 1 projects before it selects Tier 2 projects. Tier 1 projects are almost certain to be funded (if they meet eligibility and threshold requirements), while Tier 2 projects are subject to national competition and are less likely to be funded. Projects can straddle the Tier 1 and Tier 2 line; HUD will fund the Tier 1 amount even if it does not fund the Tier 2 amount, if the project is still viable at the lower amount.

After very careful consideration, the committee placed two project proposals into Tier 2:

First, it placed the Housing Authority S+C new PSH project straddling the Tier 1 and Tier 2 line with \$207,375 in Tier 1 and \$91,960 in Tier 2. This decision increased the project's chances of an award, while minimizing the risk to existing projects ranked above it. Second, due to spending challenges it placed the Santa Cruz County Human Services Agency (HSA) Bonus PSH Project at the end of Tier 2.

Finally, the Tier 1 order is in the order of objective competitive score, except that the committee lowered the rank of three renewal projects that also had spending challenges.

These decisions in no way reflect badly on the projects that were ranked lower or placed into Tier 2, nor the submitting agencies. The projects were well designed to be effective, and each applicant agency plays a highly effective and critical role for the persons experiencing homelessness they serve. Rather, these were simply difficult choices among limited alternatives.

#### CoC Planning Grant

The committee approved the non-competitive CoC planning grant application for the maximum allowable amount - \$145,361. HUD did not require ranking or tiering of the project this year.

#### YHDP Renewal and Replacement Projects

The committee approved all the non-competitive YHDP renewal and replacement projects listed in the attachment. HUD did not require ranking or tiering of the YHDP projects this year. This year, HUD allowed YHDP renewal applicants to replace their projects with new project models that would better help to end youth homelessness. Three YHDP applicants chose to replace their projects as follows:

1. Bill Wilson Center is replacing its \$135,319 Santa Cruz County Shared Housing TH Project with a project that will remain a shared housing project serving the same number of youth, but will reduce the rental assistance funding, increase the services funding, take advantage of program flexibilities available this year to YDDP projects.
2. Families in Transition is replacing its \$258,971 Y.A.A.S. RRH 2.0 project with a Y.A.A.S. TH/RRH 3.0 project that will still serve the same number of youth, but will add TH leasing to the RRH rental assistance to improve the project's ability to quickly house youth.
3. The Santa Cruz County Housing Authority is replacing its \$192,752 New Roots PSH project with a New Roots RRH project to better meet youth needs and local YHDP strategic direction.

\*\*\*

Respectfully submitted by H4H Staff: *Tony Gardner*

Submission Date: *November 1, 2021*

Attachment: Project Approval, Ranking, Tier Listing

Santa Cruz County CoC 2021 Project Approvals, Ranking, and Tiers							
Rank	Tier	Score	Applicant Name	Project Name	New or Renewal	Project Component	Total HUD Budget
<b>Competitive CoC New and Renewal Projects - Approved, Ranked, and Placed into Tiers 1 or 2:</b>							
1	Tier 1	92	Encompass Community Services	Freedom Cottages	Renewal	PH	\$15,645
2	Tier 1	92	Walnut Avenue Family & Women's Center	Walnut Avenue Housing & Employment Program	Renewal	PH	\$108,871
3	Tier 1	84.5	Housing Matters	801 River Street	New - Self-reallocation	PH	\$154,343
4	Tier 1	82	County of Santa Cruz	Coordinated Entry Expansion	Renewal	SSO	\$228,362
5	Tier 1	82	Santa Cruz County HSD	County of Santa Cruz Homeless Management Information System	Renewal	HMIS	\$91,699
6	Tier 1	81	Families In Transition of Santa Cruz County, Inc.	First Step-Scattered Site Housing for Families with Children	Renewal	PH	\$547,580
7	Tier 1	85	County of Santa Cruz Health Services Agency	MATCH	Renewal	PH	\$990,484
8	Tier 1	89	Encompass Community Services	Housing for Health 3	Renewal	PH	\$90,429
9	Tier 1	84.5	Housing Authority of the County of Santa Cruz	Shelter+Care Consolidate	Renewal	PH	\$1,141,378
10	Straddles Tiers Tier 1: \$207,375 Tier 2: \$91,960	97	Housing Authority of the County of Santa Cruz	Shelter+Care Expansion	New - CoC Bonus + Reallocation	PH	\$299,335
11	Tier 2	86	County of Santa Cruz Health Services Agency	Bonus Permanent Supportive Housing Program	Renewal	PH	\$150,308
12	DV Bonus	93.5	Walnut Avenue Family & Women's Center	Walnut Avenue DV Bonus	New - DV Bonus	PH	\$149,015
<b>Non-Competitive YHDP Renewal and Replacement Projects - Approved (no need to rank or tier):</b>							
			Bill Wilson Center	Santa Cruz County Shared Housing	YHDP Replacement	TH	\$135,319
			Community Action Board of Santa Cruz County, Inc.	YHDP - Youth Homeless Response Team (YHRT)	Renewal	PH	\$99,175
			County of Santa Cruz	Youth CES	Renewal	SSO	\$60,000
			Encompass Community Services	Drop-In Center	Renewal	PH	\$296,903
			Families In Transition of Santa Cruz County, Inc.	Y.A.A.S. (Young Adults Achieving Success)	YHDP Replacement	PH	\$258,971
			Housing Authority of the County of Santa Cruz	YHDP New Roots RRH	YHDP Replacement	PH	\$192,753
			Housing Matters	Youth Rapid Rehousing	Renewal	PH	\$226,067
<b>Non-Competitive CoC Planning Grant Project - Approved (no need to rank or tier):</b>							
			County of Santa Cruz	CoC Planning Grant	New		\$145,361
Total Funding Requested:							\$5,381,998
<b>Competitive CoC New Project - Declined as it did not meet threshold</b>							
			Community Bridges	Homeless Prevention Program	New - CoC Bonus	SSO	\$158,976



## CoC Applicant Appeals Policy

Homeless Action Partnership (HAP) Review and Ranking Committee reviews and selects local project proposals for submission to HUD through the Continuum of Care (CoC) Program. CoC applicants with projects not selected for funding or laced into Tier 2 may appeal the Review and Ranking Committee decision using the appeals process set forth below. Decisions of the Appeals Committee are final.

### 1. Appeals Committee

Upon receipt of any appeals, an Appeals Committee of at least three members will be formed and composed of representatives the HAP Board and Housing for Health (H4H) lead agency staff. Appeals Committee members must not have been members of the Review and Ranking Committee, an must be non-conflicted, meaning that they are not employees or Board members of, and do not otherwise have a business or personal conflict of interest with, CoC applicant organizations.

### 2. Who may appeal

Only CoC applicants with projects not approved for CoC funding, or placed into Tier 2, may appeal.

### 3. What may be appealed

Appeals may be made only on the following bases:

- Inaccuracy in information provided to the Review and Ranking Committee (by entities other than the applicant) resulting in the project not being approved, or being placed into Tier 2
- Failure to follow the review and rank process resulting in the project not being selected, or being placed into Tier 2
- A conflict of interest resulting in the project not being selected, or being placed into Tier 2

Appeals based on policy considerations, funding priorities, or other subjective criteria are not eligible.

### 4. Appeals process

- Applicants seeking to appeal must meet the deadline for submitting a written appeal listed in the CoC Public Solicitation of Applications, Project Selection Timeline, or the appeal is void.
- The written appeal must be submitted via e-mail only by the deadline to: [housingforhealth@santacruzcounty.us](mailto:housingforhealth@santacruzcounty.us) **and** [Tonygardnerconsulting@yahoo.com](mailto:Tonygardnerconsulting@yahoo.com). DO NOT submit written appeals by postal mail, express mail, fax, or hand delivery. The appeal must include:
  - The basis or bases for the appeal.
  - A brief statement or explanation of the facts, evidence, and reasons for the appeal.
  - The signature of the applicant's authorized representative.
- Upon the timely receipt of the appeal, H4H staff will set a date and time for the appeals meeting, which will be conducted via virtually. During the meeting:
  - H4H staff will explain the facts of the appeal and answer any procedural questions.
  - The appealing applicant may then join the virtual meeting and will be allotted a brief time to explain their appeal. The Appeals Committee members may then ask any questions of the appealing applicant. The appealing applicant will then leave the virtual meeting.
  - The Appeals Committee will then conduct a discussion of the appeal and then vote.
  - The Appeals Committee may consider the effect of its decision on other CoC project applicants and may include those project applicants in the appeals discussion.
- The Appeals Committee will issue a written decision to the appealing applicant by the deadline for such written decision listed in the CoC Public Solicitation of Applications, Project Selection Timeline. The decision of the Appeals Committee is final.

**Public Posting Projects  
Accepted**

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## Bill Wilson Center: Notification of 2021 CoC/YHDP Project Priority Listing

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From: tony gardner (tonygardnerconsulting@yahoo.com)

To: pfurlong@bwcmail.org; sharlan@bwcmail.org

Cc: robert.ratner@santacruzcounty.us; sheryl.norteye@santacruzcounty.us

Date: Monday, November 1, 2021, 7:04 PM PDT

---

Dear Pilar and Sparky,

Attached please find your CoC project notification letter, Review and Ranking Committee minutes, and approved 2021 CoC Project Listing.

Best wishes,

Tony Gardner  
Consultant, Santa Cruz County Continuum of Care

*Tony Gardner Consulting*

415.458.2460 land

415.717.9336 mobile tonygardnerconsulting@yahoo.com



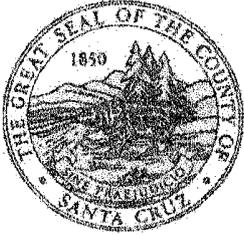
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Bill Wilson Center - 2021 HUD NOFO - Notification - 11-1-2021.pdf  
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# County of Santa Cruz

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## HUMAN SERVICES DEPARTMENT

Housing for Health Division

Robert Ratner, Director

1000 Emeline Avenue Santa Cruz, CA 95060

(831) 454-4130 FAX: (831) 454-4642

November 1, 2021

Re: BWC – Notification of 2021 CoC Project Priority Listing

Dear Bill Wilson Center:

Thank you for participating in the 2021 Santa Cruz County Continuum of Care (CoC) local program competition. We appreciate the time you and your staff devoted to preparing and submitting your funding application.

Attached please find the Review and Ranking Committee minutes and approved 2021 CoC Priority Listing. As noted in the minutes, the committee approved your non-competitive Youth Homelessness Demonstration Program (YHDP) Santa Cruz County Shared Housing replacement project.

Please let us know if you have any questions.

Again, thank you very much for your participation in the 2021 CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

**Robert Ratner**  
Housing for Health Director

Cc: Tony Gardner

## Community Action Board: Notification of 2021 CoC/YHDP Project Priority Listing

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From: tony gardner (tonygardnerconsulting@yahoo.com)  
To: helen@cabinc.org; pazp@cabinc.org  
Cc: robert.ratner@santacruzcounty.us; sheryl.norteye@santacruzcounty.us  
Date: Monday, November 1, 2021, 7:04 PM PDT

---

Dear Helen and Paz,

Attached please find your CoC project notification letter, Review and Ranking Committee minutes, and approved 2021 CoC Project Listing.

Best wishes,

Tony Gardner  
Consultant, Santa Cruz County Continuum of Care

### *Tony Gardner Consulting*

415.458.2460 land

415.717.9336 mobile tonygardnerconsulting@yahoo.com



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# County of Santa Cruz

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## HUMAN SERVICES DEPARTMENT

Housing for Health Division

Robert Ratner, Director

1000 Emeline Avenue Santa Cruz, CA 95060

(831) 454-4130 FAX: (831) 454-4642

November 1, 2021

Re: CAB – Notification of 2021 CoC Project Priority Listing

Dear Community Action Board:

Thank you for participating in the 2021 Santa Cruz County Continuum of Care (CoC) local program competition. We appreciate the time you and your staff devoted to preparing and submitting your funding application.

Attached please find the Review and Ranking Committee minutes and approved 2021 CoC Priority Listing. As noted in the minutes, the committee approved your non-competitive Youth Homelessness Demonstration Program (YHDP) Youth Homelessness Response Team renewal project.

Please let us know if you have any questions.

Again, thank you very much for your participation in the 2021 CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner  
Housing for Health Director

Cc: Tony Gardner

---

## Encompass Community Services: Notification of 2021 CoC/YHDP Project Priority Listing

---

From: tony gardner (tonygardnerconsulting@yahoo.com)

To: kristie.brenda@encompasscs.org; jace.freyman@encompasscs.org; madeira.alba@encompasscs.org

Cc: robert.ratner@santacruzcounty.us; sheryl.norteye@santacruzcounty.us

Date: Monday, November 1, 2021, 7:05 PM PDT

---

Dear Kristie, Jace, and Madeira,

Attached please find your CoC project notification letter, Review and Ranking Committee minutes, and approved 2021 CoC Project Listing.

Best wishes,

Tony Gardner  
Consultant, Santa Cruz County Continuum of Care

*Tony Gardner Consulting*

415.458.2460 land

415.717.9336 mobile tonygardnerconsulting@yahoo.com



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# County of Santa Cruz

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## HUMAN SERVICES DEPARTMENT

Housing for Health Division

Robert Ratner, Director

1000 Emeline Avenue Santa Cruz, CA 95060

(831) 454-4130 FAX: (831) 454-4642

November 1, 2021

Re: ECS – Notification of 2021 CoC Project Priority Listing

Dear Encompass Community Services:

Thank you for participating in the 2021 Santa Cruz County Continuum of Care (CoC) local program competition. We appreciate the time you and your staff devoted to preparing and submitting your funding application.

Attached please find the Review and Ranking Committee minutes and approved 2021 CoC Priority Listing. As noted in the minutes, the committee placed your Freedom Cottages and Housing for Health 3 PSH renewal projects in Tier 1, and approved your non-competitive Youth Homelessness Demonstration Program (YHDP) Drop-In Center renewal project.

Please let us know if you have any questions.

Again, thank you very much for your participation in the 2021 CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner  
Housing for Health Director

Cc: Tony Gardner

Attachments

## Families in Transition: Notification of 2021 CoC/YHDP Project Priority Listing

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From: tony gardner (tonygardnerconsulting@yahoo.com)

To: melisa@fitsantacruz.org; karina@fitsantacruz.org

Cc: robert.ratner@santacruzcounty.us; sheryl.norteye@santacruzcounty.us

Date: Monday, November 1, 2021, 7:05 PM PDT

---

Dear Melisa and Karina,

Attached please find your CoC project notification letter, Review and Ranking Committee minutes, and approved 2021 CoC Project Listing.

Best wishes,

Tony Gardner  
Consultant, Santa Cruz County Continuum of Care

### *Tony Gardner Consulting*

415.458.2460 land

415.717.9336 mobile tonygardnerconsulting@yahoo.com



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# County of Santa Cruz

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## HUMAN SERVICES DEPARTMENT

Housing for Health Division

Robert Ratner, Director

1000 Emeline Avenue Santa Cruz, CA 95060

(831) 454-4130 FAX: (831) 454-4642

November 1, 2021

Re: FIT – Notification of 2021 CoC Project Priority Listing

Dear Families in Transition:

Thank you for participating in the 2021 Santa Cruz County Continuum of Care (CoC) local program competition. We appreciate the time you and your staff devoted to preparing and submitting your funding application.

Attached please find the Review and Ranking Committee minutes and approved 2021 CoC Priority Listing. As noted in the minutes, the committee placed your First Step Scattered Site RRH renewal project in Tier 1, and approved your non-competitive Youth Homelessness Demonstration Program (YHDP) Y.A.A.S. TH-RRH 3.0 replacement project.

Please let us know if you have any questions.

Again, thank you very much for your participation in the 2021 CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner  
Housing for Health Director

Cc: Tony Gardner

Attachments

# Santa Cruz County Housing Authority: Notification of 2021 CoC/YHDP Project Priority Listing

---

From: tony gardner (tonygardnerconsulting@yahoo.com)  
To: jennyp@hacosantacruz.org; elizabethh@hacosantacruz.org  
Cc: robert.ratner@santacruzcounty.us; sheryl.norteye@santacruzcounty.us  
Date: Monday, November 1, 2021, 7:06 PM PDT

---

Dear Jenny and Liz,

Attached please find your CoC project notification letter, Review and Ranking Committee minutes, approved 2021 CoC Project Listing, and CoC Appeals Policy.

Best wishes,

Tony Gardner  
Consultant, Santa Cruz County Continuum of Care

*Tony Gardner Consulting*

415.458.2460 land

415.717.9336 mobile tonygardnerconsulting@yahoo.com



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# County of Santa Cruz

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## HUMAN SERVICES DEPARTMENT

Housing for Health Division

Robert Ratner, Director

1000 Emeline Avenue Santa Cruz, CA 95060

(831) 454-4130 FAX: (831) 454-4642

November 1, 2021

Re: Santa Cruz County Housing Authority – Notification of 2021 CoC Project Priority Listing

Dear Housing Authority:

Thank you for participating in the 2021 Santa Cruz County Continuum of Care (CoC) local program competition. We appreciate the time you and your staff devoted to preparing and submitting your funding application.

Attached please find the Review and Ranking Committee minutes and approved 2021 CoC Priority Listing. As noted in the minutes, the committee placed your S+C PSH renewal project in Tier 1, placed your S+C Expansion PSH project straddling Tiers 1 and 2, and approved your non-competitive Youth Homelessness Demonstration Program (YHDP) New Roots RRH replacement project. Because of the Tier 2 ranking, you are eligible to appeal.

The appeals process and grounds for appeal are included in the CoC Appeals Policy attached.

- **Please note that if you intend to appeal you must submit your appeal to [housingforhealth@santacruzcounty.us](mailto:housingforhealth@santacruzcounty.us) and [Tonygardnerconsulting@yahoo.com](mailto:Tonygardnerconsulting@yahoo.com) no later than NOON on Wednesday, November 6, 2021.**
- **All appeals will be considered by the Appeals Panel by Friday, November 8 [TBD].**

Please let us know if you have any questions.

Again, thank you very much for your participation in the 2021 CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner  
Housing for Health Director

Cc: Tony Gardner

## Housing Matters: Notification of 2021 CoC/YHDP Project Priority Listing

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From: tony gardner (tonygardnerconsulting@yahoo.com)  
To: tstag@housingmatterssc.org; pkramer@housingmatterssc.org  
Cc: robert.ratner@santacruzcounty.us; sheryl.norteye@santacruzcounty.us  
Date: Monday, November 1, 2021, 7:06 PM PDT

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Dear Tom and Phil,

Attached please find your CoC project notification letter, Review and Ranking Committee minutes, and approved 2021 CoC Project Listing.

Best wishes,

Tony Gardner  
Consultant, Santa Cruz County Continuum of Care

### *Tony Gardner Consulting*

415.458.2460 land

415.717.9336 mobile tonygardnerconsulting@yahoo.com



Final Minutes 10-29-21 HAP CoC Review and Ranking.pdf

148.8kB



Final 2021 Santa Cruz CoC Project Rank Order Listing Santa Cruz CoC Ranking.pdf

48.8kB



Housing Matters - 2021 HUD NOFO - Notification - 11-1-2021.pdf

212.5kB

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# County of Santa Cruz

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## HUMAN SERVICES DEPARTMENT

Housing for Health Division

Robert Ratner, Director

1000 Emeline Avenue Santa Cruz, CA 95060

(831) 454-4130 FAX: (831) 454-4642

November 1, 2021

Re: Housing Matters– Notification of 2021 CoC Project Priority Listing

Dear Housing Matters:

Thank you for participating in the 2021 Santa Cruz County Continuum of Care (CoC) local program competition. We appreciate the time you and your staff devoted to preparing and submitting your funding application.

Attached please find the Review and Ranking Committee minutes and approved 2021 CoC Priority Listing. As noted in the minutes, the committee accepted your request for self-reallocation of Page Smith TH-RRH funds, placed your 801 River Street new PSH project in Tier 1, and approved your non-competitive Youth Homelessness Demonstration Program (YHDP) Youth Rapid Rehousing renewal project.

Please let us know if you have any questions.

Again, thank you very much for your participation in the 2021 CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner  
Housing for Health Director

Cc: Tony Gardner

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## Walnut Avenue Family & Women's Center: Notification of 2021 CoC Project Priority Listings

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From: tony gardner (tonygardnerconsulting@yahoo.com)

To: lserna@wafwc.org; jmacecevic@wafwc.org; lboule@wafwc.org; aponce@wafwc.org

Cc: robert.ratner@santacruzcounty.us; sheryl.norteye@santacruzcounty.us

Date: Monday, November 1, 2021, 7:07 PM PDT

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Dear Lupe, Julie, Lynn, and Ashley,

Attached please find your CoC project notification letter, Review and Ranking Committee minutes, and approved 2021 CoC Project Listing.

Best wishes,

Tony Gardner  
Consultant, Santa Cruz County Continuum of Care

*Tony Gardner Consulting*

415.458.2460 land

415.717.9336 mobile tonygardnerconsulting@yahoo.com



Final Minutes 10-29-21 HAP CoC Review and Ranking.pdf

148.8kB



Final 2021 Santa Cruz CoC Project Rank Order Listing Santa Cruz CoC Ranking.pdf

48.8kB



Walnut Avenue - 2021 HUD NOFO - Notification - 11-1-2021.pdf

210.8kB

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# County of Santa Cruz

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## HUMAN SERVICES DEPARTMENT

Housing for Health Division

Robert Ratner, Director

1000 Emeline Avenue Santa Cruz, CA 95060

(831) 454-4130 FAX: (831) 454-4642

November 1, 2021

Re: WAFWC – Notification of 2021 CoC Project Priority Listing

Dear Walnut Avenue Family and Women's Center:

Thank you for participating in the 2021 Santa Cruz County Continuum of Care (CoC) local program competition. We appreciate the time you and your staff devoted to preparing and submitting your funding application.

Attached please find the Review and Ranking Committee minutes and approved 2021 CoC Priority Listing. As noted in the minutes, the committee placed your Walnut Avenue Housing and Employment Program renewal project in Tier 1, and accepted your Walnut Avenue DV Bonus new project for this year's Domestic Violence Bonus.

Please let us know if you have any questions.

Again, thank you very much for your participation in the 2021 CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner  
Housing for Health Director

Cc: Tony Gardner

## County Health Services Agency: Notification of 2021 CoC Project Priority Listing

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From: tony gardner (tonygardnerconsulting@yahoo.com)

To: kristina.riera@santacruzcounty.us; joey.crottogini@santacruzcounty.us; david.davis@santacruzcounty.us

Cc: robert.ratner@santacruzcounty.us; sheryl.norteye@santacruzcounty.us

Date: Monday, November 1, 2021, 7:09 PM PDT

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Dear Kristina, Joey, and David,

Attached please find your CoC project notification letter, Review and Ranking Committee minutes, approved 2021 CoC Project Listing, and CoC Appeals Policy.

Best wishes,

Tony Gardner  
Consultant, Santa Cruz County Continuum of Care

*Tony Gardner Consulting*

415.458.2460 land

415.717.9336 mobile tonygardnerconsulting@yahoo.com



Final Minutes 10-29-21 HAP CoC Review and Ranking.pdf  
148.8kB



Final 2021 Santa Cruz CoC Project Rank Order Listing Santa Cruz CoC Ranking.pdf  
48.8kB



CoC Appeals Policy.pdf  
117kB



Health Services Agency - 2021 HUD NOFO - Notification - 11-1-2021.pdf  
271.4kB



# County of Santa Cruz

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## HUMAN SERVICES DEPARTMENT

Housing for Health Division

Robert Ratner, Director

1000 Emeline Avenue Santa Cruz, CA 95060

(831) 454-4130 FAX: (831) 454-4642

November 1, 2021

Re: Santa Cruz County HSA – Notification of 2021 CoC Project Priority Listing

Dear Health Services Agency:

Thank you for participating in the 2021 Santa Cruz County Continuum of Care (CoC) local program competition. We appreciate the time you and your staff devoted to preparing and submitting your funding application.

Attached please find the Review and Ranking Committee minutes and approved 2021 CoC Priority Listing. As noted in the minutes, the committee placed your MATCH PSH renewal project in Tier 1, and your placed your Bonus PSH renewal project in Tier 2. Because of the Tier 2 ranking, you are eligible to appeal.

The appeals process and grounds for appeal are included in the CoC Appeals Policy attached.

- **Please note that if you intend to appeal you must submit your appeal to [housingforhealth@santacruzcounty.us](mailto:housingforhealth@santacruzcounty.us) and [Tonygardnerconsulting@yahoo.com](mailto:Tonygardnerconsulting@yahoo.com) no later than NOON on Wednesday, November 6, 2021.**
- **All appeals will be considered by the Appeals Panel by Friday, November 8 [TBD].**

Please let us know if you have any questions.

Again, thank you very much for your participation in the 2021 CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner  
Housing for Health Director

Cc: Tony Gardner

## County Human Services Department: Notification of 2021 CoC/YHDP Project Priority Listing

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From: tony gardner (tonygardnerconsulting@yahoo.com)

To: robert.ratner@santacruzcounty.us; sheryl.norteye@santacruzcounty.us; jessica.scheiner@santacruzcounty.us

Date: Monday, November 1, 2021, 7:19 PM PDT

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Dear Robert, Sheryl, and Jessica,

Attached please find your CoC project notification letter, Review and Ranking Committee minutes, and approved 2021 CoC Project Listing.

Best wishes,

Tony Gardner  
Consultant, Santa Cruz County Continuum of Care

*Tony Gardner Consulting*

415.458.2460 land

415.717.9336 mobile tonygardnerconsulting@yahoo.com



Final Minutes 10-29-21 HAP CoC Review and Ranking.pdf

148.8kB



Final 2021 Santa Cruz CoC Project Rank Order Listing Santa Cruz CoC Ranking.pdf

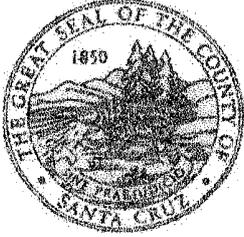
48.8kB



HSD 2021 HUD NOFO Notification - 11-1-2021.pdf

106.9kB

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# County of Santa Cruz

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## HUMAN SERVICES DEPARTMENT

Housing for Health Division

Robert Ratner, Director

1000 Emeline Avenue Santa Cruz, CA 95060

(831) 454-4130 FAX: (831) 454-4642

Re: Santa Cruz County HSD – Notification of 2021 CoC Project Priority Listing

Dear Santa Cruz County Human Services Department:

Thank you for participating in the 2021 Santa Cruz County Continuum of Care (CoC) local program competition. We appreciate the time you and your staff devoted to preparing and submitting your funding application.

Attached please find the Review and Ranking Committee minutes and approved 2021 CoC Priority Listing. As noted in the minutes, the committee placed your Homeless Management Information System (HMIS) and Coordinated Entry Expansion renewal projects in Tier 1, accepted your request to reallocate the Brommer Street PSH project funding, and approved your non-competitive CoC Planning project.

Please let us know if you have any questions.

Again, thank you very much for your participation in the 2021 CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner  
Housing for Health Director

Cc: Tony Gardner

Attachments



**MEETING MINUTES**  
**Santa Cruz County Homeless Action Partnership (HAP)**  
**Review and Ranking Committee (Committee) Meeting**

**Virtual Meeting via Teams**  
**Friday, October 29, 2021, 1:00 p.m. – 3:00 p.m.**

Committee Members Present: Kelly Conway, Jamie Goldstein, Judy Hutchinson, Larry Imwalle, Tamara Vides

Committee Members Absent: None

Housing for Health (H4H) Staff/Consultant Present: Robert Ratner, Tony Gardner, Sheryl Norteye

Others Present: Paz Padilla, Linda Lemaster

**1. Overview of the Committee Role & Process**

The committee heard and discussed a briefing regarding U.S. Department of Housing and Urban Development (HUD) Continuum of Care (CoC) Program requirements and policies, and the local CoC process and the committee's role in approving, rating, ranking, and tiering new and renewal CoC project proposals; approving renewal and replacement Youth Homelessness Demonstration (YHDP) project proposals; and approving the CoC planning grant project proposal. The group also discussed local challenges and priorities, as well as CoC strategic considerations.

Committee members had been previously asked to submit certifications relating to conflict of interest. There were no conflicts disclosed. Although not a committee member, Robert Ratner nonetheless disclosed potential conflicts relating managing County Human Services Department (HSD) renewal projects and partnering with County Health Services Agency on their grants. As staff, he did not vote or take part in the project decision process.

**2. Review and Evaluation of Projects**

The committee then reviewed and discussed project aggregate scores (which were based on the previously announced objective rating criteria), and a summary of comments made by committee members, who had previously prepared a brief written evaluation of each project. Comments included evaluation of the strengths and weaknesses of each project, suggestions for enhancements to projects, and recommendations relating to approval, ranking, tiering, spending issues, and budget amounts.

**3. Project Approval, Ranking, and Tiering Decisions**

The committee then engaged in a discussion and decision process including consideration of:

- a. Project aggregate objective scores that were based on previously publicly announced objective scoring criteria that included HMIS-generated performance measures.
- b. Committee members written evaluations of each project proposal.
- c. Consideration of ranking scenarios in the context HUD priorities, local strategic plan priorities, performance metrics, tiering considerations, funding factors, etc.

After careful consideration, the committee unanimously approved the project proposal selection, ranking, and tiering decisions reflected in the attached project list.

The following provides further details regarding the decisions made:

#### CoC Bonus Project

This year, Santa Cruz County agencies were eligible to competitively apply for \$242,268 as a bonus for new permanent supportive housing (PSH) projects, new joint transitional housing (TH) and rapid rehousing (RRH) projects, new RRH only projects, a new coordinated entry system (CES) project, or a new homeless management information system (HMIS) project. Two proposals for the CoC bonus funds were submitted: (1) the Housing Authority of the County of Santa Cruz Shelter Plus Care (S+C) Expansion new PSH project requesting \$299,335 in funding from the bonus and reallocation (see below), and (2) the Community Bridges Homeless Prevention Program new CES project requesting \$158,976. The committee approved the S+C Expansion PSH project for the full amount of the CoC bonus; the Homeless Prevention Program CES project did not meet CoC threshold requirements.

#### Reallocation

HUD rules allow CoC's to reallocate funding from one or more renewal projects to one or more new eligible projects when doing so would help to end homelessness by addressing key program type, priority, or performance issues. In addition, the HAP has a local voluntary reallocation policy to encourage reallocations by giving priority for reallocated funds to applicants that voluntarily request to reallocate their own TH or other projects that are no longer needed, no longer match the agency's mission, or are underperforming.

Under the above rules and policies, the County of Santa Cruz Human Services Department (HSD) voluntarily relinquished its \$57,067 Brommer Street PSH renewal grant and the committee reallocated these funds to the S+C Expansion PSH project, thereby increasing the project's funding above the CoC bonus amount to \$299,335. Also, the committee accepted Housing Matters' request to voluntarily reallocate its \$154,343 Page Smith TH/RRH renewal grant to the new 801 River Street PSH project.

#### DV Bonus

This year, HUD made available \$102 million nationally for a competitive Domestic Violence (DV) Bonus, to provide housing and services 100% for survivors of domestic violence, dating violence, and stalking. Each CoC can receive a DV bonus of up to 15% of its Preliminary Pro Rata Need (PPRN), \$149,015 in our case. Only one project proposal was submitted for the DV bonus. Thus, the committee approved the Walnut Avenue Family and Women's Center (WAFWC) new RRH project for the entire bonus amount of \$149,051.

#### Ranking and Tiering

This year, HUD required CoCs' to give each competitive CoC project a unique numerical rank number and to place the competitive projects into two tiers. Tier 1 is equal to the Annual Renewal Demand (ARD) for CoC renewals, or \$3,576,166. Tier 2 is equal to the value of the CoC bonus, or \$242,268. The purpose of tiering is to allow CoCs to clearly indicate to HUD which projects are of highest priority for limited 2021 CoC funds. HUD will select Tier 1 projects before it selects Tier 2 projects. Tier 1 projects are almost certain to be funded (if they meet eligibility and threshold requirements), while Tier 2 projects are subject to national competition and are less likely to be funded. Projects can straddle the Tier 1 and Tier 2 line; HUD will fund the Tier 1 amount even if it does not fund the Tier 2 amount, if the project is still viable at the lower amount.

After very careful consideration, the committee placed two project proposals into Tier 2:

First, it placed the Housing Authority S+C new PSH project straddling the Tier 1 and Tier 2 line with \$207,375 in Tier 1 and \$91,960 in Tier 2. This decision increased the project's chances of an award, while minimizing the risk to existing projects ranked above it. Second, due to spending challenges it placed the Santa Cruz County Human Services Agency (HSA) Bonus PSH Project at the end of Tier 2.

Finally, the Tier 1 order is in the order of objective competitive score, except that the committee lowered the rank of three renewal projects that also had spending challenges.

These decisions in no way reflect badly on the projects that were ranked lower or placed into Tier 2, nor the submitting agencies. The projects were well designed to be effective, and each applicant agency plays a highly effective and critical role for the persons experiencing homelessness they serve. Rather, these were simply difficult choices among limited alternatives.

#### CoC Planning Grant

The committee approved the non-competitive CoC planning grant application for the maximum allowable amount - \$145,361. HUD did not require ranking or tiering of the project this year.

#### YHDP Renewal and Replacement Projects

The committee approved all the non-competitive YHDP renewal and replacement projects listed in the attachment. HUD did not require ranking or tiering of the YHDP projects this year. This year, HUD allowed YHDP renewal applicants to replace their projects with new project models that would better help to end youth homelessness. Three YHDP applicants chose to replace their projects as follows:

1. Bill Wilson Center is replacing its \$135,319 Santa Cruz County Shared Housing TH Project with a project that will remain a shared housing project serving the same number of youth, but will reduce the rental assistance funding, increase the services funding, take advantage of program flexibilities available this year to YDDP projects.
2. Families in Transition is replacing its \$258,971 Y.A.A.S. RRH 2.0 project with a Y.A.A.S. TH/RRH 3.0 project that will still serve the same number of youth, but will add TH leasing to the RRH rental assistance to improve the project's ability to quickly house youth.
3. The Santa Cruz County Housing Authority is replacing its \$192,752 New Roots PSH project with a New Roots RRH project to better meet youth needs and local YHDP strategic direction.

\*\*\*

Respectfully submitted by H4H Staff: *Tony Gardner*

Submission Date: *November 1, 2021*

Attachment: Project Approval, Ranking, Tier Listing

Santa Cruz County CoC 2021 Project Approvals, Ranking, and Tiers							
Rank	Tier	Score	Applicant Name	Project Name	New or Renewal	Project Component	Total HUD Budget
<b>Competitive CoC New and Renewal Projects - Approved, Ranked, and Placed Into Tiers 1 or 2:</b>							
1	Tier 1	92	Encompass Community Services	Freedom Cottages	Renewal	PH	\$15,645
2	Tier 1	92	Walnut Avenue Family & Women's Center	Walnut Avenue Housing & Employment Program	Renewal	PH	\$108,871
3	Tier 1	84.5	Housing Matters	801 River Street	New - Self-reallocation	PH	\$154,343
4	Tier 1	82	County of Santa Cruz	Coordinated Entry Expansion	Renewal	SSO	\$228,362
5	Tier 1	82	Santa Cruz County HSD	County of Santa Cruz Homeless Management Information System	Renewal	HMIS	\$91,699
6	Tier 1	81	Families In Transition of Santa Cruz County, Inc.	First Step-Scattered Site Housing for Families with Children	Renewal	PH	\$547,580
7	Tier 1	85	County of Santa Cruz Health Services Agency	MATCH	Renewal	PH	\$990,484
8	Tier 1	89	Encompass Community Services	Housing for Health 3	Renewal	PH	\$90,429
9	Tier 1	84.5	Housing Authority of the County of Santa Cruz	Shelter+Care Consolidate	Renewal	PH	\$1,141,378
10	Straddles Tiers Tier 1: \$207,375 Tier 2: \$91,960	97	Housing Authority of the County of Santa Cruz	Shelter+Care Expansion	New - CoC Bonus + Reallocation	PH	\$299,335
11	Tier 2	86	County of Santa Cruz Health Services Agency	Bonus Permanent Supportive Housing Program	Renewal	PH	\$150,308
12	DV Bonus	93.5	Walnut Avenue Family & Women's Center	Walnut Avenue DV Bonus	New - DV Bonus	PH	\$149,015
<b>Non-Competitive YHDP Renewal and Replacement Projects - Approved (no need to rank or tier):</b>							
			Bill Wilson Center	Santa Cruz County Shared Housing	YHDP Replacement	TH	\$135,319
			Community Action Board of Santa Cruz County, Inc.	YHDP - Youth Homeless Response Team (YHRT)	Renewal	PH	\$99,175
			County of Santa Cruz	Youth CES	Renewal	SSO	\$60,000
			Encompass Community Services	Drop-In Center	Renewal	PH	\$296,903
			Families In Transition of Santa Cruz County, Inc.	Y.A.A.S. (Young Adults Achieving Success)	YHDP Replacement	PH	\$258,971
			Housing Authority of the County of Santa Cruz	YHDP New Roots RRH	YHDP Replacement	PH	\$192,753
			Housing Matters	Youth Rapid Rehousing	Renewal	PH	\$226,067
<b>Non-Competitive CoC Planning Grant Project - Approved (no need to rank or tier):</b>							
			County of Santa Cruz	CoC Planning Grant	New		\$145,361
						Total Funding Requested:	\$5,381,998
<b>Competitive CoC New Project - Declined as it did not meet threshold</b>							
			Community Bridges	Homeless Prevention Program	New - CoC Bonus	SSO	\$158,976



## CoC Applicant Appeals Policy

Homeless Action Partnership (HAP) Review and Ranking Committee reviews and selects local project proposals for submission to HUD through the Continuum of Care (CoC) Program. CoC applicants with projects not selected for funding or laced into Tier 2 may appeal the Review and Ranking Committee decision using the appeals process set forth below. Decisions of the Appeals Committee are final.

### 1. Appeals Committee

Upon receipt of any appeals, an Appeals Committee of at least three members will be formed and composed of representatives the HAP Board and Housing for Health (H4H) lead agency staff. Appeals Committee members must not have been members of the Review and Ranking Committee, an must be non-conflicted, meaning that they are not employees or Board members of, and do not otherwise have a business or personal conflict of interest with, CoC applicant organizations.

### 2. Who may appeal

Only CoC applicants with projects not approved for CoC funding, or placed into Tier 2, may appeal.

### 3. What may be appealed

Appeals may be made only on the following bases:

- Inaccuracy in information provided to the Review and Ranking Committee (by entities other than the applicant) resulting in the project not being approved, or being placed into Tier 2
- Failure to follow the review and rank process resulting in the project not being selected, or being placed into Tier 2
- A conflict of interest resulting in the project not being selected, or being placed into Tier 2

Appeals based on policy considerations, funding priorities, or other subjective criteria are not eligible.

### 4. Appeals process

- Applicants seeking to appeal must meet the deadline for submitting a written appeal listed in the CoC Public Solicitation of Applications, Project Selection Timeline, or the appeal is void.
- The written appeal must be submitted via e-mail only by the deadline to: [housingforhealth@santacruzcounty.us](mailto:housingforhealth@santacruzcounty.us) **and** [Tonygardnerconsulting@yahoo.com](mailto:Tonygardnerconsulting@yahoo.com). DO NOT submit written appeals by postal mail, express mail, fax, or hand delivery. The appeal must include:
  - The basis or bases for the appeal.
  - A brief statement or explanation of the facts, evidence, and reasons for the appeal.
  - The signature of the applicant's authorized representative.
- Upon the timely receipt of the appeal, H4H staff will set a date and time for the appeals meeting, which will be conducted via virtually. During the meeting:
  - H4H staff will explain the facts of the appeal and answer any procedural questions.
  - The appealing applicant may then join the virtual meeting and will be allotted a brief time to explain their appeal. The Appeals Committee members may then ask any questions of the appealing applicant. The appealing applicant will then leave the virtual meeting.
  - The Appeals Committee will then conduct a discussion of the appeal and then vote.
  - The Appeals Committee may consider the effect of its decision on other CoC project applicants and may include those project applicants in the appeals discussion.
- The Appeals Committee will issue a written decision to the appealing applicant by the deadline for such written decision listed in the CoC Public Solicitation of Applications, Project Selection Timeline. The decision of the Appeals Committee is final.

# **Housing Leveraging Commitment**

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County of Santa Cruz Health Services Agency

DOCUMENTATION OF MATCH

Jennifer Panetta  
Housing Authority of the County of Santa Cruz  
2160 41<sup>st</sup> Avenue  
Capitola, CA. 95010

To Whom it may concern:

The Housing Authority of the County of Santa Cruz commits to providing the following cash match for Shelter Plus Care Expansion Grant:

Name of organization providing the leveraged resource or cash match	Housing Authority of Santa Cruz County
Type of contribution	Cash – 4 Emergency Housing Vouchers
Value of the contribution	\$86,160
Name of project	Shelter Plus Care Expansion
Name of sponsor	Housing Authority of Santa Cruz County
Date the contribution will be available**	6-1-2022 thru 5-31-2023
Name of person authorized to commit these resources	Jennifer Panetta
Title of person authorized to commit these resources.	Executive Director of Housing Authority of the County of Santa Cruz
Signature of person authorized to commit these resources.	
Date	11-5-2021

# **Healthcare Formal Agreements**

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# County of Santa Cruz

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## HUMAN SERVICES DEPARTMENT

Housing for Health Division

Robert Ratner, Director

1000 Emeline Avenue Santa Cruz, CA 95060

(831) 454-4130 FAX: (831) 454-4642

November 5, 2021

Housing Authority of the County of Santa Cruz

2160 41<sup>st</sup> Avenue

Capitola, CA 95010-2040

Documentation of Match: County of Santa Cruz – CA-508 – Shelter Plus Care Expansion Project

Dear Housing Authority of the County of Santa Cruz:

The County of Santa Cruz Human Services Department – Housing for Health Division is pleased to support your HUD Continuum of Care (CoC) Shelter Plus Care expansion project application. Our Division is committed to working with you to ensure an appropriate number of referrals into the program, providing support to participants with their housing search, and ensuring participants receive the resources and supports needed to get and keep their permanent homes.

We will provide an in-kind match for the program valued at \$93,600/year. This total includes an estimate of the costs of housing navigation and tenancy sustaining services provided to participants in the program either directly by staff from our Division or via contracts managed by our team. These resources will be available as soon as the grant operating period for this proposed expansion begins.

I hope your application for additional rental assistance funding is accepted and that we can begin work on this project together soon. The additional housing resources will fill a critical need for additional scattered-site permanent supportive housing units in our community.

Sincerely,

Robert Ratner, MPH, MD

Housing for Health Division Director

(831) 454-4952; [robert.ratner@santacruzcounty.us](mailto:robert.ratner@santacruzcounty.us)

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**Memorandum of Understanding  
Between  
The Housing Authority of the County of Santa Cruz (HA) and the  
County of Santa Cruz Health Services Agency (HSA)  
for Compliance with Federal Funding Requirements  
from the U.S. Department of Housing and Urban Development for the  
Shelter Plus Care / Continuum of Care Program (CoC Program)**

This Memorandum of Understanding (MOU) is an agreement between the Housing Authority of the County of Santa Cruz (HA) and the County of Santa Cruz Health Services Agency (HSA) for compliance with federal grant requirements from the U.S. Department of Housing and Urban Development (HUD) for operation of the Shelter Plus Care/ Continuum of Care Program (CoC Program). Federal grants for the CoC Program are approved locally by the Santa Cruz County Homeless Action Partnership (HAP) that is coordinated by the County of Santa Cruz Planning Department. Per approval from HAP, HA receives HUD funding (CoC Grants) to provide rental assistance to disabled chronically homeless individuals (CHI). HA's role is to administer the federal housing assistance funds to disabled CHI program participants. HSA's role is to screen and refer program participants to HA. CoC Grants require a minimum 25% match as cash or in-kind services or resources. All grant funds must be matched with an amount no less than 25% of the awarded grant amount, excluding the amount awarded to the leasing budget line item. For the local CoC Program grants from HUD, this match is provided as HSA's case management and supportive services for program participants. This MOU describes the roles and responsibilities of HA and HSA for compliance with the federal CoC Program's funding and grant reporting requirements.

**I. Background**

Since 2003, HA has partnered with HSA to administer the CoC Program, which is funded by federal CoC Grants from HUD (Exhibit A), per the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act). Two MOUs between HA and HSA in 2005 and two in 2008 predate this new MOU renewal. The CoC Program provides rental assistance and supportive services to CHI that have a disability within the following categories: diagnosable Substance Abuse (SA); Severe Mental Illness (SMI); Developmentally Disabled (DD); Post-Traumatic Stress Disorder (PTSD); Cognitive impairments resulting from a brain injury; or Chronic physical illness or disability.

**II. Attached Exhibits**

This MOU includes the following attached Exhibits:

- Exhibit A: CoC Grants<sup>\*1</sup>: List of CoC Program grants awarded from HUD to HA (1 page).  
*\*1 Note: These grants are subject to possible future consolidation or other revision.*
- Exhibit B: Rent-up Packet<sup>\*2</sup>: "Shelter Plus Care HA Rent-up Packet" (37 pages).  
*\*2 Note: This packet and its forms are subject to possible future revisions based on conversion to a web-based format, or other simplifications.*

Exhibit C: CoC Program Governance Charter: Governance Charter of the Santa Cruz County Homeless Action Partnership (HAP) (4 pages).

### **III. Requirements**

Requirements of the federal CoC Program regulations, the HEARTH Act, and the contracts for the HUD CoC Grants (collectively, Federal Regulations) apply to this MOU and are incorporated herein by reference, including non-discrimination, affirmative fair housing, displacement, and other federal requirements. The respective obligations of each party under this MOU will be interpreted consistently with the obligations and requirements of the Federal Regulations. In the event of conflict between this MOU and the Federal Regulations, this MOU controls solely in determining whether the obligation is one to be carried out by HSA or HA, and the Federal Regulations will control in determining whether the obligation is being performed consistent with this MOU and applicable federal requirements.

### **IV. Description of Services to be Provided**

HA will perform the following activities:

- A. Complete initial and annual income certifications for CoC Program participant referrals from HSA for qualification of housing and continued eligibility (Form- Personal and Financial Statement: Exhibit B).
- B. Conduct initial and annual Housing Quality Standards inspections in accordance with applicable regulations.
- C. Apply funding from HUD CoC Grants to dispatch rental assistance payments to landlords.
- D. Monitor performance of HUD CoC Grants and submit annual grant reports to HUD.
- E. Attend CoC Program meetings.

HSA will perform the following activities:

- A. Conduct outreach to persons eligible for participation in the CoC Program.
- B. When the county-wide Coordinated Entry System becomes implemented by the HAP, HSA will fulfill the requirements in data entry, eligibility, selection and referral of participants.
- C. Provide initial eligibility screening and, with participant's written authorization (Form- Release of Information to Housing Authority: Exhibit B), refer participants to HA for screening by submitting a complete referral/application packet (Rent-up Packet: Exhibit B) and all required documentation.
- D. Complete a Homeless Management Information System (HMIS) Intake Form (Form - Standardized Intake for HMIS: Exhibit B) and observe required confidentiality requirements.
- E. Enter participant data into HMIS database. No patient health information pursuant to the federal Health Insurance Portability and Accountability Act of 1996, 42 CFR Part 2 and 45 CFR Parts 160 and 164 (HIPAA) will be entered into HMIS database without a HIPAA-compliant authorization from the participant (Form- HMIS Release: Exhibit B).
- F. Select participants in accordance with written selection policies in Section V. below.

- G. Assist participants with applications and all relevant paperwork required for participation in the CoC Program.
- H. Gather documentation in the form required by HUD for each client's homelessness (Form - Verification of Homeless Status: Exhibit B) and disability status (Form - Verification of Disability: Exhibit B).
- I. Assist participants as needed in their housing search.
- J. Provide participants with supportive services, including case management and other services prescribed.
- K. Conduct ongoing, and at least annually, assessments of supportive services required by participants, and make adjustments as appropriate.
- L. Provide required data and documentation to HA for HUD grant reporting and monitoring. No patient health information pursuant to HIPAA will be provided to HUD without a HIPAA-compliant authorization from the participant (Form- HMIS Release: Exhibit B).
- M. Maintain client data regarding service plans and services provided and submit annually to HA.
- N. Attend CoC Program meetings.
- O. Utilize a centralized or coordinated assessment or entry system once established by HAP.

HSA will employ personnel to perform the above activities according to the following titles and estimated hourly rates, to be verified annually to fulfill HA's ongoing HUD reporting responsibilities:

- |   |                        |
|---|------------------------|
| A. Title: Mental Health Client Specialist | Rate: \$60.00 per hour |
| B. Title: Public Health Nurse             | Rate: \$70.00 per hour |

#### V. Eligible Participants

Potential clients screened as eligible for participation in the CoC Program must meet the following guidelines for chronic homelessness and disability, as outlined by HUD in the HEARTH Act regulations and guidelines.

##### A. Chronically Homeless Individual (CHI):

- 1. A CHI is an individual who lives either in a place not meant for human habitation, safe haven, or in an emergency shelter immediately before entering the institutional care facility; and
- 2. The individual must have been living as described above continuously for 12 months, or on at least four separate occasions in the last three years, where the combined occasions total a length of time of at least 12 months. Each period separating the occasions must include at least 7 nights of living in a situation other than a place not meant for human habitation, in an emergency shelter, or in a safe haven.

An applicant's homeless status must be documented and submitted by HSA to HA using a homelessness certification form (Form:-Verification of Homeless Status: Exhibit B).

- B. Disabled: A disabled person has a disability that includes diagnosable SA, SMI, DD, PTSD, Cognitive impairments resulting from a brain injury, or chronic physical illness or disability.

HSA must document the applicant's disability by submitting to HA a completed disability certification (Form- Verification of Disability: Exhibit B).

## **VI. MOU Term**

The term of this MOU commences June 1, 2017, and shall be in effect until HA or HSA terminates the MOU per the conditions below:

- A. **Termination without Cause.** Either Party may terminate this agreement without cause by giving the other party sixty (60) day's written notice.
- B. **Termination for Cause.** Either party may terminate this agreement for cause upon written notice to the other party. For purposes of this agreement, cause includes, but is not limited to, any of the following: (1) material breach of this agreement, including failure to provide assigned services, (2) violation of any applicable laws, or (3) assignment of this agreement without the written consent of the other party. Written notice will specify the reason for termination and will indicate the effective date of such termination.
- C. **Loss of HUD funding support or significant programmatic changes meriting development of a new MOU (see Section XII).**

## **VII. Grant Expenditures and Matching Funds**

- A. **Grant Expenditures:** HUD CoC Grants are available to pay rental assistance on behalf of participants and to pay for the administration of that rental assistance. The agreements allow grantees to assist more than the number of participants identified in the application, to the extent that the grant funds will support those costs. Therefore, HA and HSA have sought to serve as many homeless individuals and families as possible with HUD grant funding. HA agrees to report to HSA as frequently as needed, regarding the level of funding available, including information about how many additional clients can be added to the CoC Program. HSA agrees to make a good faith effort to refer as many eligible clients as the grant can support, to the extent that case management services are available to those clients.
- B. **25% Minimum Matching Funds:** HUD CoC Grants only provide for rental assistance and associated administration costs. Grant funds may not be used for the provision of supportive services. In-kind supportive services provided to all program participants can be used as in-kind funds for the grants' minimum 25% required match. Information regarding the services provided and the value of the match must be submitted to HUD every year by HA. Failure to match the minimum 25% of the grant funds could lead to termination of the funding from HUD. HSA agrees to maintain documentation of the CoC Program clients served, the types and value of supportive services provided to those clients, and the quantity and value of hours spent doing any other CoC Program-related activities. HSA agrees to submit such documentation to HA as described below.

## **VIII. Reports and Recordkeeping**

- A. HSA will provide information, such as data and reports, as required by HA or HUD. HSA agrees to report to HA the monetary value of match dollars expended on a quarterly basis (Match Reports). Match Reports shall include line item detail of all match items, including the services provided, the professional title of the persons providing the services and the hourly cost of the services provided. Match Reports will be due within 45 days of the end of the quarter. HA will review documentation and verify the value of match costs for services provided to a sample of clients, taking into account billable rates, staff positions, duration of services performed and cost of each client service. These reviews will be done remotely for the first three quarters of the grant's operating year. Reviews will also include an annual site visit to coincide with the fourth quarter reporting period included in the Annual Progress Report (APR) required by HUD.
- B. HA agrees to monitor the value of match dollars expended in proportion to rental assistance expended, and to alert HSA if match dollars are not on track to reach required levels.
- C. HSA shall submit to HA an annual report for each of the HUD CoC Grants in Exhibit A, including a final detailed account of matching funds and matching in-kind services for the entire grant period. Match documentation must include a description of the services provided, the professional title of the persons providing services, the hourly cost of the services, and the number of service hours provided. The final report will also include an account of outreach activities and selection of eligible CoC Program participants as described in this MOU's Section IV. Additionally, HA will conduct an annual assessment of the adequacy and appropriateness of services provided to CoC Program clients.
- D. Information required for the APR will be provided to HA by HSA within 60 days of the grant completion date for each of the HUD CoC Grants.
- E. HSA shall provide any other fiscal, statistical, and narrative reports which may be required under HA's grant contracts with HUD.
- F. HSA agrees to keep such records and provide such reports as may be required by HA or HUD in order to comply with grant requirements.
- G. HSA is not required to provide confidential patient information that is prohibited by state and federal statutes and regulations regarding confidentiality, including, but not limited to Title 42, Part 2 of the Federal Regulations and Title 45, CFR Parts 160 and 164 which cite the Health Insurance Portability and Accountability Act of 1996 Privacy Rule (HIPAA). Where applicable, HA agrees to maintain the confidentiality of any records generated during the term of this MOU that pertain to compliance with HIPAA and all applicable state and federal laws and regulations.

## **IX. Participation of Homeless Individuals**

The local body that oversees approvals of applications for HUD funding grants under the CoC Program is the Santa Cruz County Homeless Action Partnership (HAP). Per the terms of its Governance Charter (Exhibit C), HAP includes homeless and formerly homeless persons in its

membership for purposes of considering and making policies and decisions regarding any housing assisted under this part, or services for participants, under the local CoC Program.

#### **X. Indemnity**

Each party agrees to indemnify, defend and hold harmless the other party, its governing Board, officers, directors, trustees, employees and agents (together "Employees and Agents") from any claim, liability, or loss, including reasonable attorneys' fees, arising out of or resulting from the willful, wrongful or negligent acts or omissions of the indemnifying party or any of its Employees and Agents in connection with this MOU. Each party will notify the other in writing of any claim of injury or damage related to activities pursuant to this MOU. The parties will cooperate with each other in the investigation and disposition of any claim arising out of activities of the MOU, provided that nothing will require either party to disclose any documents, records or communications which are protected based on privilege or confidentiality without proper consent or Court order. The provisions of this section will survive the termination of this MOU.

#### **XI. Notices**

All notices of the parties shall be in writing and shall be addressed as set forth below:

County of Santa Cruz Health Services Agency (HSA)  
Giang Nguyen, Health Services Agency Director  
1080 Emeline Avenue  
Santa Cruz, CA 95060-1966

Housing Authority of the County of Santa Cruz (HA)  
Jennifer Panetta, Executive Director  
2931 Mission Street  
Santa Cruz, CA 95060

#### **XII. Budget Contingency**

Performance of duties under this MOU is contingent upon the appropriation of sufficient funding by HSA for the services covered by this agreement and by HUD for the rental assistance funding. Notwithstanding the termination provisions of this MOU, if funding is reduced or depleted for services covered by this agreement, then the affected party has the option to either terminate this MOU as provided in Section VI, or to offer an amendment to this agreement indicating a reduced fiscal amount.

#### **XIII. Choice of Law/ Venue**

This MOU has been executed and delivered in, and shall be construed and enforced in accordance with, the laws of the State of California. Proper venue for legal action regarding this MOU shall be in the County of Santa Cruz.

#### **XIV. Amendment**

This MOU may be modified or amended only by written amendment signed by both parties.

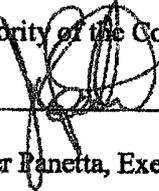
**XV. Entire Agreement**

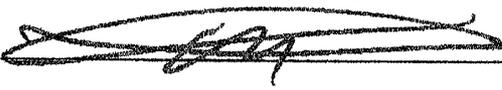
This document represents the entire agreement between the parties.

**XVI. Assignment**

No assignment of this MOU or of the rights and obligations hereunder shall be valid without the prior written consent of the other party.

**SIGNATURES:**

Housing Authority of the County of Santa Cruz:  
Signature  Date: 11/28/17  
Jennifer Panetta, Executive Director

County of Santa Cruz Health Services Agency:  
Signature  Date: 11/20/17  
Giang Nguyen, Health Services Agency Director

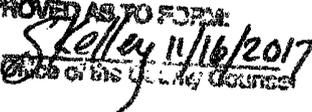
APPROVED AS TO FORM:  
  
S. Kelley 11/16/2017  
Chair of the Planning Council

Exhibit A: CoC Grants

Grant Title	Eligibility Requirements
Shelter Plus Care	Chronically homeless with disabling conditions including mental health disorders, substance use disorders, HIV/AIDS, and other chronic health conditions (includes persons identified as frequent users of hospital emergency departments)