

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 2024 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2024 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 2024 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

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

Attachments

Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.

- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.

- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	
	In the chart below for the period from May 1, 2023 to April 30, 2024:	
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or	
2.	select Nonexistent if the organization does not exist in your CoC’s geographic area:	

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

17.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
18.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Nonexistent	No	No
24.	Substance Abuse Service Organizations	Yes	Yes	Yes
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	Yes	Yes	Yes
29.	State Domestic Violence Coalition	No	No	No
30.	State Sexual Assault Coalition	No	No	No
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.	Managed Care Provider	Yes	Yes	Yes
35.	Neighborhood Community Groups	Yes	Yes	No

1B-1a.	Experience Promoting Racial Equity.	
	NOFO Section III.B.3.c.	

Describe in the field below your CoC's experience in effectively addressing the needs of underserved communities, particularly Black and Brown communities, who are substantially overrepresented in the homeless population.

(limit 2,500 characters)

The CoC has implemented multiple initiatives to address the needs of underserved Black, Brown, and other marginalized communities disproportionately affected by homelessness. Our approach prioritizes equitable access, outreach, and culturally responsive support.

The CoC expands services through funding and supporting BIPOC-led organizations, training staff on cultural responsiveness, and implementing a revised Coordinated Entry System (CES) tool that addresses racial and ethnic biases. Disaggregated data from HMIS, including Stella metrics, allows us to analyze and take steps to correct disparities in service access and out-comes across demographics groups.

The CoC has strengthened efforts to inform and engage communities impacted by housing dis-parities, including through street outreach and education to reach underrepresented groups. We are developing tools to track housing prevention specifically for Latino(a)(x), Black, and Na-tive American populations and have established bilingual positions within the County Housing for Health (H4H) Division (Collaborative Applicant) to remove language barriers.

Our commitment to inclusive leadership is embodied in the creation of advisory groups, includ-ing the earlier Youth Advisory Board (YAB) and current Lived Expertise Action Boards (LEAB), ensuring the voices of people with lived experience guide our strategic decisions. An advisory group of persons of color has been formed to offer guidance on reducing racial and ethnic dis-parities, embracing the “nothing for us without us” approach.

With a focus on workforce diversity, the CoC collaborates with partner organizations to diversi-fy and train staff, implementing new recruitment practices to increase hiring among people of color for roles as H4H CES connectors and outreach workers. We have introduced new stand-ards in emergency shelters to address specific barriers faced by BIPOC and marginalized groups and to provide targeted recidivism prevention strategies, including behavioral, financial, and legal support to reduce eviction risk.

Through culturally responsive tenancy-sustaining services, we aim to increase the utilization of housing resources for disproportionately impacted communities. In alignment with our 3-Year Strategic Framework, we incorporate equity analysis into ongoing CES and system planning ef-forts to ensure all community members have access to housing solutions.

1B-2.	Open Invitation for New Members.	
	NOFO Section V.B.1.a.(2)	
	Describe in the field below how your CoC:	
	1. communicated a transparent invitation process annually (e.g., communicated to the public on the CoC’s website) to solicit new members to join the CoC;	
	2. ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and	
	3. invited organizations serving culturally specific communities experiencing homelessness in your CoC’s geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities).	

(limit 2,500 characters)

1. The CoC continually and transparently invites new members by including a standard invitation for new members on the CoC website homepage. Under the Get Involved tab, the CoC specifically invites applications from any person or organization committed to a collaborative impact effort focused on ensuring all residents within the County have stable, safe, and healthy places to live.

Interested applicants can easily apply by completing the simple accessible online membership form and will automatically receive all CoC-related list serve notices, including invitations to biannual CoC-wide meetings. Invitations are also sent out 22 times per year on average via the CoC newsletter to a long list of community organizations and persons in the county known to be interested in homelessness issues and are posted on the CoC Facebook page. This community partner 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. Communications are e-mailed in plain text to be easily machine readable and posted on the CoC website, which is reviewed against Website Content Accessibility Guidelines 2 (WCAG 2). The CoC also improves accessibility through linear content design that works well with assistive devices, logical tab order, consistent navigation structure, and alt attributes. Meeting notices and other flyers are sent in accessible PDF format. Meetings held on Microsoft Teams or Zoom include captioning for hearing impaired and screen reader for visually impaired persons.

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

1B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.	
	NOFO Section V.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;
3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

(limit 2,500 characters)

1. The CoC solicits and considers opinions through a broad range of CoC community, committee, and work group meetings, as well as workshop and training opportunities. These are attended by a broad universe of interested persons and organizations, including affordable housing developers, homeless assistance providers, County and City elected representatives and agencies, faith groups, neighborhood groups, health care providers, business representatives, education providers, persons with lived experience of homelessness, and more. In addition, requests for input and feedback are communicated via the website and Facebook, direct outreach by CoC staff and the CoC list serve, which includes more than 200 interested agencies or persons. Also, at CoC Board meetings public comment is allowed and requested for each agenda item. Finally, CoC staff provide regular updates at meetings of the County Board of Supervisors and City Councils, where members of the public can comment on CoC items.

2. During virtual and in-person 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 via newsletter to a long list of agencies a few days before the meeting and are posted on the website. People can provide input by participating in the meeting online or in person, or emailing their comments.

3. Persons with disabilities are invited to contribute input, whether online, in-person, or through virtual meeting participation. The CoC uses the following to improve information accessibility: accessible meeting rooms, website WCAG 2 guidelines, accessible PDF documents, Teams and Zoom attendance option with captioning and screen reader, and linear content design that works well with assistive devices, logical tab order, consistent navigation structure, and alt attributes.

4. Public input has positively impacted a broad array of issues, including CoC governance, funding priorities, CoC rating criteria, CES redesign, HMIS restructuring, unsheltered homelessness, emergency shelter protocols, updates and reports on the 3-Year Strategic Plan, federal and state funding sources, public engagement and information, and more.

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

(limit 2,500 characters)

1. On August 9, 2024, the CoC issued a public solicitation of CoC applications and invitation to participate in Applicant Orientations open to all interested applicants, including those that had never received CoC funding. The invitation, process timeline, and application materials were posted on the CoC’s website, its Facebook page and sent to the CoC’s list serve of all known interested organizations. The solicitation and application policies and procedures manual specifically highlighted the process was OPEN TO NEW APPLICANTS that had never received CoC funds. A section on p. 28 invited and offered technical assistance to new applicants, and those representing LGBTQ+, racial, and ethnic groups overrepresented in the homeless population.
2. Open applicant orientation sessions was held on August 27 (in-person) and August 28 (Zoom) and a recording was publicly posted on the CoC website to ensure access for all. The orientation session and the written CoC application policies and procedures document included information and explanations about how exactly to complete and submit the HUD and local application forms, HUD and local priorities and requirements, the deadlines for submitting local and e-snaps applications, and the process and objective criteria for selecting applications.
3. As explained publicly, the CoC used an objective rating process for selecting and ranking projects. Proposals that met threshold requirements were reviewed and rated with a 110-point rating tool using objective criteria and HMIS-based performance benchmarks. Extra points were given to projects that were PSH or RRH, that serve CH or DV survivors, that target the most vulnerable persons, and are high performing. On October 8 and 9, the CoC Funding Review Committee met to review the applications, aggregate scores, other project performance data, hear applicant presentations, and to develop project selection and ranking recommendations. On October 15, the CoC Board approved the recommendations and written approval or rejection decision letters were sent to all applicants with the approved ranking list.
4. Applicant information accessibility steps: web posting materials with WCAG 2 guidelines, translation, and accessible PDFs; and Applicant Orientation options including accessible room, Zoom with captioning and screen reader, and a recording.

1C. Coordination and Engagement

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

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1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section V.B.1.b.	
	In the chart below:	
1.	select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or	
2.	select Nonexistent if the organization does not exist within your CoC's geographic area.	

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

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

In the chart below select yes or no to indicate whether your CoC:

1.	Consulted with ESG Program recipients in planning and allocating ESG Program funds?	Yes
2.	Provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area?	Yes
3.	Ensured local homelessness information is communicated and addressed in the Consolidated Plan updates?	Yes
4.	Coordinated with ESG recipients in evaluating and reporting performance of ESG Program recipients and subrecipients?	Yes

1C-3.	Ensuring Families are not Separated.	
	NOFO Section V.B.1.c.	

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

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 family members are not separated?	Yes
3.	Worked with CoC and 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 questions or requesting technical assistance to resolve noncompliance by service providers?	No

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

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

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

1C-4a.	Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.	
	NOFO Section V.B.1.d.	

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

(limit 2,500 characters)

The CoC has cultivated a formal, collaborative partnership with the Santa Cruz County Office of Education Students in Transition (SCCOE SIT) program, strengthening support systems for homeless youth across educational and supportive services. Through the SCCOE SIT program, the CoC identifies and supports students experiencing homelessness, ensuring their educational rights and access to essential resources. The SCCOE SIT holds a seat on the CoC, allowing seamless communication on homeless student needs, while CoC youth and family providers regularly participate in SCCOE meetings. Together, they support each child’s ability to succeed in school through tutoring, homework help, and access to free or reduced-cost meals.

For over 30 years, SCCOE has received McKinney-Vento (M-V) Education for Homeless Children and Youth (EHCY) grant funding, as well as more recent ARP-EHCY funding, which has allowed dedicated staff to coordinate with both the CoC and local school districts on enrollment, school choice, and legal concerns related to the M-V Homeless Assistance Act and Every Student Succeeds Act (ESSA). These resources also support intensive case management, training in trauma-informed care, and the promotion of inclusive responses for youth facing homelessness.

The partnership extends to the CoC's Youth Homelessness Demonstration Project (YHDP), where CAB, Inc., in coordination with SCCOE SIT and peer liaisons, leads the Youth Homelessness Response Team, delivering housing and comprehensive support services directly in school and community environments for homeless youth.

Furthermore, joint SCCOE SIT and CoC member initiatives focus on advocacy and services for foster and homeless youth, case management, and school-readiness support through the Stuff the Bus project, which provides backpacks and school supplies. The collaboration also includes annual needs assessments, diversion programs in cooperation with local law enforcement, educational support for incarcerated youth, and mental health services through partnerships with the County Children’s Behavioral Health Department and Encompass Community Services. This multi-faceted approach underscores our commitment to advancing stability and educational success for vulnerable youth across the region.

1C-4b.	Informing Individuals and Families Who Have Recently Begun Experiencing Homelessness about Eligibility for Educational Services.	
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NOFO Section V.B.1.d.

Describe in the field below written policies and procedures your CoC uses to inform individuals and families who have recently begun experiencing homelessness of their eligibility for educational services.

(limit 2,500 characters)

The CoC has established written policies and procedures to ensure that individuals and families experiencing homelessness are informed of their eligibility for educational services. The policies and procedures are summarized as follows:

All programs serving families and unaccompanied youth are mandated to prioritize student educational needs and to prevent disruptions in school continuity by placing families and unaccompanied youth in shelter and housing as close to their school of origin as possible.

Upon intake, families with children and unaccompanied youth are informed of their educational rights, supported with written materials, and assisted in enrollment, including referrals to McKinney-Vento Liaisons. The CoC ensures families have the right to choose their school placement, without mandating new school enrollment as a condition for receiving services. Programs cannot require children to attend supplementary education programs that may interfere with regular school attendance, safeguarding continuity in education. Notices detailing student rights are posted in appropriate languages across program sites serving homeless families and youth to increase awareness.

Designated staff within each program are responsible for supporting these educational policies, specifically by ensuring homeless children and youth are enrolled in school and accessing available services. These staff members actively coordinate with the CoC, the Department of Social Services, the Santa Cruz County Office of Education (SCCOE), and McKinney-Vento Coordinators and Liaisons to facilitate access to educational services and resources.

Led by SCCOE SIT, the CoC collaborates with schools, public agencies, nonprofits, businesses, and the community to implement these policies effectively. Each year, SCCOE SIT provides training for school district liaisons and distributes informational materials, ensuring that disadvantaged students and their families are reached and supported through consistent, comprehensive outreach efforts.

1C-4c.	Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	
	NOFO Section V.B.1.d.	

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

		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 Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking—Collaboration with Federally Funded Programs and Victim Service Providers.
	NOFO Section V.B.1.e.

In the chart below select yes or no for the organizations your CoC collaborates with:

	Organizations	
1.	State Domestic Violence Coalitions	Yes
2.	State Sexual Assault Coalitions	Yes
3.	Anti-trafficking Service Providers	Yes
	Other Organizations that Help this Population (limit 500 characters)	
4.	City of Santa Cruz Commission on the Prevention of Violence Against Women	Yes

1C-5a.	Collaborating with Federally Funded Programs and Victim Service Providers to Address Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.
	NOFO Section V.B.1.e.

Describe in the field below how your CoC regularly collaborates with organizations that you selected yes to in Question 1C-5 to:

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

(limit 2,500 characters)

1. There are two victim service providers in our CoC area: Walnut Avenue Family and Women’s Center (WAFWC) and Monarch Services, both of which are applying this year for new and renewal funding. Both are long-term voting members of our CoC and participants in the Santa Cruz Commission on Prevention of Violence Against Women. They are also members of the California Partnership to End Domestic Violence and Valor California (the statewide sexual assault coalition), which enables them to bring back critical knowledge, training resources, and best practices to assist our CoC.

Both agencies have a long history of supporting and collaborating with the CoC in the development and implementation of CoC and ESG plans, programs, and policies. For example, both agencies took part in the planning process to develop our current 3-year strategic plan, Housing for a Healthy Santa Cruz, as well as previous strategic homelessness plans. Both participated in planning processes for the development of our YHDP initiative and for key State of California funding sources. Both participated in meetings to develop our original CoC charter, CoC and ESG program standards, and recent redesign of our CES policies and procedures (including updated DV procedures and trainings).

2. Both Monarch and WAFWC are fully trained in and use trauma-informed and victim-centered practices, and regularly receive updated training on these issues from the statewide coalitions. As such, they have brought the importance of these practices to the fore, helping to embed them in our plans, programs, and policies. Moreover, all CoC agencies work directly with these DV providers to link DV survivors to the range of housing and service options. In the process, CoC agencies have learned and continue to learn about the traumas that are associated with DV, and the trauma-informed best practices that are essential to successfully assisting survivors. Use of trauma-informed practices by CoC agencies to better meet survivor needs is further strengthened by the trainings provided by Monarch and WAFWC described below.

1C-5b.	Implemented Safety Planning, Confidentiality Protocols in Your CoC’s Coordinated Entry to Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC’s coordinated entry addresses the needs of DV survivors by including:	
1.	safety planning protocols; and	
2.	confidentiality protocols.	

(limit 2,500 characters)

Our CES Ps&Ps have special protocols in place to ensure the safety planning and confidentiality of persons fleeing domestic violence, dating violence, sexual assault, and stalking.

1. Triage for all persons who contact CES includes safety planning to determine if they may be fleeing or attempting to flee domestic violence or human trafficking or are survivors of the same. Anyone who at this point is identified as fleeing or potentially fleeing, or is a survivor who desires DV services, is offered connection to DV resources, including a warm handoff to a DV provider (e.g., Monarch or WAFWC), for immediate safety needs and ongoing supports. A certified DV advocate then immediately engages the survivor, offering safe shelter and/or other legal services for a protective order, providing information about DV and about housing/service options (including risks), and assists the survivor to develop and carry out a personal or family safety plan.

2. When a person presents as a survivor, special confidentiality protocols are immediately implemented. These include the following: (1) the survivor can elect to have an anonymous record (no identifying information) in HMIS and the CES referral specialist receives only the HMIS ID number; (2) if the survivor chooses not to have any data entered into HMIS, then a DV agency will conduct a modified assessment in paper format and the CES referral specialist will receive the modified assessment with no identifying information and only a random generated ID number generated by the DV agency; (3) the CES referral specialist maintains a DV participant priority list outside of HMIS and the referral specialist will use both lists when prioritizing persons for housing placements; and (4) when a survivor is referred for housing, the receiving agency will receive only the randomly generated ID and the DV agency’s contact person who will make the needed contacts and arrangements.

1C-5c.	Coordinated Annual Training on Best Practices to Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

In the chart below, indicate how your CoC facilitates training for project staff and coordinated entry staff that addresses best practices on safety planning and confidentiality protocols:

		Project Staff	Coordinated Entry Staff
1.	Training Occurs at least annually?	Yes	Yes
2.	Incorporates Trauma Informed best practices?	Yes	Yes
3.	Incorporates Survivor-Centered best practices?	Yes	Yes
4.	Identifies and assesses survivors’ individual safety needs?	Yes	Yes
5.	Enhances and supports collaboration with DV organizations?	Yes	Yes
6.	Ensures survivors’ rights, voices, and perspectives are incorporated?	Yes	Yes
	Other? (limit 500 characters)		
7.	Provides DV Advocate certification	Yes	Yes

1C-5d.	Implemented VAWA-Required Written Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below:	
1.	whether your CoC's written policies and procedures include an emergency transfer plan;
2.	how your CoC informs all households seeking or receiving CoC Program assistance about their rights to an emergency transfer;
3.	what your CoC requires households to do to request emergency transfers; and
4.	what your CoC does in response to households requesting emergency transfers.

(limit 2,500 characters)

1. The CoC has Ps&Ps to inform all persons seeking or receiving CoC and ESG services of their rights under VAWA including to request an emergency transfer to another unit. The CoC's emergency transfer Ps&Ps build on HUD's model plan. In addition, the Santa Cruz County Housing Authority, which maintains many of the programs such as Shelter Plus Care or Housing Choice Vouchers that might be used by victims, has its own VAWA-compliant emergency transfer plan and communication process. And the local CES has a separate, confidential oral communication method for persons who are fleeing DV. This process provides for the confidentiality and safety of participants, while ensuring they receive the same opportunities for accessing housing opportunities as other CES participants.

2. All homeless agencies are trained to ask all clients at intake and during the course of services about DV in a sensitive, trauma informed way and where needed to offer information and access to DV services, including referral to DV providers, crisis intervention, safety planning, and safe DV shelter or motel vouchers. This process includes providing information and answering questions about of victims' rights and housing protections under VAWA, documentation and certifications needed to process the request, confidentiality procedures, unit availability timing and issues, safety and security planning, and emergency transfer rights and process for persons or households in units. The victim can request an emergency transfer from their provider either orally or by submitting an optional written request.

3. Victims requesting transfer are asked for documentation that includes: (1) a signed statement by the victim, DV agency, attorney, health provider, mental health provider, or other professional that documents and certifies the incident(s) of DV, dating violence, sexual assault, or stalking, (2) a record of the of the incident(s) by a law enforcement agency, court, or administrative agency; or (3) a statement or other evidence provided by the tenant.

4. The agency then reviews the documentation. If approved, the provider acts quickly to help the tenant move, subject to whether a unit for which the person is eligible is actually available. Finally, pending the transfer, the provider makes available safety resources and assists the victim to take reasonable safety precautions.

1C-5e.	Facilitating Safe Access to Housing and Services for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC ensures households experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within your CoC's geographic area.

(limit 2,500 characters)

Our CES Ps&Ps guarantee that DV survivors will have maximum choice and equal access to all housing and services within the CoC. The Ps&Ps include a confidential process for individuals and families who are fleeing/attempting to flee domestic violence, dating violence, sexual assault, stalking, or human trafficking. This process provides for the confidentiality and safety of participants, while ensuring they receive the same opportunities for accessing housing opportunities as other CES participants. Thus, if a person is triaged at a CES connector site as a DV survivor, they are given the choice in a trauma-informed way to be referred to a DV provider (Monarch or WAFWC) and/or to other non-DV housing or service programs. The choice is up to the client. A CES connector will make the referral based upon client choice, while taking whatever steps are needed to ensure client safety.

All homeless agencies receiving referrals of victims are trained in strategies to effectively address victims' physical and emotional safety, privacy, and confidentiality needs, as well as to communicate in a sensitive, trauma-informed way and where needed to offer information and access to DV services, including referral to DV providers, crisis intervention, safety planning, and safe DV shelter or motel vouchers.

1C-5f.	Identifying and Removing Barriers for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC ensures survivors receive safe housing and services by:

1.	identifying barriers specific to survivors; and	
2.	working to remove those barriers.	

(limit 2,500 characters)

1. The CoC and its members have used a variety of proactive strategies for identifying and working to remove systemic barriers faced by DV survivors. DV survivors and victim service agencies have provided the CoC with feedback and comments about barriers during CoC membership meetings, strategic planning meetings, CoC Operations Committee work to develop program-level standards and policies, the CES redesign process, and most recently during the CES evaluation process. The CoC includes DV in its annual assessment of service and outcome disparities and barriers of under-represented groups.

Disaggregated HMIS data supports this yearly analysis, allowing for evidence-based adjustments that aim to close barriers to survivors of DV. Finally, Monarch and WAFWC have provided regular feedback to the Santa Cruz Commission on Prevention of Violence Against Women regarding barriers faced by DV survivors.

2. To help remove housing-specific barriers, the CoC prioritizes housing projects that serve DV survivors, and Monarch Services and/or WAFWC have applied for DV Bonus funds every year since the bonus's inception. In addition, the CoC has implemented strategies to remove barriers that include: (1) working with State and national DV coalitions to remove legislative barriers, (2) prohibiting CoC housing providers from discrimination based on the perpetrators actions, (3) expanding the use of safer housing approaches, such as scattered site models and shared or clustered housing; (4) providing credit repair and financial assistance to combat perpetrator financial abuse; (5) furnishing employment and benefits assistance to help the victim achieve independence and housing. Finally, CES has established a separate process for DV survivors focused on a safety assessment and protocols, special privacy and confidentiality procedures, and use of client-driven, trauma-informed engagement practices.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+—Anti-Discrimination Policy and Equal Access Trainings.	
	NOFO Section V.B.1.f.	

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

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

Describe in the field below:

1.	how your CoC regularly collaborates with LGBTQ+ and other organizations to update its CoC-wide anti-discrimination policy, as necessary to ensure all housing and services provided in the CoC are trauma-informed and able to meet the needs of LGBTQ+ individuals and families;
2.	how your CoC assisted housing and services providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy;

3.	your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and
4.	your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.

(limit 2,500 characters)

1. The CoC updates anti-discrimination policies based on regular stakeholder feedback. In October 2017, the CoC adopted a CoC-wide anti-discrimination policy informed by an extensive stakeholder engagement including CoC agencies, YHDP agencies and YAB members, and the local LGBTQ+ community. Among other things, the policy requires compliance with the Equal Access to HUD Programs – Regardless of Sexual Orientation or Gender Identity final rule, and prohibits denial of program admission based upon the sexual orientation or gender identity of any household members. The CoC's recently revised CES Ps&Ps includes anti-discrimination policies developed through a stakeholder input process with working groups, a Community-wide meeting, and public comment to the Board of Supervisors.

2. The CoC has shared the Equal Access to HUD Programs rule with all CoC providers, discussed it at CoC membership meetings, shared policy language, and encouraged all providers to adopt their own agency policies in line with CoC policy. Information about the requirement to comply with the HUD rule is included in the annual CoC applicant orientation training. The CoC has also required YHDP-funded programs to participate in Diversity Center-provided LGBTQ+ trainings and encouraged CoC-funded programs to do so. The Diversity Center is a local LGBTQ+ advocacy organization that is a long-term voting CoC member, participant in the YHDP initiative, and collaborator with CoC DV providers on a twice-monthly support group for LGBTQ+ DV survivors.

3. Every year, the CoC evaluates CoC programs' compliance with anti-discrimination policies and practices as part of its broader CoC compliance evaluation. This includes assessment of gender, identity, race, and ethnicity equity relating to: persons in managerial and leadership positions; training since 1/1/23 on equity; program outcomes with an equity lens; program changes needed and a plan for improving equity and outcomes; and regular review of data disaggregated for gender, identity, race, and ethnicity.

4. The CoC's method for addressing noncompliance is funding incentive-based. New and renewal project evaluation scoring tools prioritize projects and award points to agencies who have met demonstrated compliance with the CoC's anti-discrimination policies. Finally, the CoC provides technical assistance to agencies that perform poorly or need help with anti-discrimination and equity.

1C-7.	Public Housing Agencies within Your CoC's Geographic Area–New Admissions–General/Limited Preference–Moving On Strategy.	
	NOFO Section V.B.1.g.	
	You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.	
	Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with—if there is only one PHA in your CoC's geographic area, provide information on the one:	

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing or Housing Choice Voucher Program During FY 2023 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	52%	Yes-HCV	Yes

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
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NOFO Section V.B.1.g.

Describe in the field below:

- | | |
|----|--|
| 1. | steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or |
| 2. | state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference. |

(limit 2,500 characters)

1. The CoC has worked very closely every year with the Santa Cruz County Housing Authority (only HA in the area) to establish and implement the following homeless preferences, all clearly documented 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. Emergency Housing Vouchers for persons experiencing homelessness, at risk of homelessness, fleeing DV, or recently homeless and at high risk of returning to homelessness. Implemented under a HA-CoC MOU, up to 295 households are being served (425 persons), all were assessed and referred through CES, and all have a case management plan with a services provider.

c. 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.

d. 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).

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 participants who have been in good standing for two years.

The CoC also works closely with the HA on special purpose voucher programs: (1) 433 HUD VASH vouchers for homeless veteran; and (2) 218 FUP vouchers, including a preference for homeless youth identified through CES and case managed by County HSD; Youth FUP voucher holders may graduate to the regular HCV program after two years in good standing.

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	Yes
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes
	Other (limit 150 characters)	
5.	UCSC and Cabrillo College (for youth experiencing homelessness)	Yes

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section V.B.1.g.	

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

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	Yes
3.	Housing Choice Voucher (HCV)	Yes
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	Yes
6.	Non-Elderly Disabled (NED) Vouchers	Yes
7.	Public Housing	No
8.	Other Units from PHAs:	
	Nuevo Sol SRO	Yes

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

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	Yes
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	FYI Initiative, VASH, Stability Vouchers, FUP, FUP-Youth, and Mainstream

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

	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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1D. Coordination and Engagement Cont'd

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1D-1.	Preventing People Transitioning from Public Systems from Experiencing Homelessness.	
	NOFO Section V.B.1.h.	

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the public systems 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.	Prisons/Jails?	Yes
2.	Health Care Facilities?	Yes
3.	Residential Care Facilities?	Yes
4.	Foster Care?	Yes

1D-2.	Housing First—Lowering Barriers to Entry.	
	NOFO Section V.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2024 CoC Program Competition.	16
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 2024 CoC Program Competition that have adopted the Housing First approach.	16
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2024 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1D-2a.	Project Evaluation for Housing First Compliance.	
	NOFO Section V.B.1.i.	

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

1.	how your CoC evaluates every project—where the applicant checks Housing First on their project application—to determine if they are using a Housing First approach;
2.	the list of factors and performance indicators your CoC uses during its evaluation;
3.	how your CoC regularly evaluates projects outside of your local CoC competition to ensure the projects are using a Housing First approach; and
4.	what your CoC has done to improve fidelity to Housing First.

(limit 2,500 characters)

1. The CoC requires applicants to answer questions demonstrating Housing First compliance and barrier removal during an annual risk assessment and through the CoC competition. In both the risk assessment and project application, Housing First responses are scored. A low score on the risk assessment may help lead to in-depth, on-site monitoring, while a low score on the project application may lead to a lower rank or loss of funds. In addition, high rates of housing stability and low rates of returns to homelessness are associated with an agency’s strong commitment to actually implementing 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.

2. Key factors used in Housing First evaluations include: CES referral acceptance, efforts to avoid denying admission, efforts to avoid exits to homelessness, leases that are the same for all tenants, access to tenant education provided, substance use not a reason for termination, client choice in services, and efforts to house persons with the most severe barriers to maintaining housing. Rel-levant HMIS indicators we use include: (1) maintaining housing stability or retention (at least 90%), (2) preventing returns to homelessness (no more than 20%), increasing use of main-stream health and other resources (at least 50%), and increased employment (at least 25%). Finally, the CoC reviews client surveys and focus group results to assess participant quality of life, sense of autonomy over their own service plans, and reduced risk behaviors.

3. As mentioned above, outside the competition, the CoC carries out annual risk assessment of each project including adherence to Housing First and Low Barrier service approaches. We are also piloting the use of the HUD Housing First assessment tool.

4. The CoC’s October 17, 2024 CoC-wide meeting provided a training on “Housing First: From Principles to Practice.” On October 22, 2024, the CoC hosted a public “Housing First Conversation.” In addition, our CoC has received Housing First technical assistance from HomeBase.

1D-3.	Street Outreach—Data—Reaching People Least Likely to Request Assistance.	
	NOFO Section V.B.1.j.	

Describe in the field below how your CoC tailored its street outreach to people experiencing homelessness who are least likely to request assistance.

(limit 2,500 characters)

Street outreach in Santa Cruz County engages and assists all persons experiencing homelessness, including those populations least likely to access services without outreach. Street outreach is closely linked to and coordinated with a broad variety of service and community organizations, including emergency shelters, law enforcement, fire department, behavioral health integrated teams, PSH and RRH programs, CES, VA and veteran service providers, youth programs, the County Office of Education, community action programs, faith organizations, healthcare clinics and hospitals, City and County homelessness program and public works staff, County mainstream service programs, businesses, and more. Outreach workers use peer contacts, a trauma-informed approach, and harm reduction strategies to build trust, offer basic healthcare and personal care items, and make referrals to shelter, housing, health clinics, food pantries, and mainstream programs. Outreach teams provide on-the-spot CES connections, 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 needed healthcare, housing, and other services. Outreach is provided countywide where hard-to-reach persons congregate, such as encampments, downtown locations, parks, parking lots, and other unsheltered locations; safe parking sites; emergency shelters and food programs, County service offices, and libraries.

Several teams conduct outreach to specific hard-to-reach subpopulations as follows: 1) HPHP mobile street medicine team 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 focuses on justice system-involved and addicted persons experiencing homelessness; 4) Community Action Board offers youth and unsheltered persons outreach in the southern part of the County; and 5) Encompass offers TAY outreach and County Veterans Services offers veteran outreach.

All outreach programs provide bilingual/bicultural services (Spanish-English), referrals, transportation, and warm handoffs when needed. CAB provides disabled communication tools and has a bilingual toll-free hotline. 2-1-1 I&R is available 24/7/365 by phone or internet in more than 170 languages.

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section V.B.1.k.	

Select yes or no in the chart below to indicate your CoC's strategies to prevent the criminalization of homelessness in your CoC's geographic area:

Your CoC's Strategies	Engaged/Educated Legislators and Policymakers	Implemented Laws/Policies/Practices that Prevent Criminalization of Homelessness

1.	Increase utilization of co-responder responses or social services-led responses over law enforcement responses to people experiencing homelessness?	Yes	Yes
2.	Minimize use of law enforcement to enforce bans on public sleeping, public camping, or carrying out basic life functions in public places?	Yes	Yes
3.	Avoid imposing criminal sanctions, including fines, fees, and incarceration for public sleeping, public camping, and carrying out basic life functions in public places?	Yes	Yes
4.	Other:(limit 500 characters)		
	Linking Public Defender with Trained Advocates to Assist Homeless Defendants to Needed Supports and Case Management	Yes	Yes

1D-5.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC) or Longitudinal Data from HMIS.	
	NOFO Section V.B.1.I.	

		HIC Longitudinal HMIS Data	2023	2024
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	400	444

1D-6.	Mainstream Benefits–CoC Annual Training of Project Staff.	
	NOFO Section V.B.1.m.	

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

	Mainstream Benefits	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	No
3.	SSDI–Social Security Disability Insurance	Yes
4.	TANF–Temporary Assistance for Needy Families	Yes
5.	Substance Use Disorder Programs	No
6.	Employment Assistance Programs	Yes
7.	Other (limit 150 characters)	
	Cash Assistance for Immigrants	Yes

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

Describe in the field below how your CoC:

1. works with projects to collaborate with healthcare organizations, including those that provide substance use disorder treatment and mental health treatment, to assist program participants with receiving healthcare services, including Medicaid; and

2.	promotes SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.
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(limit 2,500 characters)

1. The CoC collaborates systematically with County Health Services Agency (HSA) and Santa Cruz Community Health Centers to assist homeless people to learn about and access community health, mental health, and substance use services. This includes supporting HSA’s Homeless Persons Health Project (HPHP), a Healthcare for the Homeless-funded project providing mobile outreach, its own clinic on a homeless campus, medical care, behavioral care, and benefits advocacy. The CoC coordinates with the Health Improvement Partnership in a range of care coordination (e.g., behavioral health network) and data projects (e.g., Datashare Santa Cruz). The CoC is working with Central Coast Alliance for Health to link providers to California Advancing and Innovating Medi-Cal (CalAIM) resources for enhanced case management and in lieu services, as well as to enroll agencies’ clients in Medicaid.

The CoC’s Lead Agency (County Human Services Department-HSD) provides direct access Medi-Cal (Medicaid) health benefits as well as other mainstream benefits. HSD staff regularly present on Medi-Cal at provider meetings and distribute toolkits, fact sheets, partner agency resources, and updates. CoC staff send similar information via e-blast upon request of HSD staff. Also, HSD directs program staff to its website, which has current information on Medi-Cal and other benefits. HSD has an online benefits application system that allows CoC agencies to submit applications on clients’ behalf and has extensive information on programs, eligibility, and how to apply. 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. Our CoC Lead staff person is SOAR-trained and another CoC staff member has attended State Housing Disability Advocacy Project (HDAP) Learning Forums that included SOAR training. CoC member CCCIL has case managers who are SOAR-trained. HPHP and the HSD GA and TANF sections have SSI Advocates incorporate SOAR practices in their advocacy work. CoC staff have encouraged SOAR certification by distributing materials about SOAR to projects at CoC membership meetings and Human Care Alliance meetings. The CoC contracts with a legal services organization to provide Social Security benefits advocacy education and technical assistance to the CoC along with direct client services to clients enrolled in the County’s HDAP program.

ID-7.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent the Spread of Infectious Diseases.	
	NOFO Section V.B.1.n.	

Describe in the field below how your CoC effectively collaborates with state and local public health agencies to develop CoC-wide policies and procedures that:

1.	respond to infectious disease outbreaks; and
2.	prevent infectious disease outbreaks among people experiencing homelessness.

(limit 2,500 characters)

1. The CoC works very closely with local (and State) public health agencies in developing Ps&Ps to respond to disease outbreaks, to secure staffing and program sites, and to coordinate public health information and resources for CoC providers. Ps&Ps are developed within a County Incident Command Structure, which in the case of an infectious outbreak is led by County Health Services Agency (HSA) in coordination with State and federal public health authorities. When there is an outbreak, the Human Services Department Housing for Health (HSD H4H) Division (CoC Lead Agency) takes responsibility for standing up an interagency Shelter and Care Taskforce (S&C TF) charged with developing and coordinating implementation of the special Ps&Ps needed for rapidly responding to and preventing infection among persons experiencing homelessness and other vulnerable populations. The S&C TF coordinates closely with key partners, including through a set of weekly meetings to share information and coordinate with HSA, Cities, shelter and housing providers, and other community organizations. In line with federal and State PH guidance the S&C TF may (as with COVID-19) develop Ps&Ps for:

- Addressing and preventing disease in shelter, housing, encampment, and other outdoor or services settings for clients and staff;
- Expanding and supporting additional shelter capacity to reduce risk and congestion;
- Securing and implementing NCS or other means for quarantine, isolation, and protection of vulnerable persons;
- Increasing and coordinating public health outreach to encampments to provide protective health and hygiene services and allow and encourage sheltering in place.

2. Working with public health authorities, critical Ps&Ps for preventing outbreaks in shelter, housing, encampments, outdoor, and service settings may include (as with COVID-19)

- Masking and other preventive clothing or gear for clients and staff;
- Limited or no visiting allowed;
- Infection screening procedures for all person entering the site or present;
- Hand washing stations and hand sanitizers;
- Environmental cleaning and disinfecting, and improving ventilation;
- Social distancing including beds and plexy glass separators for intake locations;
- Quarantine for actually or potentially infected persons, and isolation for high risk populations;
- Provision of meals and other basic needs onsite supporting sheltering-in-place; and
- Testing and providing vaccines.

ID-7a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section V.B.1.n.	
	Describe in the field below how your CoC:	
	1. effectively shared information related to public health measures and homelessness; and	
	2. facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.	

(limit 2,500 characters)

1. The CoC uses multiple techniques, grounded in emergency communication and trauma-informed principles, to broadly disseminate Public Health (PH) information to CoC providers and persons experiencing homelessness. The purpose is to ensure that CoC agencies and their clients receive clear, time-critical information from the PH authorities related to PH measures taken, changing requirements, CoC activities in support of PH authorities, and resources available for providers and clients. In responding to prior infectious diseases (e.g., Covid), the CoC has used all of the following communication techniques that could be adapted for future infectious outbreaks:

- Forwarding of all PH notices regarding new or changed local restrictions, as well as CDC and State changes, as soon as released to the list serve of CoC agencies.
- Timely e-mails to CoC agencies and other partner agencies on the availability of new resources or information, including CDC and State materials on the infectious disease response in homeless settings, HUD information, and national TA provider information.
- Development of a dedicated website for the homeless response system to be regularly updated with new PH notices, information on available resources including shelters, practices to prevent the transmission of the disease, and information on disease protections such as eviction moratoriums.

2. In addition, the CoC has facilitated communication between the local PH authorities and CoC providers in the following way that could be adapted for future use:

- Twice monthly conference calls with all CoC agencies and other organizations, with information provided by staff from the County’s HSD, HSA Public Health Division, and the County HPHP, and the leads for the County’s S&C in the areas of NCS, expanded congregate shelters, outreach to encampments, and shelter referral system.
- Regular Shelter Provider conference call meetings attended by public health and medical staff, to discuss PH notices, measures, protocols, processes, and available resources to prevent the transmission of infectious disease amongst shelter clients.
- Provision of contact information for all CoC agencies to facilitate direct communication with agencies by PH authorities.
- Relaying of sheltered-based infectious disease incident reports directly to PH to speed the response.
- Providing summaries of key needs and gaps in the homeless services system.

1D-8.	Coordinated Entry Standard Processes.	
	NOFO Section V.B.1.o.	

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

1.	can serve everybody regardless of where they are located within your CoC’s geographic area;
2.	uses a standardized assessment process to achieve fair, equitable, and equal access to housing and services within your CoC;
3.	collects personal information in a trauma-informed way; and
4.	is updated at least annually using feedback received from participating projects and households that participated in coordinated entry.

(limit 2,500 characters)

1. The CoC’s CES uses an “any door” access strategy to cover 100% of the CoC geography. Persons with housing challenges care complete the CES assessment by calling 2-1-1 or visiting any of these “Access Points”: Santa Cruz area - Housing Matters (HSC), Mental Health Client Action Network (MHCAN), Santa Cruz Public Library – Downtown, and Nations Finest; Watsonville area - Families in Transition (FIT), Community Action Board (CAB); Encompass Community Services Youth Drop-In Thrive Hive. Trained CES Connectors provide outreach and assessment at meal sites, shelters, encampments, or wherever needed.

2. Santa Cruz County CES uses a standardized assessment process in which the VI-SPDAT has been replaced in part to ensure fair and equitable access to housing. A locally developed assessment tool avoids the racial and other biases of the VI/SPDAT, while focusing on actionable questions related to housing barriers. The CES Ps&Ps prohibits discrimination and requires CES Connector agencies to ensure physical accessibility and language access.

3. Replacement of the assessment tool has helped to make the process more trauma-informed by avoiding the overly intrusive questions of the VI/SPDAT. CES Connectors are trained to carry out assessments in a trauma-informed way that empowers the client, is empathetic, is culturally responsive, and seeks to avoid triggers. The workflow is progressive to build trust as the conversation moves, sometimes over multiple days, from urgent needs and safety planning to the housing assessment and housing plan.

4. The CoC uses an independent evaluation as the key basis for annually updating CES. The CoC contracts with a local research firm, Applied Survey Research (ASR) to carry out an evaluation that includes 2 phases. During Phase 1 ASR conducts qualitative information gathering from people with lived experience, CES providers, housing programs that receive referrals from CES; and conducts key interviews to synthesize the findings. During Phase 2, ASR works with the CoC Operations Committee and CES stakeholders to develop a final report of findings and recommendations. The Operations Committee adopts proposed changes, and any major changes are forwarded to the CoC Board for final approval. Recent changes have included a full CES redesign, a new assessment tool and process, prioritization process improvements, and new CES Ps&Ps.

1D-8a.	Coordinated Entry–Program Participant-Centered Approach.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC's coordinated entry system:	
1.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;	
2.	prioritizes people most in need of assistance;	
3.	ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their needs and preferences; and	

	4. takes steps to reduce burdens on people seeking assistance.
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(limit 2,500 characters)

1. Outreach teams reach those least likely to apply. Marketing flyers and assessments are translated into Spanish. Most CES access points offer bilingual services and are ADA accessible. Persons with mental illness are reached through MHCAN. CES Connectors and outreach teams reach chronically homeless and other unsheltered persons. Veterans are reached through Nations Finest. Youth are reached by the YHDP-connected Encompass TAY Program. Immigrant farmworkers are reached through outreach and bilingual connectors. DV survivors are assessed and connected to DV providers. As part of the CES redesign, the CoC has worked with the Central California Alliance for Health (Medicaid managed care provider) to better reach the Medicaid-eligible population by linking CES with CalAIM enhanced case management and community support resources.

2. Threshold scores are used to prioritize those most in need who are likely to access housing. This is the score on the assessment tool that qualifies a participant to be added to the housing queue and to be considered prioritized for one or more of the housing resources available. A threshold score is established by the CES management by reviewing the current and anticipated inventory over a period of 90-180 days and estimates of how many referrals may be necessary to fill openings in a timely fashion while not adding participants to queues who are extremely unlikely to receive a referral. The specific factors for the ratio of anticipated referrals to openings and the length of time for the openings to occur is adopted and posted as a separate policy to allow for regular updating.

3. CES Ps&Ps require agencies to make multiple attempts to contact referred persons within 5 business days, and timeliness is an evaluation metric. The Ps&Ps also permit clients to decline a housing referral based upon needs and preferences without penalty; there is no limit on the number of referrals they may refuse.

4. One of the key reasons for the recent CES redesign was to make the process easier, less invasive, and more successful for clients. The assessment form is easier to complete, there fewer questions overall and fewer of a personal nature (e.g., sexual assault experience, jail experience, victim of attacks, etc.) than the VI-SPDAT. Finally, the process now focuses more on problem solving and actionable strategies that are likely to achieve housing outcomes.

1D-8b.	Coordinated Entry–Informing Program Participants about Their Rights and Remedies–Reporting Violations.	
	NOFO Section V.B.1.o.	

Describe in the field below how your CoC through its coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC’s geographic area and ensures it reaches all persons experiencing homelessness;
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.

(limit 2,500 characters)

1. The CoC uses CES to affirmatively market to persons who are members of underserved, over-represented classes to ensure they have meaningful access to housing and services within the CoC’s geography. The CES Ps&Ps require housing providers participating in CES to affirmatively market their housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability who are least likely to apply in the absence of special outreach, and to maintain records of those marketing activities. Housing assisted with CoC funds must also be made available to individuals and families without regard to actual or perceived sexual orientation, gender identity, or marital status. In addition, the CES program provides materials in English and Spanish including brochures and flyers. These materials are distributed in locations where people experiencing homelessness may visit, such as the library, certain restaurants, safety net clinics, homeless service agencies, etc. Advertising through 2-1-1 ensures that accurate information is available to all callers in multiple languages. Mental health advocacy and service organizations are contacted to ensure that information is available to people with mental illnesses. CES Connectors actively seek out people experiencing homelessness to engage them and offer services. CES information on the CoC website is updated, and is accessible to persons with disabilities.

2. The CES program informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws by posting signs, brochures, and flyers in prominent locations in all places where persons are likely to access/attempt to access CES, informing participants of their right to file a non-discrimination grievance. All CES assessor agencies are required to have and make available a copy of the CoC Ps&Ps for complaints and grievances and the associated forms.

3. The CoC and its agencies regularly works with California Rural Legal Assistance (CRLA) and Senior Citizens Legal Services to prevent, address, and resolve any fair housing complaints that might affect CoC or ESG-funded program participants. Every year, the CoC provides extensive information, including on affirmative housing conditions and actions, to all Consolidated Plan jurisdictions in the County.

1D-9.	Advancing Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section V.B.1.p.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	03/26/2024

1D-9a.	Using Data to Determine if Racial Disparities Exist in Your CoC's Provision or Outcomes of CoC Program-Funded Homeless Assistance.	
	NOFO Section V.B.1.p.	

Describe in the field below:

1.	the data your CoC used to analyze whether any racial disparities are present in your CoC's provision or outcomes of CoC Program-funded homeless assistance; and
2.	how your CoC analyzed the data to determine whether any racial disparities are present in your CoC's provision or outcomes of CoC Program-funded homeless assistance.

(limit 2,500 characters)

1. The CoC has a robust process for analyzing racial disparities in provision and outcomes of homeless assistance. Since 2019, CoC staff have been annually reviewing the HUD-provided CoC Racial Equity Analysis Tool to gain insight into disparities. In addition, starting in 2020, the County HSD Analytics Division has been annually using the Stella P tool to disaggregate CoC-wide HMIS data by race, ethnicity, gender, and other subpopulations to identify potential disparities. At each step, the CoC has presented and gained input on the data at meetings of the CoC Board and CoC membership, which have representatives of varied races and ethnicities and include persons with lived experience of homelessness. Through the 2023-24 State HHAP-5 funding process, the CoC carried out goal setting steps that included preparing a 2020 – 2022 trend analysis of PIT and HMIS disaggregated data, pinpointing specific disparities shown, and developing proposed trackable goals for 2024-28 for addressing the disparities.

2. The CoC's 2023-24 analysis primarily made use of the State of California's SPM Data Report on the Santa Cruz County CoC area, which used PIT and multi-year HMIS data. The report showed marked disparities among the following underserved subpopulations: Black/African American, American Indian/Alaska Native, Hispanic/Latinx, and Multiple Races. For example, 2022 PIT data found an increase of 65% over 2019 in homelessness among Blacks/Africans; 2022 PIT data found a more than 50% increase in first time homelessness among Blacks/Africans; 2021 HMIS data found that of persons served the following had the worst rate of successful PH placement: 13% - Multiple Race and 20% - Blacks/Africans.

1D-9b.	Implemented Strategies to Prevent or Eliminate Racial Disparities.	
	NOFO Section V.B.1.p	

Select yes or no in the chart below to indicate the strategies your CoC is using to prevent or eliminate racial disparities.

1.	Are your CoC's board and decisionmaking bodies representative of the population served in the CoC?	Yes
2.	Did your CoC identify steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC?	Yes
3.	Is your CoC expanding outreach in your CoC's geographic areas with higher concentrations of underrepresented groups?	Yes
4.	Does your CoC have communication, such as flyers, websites, or other materials, inclusive of underrepresented groups?	Yes

5.	Is your CoC training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness?	Yes
6.	Is your CoC establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector?	Yes
7.	Does your CoC have staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness?	Yes
8.	Is your CoC educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity?	Yes
9.	Did your CoC review its coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness?	Yes
10.	Is your CoC collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system?	Yes
11.	Is your CoC conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness?	Yes
Other:(limit 500 characters)		
12.	Encouraging small, BIPOC-led organizations representing marginalized communities to apply for CoC funds and offering technical assistance.	Yes

1D-9c.	Plan for Ongoing Evaluation of System-level Processes, Policies, and Procedures for Racial Equity.	
	NOFO Section V.B.1.p.	

Describe in the field below your CoC's plan for ongoing evaluation of system-level processes, policies, and procedures for racial equity.

(limit 2,500 characters)

The CoC is committed to evaluating and enhancing processes, policies, and procedures to eliminate racial disparities in CoC-funded services and outcomes. This plan incorporates data-driven strategies, feedback from persons with lived experience, and continuous improvement.

1. CoC-Level Processes, Policies, and Procedures: The CoC embeds racial equity throughout its system by addressing disparities and promoting inclusive access to resources. The CoC replaced the VI-SPDAT in CES with a racially unbiased assessment tool to minimize entry-point biases. Efforts to diversify the workforce ensure alignment with community demographics, particularly among outreach workers and CES connectors. Through partnerships with the County Workforce Development Board, the CoC focuses on hiring and training more people of color. All staff members receive training in cultural competency, trauma-informed care, and the CoC maintains bilingual staff.

2. Ongoing Evaluation: The CoC’s approach includes an annual equity assessment of CES and overall program access and outcomes by race and ethnicity. Disaggregated HMIS data, analyzed through Stella, helps identify disparities by race, ethnicity, and program type; guides necessary adjustments in services, prioritization, and outreach; and helps close racial disparities within CES, shelter access, and program utilization. The CoC also sets racial equity goals and performance measures each year to hold the system accountable.

The adult LEAB and Youth Lived Expertise Action Board (YLEAB), representing diverse racial and ethnic backgrounds, advise on racial equity strategies and review CoC policies. The LEAB and YLEAB meet regularly, providing feedback on gaps in service, offering real-time guidance, and supporting continuous improvement. They also bring perspectives that ensure BIPOC community needs are front and center in CoC decisions and service design. The CoC also incorporates perspectives of persons with lived experience in the PIT count. Hiring individuals with lived experience as guides enriches data quality and identifies hidden service access barriers, further contributing to system-level evaluation.

The CoC’s evaluations lead to specific actions, such as refining CES prioritization protocols, reallocating resources, and adjusting outreach strategies, expanding staff training, improved support for CES connectors, and professional development for people of color.

1D-9d.	Plan for Using Data to Track Progress on Preventing or Eliminating Racial Disparities.	
NOFO Section V.B.1.p.		
Describe in the field below:		
1.	the measures your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance; and	
2.	the tools your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance.	

(limit 2,500 characters)

1. The following are measures, adopted by the CoC on March 26, 2024, for tracking progress on preventing or eliminating the key disparities that have been identified to date through analysis:

- 1.reduction in the number of Black/African Americans and persons of Multiple Race who are homeless
- 2.reduction in the number of persons who are Hispanic/Latinx and American Indian/Alaska Native who become homeless for the first time;
- 3.increase in the number of Black/African Americans, persons who are American Indian/Alaska Native, and persons of Multiple Race groups who exit to permanent housing; and
- 4.decrease in the length of time homeless (median number of days to permanent housing move-in) for Black/African Americans.

2. Following are to tools used by the CoC:

- 1.County HSD Analytics Division has been annually using the Stella P tool to disaggregate CoC-wide HMIS data by race, ethnicity, gender, and other subpopulations to identify potential disparities;
- 2.The CoC annually reviews and analyzes the racial/ethnic disparity data in the State of California’s SPM Data Report on the Santa Cruz County CoC area, and
- 3.The CoC annually reviews and analyzes our CoC’s data in the HUD CoC Racial Equity Analysis Tool.

1D-10.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking–CoC’s Outreach Efforts.	
	NOFO Section V.B.1.q.	

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

(limit 2,500 characters)

The CoC actively engages individuals with lived experience of homelessness in leadership roles and decision-making processes through diverse, targeted outreach strategies. These efforts include adding individuals with lived experience to e-blast lists, targeted newsletters, and social media channels to keep them informed of leadership opportunities and key CoC events. Additionally, CoC agencies are encouraged to invite clients to attend pivotal CoC meetings, often providing meals to enhance accessibility and participation.

Direct recruitment is an essential component of our outreach, including targeted invitations for people with lived experience to serve on the CoC, the CoC Board, and the Funding Review Committee. Youth engagement is a priority as well; the CoC formed the Youth Advisory Board (YAB) for the Youth Homelessness Demonstration Program (YHDP), which provides stipends to compensate participants for their time and insights. Furthermore, as part of the CoC’s 3-year strategic framework, Focus Strategies held 3 focus groups in emergency shelters, where feedback was gathered on needs and solutions.

The CoC also recently established the Lived Expertise Action Board (LEAB) and the Youth Lived Expertise Action Board (YLEAB). These boards provide pathways for members to contribute meaningfully to decision-making. In recruiting members for these boards, the CoC used a combination of e-mail, social media, and direct in-person outreach. Multiple invitations to apply were sent out and information on the opportunity was posted on the CoC website. Numerous applications were received and 5 members each were eventually selected for both the LEAB and YLEAB. Each group meets monthly and members are compensated for their time and expertise at \$25 per hour for a 20-hour monthly commitment.

To further support leadership development, County HSD and Housing Matters are coordinating a new training initiative funded by County general funds. Through this initiative, individuals with histories of homelessness are trained to participate in CoC working groups, enhancing their role in the homelessness response system.

Finally, the CoC ‘s annual PIT count has included recruiting and training people with lived experience to serve as temporary employees for the count. The CoC also worked with Applied Survey Research to hire and train people with lived experience to support the evaluation of our local CES.

1D-10a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.q.	

You must upload the Lived Experience Support Letter attachment to the 4B. Attachments Screen.

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the four 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.	Routinely included in the decisionmaking processes related to addressing homelessness.	15	4
2.	Participate on CoC committees, subcommittees, or workgroups.	15	4
3.	Included in the development or revision of your CoC's local competition rating factors.	2	1
4.	Included in the development or revision of your CoC's coordinated entry process.	10	5

1D-10b.	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.q.	

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

(limit 2,500 characters)

The CoC is dedicated to creating professional development and employment opportunities for individuals with lived experience of homelessness. Through partnerships with the County Workforce Development Board (WDB), the CoC encourages employers to utilize state and federal tax incentives for hiring individuals experiencing homelessness, promoting long-term employment.

The CoC actively invests in skill-building initiatives through various programs. For instance, a CoC staff member launched a Transition Age Youth (TAY) professional development project that pairs mentorship with leadership training. Similarly, the County Human Services Department (HSD) offers paid employment through CalFresh Employment and Training contracts with Downtown Streets Team, Community Action Board (CAB), Housing Matters, and the Homeless Garden Project (HGP). These roles include structured training and advancement opportunities.

The County’s CORE Investments initiative further supports individuals with lived experience in leadership and public advocacy roles. Housing Matters’ Community Conversations on Homelessness program provides paid speaking engagements and storytelling opportunities, empowering individuals to share their experiences and promote community understanding. Additionally, CAB’s Youth Homeless Response Team connects young adults with employment, education, and mentorship, and HGP’s transitional employment program offers job training and support services.

For those in need of specialized support, the County Health Services Agency’s Healing the Streets program hires peer recovery specialists funded by SAMHSA to provide outreach and treatment services.

The CoC also emphasizes employment inclusivity by hiring individuals with lived experience for service-oriented roles within member organizations, offering training and promotion paths to foster professional growth. The County’s Point-in-Time (PIT) count contract employs individuals with lived experience as guides for annual counts, providing both compensation and training.

The CoC supports career development for individuals with lived experience in county departments, such as HSD, where hires receive professional development resources, leadership training, and mentorship. Cabrillo College also links former foster youth facing homelessness with housing, employment, and supportive services, further enhancing the CoC’s commitment to economic mobility for those with lived experience.

1D-10c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.q.	

Describe in the field below:	
1.	how your CoC gathers feedback from people experiencing homelessness;
2.	how often your CoC gathers feedback from people experiencing homelessness;
3.	how your CoC gathers feedback from people who received assistance through the CoC Program or ESG Program;
4.	how often your CoC gathers feedback from people who have received assistance through the CoC Program or ESG Program; and

5.	steps your CoC has taken to address challenges raised by people with lived experience of homelessness.
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(limit 2,500 characters)

1. The CoC gathers feedback from individuals experiencing homelessness through a range of structured and ongoing channels. Regular engagement opportunities include participation as members - or as community members - in CoC meetings, Board meetings, committees, and working groups, as well as involvement in the Youth Advisory Board (YAB) for the Youth Homelessness Demonstration Program (YHDP). In addition, the CoC conducts community stakeholder sessions, client surveys, and focus groups within shelters. Feedback is also obtained from an extensive survey that reaches up to 400 individuals experiencing homelessness.

2. Our feedback gathering is ongoing and focused on key decisions and activities. For example, the 400-person survey happens every year in conjunction with the PIT count. The CoC Board meets every other month, while the lived expertise boards meet monthly. The CoC funding process takes place annually although the Funding Review Committee also meets earlier to help set CoC funding priorities. Surveys, focus groups, and community stakeholder meetings take place on an ad hoc basis when there is need for specific input, such as when we updated the 3-Year Strategic Homelessness Framework, or developed our State Regionally Coordinated Plan.

3. The methods under 1. above also apply to persons who receive CoC or ESG assistance. We also request that CoC applicants provide client survey and focus group information so that the views of clients can be considered during the project review, rating, and ranking process.

4. Again, the timing described in 2. above also applies to persons who receive CoC or ESG assistance. The client survey and focus group information is requested once per year during the annual CoC funding process.

5. In response to specific challenges raised by those with lived experience, the CoC has implemented targeted changes, including revising the Coordinated Entry System (CES) assessment tool to address racial and ethnic biases, establishing new Lived Expertise Advisory Boards (LEABs), and launching leadership development programs in collaboration with Housing Matters. By partnering with Applied Survey Research (ASR), the CoC has also strengthened the Point-in-Time count methodology, hiring individuals with lived experience to guide data collection and evaluate CES outcomes, ensuring a robust feedback loop that continuously addresses system challenges and drives service improvements.

1D-11.	Increasing Affordable Housing Supply.	
	NOFO Section V.B.1.s.	

Describe in the field below at least two steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC's geographic area regarding the following:

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

(limit 2,500 characters)

The CoC’s recently updated 3-Year Strategic Framework includes the following goal: “Work toward ensuring all jurisdictions within the County meet or exceed their Regional Housing Needs Allocation (RHNA) very low-income housing production goals over the 8-year period between (2023-2031). In the past 12 months the CoC has:

1. Increasing Development - Zoning and Land Use.
 - Advocated for meeting and exceeding these goals through actions that include streamlining the planning process and reducing key barriers to land use approvals.
 - Presented twice to the County Board of Supervisors regarding the importance of addressing homelessness by meeting RHNA goals relating to housing supply and the negative impact that planning barriers have on achieving these goals.
 - Participated in 3 affordable housing month events – faith-based housing promotion, landlord appreciation and outreach, and regional affordable housing web portal demonstrations.
 - Supported a prohousing designation educational campaign in partnership with Housing Santa Cruz County.
 - Coordinated with the Central California Alliance for Health to develop and implement a new revolving supportive housing loan fund.
 - Collaborated with Housing Santa Cruz County on their efforts to support affordable and supportive housing development projects throughout the County.
 - Joined with the Housing Authority and Housing Santa Cruz County to bring local government leaders together with developers quarterly around affordable housing pipeline development;

2. Increasing Development - Reducing Regulatory Barriers -
 - Worked with California Project Homekey staff around overcoming highly complex, onerous grant application requirements that were a barrier for the developers of several Project Homekey PSH developments.
 - Supported efforts by the Park Haven Plaza, Vets Village, and Freedom Youth TH project developers to address County of Santa Cruz zoning and land use issues, such as density bonuses, parking, and use of manufactured buildings, needed for project approval.
 - Engaged in collaborative efforts to prevent the loss of affordable housing units and tenant stability with housing projects that have expiring affordability restrictions.
 - Work with the Santa Cruz County Community Development and Infrastructure Department to identify specific regulatory barriers to becoming a state-designated prohousing community.

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

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1E-1.	Web Posting of Advance Public Notice of Your CoC’s Local Competition Deadline, Scoring and Rating Criteria.	
	NOFO Section V.B.2.a. and 2.g.	

1.	Enter the date your CoC published its submission deadline and scoring and rating criteria for New Project applicants to submit their project applications for your CoC’s local competition.	08/09/2024
2.	Enter the date your CoC published its submission deadline and scoring and rating criteria for Renewal Project applicants to submit their project applications for your CoC’s local competition.	08/09/2024

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

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

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

1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Provided points for projects that addressed specific severe barriers to housing and services.	Yes
5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes

6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	Yes
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1E-2a.	Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below. NOFO Section V.B.2.a., 2.b., 2.c., and 2.d.	
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You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.
 Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	110
2.	How many renewal projects did your CoC submit?	9
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process. NOFO Section V.B.2.d.	
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Describe in the field below:

1.	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
4.	the severe barriers your CoC considered.

(limit 2,500 characters)

1. The CoC required renewal projects to provide HMIS or comparable database information from APRs, including housing performance data, for their most recently completed program year. The projects were asked to use the APR data to complete application questions demonstrating their performance against local performance targets for housing stability (PH exits or retention), program occupancy, returns to homelessness, and length of stay, among others targets. New projects had no APR data but provided information on program design and past performance with similar programs. Funding Review Committee members read each application and APR, had the chance to comment including on housing performance, and engaged in robust discussion of each project. All renewals recommended had strong data-based housing performance and all new projects had strong experience and plans for helping clients to obtain and remain in housing.

2. In considering how long it takes to house people, the CoC analyzed HMIS and comparable database data and financial data as follows: for PSH projects, program occupancy (low occupancy as sign that housing is taking a long time) and spending data (low spending as a sign of slowness in securing units); for RRH projects, housing placement rate (low placement rate showing ineffectiveness) and length of stay (too long in the program as a sign of a slow housing process). The CoC also considers CES speed in housing persons referred to PH.

3. The 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 (e.g., severe mental illness or substance abuse), and DV experience. A bonus point was offered to new housing projects that agreed to serve persons who are undocumented or who are justice-system-involved.

4. Our CoC has identified a high level of need for and prioritizes projects that serve the most vulnerable client populations. The severe barriers considered were projects that serve persons with the longest homelessness histories and most severe barriers (e.g., severe mental illness, substance use, physical disabilities, medically frail, advanced age) among persons who qualify as CH or DedicatedPlus; all persons fleeing or attempting to flee DV; and households with a pregnancy or infant among families and unaccompanied youth.

1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.	
	NOFO Section V.B.2.e.	

Describe in the field below:	
1.	how your CoC used input from persons of different races and ethnicities, particularly those over-represented in the local homelessness population, to determine the rating factors used to review project applications;
2.	how your CoC included persons of different races and ethnicities, particularly those over-represented in the local homelessness population in the review, selection, and ranking process; and
3.	how your CoC rated and ranked projects based on the degree that proposed projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and steps the projects took or will take to eliminate the identified barriers.

(limit 2,500 characters)

1. Efforts to include and center the voices of overrepresented races and ethnicities have been discussed at all levels, including the CoC Board, CoC general membership and committees, and H4H staff. Our most recent data indicate the following groups are over-represented: Black/African American, American Indian/Alaska Native, Hispanic/Latinx, and Multiple Races. CoC staff and membership are more representative of these groups than the general Santa Cruz County population. Thus, input from over-represented races and ethnicities is received and included through CoC membership and meetings, one-on-one contact, surveys, focus groups, and working groups. The input received from these persons, especially members of the traditionally underserved Latinx community in South County, was instrumental in the CoC’s recent decisions to increase racial equity scoring factors in its rating and ranking tools and to add a new scoring question requesting a narrative response on experience advancing BIPOC and LGBTQ+ equity; to ensure BIPOC participation in rating and ranking; and to (1) include language in our CoC solicitation of applications specifically encouraging applications from applicants representing LGBTQ+ and races/ethnicities overrepresented in the homeless population, and (2) target outreach to small BIPOC-led organizations.

2. 33% of the Funding Review Committee that made ranking recommendation was made up of those over-represented. The committee had 6 persons and the over-represented persons were Latinx and Tamil Indian. Three committee members had lived experience of homelessness and at least one was LGBTQ+. CoC staff, who coordinated the rating and ranking process, included one Latinx and one Black person, and one with lived experience.

3. The increased racial/ethnicity scoring criteria adopted by the CoC were used in the review and ranking process to assess projects’ prior experience and future 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.	
	NOFO Section V.B.2.f.	

Describe in the field below:

1.	your CoC’s reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC’s local competition this year;
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

(limit 2,500 characters)

1. The CoC has an explicit policy to reallocate 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 persons experiencing chronic homelessness, would better reduce homelessness. The CoC Board sets the written reallocation policy, and reallocation recommendations are made by the Funding Review Committee based upon its review, scoring, and assessment of the of the project. TH projects that are no longer viewed as good use of funds, and projects which score 85 or below, or which show especially poor performance in a key area such as housing stability or spend down rates, will be considered for reallocation. The policy was updated this year to include DV and YHDP reallocation. Also, the CoC has a self-reallocation policy option 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 four competitive renewal projects with performance issues. All four had significant under-spending issues.

3. After careful consideration, the CoC decided not to reallocate any funds this year for the reasons below.

4. After careful consideration, the CoC did not reallocate any funds from the under-spending projects due to their importance (all were PSH, RRH, or CES), potential for causing housing loss for clients currently in the projects, and good performance in non-spending areas.

1E-4a.	Reallocation Between FY 2019 and FY 2024.	
	NOFO Section V.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2019 and FY 2024?	No
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1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	Yes
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	Yes
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	10/15/2024

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	10/15/2024
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project Status–Accepted, Rejected, Reduced Reallocated, Fully Reallocated; 4. Project Rank; 5. Amount Requested from HUD; and 6. Reallocated Funds +/-.	Yes
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1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website–which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	10/28/2024
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1E-5d.	Notification to Community Members and Key Stakeholders by Email that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC’s website or partner’s website.	10/28/2024
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2A. Homeless Management Information System (HMIS) Implementation

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Enter the name of the HMIS Vendor your CoC is currently using.	BitFocus 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 V.B.3.a.	

	Enter the date your CoC submitted its 2024 HIC data into HDX.	04/12/2024
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2A-4.	Comparable Databases for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

In the field below:

- | | |
|----|--|
| 1. | describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases; and |
| 2. | state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database—compliant with the FY 2024 HMIS Data Standards. |

(limit 2,500 characters)

1. The CoC’s two DV providers, Monarch Services and WAFWC, both meet HUD’s comparable database requirements. Our local funding policies and selections tools require that any DV agency requesting or receiving CoC or ESG funds 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. BitFocus also provides technical assistance to these agencies to 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.

2. WAFWC selected and uses the Social Solutions Apricot comparable database, while Monarch Services selected and uses Osnium. Both have been updated and are compliant with the 2024 HMIS Data Standards.

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

Using the 2024 HDX Competition Report we issued your CoC, enter data in the chart below by project type:

Project Type	Adjusted Total Year-Round, Current Non-VSP Beds [Column F of HDX Report]	Adjusted Total Year-Round, Current VSP Beds [Column K of HDX Report]	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database [Column M of HDX Report]	HMIS and Comparable Database Coverage Rate [Column O of HDX Report]
1. Emergency Shelter (ES) beds	324	14	277	81.95%
2. Safe Haven (SH) beds	0	0	0	100.00%
3. Transitional Housing (TH) beds	92	0	92	100.00%
4. Rapid Re-Housing (RRH) beds	426	18	444	100.00%
5. Permanent Supportive Housing (PSH) beds	650	0	650	68.77%
6. Other Permanent Housing (OPH) beds	602	0	602	0.00%

2A-5a.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.	
	NOFO Section V.B.3.c.	

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

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

(limit 2,500 characters)

1. CoC and HMIS staff will meet with leadership of the following programs to encourage them to begin participation in HMIS. None are required to participate so they must be convinced it is in their interest. Progress has been made in discussions with each of the following groups as outlined below.

- Department of VA – VASH Program (434 PSH beds) have been working on, but have not yet completed, an export process for sharing HOMES data with the CoC HMIS team for integration with HMIS data.
- Housing Authority – Homeless-Targeted Mainstream Voucher, DMV Vouchers, EHV Vouchers, and FUP Vouchers (872 total PSH & OPH beds) has discussed development of a collaborative data sharing MOU with the CoC.
- Faith-based emergency shelters (33 total not entered into HMIS) have had ongoing discussions of the challenges to participating in HMIS

2. To implement these steps, the CoC will: (1) present information about the benefits of HMIS and HMIS bed coverage rates and of data sharing to program leadership staff, (2) continue meeting formally with leadership staff of each program to troubleshoot barriers to using HMIS and develop solutions, (3) assist each program to develop and implement a plan for starting to use HMIS; (4) coordinate with BitFocus to provide free licenses, training, and start up support; and (5) report progress to the CoC Board.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2024 HDX Competition Report to the 4B. Attachments Screen.	
	Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by January 24, 2024, 11:59 p.m. EST?	Yes

2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC conducted its 2024 PIT count.	01/24/2024
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2024 PIT count data in HDX.	05/10/2024
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2B-3.	PIT Count–Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

	Describe in the field below how your CoC:	
1.	engaged unaccompanied youth and youth serving organizations in your CoC’s most recent PIT count planning process;	
2.	worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC’s most recent PIT count planning process; and	
3.	included youth experiencing homelessness as counters during your CoC’s most recent unsheltered PIT count.	

(limit 2,500 characters)

1. In 2024, the CoC conducted a supplemental youth count to ensure that unaccompanied children and transition-age youth (TAY) were accurately represented in the point-in-time (PIT) count. Youth recruited by YHDP initiative-participating agencies and other providers serving youth and TAY were engaged to help design and plan the supplemental youth count and recruit other youth currently experiencing homelessness to serve as guides for the count.

2. The youth who assisted helped to identify and select locations where youth experiencing homelessness were most likely to be identified, and youth enumerators served as guides to those locations. The youth played a key role in ensuring count completeness due to their unique knowledge and access. A total of 199 unaccompanied children and TAY were counted, of whom 95% were unsheltered.

3. The youth who assisted were counters and integral members of the teams enumerating the youth. They were paid \$20 per hour for time spent both in training and taking part in the count. The youth worked in teams of two to four persons counting different areas, with each team coordinated and supervised by street outreach workers.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	

In the field below:	
1.	describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2023 and 2024, if applicable;
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2023 and 2024, if applicable;
3.	describe whether your CoC's PIT count was affected by people displaced either from a natural disaster or seeking short-term shelter or housing assistance who recently arrived in your CoCs' geographic; and
4.	describe how the changes affected your CoC's PIT count results; or
5.	state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2024.

(limit 2,500 characters)

N/A - there were no changes to our sheltered and unsheltered count processes, nor was our PIT count affected by natural disaster. Also, we were not part of a CoC merger.

2C. System Performance

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2C-1.	Reducing the Number of First Time Homeless—Risk Factors Your CoC Uses.	
	NOFO Section V.B.5.b.	
	In the field below:	
	1. describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;	
	2. describe your CoC’s strategies to address individuals and families at risk of becoming homeless; and	
	3. provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the number of individuals and families experiencing homelessness for the first time	

(limit 2,500 characters)

1. 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 395-person random survey for the PIT count asked several first-time time homeless risk factor questions. Key risk factors were: lost job (36%), eviction (29%), substance use (22%), divorce or separation (15%), and domestic violence (15%). Our 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 the extremely high cost to maintain rental housing.

2. The CoC has shown increasing success with a plan to prevent first-time homelessness that 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 rental assistance among households at risk of eviction; implementing robust problem solving and diversion strategies as part of CES; emphasizing job services (CalFresh Employment Training and Workforce Santa Cruz linkages) and connecting them to housing and stabilization services; and expanding both health insurance enrollment and community health services.

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

2C-1a.	Impact of Displaced Persons on Number of First Time Homeless.	
	NOFO Section V.B.5.b	

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

1.	natural disasters?	No
2.	having recently arrived in your CoC's geographic area?	No

2C-2.	Reducing Length of Time Homeless—CoC's Strategy.	
	NOFO Section V.B.5.c.	

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

(limit 2,500 characters)

1. The CoC has redoubled its strategy to reduce the length of time individuals and families remain homeless by 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 funded several new PSH projects; asked all PSH to meet length-of-time homeless performance targets by program type; made serving persons with the longest length-of-time homeless a high priority for CoC-funded PSH; asked providers to ID and prioritize this group; added new housing navigation teams and a problem solving fund; increased resources for RRH programs; recruited volunteer housing navigators; and funded a Housing Authority Landlord Incentive Program to incentivize speedy rentals to households experiencing homelessness by covering some costs for damages, missed rent, and vacancies.

2. In addressing needs of persons with the longest length of time experiencing homelessness, the CoC’s CES uses assessment questions on length of homelessness to identify and prioritize persons with the longest length-of-time experiencing homelessness for PSH, building upon Project 180 Together and Rehousing Wave housing teams. Also, the CoC adopted CPD 16-11; worked with the Housing Authority to prioritize long-term homeless in special purpose voucher programs (e.g. mainstream vouchers); established several voucher preferences, such as our 150 voucher preference for Disabled Medically Vulnerable (DMV) Homeless; and made use of the Housing Authority moving on programs to free S+C and DMV voucher spaces for persons with a very long length-of-time experiencing homelessness.

3. Responsible: County Housing for Health CES Team.

2C-3.	Successful Permanent Housing Placement or Retention –CoC’s Strategy.	
	NOFO Section V.B.5.d.	

	In the field below:	
	1. describe your CoC’s strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;	
	2. describe your CoC’s strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and	
	3. provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to increase the rate that individuals and families exit to or retain permanent housing.	

(limit 2,500 characters)

1. The CoC has successfully improved its rate of exit to PH in spite of the extremely high-cost rental market in Santa Cruz. Key CoC strategies include: implementation of CES in ES and TH sites; CoC-wide implementation of Housing First; persistent focus on locating housing by the CES; the addition of housing navigators or housing-focused case management in all ES, TH, and RRH programs; housing surge strategies through Project 180 Together and Rehousing Wave programs; the use of County-funded housing navigation teams and a problem-solving fund in the Rehousing Wave; the use 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 use of one-time resources, such as ESG-CV and EHV.

2. Strategies that have contributed to 95% PH retention include: steady increases in the number of PH subsidies (making staying housed possible for extremely low-income persons) through HCV preferences for disabled medically vulnerable persons experiencing homelessness, and special purpose homeless-targeted programs such as FUP, mainstream, and EHV vouchers; the stabilization of persons experiencing chronic homelessness 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.

3. Responsible: Housing Authority of the County of Santa Cruz.

2C-4.	Reducing Returns to Homelessness—CoC's Strategy.	
	NOFO Section V.B.5.e.	

In the field below:	
1.	describe your CoC's strategy to identify individuals and families who return to homelessness;
2.	describe your CoC's strategy to reduce the rate that individuals and families return to homelessness; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.

(limit 2,500 characters)

1. The CoC’s cumulative rate of returns to homelessness over 0 -12 months remained very low – 9%. 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, our CES program 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 is as follows: the implementation of a CoC return to homelessness performance scoring standard of no more than 20% for all program types; CoC program and CES Connectors 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 persons 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 HSD resources for prevention and the connection of prevention, diversion, and problem solving strategies to CES.

3. Responsible: Housing for Health Senior Analyst, Human Services Department.

2C-5.	Increasing Employment Cash Income–CoC’s Strategy.	
	NOFO Section V.B.5.f.	
	In the field below:	
1.	describe your CoC’s strategy to access employment cash sources;	
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income; and	
3.	provide the organization name or position title that is responsible for overseeing your CoC’s strategy to increase income from employment.	

(limit 2,500 characters)

1. The CoC employs a variety of methods to help unhoused 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 advancement support and education and training activities for career advancement and higher paying jobs. Important strategies include: setting annual performance targets for increasing employment (25% employed); closely monitoring CoC-funded program employment performance as reported in the APR; supporting homeless-targeted employment programs such Homeless Garden Project (HGP) and Downtown Streets Team, which offer supportive employment environments that often are the first step toward a future of employment; providing paid jobs with training and advancement opportunities for persons experiencing homelessness through CalFresh Employment and Training contracts with Downtown Streets Team, Community Action Board, Housing Matters, and HGP; and supporting grants and projects that provide employment opportunities for clients including through CoC and YHDP projects, local CORE Investments grants, SAMSHA funding for peer outreach, and PIT guide teams.

2. The CoC also works closely with mainstream employment organizations, e.g., by partnering with the County Workforce Development Board (WDB) to promote state and federal tax deductions for employers that hire individuals experiencing homelessness, by signing an MOU with the WDB giving service priority to persons experiencing homelessness, and by 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. In addition, the CoC has encouraged PSH providers to partner with the Community Connections, which helps SMI consumers with employment; fostered a range of links to Cabrillo College for career education especially for youth and young adults served by the YHDP initiative; and initiating an H4H staff-led TAY professional development and mentorship project within HSD.

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

2C-5a.	Increasing Non-employment Cash Income—CoC's Strategy	
	NOFO Section V.B.5.f.	
	In the field below:	
	1. describe your CoC's strategy to access non-employment cash income; and	
	2. provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.	

(limit 2,500 characters)

1. The CoC works to help persons experiencing homelessness to both gain access to mainstream income benefits and apply for and receive all the cash benefits to which they are entitled 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.

In the area of access, the following are key CoC strategies: training case managers at all agencies on how participants identify, apply for, and receive cash benefits, gather documents, attend benefits appointments, and to overcome any barriers to program access that client may be experiencing; supporting the County Homeless Persons Health Project's 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.

2. Responsible: System Operations, Data and Evaluation Committee

3A. Coordination with Housing and Healthcare

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3A-1.	New PH-PSH/PH-RRH Project–Leveraging Housing Resources.	
	NOFO Section V.B.6.a.	
	You must upload the Housing Leveraging Commitment attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	Yes
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3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
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3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections V.B.6.a. and V.B.6.b.	

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

Project Name	Project Type	Rank Number	Leverage Type
Shelter Plus Care...	PH-PSH	10	Both

3A-3. List of Projects.

1. What is the name of the new project? Shelter Plus Care Consolidated FY 2024 Expansion

2. Enter the Unique Entity Identifier (UEI): MMHHPJVM37K7

3. Select the new project type: PH-PSH

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

5. Select the type of leverage: Both

3B. New Projects With Rehabilitation/New Construction Costs

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3B-1.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.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
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3B-2.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.B.1.r.	

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

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

(limit 2,500 characters)

N/A

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

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
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3C-2.	Cost Effectiveness of Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

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

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

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

(limit 2,500 characters)

N/A

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

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

4A-1.	New DV Bonus Project Applicants.	
	NOFO Section I.B.3.j.	

	Did your CoC submit one or more new project applications for DV Bonus Funding?		Yes
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4A-1a.	DV Bonus Project Types.	
	NOFO Section I.B.3.j.	

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 2024 Priority Listing.

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

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

4A-3.	Data Assessing Need for New DV Bonus Housing Projects in Your CoC's Geographic Area.	
	NOFO Section I.B.3.j.(1)(c) and I.B.3.j.(3)(c)	

1.	Enter the number of survivors that need housing or services:	199
2.	Enter the number of survivors your CoC is currently serving:	75
3.	Unmet Need:	124

4A-3a.	How Your CoC Calculated Local Need for New DV Bonus Housing Projects.	
	NOFO Section I.B.3.j.(1)(c)	
	Describe in the field below:	
	1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-3 element 1 and element 2; and	
	2. the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects); or	
	3. if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.	

(limit 2,500 characters)

1. Survivors Needing Housing or Services: The CoC created an ad hoc report gathering and analyzing all related DV data from the sources listed below. Our estimated demand for survivors seeking DV housing or services is 199 since we had information from the State of California data warehouse information indicating that 199 DV survivors had sought and were receiving services within the Santa Cruz County CoC. This is a conservative figure since we all know that 278 persons indicated fleeing DV was their primary cause in the 2024 PIT count report, and that Monarch’s crisis line fielded over 2000 calls for help in 2023.

Survivors Currently Served by CoC: The CoC added the numbers of persons currently receiving core services at Monarch and at WAFWC in shelter and housing programs – 75 survivors – to arrive at the number currently receiving housing and service assistance.

2. HMIS, LSA data as reported in Stella, Monarch Osnum comparable data, and WAFWC Apricot data.

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; and economic hardship leading survivors to stay with the abuser. According to Monarch data, in recent years there has been a 75% increase in the demand for DV services such as counseling, emergency shelter, housing aid, financial aid, transportation, and support. In addition, the needs and traumas of persons fleeing DV are unique and often hard for non-DV-trained providers to effectively address.

4A-3b.	Information About Unique Project Applicant Requesting New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)	
	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.	

Applicant Name
Monarch Services-...
Walnut Avenue Fam...

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

4A-3b.	Information About Unique Project Applicant Requesting New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)	

Enter information in the chart below on the project applicant that applied for one or more New DV Bonus housing projects included on your CoC's FY 2024 Priority Listing for New Projects:

1.	Applicant Name	Monarch Services-Servicios Monarca
2.	Rate of Housing Placement of DV Survivors–Percentage	95%
3.	Rate of Housing Retention of DV Survivors–Percentage	92%

4A-3b.1.	Applicant's Housing Placement and Retention Data Explanation.	
	NOFO Section I.B.3.j.(1)(d)	

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

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

(limit 1,500 characters)

1. For Housing Placement – We pulled data from 2022, 2023, and the first two quarters of 2024, and calculated the percentage of survivors who secured long-term housing from the total number of housing clients served. We chose a two-and-a-half-year duration to give a more accurate sense of both placement and long-term retention rates.

For Housing Retention – We used the same data period, and calculated the percentage of clients who had maintained their housing for at least six months post-service completion.

2. Both rates account for exits to safe housing destinations. We continue to provide housing support for up to 24 months after a long-term housing placement has been secured. Surveys are conducted with clients assessing housing status, financial stability, etc. at the three-, six-, and twelve-month marks post-housing placement. Once services have concluded, Monarch Housing staff conducts a six-month post-service survey to assess the longer-term financial stability of survivors/families and inform the program’s service delivery model moving forward.

3. Housing retention is calculated using data from our case management system, Osnium, as well as data from survivor feedback and outcome surveys conducted by housing case management staff.

4. The data source for the above percentages is Osnium. This system allows us to track and generate reports across service areas, survivor identifiers, and outcomes.

4A-3c.	Applicant’s Experience Housing DV Survivors.	
	NOFO Section I.B.3.j.(1)(d)	

Describe in the field below how the project applicant:	
1.	ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;
2.	prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC’s emergency transfer plan;
3.	determined survivors’ supportive services needs;
4.	connected survivors to supportive services; and
5.	moved survivors from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.

(limit 2,500 characters)

1. For survivors in acute crisis, Monarch utilizes our emergency, confidential shelter until the client is safe and stabilized (on average, 90 days), then assists with placement in either a transitional housing unit or a long-term rapid rehousing unit depending on their preference. The shelter and housing programs collaborate to support the client with immediate housing and crisis support while providing transitional and long-term housing case management. For clients not in need of confidential shelter, we assess their situation and either place them directly in transitional housing or ensure they have a stable and safe place to reside while searching for a long-term placement.

2. Monarch has a comprehensive screening process to ensure survivors are stably housed across all programs. We work closely with community partners for external referrals. A client must meet Monarch’s core service requirements (being a survivor of domestic violence, sexual assault, or human trafficking) to receive services. We coordinate closely with the CoC’s emergency transfer plan and the Coordinated Entry team to prioritize survivors’ housing needs.

3. Supportive services are tailored to each client based on their stated needs and goals. If vocational training is a goal, Case Managers assist with searching for options, and the agency provides funding for up to nine months of programming. If childcare is needed, the Case Manager helps find options, and the agency can provide funding for the duration of the client’s program.

4. Any client meeting Monarch’s criteria can receive services from all agency programs. Supportive services can include therapy, support groups, DV education, legal assistance, and trauma-informed support. All housing staff are certified DV Counselors and provide trauma-informed services tailored to survivors of violence.

5. Monarch’s Housing Program offers both a 24-month transitional housing facility and rapid rehousing options. Case Managers ensure clients are not placed in housing they cannot sustain, and provide financial literacy training, vocational skills support, and gradual assistance to foster independence.

4A-3d.	Applicant’s Experience in Ensuring DV Survivors’ Safety.	
	NOFO Section I.B.3.j.(1)(d)	

	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:	
	1. taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;	
	2. making determinations and placements into safe housing;	
	3. keeping survivors’ information and locations confidential;	
	4. training staff on safety and confidentiality policies and practices; and	
	5. taking security measures for units (congregate or scattered site), that support survivors’ physical safety and location confidentiality.	

(limit 2,500 characters)

1. Staff prioritizes confidentiality at every point. As part of intake, staff seeks the safest method of contact for each survivor. We do not leave messages or send emails without permission. We have two vehicles that allow staff to meet survivors in a location accessible and safe for them. We offer transportation or virtual appointments as needed.

2. The shelter and housing programs have comprehensive screening processes to determine if survivors qualify for emergency shelter and/or housing assistance. Survivors/families in acute crisis are brought into our shelter environment first, where they receive wraparound support. Once stabilized, clients work closely with the case manager and the housing program to determine next steps, including securing and maintaining housing. Often, survivors are invited to stay in our TH units once out of immediate danger and then work with the housing program to find long-term housing. This prevents survivors from returning to an abusive environment in the interim.

3. All client information is kept strictly confidential. Files and internal databases are stored in secure locations. When records are subpoenaed, the agency files Motions to Quash to prevent disclosure. Staff must receive written consent and discuss safety concerns directly with clients before sharing information with any outside partner or landlord. The agency’s shelter location is confidential, and the office address is used for client mail. For housing placements, Case Managers work with survivors to create a safety plan.

4. Monarch has a contract attorney and a staff paralegal who provide annual training on confidentiality, privilege, and best practices around filekeeping. Monarch’s leadership team consistently quality-checks our safety and confidentiality mechanisms and consults with experts to ensure consistency with best practices.

5. The confidential shelter and TH have security systems, including cameras and a 911-connected alarm system. Staff are present 7 days a week, and on-call advocates and managers are available 24 hours a day via our crisis line. The TH is located four blocks from the police station. Ps&Ps prevent abusers from entering the facility. Scattered-site units are thoroughly vetted and a comprehensive safety plan is developed. We help with phone number/plan changes to prevent tracking, lock changes from landlords, or installing security systems.

4A-3d.1.	Applicant’s Experience in Evaluating Its Ability to Ensure DV Survivors’ Safety.	
	NOFO Section I.B.3.j.(1)(d)	

Describe in the field below how the project evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement throughout the project’s operation.

(limit 2,500 characters)

Monarch offers a continuum of supportive services that prioritize the safety and well-being of survivors. These services include a 24/7 bilingual Crisis & Support line where survivors receive immediate support, even outside regular business hours. Monarch’s shelter program offers the only emergency confidential shelter in the county, designed to provide immediate, temporary housing to survivors of violence and their families seeking safety. Intake assessments, regardless of the program of entry, screen for immediate safety needs and prioritize those areas first. Immediate needs might be shelter placement, assistance with an emergency protective order, or transportation to a safe location. Only after a survivor/family is out of a period of acute crisis and basic foundational needs are met (food, clothing, shelter, etc.) can the agency offer meaningful and holistic support aimed at longer-term goals of financial stability, housing placement, and healing from trauma.

Housing staff specifically work with the Crisis & Intervention team to develop comprehensive safety plans for every survivor we serve. These plans are developed collaboratively with survivors and can include therapy and healing services, education and resources around cycles of domestic violence, and utilizing outside resources to address safety concerns.

Monarch has the following practices in place to support the agency and individual staff’s capacities to assess the safety of each survivor and family that we serve:

- Quarterly reports and assessments through our case management system to track short- and long-term client outcomes.
- Routine confidential client surveys that seek feedback around program success and client safety.
- Ongoing training. Monarch staff receives monthly training from internal and external experts. Examples of past trainings include file-keeping and confidentiality across programs, the Danger Assessment to improve capacity to determine lethality, and support for clients in identifying risk factors and how to seek support when situations escalate.
- 65-Hour Domestic Violence Certification. All program staff (including Housing) are 65-hour certified domestic violence counselors and trained to screen for and prioritize addressing safety concerns first.

4A-3e.	Applicant’s Experience in Placing and Stabilizing Survivors in Permanent Housing Using Trauma-Informed, Survivor-Centered Approaches.	
	NOFO Section I.B.3.j.(1)(d)	

Describe in the field below the project applicant's experience in:

1.	prioritizing placement and stabilization of survivors;
2.	placing survivors in permanent housing;
3.	placing and stabilizing survivors consistent with their preferences; and
4.	placing and stabilizing survivors consistent with their stated needs.

(limit 2,500 characters)

1. Monarch services prioritize the safety and stabilization of survivors first and foremost. When a client is in need of safe shelter, they are immediately stabilized in a shelter or with a motel voucher and receive access to Monarch’s holistic suite of services to address their immediate needs. This could include legal support for TROs, a technological review of devices to ensure the survivor is not being tracked, direct client financial aid to ensure they have gas or can pay an immediate bill, and/or support in making medical appointments. Once stabilized, the client is immediately referred to our Housing First program, and Case Management staff begin their housing navigation work, which includes an assessment of and information about the transitional housing program option.

2. Monarch’s Housing Program is designed to support clients in working towards their own goals. We assist survivors with the housing search, applications, lease negotiations, rental assistance, etc., but do not choose the housing for them. The process can include multiple apartment tours, check-ins around needs (e.g., bedrooms for children, proximity to public transit, etc.), information about housing costs, and financial planning. If a client’s needs exceed what is financially viable in Santa Cruz County, we help explore out-of-county options, ideally in locations where they have community connections or a support network in place. The TH units are offered as an option to survivors who need long-term supportive housing. Survivors are always empowered to choose which housing option works best for them.

3. The Housing Program uses Housing First and does not screen clients out of service based on factors assumed to be predictors of success. Case plans are built around goals that clients set for themselves. Staff is trained to honor survivors’ choices as they are the experts in their own lives. While Housing staff offer options, survivors ultimately decide what is best for them and their families. Mutual trust cannot be built if staff dictate to survivors what their goals should be or how to achieve them.

4. The Housing Program works with clients to address SMART goals around their stated needs. This includes identifying their strengths and areas in which they would like support in gaining stability and independence. While Housing staff offer ideas and options, survivors ultimately decide what is best for them and their families.

4A-3f.	Applicant’s Experience in Trauma-Informed, Survivor-Centered Approaches. NOFO Section I.B.3.j.(1)(d)	
	Describe in the field below examples of the project applicant’s experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:	
1.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures survivors and staff interactions are based on equality, and minimize power differentials;	
2.	providing survivors access to information on trauma, e.g., training staff on providing survivors with information on the effects of trauma;	
3.	emphasizing survivors’ strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;	
4.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;	

	5. providing a variety of opportunities for survivors' connections, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
	6. offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

1. Monarch’s Housing Case Managers work with each survivor to develop a uniquely tailored Case Plan that reflects their needs and goals. Staff support survivors in the housing search but do not dictate which unit a survivor ultimately chooses. Comprehensive assistance around budgeting, plans for graduated rental and down payment assistance, and financial literacy education are provided to ensure survivors choose an option that is viable for themselves and their families long-term.

2. Housing Case Managers, along with all staff, are trained to provide trauma-informed services and work with survivors of violence. In addition to the mandatory 65-hour training requirement, all staff participate in ongoing training focused on the provision of trauma-informed services. Currently, staff are engaged in a series focused on Adverse Childhood Experiences (ACEs) and regular Motivational Interviewing practice sessions with a certified trainer and therapist. The agency also holds weekly case management meetings to promote collaboration, avoid placing coordination burdens on clients, and ensure seamless service delivery across programs.

3. Monarch’s Housing Program assessments are designed to screen for strengths and resources already present in survivors’ lives. All program staff, including Housing Case Managers, are trained in motivational interviewing and in centering survivors’ goals and overall vision for themselves and their families within their case plans. While staff might identify areas of focus based on an assessment, they do not have preset goals. Case plans are developed collaboratively, based on client strengths, resources, and input, and are unique to each survivor the Housing Program serves.

4. One of the agency’s goals is to provide culturally and linguistically relevant services, while approaching work with a lens of cultural humility. All Housing staff are bicultural and bilingual (English/Spanish) and are from the Watsonville, Santa Cruz and Pajaro communities representing the population they serve. Additionally, Monarch has a Diversity, Equity, and Inclusion (DEI) committee comprised of staff across programs, focusing on improving the agency’s capacity to meet the needs of marginalized groups. This committee recently reviewed all external agency materials to ensure the language was inclusive, particularly for individuals across gender identities and racial backgrounds.

5. Monarch offers numerous opportunities for connection and healing. The agency provides 1-on-1 therapy in-house for survivors who wish to participate. We also offer weekly support groups (in both English and Spanish) for survivors who prefer group settings. Case Managers are also trained to make outside referrals and support survivors in connecting with services not provided within the agency, such as faith communities, support groups focused on mental health and/or substance use, or parent support groups.

6. Monarch’s Housing Program provides childcare funding, assistance with custody issues, and protective orders on behalf of child survivors when appropriate. Our Child and Youth Case Program staff are trained in providing supportive services to child survivors of violence. These services are available to the children of all adult clients and can include support groups (running concurrently with adult groups), therapy (with providers specializing in child survivors of trauma), wraparound case management, and courtroom or law enforcement interview accompaniment. We also offer the Triple P (Positive Parenting Program) in-house. When not available, we refer clients to community

partners offering Triple P or Positive Discipline courses (La Manzana, Live Oak Resource Center).

4A-3g.	Applicant's Experience Meeting Service Needs of DV Survivors.	
	NOFO Section I.B.3.j.(1)(d)	

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

(limit 5,000 characters)

During funding year 2023:

- Crisis & Intervention DV Services: In 2023, Monarch's On-Call Program staff fielded over 2,000 Crisis Line calls. Monarch's 24/7 bilingual crisis line is available 365 days a year to anyone experiencing domestic violence, sexual assault, or human trafficking and in need of immediate support.
- Financial Literacy: In 2023, Monarch's Housing Program provided financial literacy services to 28 survivors of violence. This includes building budgets, creating savings plans, and supporting access to public benefits.
- Childcare Assistance: In 2023, Monarch's Housing Program provided financial assistance for childcare to 10 families and connected 15 families to external funding for childcare through Go Kids (a county program that offers subsidized childcare) or sliding scale after-school programs (Boys & Girls Club, YWCA, Campus Kids Connection).
- Vocational & Educational Training: Monarch's Housing Program provided five survivors with funding for vocational training programs. Two clients enrolled in courses for certification in the medical field (Medical Billing and Medical Assisting) through Watsonville Adult Education.
- Legal Services – Protective Orders: In 2023, Monarch's Legal Program assisted 51 clients in filing for Domestic Violence Protective Orders.
- Legal Services – Immigration Assistance: In 2023, Monarch's Legal Program assisted 33 survivors with immigration-related services (screening for and preparing U and T Visa applications when appropriate).
- Therapeutic & Healing Services: In 2023, Monarch provided individual therapy to 50 adult survivors of violence.
- Therapeutic & Healing Services for Child & Youth Survivors: In 2023, Monarch provided individual therapy to 25 child and youth survivors of violence.
- Shelter Services: In 2023, Monarch's Shelter Program provided emergency shelter to 120 survivors of violence (this includes family members/children).
- Long-Term Housing Stability Safety Planning: Monarch's Long-Term Housing Program Case Managers provided comprehensive safety planning and supportive services to 36 survivors of violence. These services included long-term housing safety plans, connecting with community supports and resources, systems advocacy, legal support, court accompaniment, Safe at Home program enrollment, landlord advocacy, and life skills and financial literacy education and training—all in preparation for program completion.

4A-3h.	Applicant's Plan for Placing and Stabilizing Survivors in Permanent Housing Using Trauma-Informed, Survivor-Centered Approaches in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)(e)	

Describe in the field below how the project(s) will:

1.	prioritize placement and stabilization of program participants;
2.	place program participants in permanent housing;
3.	place and stabilize program participants consistent with their preferences; and
4.	place and stabilize program participants consistent with their stated needs.

(limit 2,500 characters)

1. Monarch services prioritize the safety and stabilization of survivors. When a client is in need of safe shelter, they are immediately stabilized in shelter or provided with a motel voucher. They receive access to Monarch’s holistic suite of services to address their immediate needs, which could include legal support for TROs, a technological review of devices to ensure the survivor is not being tracked, direct financial aid to pay immediate bills or gas, and/or support for medical appointments. Once stabilized, the client is referred to our Housing First program, where Case Management staff begin housing navigation, including assessments for the TH program and RRH options.

2. Monarch’s Housing Case Managers work with each survivor to develop a tailored Case Plan that reflects their needs and goals. Staff support survivors in the housing search but do not dictate which unit a survivor should choose. Comprehensive assistance is offered around budgeting, graduated rental and down payment assistance, and financial literacy education to ensure that survivors select an option that is viable for themselves and their families long-term. Both the TH and RRH options are available to meet clients’ long-term housing goals, and both programs can be used independently or consecutively for up to the 24-month program length.

3. The Housing Program is rooted in the Housing First model and does not use punitive interventions or screen clients out based on factors assumed to predict successful outcomes. Case plans are built around goals set by the clients themselves, with guidance and full knowledge of available resources. Staff are trained to respect and honor survivors’ choices, as they are the experts in their own lives. While Housing staff provide ideas, resources, and options, survivors ultimately decide what is best for them and their families. Mutual trust cannot be built if there is rigidity in program objectives or if staff dictate to survivors what their goals should be or how to achieve them.

4. The Housing Program works with clients to address SMART goals around their stated needs, identifying strengths and areas where they would like support in gaining stability and independence. While Housing staff offer ideas, resources, and options, survivors ultimately decide what is best for them and their families.

4A-3i.	Applicant’s Plan for Administering Trauma-Informed, Survivor-Centered Practices in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)(e)	
	Describe in the field below examples of how the new project(s) will:	
1.	establish and maintain an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant and staff interactions are based on equality, and minimize power differentials;	
2.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;	

3.	emphasize program participants' strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivor-defined goals and aspirations;
4.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
5.	provide a variety of opportunities for program participants' connections, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
6.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

1. Housing Case Managers approach their work with humility and respect for the vision survivors have for their own lives. Housing staff work collaboratively with clients to create a plan that supports and builds toward that vision. They are also clear about the support Monarch will provide over a 24-month period to ensure that case plans are developed around survivors' goals and grounded in what is viable for them long-term.

2. Housing Staff support each survivor with the tools and resources to process trauma and begin healing. Once basic needs are met, Housing staff work with the Crisis & Intervention team to develop a healing support plan tailored to the client and their family. This often includes individual therapy, support groups, and meetings to process trauma, share information about domestic violence, and access resources. Therapy and resources are also available for survivors' children.

3. Housing Case Managers use screening tools to assess strengths and resources already present in survivors' lives. They apply motivational interviewing techniques and center survivors' goals and visions for themselves and their families in their case plans. While the program might identify areas for potential focus (e.g., financial self-sufficiency, childcare, housing placement), Housing Case Managers develop case plans collaboratively with survivors, building on their strengths and input.

4. Housing staff are bilingual (English/Spanish) and provide services in the language that survivors are most comfortable with. By allowing survivors to lead their own process, Case Managers intentionally work to incorporate survivors' goals, needs, and unique internal and external resources into individualized case plans. Housing staff rely on their training as DV counselors and motivational interviewers to promote a survivor-driven, trauma-informed process. Regular assessments every 8–12 weeks offer opportunities to gather survivor feedback and improve services in real time.

5. Housing staff collaborate with other Monarch programs to holistically serve each survivor and their family. Survivors are supported in identifying their need for community support and connection. The team meets weekly and develops plans to connect survivors with both internal and external resources to meet those needs. This could involve connecting clients with Monarch's weekly support groups, faith communities, or programs focused on substance use, mental health, or parenting.

6. If survivors identify parenting support as a goal, Monarch's Housing staff collaborate with other programs (Child and Youth, Legal, Crisis & Intervention) to connect them with the necessary resources. Internally, Monarch provides case management, 1-on-1 therapy, support groups, legal services, and childcare funding. Monarch also offers Triple P parenting classes. If resources are unavailable internally, staff refer survivors to community partners, such as La Manzana or Live Oak Resource Center, that offer Triple P or Positive Discipline courses. Additionally, Monarch's legal services include crisis intervention legal support, safety planning, and support for restraining orders, family law, and immigration-related cases (e.g., U, T, and VAWA visas).

4A-3j.	Applicant's Plan for Involving Survivors in Policy and Program Development, Operations, and Evaluation in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)(f)	

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

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

(limit 2,500 characters)

1. Monarch is intentional about incorporating survivor feedback into our strategic policy and program development processes. This is vital to ensuring that the agency remains survivor-centered in its one-on-one work with individuals and families, as well as in the larger sense of strategic direction and identifying areas for growth within existing programs or emerging community needs. Monarch's Housing Program involves survivors by conducting extensive surveys of housing clients three, six, and twelve months after securing housing placement and during their stay in the transitional housing program. The Housing Program conducts a final assessment six months after program completion. Each survey seeks feedback on service efficacy (what worked and what didn't), whether services were survivor-centered (did the survivor feel supported and in what ways?), and whether the survivor feels capable of maintaining housing independently (why or why not).

2. In addition to these surveys, Monarch engages in a strategic visioning process every three years. During this process, the Housing Program Manager reaches out to clients engaged in housing services for one-on-one feedback. The Program Manager intentionally seeks feedback from clients who have been both successful and those who have struggled to find or maintain housing, using this information to identify areas for programmatic growth and change.

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

4A-3b.	Information About Unique Project Applicant Requesting New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)	

Enter information in the chart below on the project applicant that applied for one or more New DV Bonus housing projects included on your CoC's FY 2024 Priority Listing for New Projects:

1.	Applicant Name	Walnut Avenue Family and Women's Center
2.	Rate of Housing Placement of DV Survivors—Percentage	100%
3.	Rate of Housing Retention of DV Survivors—Percentage	100%

4A-3b.1.	Applicant's Housing Placement and Retention Data Explanation.	
	NOFO Section I.B.3.j.(1)(d)	
	For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below:	
	1. how the project applicant calculated the rate of housing placement;	
	2. whether the rate for housing placement accounts for exits to safe housing destinations;	
	3. how the project applicant calculated the rate of housing retention; and	
	4. the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).	

(limit 1,500 characters)

1. To calculate the rate of housing placement, Walnut Avenue determined the percentage of DV survivors applying for housing that were placed into permanent housing. All survivors who are in the Housing & Employment Program have been successful in securing housing with the help of Housing & Employment Program staff.

2. The rate for housing placement accounts for exits to safe housing destinations. All Housing & Employment Program participants have been able to maintain safe housing after they have been exited from the program.

3. The housing retention rate was calculated by determining the percentage of program participants that remained housed. All program participants are DV survivors.

4. Walnut Avenue used their comparable database as the data source to calculate the housing retention and housing placement rate of DV survivors. Participant housing status and any changes to participant housing status is updated and recorded in Walnut Avenue's comparable database Apricot.

4A-3c.	Applicant's Experience Housing DV Survivors.	
	NOFO Section I.B.3.j.(1)(d)	
	Describe in the field below how the project applicant:	
	1. ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;	
	2. prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan;	
	3. determined survivors' supportive services needs;	
	4. connected survivors to supportive services; and	
	5. moved survivors from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.	

(limit 2,500 characters)

1. Walnut Avenue prioritizes victims of DV and implements housing first, which has allowed us to form relationships with local landlords and property management companies who understand our mission. Walnut Avenue has established partnerships with landlords who call them when a unit is available and stated there is no need for a rental application, which eliminates the barriers of poor rental history and bad credit. These relationships with landlords allow for a quick placement into safe affordable housing.

2. Walnut Avenue prioritizes program participants based on safety risk assessments conducted by staff certified domestic violence advocates. Walnut Avenue considers an individual’s physical and emotional safety, children in the household, household member disabilities, connection to friends and family in the area, lack of financial means to move, etc. Advocates help create a self-identified safety plan with steps that leads them to safe housing. If a fleeing survivor lacks the means to secure safe housing, they are referred to the Housing & Employment Program and placed on a priority list depending on program capacity. Walnut Avenue participates in Coordinated Entry to identify and provide services to households fleeing DV.

3. Walnut Avenue determines survivor supportive services needs through a housing needs assessment. Conversations between the participant and case manager allow for the gathering of information on the participant’s circumstances, needs, desires, and strengths with the ultimate self-identified goal being to secure and maintain safe affordable housing.

4. Participants are connected to services through the Housing & Employment case manager. The case manager and participant create an Action Plan with the case manager offering supportive services as needed. Case Managers arrange for supportive services through HUD, if they are HUD eligible activities, otherwise, case managers will provide resources and/or make referrals for additional supportive services. Walnut Avenue provides housing to participants through other funding sources, with support groups, counseling, advocacy, household goods, furniture, etc. to make sure that participants have what they need.

5. Case management is provided to support participants with goal setting, including obtaining mainstream benefits, education and employment, community connection, and financial assistance during the initial stabilization period.

4A-3d.	<p>Applicant’s Experience in Ensuring DV Survivors’ Safety.</p> <p>NOFO Section I.B.3.j.(1)(d)</p>	
<ol style="list-style-type: none"> 1. taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors; 2. making determinations and placements into safe housing; 3. keeping survivors’ information and locations confidential; 4. training staff on safety and confidentiality policies and practices; and 5. taking security measures for units (congregate or scattered site), that support survivors’ physical safety and location confidentiality. 	<p>Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:</p>	

(limit 2,500 characters)

1. Walnut Avenue ensures confidentiality during the intake process by providing informed consent form and clearly notifying survivors of Walnut Avenue’s confidentiality policy. Staff only ask questions necessary to best assess the safety of the participant rather. Walnut Avenue asks the participant for the information on the person who causes them harm to prevent conflicts of interest, but the survivor is not required to disclose the information. Walnut Avenue cannot discuss the participants needs with any additional parties, including friends and family members, law enforcement, or other service agencies without the express consent of the participant.

2. Walnut Avenue case managers discuss housing needs with participants and prioritize safety. Walnut Avenue helps participants relocate to a different county when they are fleeing DV and there are safety concerns regarding the person who causes them harm tracking them. Staff and participants discuss a variety of housing options such as living in an apartment that has security features such as a buzzer, front desk reception, etc. Participants determine their own housing location based on their safety needs being met.

3. Walnut Avenue keeps survivor information and locations confidential by keeping their information in the secured comparable database (Apricot) which only staff have access to. Paper copies of participant documents are kept secure in a locked file cabinet located in a locked office only accessible by staff. Walnut Avenue has a strict policy on keeping any and all participant information confidential.

4. Walnut Avenue staff receive continuous training in safety and confidentiality policies and best practices. Walnut Avenue staff attend frequent training provided by the National Network to End Domestic Violence (NNEDV) and the California Partnership to End Domestic Violence that focus on providing victim service providers with the latest information on the safety and confidentiality of survivors. Walnut Avenue DV advocates attend the annual NNEDV Tech Summit to be aware of technology best safety practices.

5. The Housing & Employment Program provides scattered site rental assistance. The housing search is participant driven meaning all participants decide where their housing is located. If a participant needs to move to a different county for their physical safety, Walnut Avenue assists. Walnut Avenue facilitates participation in the State Safe at Home confidential address program.

4A-3d.1.	Applicant’s Experience in Evaluating Its Ability to Ensure DV Survivors’ Safety.	
	NOFO Section I.B.3.j.(1)(d)	

Describe in the field below how the project evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement throughout the project’s operation.

(limit 2,500 characters)

The Housing & Employment Program evaluates its ability to ensure the safety of program participants by comparing the number of violent interactions between a survivor and the self-identified person who has done harm, before participation in the housing program and then after enrollment in the program. The project measures safety by recording the number of incidents in the comparable database. Walnut Avenue has seen a reduction in number of violent interactions with the person who has done harm as measured by the number of incidents in the previous year being more than the number of incidents in the current grant year, indicating a reduction in violence and increase in safety. Walnut Avenue receives participant feedback through participant satisfaction surveys. Survivors have self-reported feeling safer during their participation in the program than when they first enrolled in the program. Through participant feedback, Walnut Avenue has learned that consistent follow-up on supportive services Walnut Avenue can offer regarding safety would be helpful to participants. Participants have expressed that they can forget that Walnut Avenue is able to offer home security set up costs' services and Safe-at-Home confidential address program. A participant may have declined certain safety precautions during the development of their initial safety plan and will later decide to include those precautions while in their housing. Follow up regarding safety planning is now an area case managers are mindful to discuss frequently with survivors to prioritize their safety.

4A-3e.	Applicant's Experience in Placing and Stabilizing Survivors in Permanent Housing Using Trauma-Informed, Survivor-Centered Approaches.	
	NOFO Section I.B.3.j.(1)(d)	

Describe in the field below the project applicant's experience in:	
1.	prioritizing placement and stabilization of survivors;
2.	placing survivors in permanent housing;
3.	placing and stabilizing survivors consistent with their preferences; and
4.	placing and stabilizing survivors consistent with their stated needs.

(limit 2,500 characters)

1. Walnut Avenue has been prioritizing placement and stabilization of survivors using trauma-informed care and survivor-centered approaches since the development of the Housing & Employment Program in 2019. The Housing & Employment staff are trained domestic violence advocates who are skilled in using trauma informed care and survivor centered approaches. Walnut Avenue staff meet participants where they are and slowly begin to build rapport at the participants pace to best understand and meet their needs. Once the needs are identified a safety plan is created to ensure participants' physical safety. A safety plan also entails connecting participants with the appropriate resources or making the necessary referrals to meet their identified needs and ensure stabilization.

2. Walnut Avenue has placed program participants in permanent housing since 2019 when the Walnut Avenue Housing & Employment Program was established. Case managers using the housing first model work with participants to prioritize their self-identified goal of obtaining safe housing. Case managers work with participants to minimize barriers to housing such as lack of income, lack of rental history, poor credit, transportation to housing, etc. All survivors in the Housing & Employment program have successfully been placed in permanent housing.

3. Case Managers are experienced in working with participants to complete a housing needs assessment and action plan. In creating an action plan, case managers use motivational interviewing techniques to encourage survivors to establish self-identified goals and promote a strength-based approach to empower survivors. Walnut Avenue has been successful in helping participants secure housing in the area of their choice that best fits their safety needs whether local or out of county. Participants continue to receive supportive services in employment, education, childcare, etc. to help them achieve their self-identified career goals.

4. Walnut Avenue continues to have success in placing and stabilizing survivors consistent with their stated needs. Walnut Avenue has a long-established history of using an empowerment model in which survivors are encouraged to regain control of their life and focus on their strengths and expertise to achieve their self-identified goals. Walnut Avenue staff listen to participants when they state their needs and work together to create realistic action steps that result in participants achieving their goals.

4A-3f.	Applicant's Experience in Trauma-Informed, Survivor-Centered Approaches. NOFO Section I.B.3.j.(1)(d)	
Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:		
1.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures survivors and staff interactions are based on equality, and minimize power differentials;	
2.	providing survivors access to information on trauma, e.g., training staff on providing survivors with information on the effects of trauma;	
3.	emphasizing survivors' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;	

	4. centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
	5. providing a variety of opportunities for survivors' connections, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
	6. offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

1. Walnut Avenue has been providing human services in Santa Cruz County for over 90 years and has maintained an environment of agency and mutual respect ever since. All staff are certified domestic violence advocates trained in trauma-informed care and survivor-centered approaches. During the intake, advocates are trained to open the space for survivors to share their experience to best understand their needs. Advocates use more of a conversational approach using open-ended questions rather than asking a long list of yes or no questions to help build a safe space where survivors feel comfortable sharing their experiences.

2. Advocates have expertise on the effects of trauma caused by domestic violence and discuss that information with participants during one-on-one peer counseling sessions as needed. Walnut Avenue has a long-established history of providing domestic violence support groups that cover topics concerning the immediate and long-term effects of domestic violence and to build community with other survivors for peer support. Participants can also have access to information on trauma at any time thanks to the Walnut Avenue 24/7 DV crisis line where participants can speak directly with a certified advocate. Continuous training in best practices to provide survivors with trauma information and supportive services are offered to staff as they become available through the California Partnership to End Domestic Violence.

3. The Housing & Employment Program has used a strength-based approach since it was founded in 2019. All action plans are survivor-driven meaning they self-identify their own goals, aspirations, and needs. Case managers are experienced in using Motivational Interviewing as a tool to help participants reflect on their situation and consider all options. Case managers work with participants to identify strengths and highlight the assets they have through their lived experience such as resiliency to work on achieving their identified goals.

4. Walnut Avenue is well established in providing high quality services to survivors centering on cultural responsiveness and inclusivity. Walnut Avenue has policies and procedures in place to ensure equal access, cultural competence, nondiscrimination, and language access. Staff receive training from the local Diversity Center and California Partnership to End Domestic Violence to learn best practices on being culturally responsive and trauma informed. Housing & Employment staff are bilingual in Spanish and Walnut Avenue has access to a translation service provider to be available as needed. Walnut Avenue has an Equity Committee which focuses on improving services to reflect best practices regarding being culturally responsive, accessible and trauma informed for participants.

5. Walnut Avenue has been successful in providing a variety of opportunities for survivors' connections for decades. Walnut Avenue provides multiple weekly domestic violence support groups where survivors have the opportunity to connect with one another and form a sense of community. Youth one-on-one mentoring is available for teens who have been impacted by domestic violence. Walnut Avenue provides a weekly teen group that serves as an opportunity for teens who have similar experiences to get together and connect. Advocates may refer participants to other appropriate community resources if the participant expresses needing additional support.

6. Walnut Avenue offers support for survivor parenting through advocate parenting support. Advocates discuss and review communication techniques

with survivor parents who co-parent with the person who chose harm. Advocates provide parents with information and resources to parenting classes such as Positive Discipline hosted by Positive Discipline Community Resources. Advocates provide connections to legal services if child custody is something the participant is interested in. This project offers program participants with childcare supportive services for employment purposes. Walnut Avenue helps participants in obtaining Domestic Violence restraining orders, custody orders and provides accompaniment to family court.

4A-3g.	Applicant's Experience Meeting Service Needs of DV Survivors.	
	NOFO Section I.B.3.j.(1)(d)	

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

(limit 5,000 characters)

Walnut Avenue provides a variety of supportive services to program participants while quickly moving them into permanent safe housing. Domestic violence advocacy services are available to all program participants. Walnut Avenue has a 24/7 DV crisis helpline that provides trauma-informed support, including safety planning, emergency shelter, and assistance in navigating restraining order processes. Program participants have regular one-on-one peer advocacy meetings to meet their needs regarding any domestic violence situations. Walnut Avenue offers weekly domestic violence support groups that program participants are encouraged to attend. The Housing & Employment Program provides financial literacy supportive services. Case managers are quickly able to assess whether survivors need credit repair services which is often necessary to obtain affordable housing. Walnut Avenue partners with the Santa Cruz County Bank to assist survivors to restore their credit that has been damaged. The project provides educational supportive services to program participants. Walnut Avenue partners with local community college Cabrillo College to provide program participants with the opportunity to enroll in professional development courses such as the Leadership Academy to help participants increase their skills and knowledge to obtain leadership positions in their place of employment. Walnut Avenue partners with Family Services Agency to provide mental health counseling supportive services to program participants. Walnut Avenue provides parenting supportive services to those parents who are co-parenting with the person who causes them harm.

4A-3h.	Applicant's Plan for Placing and Stabilizing Survivors in Permanent Housing Using Trauma-Informed, Survivor-Centered Approaches in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)(e)	

Describe in the field below how the project(s) will:

1.	prioritize placement and stabilization of program participants;
2.	place program participants in permanent housing;
3.	place and stabilize program participants consistent with their preferences; and
4.	place and stabilize program participants consistent with their stated needs.

(limit 2,500 characters)

1. Walnut Avenue will continue to prioritize placement and stabilization of survivors using trauma-informed care and survivor-centered approaches. Housing & Employment staff will meet participants where they are and slowly begin to build rapport at the participants pace to best understand and meet their needs. Once the needs are identified a safety plan will be created to ensure participants' physical safety. The safety plan will include connecting participants with the appropriate resources and making necessary referrals to meet their identified needs to ensure stabilization.

2. With Rapid Rehousing DV Bonus grant funds Walnut Avenue will continue to house program participants in permanent housing. Case managers will use the housing first model and work with participants to prioritize their self-identified goal of obtaining safe housing. Case managers will work with participants to remove barriers to housing such as lack of income, lack of rental history, poor credit, transportation to housing, etc.

3. Housing & Employment Case Managers will work with participants to complete a housing needs assessment and action plan. In creating an action plan, case managers will use motivational interviewing techniques to encourage survivors to establish self-identified goals and promote a strength-based approach to empower survivors. Walnut Avenue will help participants secure housing in the area of their choosing that best fits their safety needs whether local or out of county. Participants will be provided supportive services in employment, education, childcare, etc. to help them achieve their self-identified career goals.

4. Walnut Avenue will place and stabilize survivors consistent with their stated needs. Walnut Avenue staff will use an empowerment model in which survivors are encouraged to regain control of their life and focus on their strengths and expertise to achieve their self-identified goals. Walnut Avenue staff will listen to participants when they state their needs and work together to create realistic action steps that result in participants achieving their goals and having their needs met that include maintaining safe housing.

4A-3i.	Applicant's Plan for Administering Trauma-Informed, Survivor-Centered Practices in the New DV Bonus Housing Project(s).	
NOFO Section I.B.3.j.(1)(e)		
Describe in the field below examples of how the new project(s) will:		
1.	establish and maintain an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant and staff interactions are based on equality, and minimize power differentials;	
2.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;	
3.	emphasize program participants' strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivor-defined goals and aspirations;	
4.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;	
5.	provide a variety of opportunities for program participants' connections, e.g., groups, mentorships, peer-to-peer, spiritual needs; and	

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

(limit 5,000 characters)

1. Walnut Avenue will maintain an environment of agency and mutual respect by providing survivor-driven services. All staff are certified domestic violence advocates trained in trauma-informed care and survivor-centered approaches. During the intake, advocates will open the space for survivors to share their experience to best understand their needs. Advocates use more of a conversational approach using open-ended questions rather than asking a long list of yes or no questions to help build a safe space where survivors feel comfortable sharing their experiences.

2. Advocates have expertise on the effects of trauma caused by domestic violence and will discuss that information with participants during one-on-one peer counseling sessions as needed. Walnut Avenue will continue to provide domestic violence support groups that cover topics concerning the immediate and long term effects of domestic violence and to build community with other survivors for peer support. Participants will have access to information on trauma at any time thanks to the Walnut Avenue 24/7 DV crisis line where participants can speak directly with a certified advocate. Continuous training in best practices to provide survivors with trauma information and supportive services will be offered to staff as they become available through the California Partnership to End Domestic Violence.

3. The Housing & Employment Program will use a strength-based approach. All action plans are survivor-driven meaning survivors will self-identify their own goals, aspirations, and needs. Case managers will use Motivational Interviewing as a tool to help participants reflect on their situation and consider all options. Case managers will work with participants to identify strengths and highlight the assets they have through their lived experience such as resiliency to work on achieving their identified goals.

4. Walnut Avenue will provide high quality services to survivors centering on cultural responsiveness and inclusivity. Walnut Avenue will continue to have policies and procedures in place to ensure equal access, cultural competence, nondiscrimination, and language access. Staff will receive training from the local Diversity Center and California Partnership to End Domestic Violence to learn best practices on being culturally responsive and trauma informed. Housing & Employment staff are bilingual in Spanish and Walnut Avenue has access to a translation service provider to be available as needed. Walnut Avenue has an Equity Committee which focuses on improving services to reflect best practices regarding being culturally responsive, accessible and trauma informed for participants.

5. Walnut Avenue will provide a variety of opportunities for survivors' connections for decades. Walnut Avenue will provide multiple weekly domestic violence support groups where survivors have the opportunity to connect with one another and form a sense of community. Youth one-on-one mentoring will be available for teens who have been impacted by domestic violence. Walnut Avenue will provide a weekly teen group that serves as an opportunity for teens who have similar experiences to get together and connect. Advocates will refer participants to other appropriate community resources if the participant expresses needing additional support.

6. Walnut Avenue will offer support for survivor parenting through advocate parenting support. Advocates may discuss and review communication techniques with survivor parents who co-parent with the person who chose

harm. Advocates will provide parents with information and resources to parenting classes such as Positive Discipline hosted by Positive Discipline Community Resources. Advocates will provide connections to legal services if child custody is something the participant is interested in. This project will offer program participants with childcare supportive services for employment purposes. Walnut Avenue will help participants in obtaining Domestic Violence restraining orders, custody orders and provides accompaniment to family court.

4A-3j.	Applicant's Plan for Involving Survivors in Policy and Program Development, Operations, and Evaluation in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)(f)	

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

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

(limit 2,500 characters)

1. Walnut Avenue will involve survivors with a range of lived experience/expertise in the new project by requesting program participant feedback, and by including survivors in our staff, leadership team and agency committees to ensure that survivors' voices are elevated and heard. All of the program participants are survivors of domestic violence and have experienced homelessness or housing instability caused by domestic violence. Walnut Avenue believes survivors are the experts in their own lives who come with a wide range of expertise from experiencing domestic violence and homelessness. Walnut Avenue has people with lived experience in volunteer positions, staff positions, leadership roles, and board member positions. This new project will involve feedback from all people with lived experience to best inform the Housing & Employment staff of the needs of survivors.

2. Walnut Avenue will involve survivors in policy and program development throughout the project's operation. Walnut Avenue prioritizes survivor driven services and quarterly distributes participant satisfaction surveys to receive feedback. Survivors have a voice and are involved in changes that are made in Walnut Avenue services. If survivors express additional support is needed in an area, changes are made to fulfill those needs. Because survivors with lived experience are also in positions of leadership, there will be input around the implementation of policies and procedures based on the initial feedback provided by program participants. Through program participant feedback via surveys, survivors voices will be prominent enabling Walnut Avenue to evaluate and make adjustments to the policies and procedures, as needed.

4B. Attachments Screen For All Application Questions

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

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

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	10/24/2024
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	10/24/2024
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	10/24/2024
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes	Web Posting - CoC...	10/28/2024
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin...	10/24/2024
3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	10/24/2024
3C-2. Project List for Other Federal Statutes	No	N/A Project List ...	10/25/2024
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	10/24/2024
1E-2a. Scored Forms for One Project	Yes	Scored Forms for ...	10/29/2024
1E-5b. Local Competition Selection Results	Yes	Local Competition...	10/24/2024
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	10/24/2024

1E-5d. Notification of CoC-Approved Consolidated Application	Yes	Notification of C...	10/28/2024
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	10/24/2024
1D-10a. Lived Experience Support Letter	Yes	Lived Experience ...	10/24/2024
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	HUD's HDX Competi...	10/24/2024
Other	No	Other: Web Postin...	10/24/2024

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Web Posting - CoC-Approved Consolidated Application

Attachment Details

Document Description: Housing Leveraging Commitment

Attachment Details

Document Description: Healthcare Formal Agreement

Attachment Details

Document Description: N/A Project List for Other Federal Statutes

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of CoC-Approved Consolidated Application

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Lived Experience Support Letters

Attachment Details

Document Description: HUD's HDX Competition Report

Attachment Details

Document Description: Other: Web Posting of Local Competition Deadline

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/26/2024
1B. Inclusive Structure	10/29/2024
1C. Coordination and Engagement	10/29/2024
1D. Coordination and Engagement Cont'd	10/29/2024
1E. Project Review/Ranking	10/29/2024
2A. HMIS Implementation	10/29/2024
2B. Point-in-Time (PIT) Count	10/29/2024
2C. System Performance	10/29/2024
3A. Coordination with Housing and Healthcare	10/29/2024
3B. Rehabilitation/New Construction Costs	10/29/2024
3C. Serving Homeless Under Other Federal Statutes	10/29/2024

4A. DV Bonus Project Applicants	10/29/2024
4B. Attachments Screen	10/29/2024
Submission Summary	No Input Required

1C-7 PHA HOMELESS PREFERENCE

HOUSING AUTHORITY OF THE COUNTY OF SANTA CRUZ

HOUSING CHOICE VOUCHER PROGRAM (SECTION 8)
ADMINISTRATIVE PLAN



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.

October 2, 2024

Please note that the electronic copy of this document contains hyperlinks to applicable regulations and other references. An electronic copy of this document is available at: hacosantacruz.org. If you cannot access the electronic copy of this document, copies of the referenced links and regulations will be available upon request.

TABLE OF CONTENTS

Section	Title	Page
I.	Selecting Applicants from the Waiting List, Targeting, Preferences, Closing and Opening Waiting List	3
II.	Issuing or Denying Housing Choice Vouchers, Term of the Housing Choice Voucher, and Extensions or Suspensions of the Term	13
III.	Special Purpose Programs	14
IV.	Occupancy Policies	20
V.	Encouraging Participation by Owners Outside Areas of Low-Income and Minority Concentration	23
VI.	Assisting a Family That Claims Illegal Discrimination	24
VII.	Providing Information about a Family to Prospective Owners.....	24
VIII.	Disapproval of Owners	25
IX.	Subsidy Standards	25
X.	Family Absence from Dwelling Units.....	27
XI.	How to Determine Who Remains in the Program If a Family Breaks Up	28
XII.	Informal Review Procedures for Applicants	29
XIII.	Informal Hearing Procedures for Participants.....	29
XIV.	The Process for Establishing and Revising Payment Standards and Utility Allowances.....	32
XV.	The Method for Determining That Rent to Owner Is a Reasonable Rent	33
XVI.	Policies Regarding Special Housing Types	34
XVII.	Project Based Voucher Program	37
XVIII.	Payment by a Family to the Housing Authority	46
XIX.	Annual and Interim Determinations of Family Income.....	46
XX.	Restrictions, If Any, on the Number of Moves by a Participant Family.....	50
XXI.	Approval by the Board of Commissioners or Other Authorized Officials to Charge the Administrative Fee Reserve.....	50
XXII.	Procedural Guidelines and Performance Standards for Conducting Required HQS Inspections	50
XXIII.	Screening of Applicants for Family Behavior or Suitability for Tenancy	51
XXIV.	Voucher Suspension Policy.....	51
XXV.	Moving to Work – Local Non-Traditional Activities	52

Project-Based Voucher sites may have separate site-based waiting lists, may have third-party referral units, may utilize the combined Housing Choice Voucher Waiting List, or may employ a mix of these methods. The Housing Authority will consider the establishment of additional site-based waiting lists for new Project-Based Voucher units on a case-by-case basis. For most Project Based Voucher units, families will be selected from the Housing Choice Voucher Waiting List to apply for a PBV unit in the order of their random number sequence (lottery number). Additionally, existing Housing Choice Voucher holders who were recently issued a voucher or are in the process of transferring may lease PBV units at developments that utilize the combined HCV Waiting List.

When a PBV unit becomes available, the Housing Authority will send a letter to the top families in the HCV Waiting List and searching voucher-holders or to households on the PBV site-based waiting list, as applicable. The letter will instruct interested families to contact the owner directly to apply. For PBV units that utilize the combined Housing Choice Voucher waiting list, if outreach to the waiting list does not result in an eligible applicant with the appropriate household size after sixty (60) days of outreach consisting of at least two (2) mailings, and the owner utilizes a site-based waiting list for other PBV units or non-PBV units, the Housing Authority may allow the owner to refer an eligible applicant from that site-based waiting list to the combined HCV waiting list unit. Acceptance of referrals for HCV waiting list units will be considered on a case-by-case basis, subject to approval of the Executive Director.

Specifically designated Project-Based Voucher properties may offer units through a referral process with a third-party agency. Eligible families referred through this method will be placed on a PBV waiting list for designated unit(s) at that property and receive an absolute preference. Such properties are listed in the table below.

PBV Development	Location	Waiting List Conditions
<p>El Centro</p> <p>44 PBV units – senior housing</p>	<p>1110 Pacific Avenue Santa Cruz</p>	<p>44 units for elderly households – Date of placement on the site-based waiting list</p>
<p>Resetar Residential Hotel</p> <p>52 PBV units</p>	<p>15 West Lake Avenue Watsonville</p>	<p>44 Standard PBV units - date of placement on the site-based waiting list</p> <p>8 HUD-VASH PBV units – referrals from the Department of Veterans Affairs</p>

<p>St. Stephens Senior Housing</p> <p>39 PBV units – senior housing</p>	<p>2510 Soquel Avenue Santa Cruz</p>	<p>29 PBV units for elderly households – lottery number on the site-based waiting list</p> <p>5 HUD-VASH PBV units for elderly households – referrals from the Department of Veterans Affairs</p> <p>5 PBV units for frail elderly households – referrals from Health Projects Center</p>
<p>Pippin Orchards Apartments</p> <p>31 PBV units</p>	<p>56 Atkinson Lane Watsonville</p>	<p>33 Standard PBV units – lottery number on the site-based waiting list</p>
<p>Sunrise Senior Apartments</p> <p>48 PBV units – senior housing</p>	<p>580 Westside Blvd. Hollister</p>	<p>43 PBV units for elderly households – Sunrise Senior Apartments will use a site-based waiting list.</p> <p>Applications will be processed based on the date the application is received after the initial lottery is conducted.</p> <p>5 HUD-VASH PBV units for elderly households – referrals from the Department of Veterans Affairs</p>
<p>San Andreas</p> <p>4 PBV units – farmworker</p>	<p>295 San Andreas Road Watsonville</p>	<p>4 Farmworker PBV units – the Housing Authority may accept referrals of eligible families from Mid-Pen Housing’s waiting list.</p>
<p>Villas del Paraiso</p> <p>15 PBV units – farmworker</p>	<p>340 Paraiso Drive Watsonville</p>	<p>15 Farmworker PBV units – The Housing Authority may accept referrals of eligible families from Mid Pen Housing’s waiting list.</p>
<p>Jardines del Valle</p> <p>5 PBV units</p>	<p>76 Murphys Crossing Road Santa Cruz County (unincorporated area)</p>	<p>5 Standard PBV units – The Housing Authority may accept referrals of eligible families from Mid-Pen Housing’s waiting list</p>

<p>Pajaro Valley Shelter Services</p> <p>4 PBV units</p>	<p>Scattered sites</p>	<p>4 Standard PBV units for formerly homeless families referred by Pajaro Valley Shelter Services</p>
<p>Merrill Road Apartments</p> <p>15 PBV units</p>	<p>3201 Merrill Road Aptos</p>	<p>15 Standard PBV units – date of placement on site-based waiting list</p>
<p>Bienestar Plaza</p> <p>40 PBV units</p>	<p>1500 Capitola Road Santa Cruz</p>	<p>25 Standard PBV units – lottery number on the HCV waiting list.</p> <p>10 Permanent Supportive Housing (PSH) units for families eligible for No Place Like Home – referrals from the Continuum of Care’s Coordinated Entry System</p> <p>5 Permanent Supportive Housing (PSH) High Utilizer Preference units with a preference for “high utilizers” who are eligible and prioritized through the Continuum of Care’s Coordinated Entry System as applicants for the High Utilizer Preference.</p>
<p>Tabasa Gardens</p> <p>37 PBV units</p>	<p>1482 Freedom Blvd Watsonville</p>	<p>21 Standard PBV units – lottery number on the HCV waiting list.</p> <p>6 Permanent Supportive Housing (PSH) units for families eligible for No Place Like Home – referrals from the Continuum of Care’s Coordinated Entry System</p> <p>10 Farmworker units for farmworker families eligible for supportive services – families to be selected from the owner-maintained’ site-based farmworker waiting list, with a preference for farmworker families also on the HCV waiting list.</p>

<p>Cedar Street Family Apartments</p> <p>8 PBV units</p>	<p>525 Cedar Street Santa Cruz</p>	<p>4 HUD-VASH PBV units - referrals from the Department of Veterans Affairs</p> <p>4 Permanent Supportive Housing (PSH) units - referrals from the Continuum of Care's Coordinated Entry System</p>
<p>Cienega Heights</p> <p>37 PBV units</p>		<p>32 Standard PBV units – lottery number on the HCV waiting list</p> <p>5 Farmworker units for farmworker families selected from the owner-maintained site-based farmworker waiting list, with a preference for farmworker families also on the HCV waiting list</p>
<p>Sparrow Terrace</p> <p>43 PBV units</p>	<p>139 & 141 Miles Lane Watsonville</p>	<p>25 Standard PBV units – lottery number on the HCV waiting list</p> <p>12 Farmworker units for farmworker families selected from the owner-maintained site-based farmworker waiting list, with a preference for farmworker families also on the HCV waiting list</p> <p>6 Permanent Supportive Housing (PSH) units for families eligible for No Place Like Home - referred through the Continuum of Care's Coordinated Entry System</p>

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

The 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 lottery or random number sequence.

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 the Coordinated Entry System administered by the Continuum of Care (CoC), provides referrals for homeless persons who meet all of the following criteria:

- a. Disabled as defined by HUD at 24CFR 5.403.
- b. Medically vulnerable as determined by Continuum of Care prioritization policies.
- 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 Housing Choice Voucher 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 of homeless families with minor children from the County of Santa Cruz Human Services Department (HSD) 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 lottery or random sequence number. If the Housing Choice Voucher waiting lists do not contain sufficient numbers 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.

8. Graduates of the Continuum of Care (CoC) Shelter Plus Care (S+C) Program and Family Unification Program (FUP) Youth in Project Based Voucher units.

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.

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 provides a preference within the HCV voucher program for Family Unification Program Youth in Project Based Voucher units, wherein they may graduate into the regular HCV voucher program when they have reached the maximum period of assistance under FUP and are in good standing with the program.

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:

- a. 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.
- b. Eviction Prevention. The Housing Authority may accept direct referrals from the Community Action Board of Santa Cruz County (CAB) of families at imminent risk of homelessness due to eviction for economic reasons. The Eviction Prevention preference will be limited to applicants on the HCV waiting list and the preference will be limited to 24 vouchers.

11. Early Family Right to Move in Project-Based Voucher Units

Prior to a family completing its one-year assistance requirement in PBV units, if the owner and the family agree to mutually terminate the tenancy, the Housing Authority, at its discretion, may agree to allow the family to transfer with an HCV.

Targeting

Notwithstanding the above, if necessary to meet the HUD MTW statutory requirement that 75% of newly admitted families in any fiscal year be families who are very low-income (incomes not exceeding 50% of area median income), the Housing Authority retains the right to select very low-income families ahead of other eligible families on an as-needed basis to ensure the HUD MTW income targeting requirement is met. This measure will only be taken if it appears the goal will not otherwise be met. To ensure this goal is met, the Housing Authority will monitor incomes of newly admitted families.

Opening and Closing the Waiting list

When the Housing Authority opens a waiting list, the opening will be announced publicly on our website, on our waiting list phone line, in our lobby, in local newspapers of general circulation, and other appropriate media such as email and/or social media sites. The Housing Authority will affirmatively further fair housing by conducting strategic outreach through diverse community partners to inform the public when the waiting list opens.

The Housing Authority may accept applications by mail, via internet, by fax, and by other methods that encourage equal access and opportunity to apply for all persons, including those with disabilities.

The Housing Authority will provide written notice to the family when granting an extension. The number and duration of extensions may depend on a number of factors including market conditions and availability of vouchers / funding.

The Housing Authority will grant additional extensions on an individual case basis as a Reasonable Accommodation for Housing Choice Voucher holders with disabilities. Third party verification of disability and need for extension is required. The extension may be granted after the Housing Authority has received such verification from a doctor, other health care professional or a social worker with medical or professional knowledge of the person's disability. If acceptable verification is not received within 60 days of the Housing Authority's request, the extension may be denied.

See Section IV Occupancy Standards (Standards for denying admissions or terminating assistance) for information about denying assistance for applicants.

III. Special Purpose Programs

Over time, HUD has awarded the Housing Authority with funding for specific voucher types to serve specific populations. In some instances, these special programs offer vouchers to eligible persons from the Housing Choice Voucher (HCV) waiting list. In other instances, vouchers are issued based on referrals from service providers. All special voucher programs are listed and described below. If special program vouchers are project based, the unique eligibility criteria described below will be preserved.

Veterans Assisted Supportive Housing / VASH (433 vouchers)

The Department of Housing and Urban Development (HUD) and the Veterans Administration (VA) have partnered to create a program for homeless veterans. This program combines HUD Housing Choice Voucher rental assistance with the Department of Veterans Affairs case management and clinical services provided at its medical centers and in the community. Funding for this program is limited to housing authorities that partner with "eligible Veterans Affairs Medical Centers (VAMCs) or other entities as designated by the VA."

VASH vouchers are not issued based on placement on Housing Authority waiting lists. Instead, referrals for eligible homeless veterans are provided by the Veterans Administration. The Housing Authority will administer the VASH program in accordance with HUD VASH rules and regulations, which may differ from the Housing Choice Voucher Program.

Upon HUD approval, the Housing Authority will operate HUD-VASH in accordance with Moving to Work (MTW) administrative flexibilities that are not otherwise in conflict with the HUD-VASH Operating Requirements.

Family Unification Program (FUP) and Foster Youth to Independence (FYI) (220 vouchers)

Family Unification Program and Foster Youth to Independence (FYI) vouchers have been made available by HUD for this program. The Family Unification Program (FUP) vouchers are reserved for families for which lack of adequate housing is a primary factor in the imminent placement of their a child or children in out-of-home care or in the delay of discharge of a child or children to the

family from out-of-home care and for youth, 18-24 years old, who left foster care, or will leave foster care within 90 days, and are homeless or at risk of becoming homeless. FYI vouchers are reserved for youth, 18-24 years old, who left foster care, or will leave foster care within 90 days, and are homeless or at risk of becoming homeless. To be considered for FUP/FYI assistance, applicants will be identified and certified for eligibility by the County Human Services Department (HSD).

FUP/FYI vouchers are not issued based on placement on the Housing Choice Voucher waiting list. Instead, HSD provides referrals to the Housing Authority based on comprehensive risk assessment and FUP/FYI-eligibility determination. HSD will provide written certification to the Housing Authority that a family or a youth qualifies as a FUP/FYI-eligible family or youth. A family will be certified as eligible if it is determined that (1) the children are at imminent risk of placement in out-of-home care or at risk of having their discharge to the family from out-of-home care delayed (2) the lack of adequate housing is a primary factor in the risk of placement or delay of discharge and (3) the family meets all other eligibility requirements for Section 8 assistance; youth will be certified as eligible by age, foster care history, and homelessness risk. Youth will also be identified through the county Coordinated Entry System. FUP Youth and FYI vouchers have a HUD imposed 36- month limit on rental assistance, excepting for the provisions under Fostering Stable Housing Opportunities (FSHO).

For youth who first leased a unit with a FUP/FYI voucher after December 27, 2020 the provisions of Fostering Stable Housing Opportunities (FSHO) apply. FSHO provides a 24-month extension of voucher assistance for:

1. FUP/FYI youth who are participating in a Family Self-Sufficiency (FSS) Program under Section 23 of the U.S. Housing Act or an MTW self-sufficiency program.
 - a. If the youth is offered an FSS slot during their first 36 months of FUP assistance, the youth must participate in the FSS program to receive an extension of assistance.
 - b. If the youth is offered an FSS slot after the 36-month mark, the youth may choose to accept the FSS slot or decline the slot and meet the education, workforce development, or employment requirement instead.
2. FUP/FYI youth who were unable to enroll in FSS but engaged in education, workforce development, or employment, or employment activities for at least 9 months of the 12-month period preceding the extension. The youth is considered unable to enroll in FSS if the youth has not been offered an FSS slot during the first 36 months of receiving FUP/FYI assistance.
 - a. The youth must have engaged in at least one of the following activities for not less than 9 months of the 12-month period preceding each extension.
 - i. Education:
 1. The youth was engaged in obtaining a “recognized postsecondary credential” or a “secondary school diploma or its recognized equivalent;” or
 2. The youth was enrolled in an “institution of higher education” a “proprietary institution of higher education,” or a “postsecondary vocational institution” as defined in the Higher Education Act.

HUD has made vouchers available for persons participating in the CalWORKs Welfare to Work Program. The Welfare to Work vouchers are reserved for CalWORKs participants. They are intended to be a key part of the strategy to support the efforts of Santa Cruz County families who are working towards self-sufficiency. Welfare to Work vouchers are not issued based on placement on the Housing Choice Voucher waiting list. Instead, eligible referrals are provided by the Santa Cruz County Human Services Department (HSD).

Responsibilities for administering the Welfare to Work vouchers are as follows:

The Housing Authority will be responsible wholly or in part for

1. certifying voucher eligibility;
2. providing orientation with regards to the Section 8 Housing Choice Voucher Program; and
3. approving rental agreements.

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

1. screening and refer CalWORKs participants;
2. assisting CalWORKs participants who receive vouchers with housing-related issues and work with Housing Authority staff to resolve those issues;
3. supporting housing stability for eligible CalWORKs participants who receive vouchers by providing them with comprehensive services including individual assistance in the areas of vocational training and assessment, job search and upgrade, on-the-job training, transportation assistance, child care, participation in Medical/Medi Cruz as appropriate, counseling services for substance abuse, domestic violence and mental health issues and other supportive services; and
4. coordinating participant involvement in programs offered through the Small Business Development Center, Career Centers, and Cabrillo Student Resource Support Network.

If the Human Services Department informs the Housing Authority that a Welfare to Work voucher holder has graduated from the program, the Housing Authority may absorb that program participant into the regular Housing Choice Voucher program if a voucher is available and if the program participant is in good standing, and if the participant has been stably housed for two or more years. At that time, the Welfare to Work voucher would be available for the next eligible family referred by the Human Services Department.

Emergency Housing Vouchers (EHV) (280 Vouchers)

The Department of Housing and Urban Development (HUD) has awarded the Housing Authority Emergency Housing Vouchers (EHV) to continue relief from the COVID-19 pandemic impacts.

Eligibility for these EHV's is limited to individuals and families who are (1) homeless; (2) at risk of homelessness; (3) fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking or human trafficking; or (4) recently homeless and for whom providing rental assistance will prevent the family's homelessness or having high risk of housing instability. EHV's are tenant-based rental assistance under section 8(o) of the United States Housing Act of 1937 (42 U.S.C. 1437f(o)).

The EHV allocation from HUD is accompanied by a one-time service fee to support the efforts of implementing the program. The Housing Authority will use this service fee in accordance with the requirements established in PIH 2021-15, as well as any subsequent HUD guidance. Use of the service fees may include security deposits assistance, owner-related recruitment, incentives, and retention programs, move-in assistance, and tenant readiness services, or any other allowable use that supports the rapid issuance and utilization of these vouchers.

In most respects, EHV's will be administered like the regular HCV program. However, EHV's will 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:

1. 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
2. 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 Housing Authority will operate EHV in accordance with MTW administrative flexibility that are not otherwise in conflict with the EHV Operating Requirements.

The EHV program sunset on September 30, 2023. As of that date, 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 unless new EHV vouchers are awarded by HUD. Therefore, as EHV program participants leave the program, turnover vouchers will not be issued, and the program will eventually end through attrition.

Stability Vouchers (SV) (40 Vouchers)

The Department of Housing and Urban Development (HUD) has awarded the Housing Authority Stability Vouchers (SV) to assist households experiencing or at risk of homelessness, those fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, human trafficking, and veterans and families that include a veteran family member.

Household Eligibility. In accordance with Notice PIH 2022-24, in order to be eligible for a Stability Voucher, a household must meet one of four eligibility criteria:

1. Individuals and families who are currently experiencing homelessness;
2. Individuals and families at risk of homelessness;
3. Individuals and families fleeing, or attempting to flee, domestic violence, dating violence, stalking, sexual assault; and
4. Veterans and families that include a veteran family that meet one of the preceding criteria.

Referrals will be made based on the CoC-approved Coordinated Entry System (CES) prioritization. The County and CoC will work to pair eligible households with appropriate supportive services to help with securing and maintaining housing.

HACSC operates the following Special Purpose Voucher programs in accordance with MTW flexibilities: Mainstream, FUP, VASH, EHV, and Stability. For Stability and VASH Vouchers, we do not apply Waiver 9.h. (Limit Portability for PBV Units (HCV)).

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, single persons who are youth, 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 186 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. Families with children who have been placed in foster care will keep their voucher size for at least 12 months after the child is removed but may be removed from the household at the next regular re-examination following the 12-month period, or after being provided at least 120 days' notice following the 12 month period. When the child returns from foster placement, the household composition will be upsized at the interim and the payment standard will be updated at that time. The family will not be required to wait until their next re-examination to be upsized or to have their payment standard updated.

Families with military servicepersons on active duty will be downsized at the first transfer or regular re-examination following the departure of the serviceperson or after being provided at least 120 days' notice following the departure of the serviceperson. When military servicepersons on active-duty return, the household composition will be upsized, and the payment standard will be updated at the interim. The family will not be required to wait until their next re-examination to be upsized or to have their payment standard updated.

1C-7 PHA MOVING ON PREFERENCE

HOUSING AUTHORITY OF THE COUNTY OF SANTA CRUZ

HOUSING CHOICE VOUCHER PROGRAM (SECTION 8) ADMINISTRATIVE PLAN



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.

October 2, 2024

Please note that the electronic copy of this document contains hyperlinks to applicable regulations and other references. An electronic copy of this document is available at: hacosantacruz.org. If you cannot access the electronic copy of this document, copies of the referenced links and regulations will be available upon request.

TABLE OF CONTENTS

Section	Title	Page
I.	Selecting Applicants from the Waiting List, Targeting, Preferences, Closing and Opening Waiting List	3
II.	Issuing or Denying Housing Choice Vouchers, Term of the Housing Choice Voucher, and Extensions or Suspensions of the Term	13
III.	Special Purpose Programs	14
IV.	Occupancy Policies	20
V.	Encouraging Participation by Owners Outside Areas of Low-Income and Minority Concentration	23
VI.	Assisting a Family That Claims Illegal Discrimination	24
VII.	Providing Information about a Family to Prospective Owners.....	24
VIII.	Disapproval of Owners	25
IX.	Subsidy Standards	25
X.	Family Absence from Dwelling Units.....	27
XI.	How to Determine Who Remains in the Program If a Family Breaks Up	28
XII.	Informal Review Procedures for Applicants	29
XIII.	Informal Hearing Procedures for Participants.....	29
XIV.	The Process for Establishing and Revising Payment Standards and Utility Allowances.....	32
XV.	The Method for Determining That Rent to Owner Is a Reasonable Rent	33
XVI.	Policies Regarding Special Housing Types	34
XVII.	Project Based Voucher Program	37
XVIII.	Payment by a Family to the Housing Authority	46
XIX.	Annual and Interim Determinations of Family Income.....	46
XX.	Restrictions, If Any, on the Number of Moves by a Participant Family.....	50
XXI.	Approval by the Board of Commissioners or Other Authorized Officials to Charge the Administrative Fee Reserve.....	50
XXII.	Procedural Guidelines and Performance Standards for Conducting Required HQS Inspections	50
XXIII.	Screening of Applicants for Family Behavior or Suitability for Tenancy	51
XXIV.	Voucher Suspension Policy.....	51
XXV.	Moving to Work – Local Non-Traditional Activities	52

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 the Coordinated Entry System administered by the Continuum of Care (CoC), provides referrals for homeless persons who meet all of the following criteria:

- a. Disabled as defined by HUD at 24CFR 5.403.
- b. Medically vulnerable as determined by Continuum of Care prioritization policies.
- 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 Housing Choice Voucher 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 of homeless families with minor children from the County of Santa Cruz Human Services Department (HSD) 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 lottery or random sequence number. If the Housing Choice Voucher waiting lists do not contain sufficient numbers 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.

8. Graduates of the Continuum of Care (CoC) Shelter Plus Care (S+C) Program and Family Unification Program (FUP) Youth in Project Based Voucher units.

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.

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 provides a preference within the HCV voucher program for Family Unification Program Youth in Project Based Voucher units, wherein they may graduate into the regular HCV voucher program when they have reached the maximum period of assistance under FUP and are in good standing with the program.

The Housing Authority will provide written notice to the family when granting an extension. The number and duration of extensions may depend on a number of factors including market conditions and availability of vouchers / funding.

The Housing Authority will grant additional extensions on an individual case basis as a Reasonable Accommodation for Housing Choice Voucher holders with disabilities. Third party verification of disability and need for extension is required. The extension may be granted after the Housing Authority has received such verification from a doctor, other health care professional or a social worker with medical or professional knowledge of the person's disability. If acceptable verification is not received within 60 days of the Housing Authority's request, the extension may be denied.

See Section IV Occupancy Standards (Standards for denying admissions or terminating assistance) for information about denying assistance for applicants.

III. Special Purpose Programs

Over time, HUD has awarded the Housing Authority with funding for specific voucher types to serve specific populations. In some instances, these special programs offer vouchers to eligible persons from the Housing Choice Voucher (HCV) waiting list. In other instances, vouchers are issued based on referrals from service providers. All special voucher programs are listed and described below. If special program vouchers are project based, the unique eligibility criteria described below will be preserved.

Veterans Assisted Supportive Housing / VASH (433 vouchers)

The Department of Housing and Urban Development (HUD) and the Veterans Administration (VA) have partnered to create a program for homeless veterans. This program combines HUD Housing Choice Voucher rental assistance with the Department of Veterans Affairs case management and clinical services provided at its medical centers and in the community. Funding for this program is limited to housing authorities that partner with "eligible Veterans Affairs Medical Centers (VAMCs) or other entities as designated by the VA."

VASH vouchers are not issued based on placement on Housing Authority waiting lists. Instead, referrals for eligible homeless veterans are provided by the Veterans Administration. The Housing Authority will administer the VASH program in accordance with HUD VASH rules and regulations, which may differ from the Housing Choice Voucher Program.

Upon HUD approval, the Housing Authority will operate HUD-VASH in accordance with Moving to Work (MTW) administrative flexibilities that are not otherwise in conflict with the HUD-VASH Operating Requirements.

Family Unification Program (FUP) and Foster Youth to Independence (FYI) (220 vouchers)

Family Unification Program and Foster Youth to Independence (FYI) vouchers have been made available by HUD for this program. The Family Unification Program (FUP) vouchers are reserved for families for which lack of adequate housing is a primary factor in the imminent placement of their a child or children in out-of-home care or in the delay of discharge of a child or children to the

family from out-of-home care and for youth, 18-24 years old, who left foster care, or will leave foster care within 90 days, and are homeless or at risk of becoming homeless. FYI vouchers are reserved for youth, 18-24 years old, who left foster care, or will leave foster care within 90 days, and are homeless or at risk of becoming homeless. To be considered for FUP/FYI assistance, applicants will be identified and certified for eligibility by the County Human Services Department (HSD).

FUP/FYI vouchers are not issued based on placement on the Housing Choice Voucher waiting list. Instead, HSD provides referrals to the Housing Authority based on comprehensive risk assessment and FUP/FYI-eligibility determination. HSD will provide written certification to the Housing Authority that a family or a youth qualifies as a FUP/FYI-eligible family or youth. A family will be certified as eligible if it is determined that (1) the children are at imminent risk of placement in out-of-home care or at risk of having their discharge to the family from out-of-home care delayed (2) the lack of adequate housing is a primary factor in the risk of placement or delay of discharge and (3) the family meets all other eligibility requirements for Section 8 assistance; youth will be certified as eligible by age, foster care history, and homelessness risk. Youth will also be identified through the county Coordinated Entry System. FUP Youth and FYI vouchers have a HUD imposed 36-month limit on rental assistance, excepting for the provisions under Fostering Stable Housing Opportunities (FSHO).

For youth who first leased a unit with a FUP/FYI voucher after December 27, 2020 the provisions of Fostering Stable Housing Opportunities (FSHO) apply. FSHO provides a 24-month extension of voucher assistance for:

1. FUP/FYI youth who are participating in a Family Self-Sufficiency (FSS) Program under Section 23 of the U.S. Housing Act or an MTW self-sufficiency program.
 - a. If the youth is offered an FSS slot during their first 36 months of FUP assistance, the youth must participate in the FSS program to receive an extension of assistance.
 - b. If the youth is offered an FSS slot after the 36-month mark, the youth may choose to accept the FSS slot or decline the slot and meet the education, workforce development, or employment requirement instead.
2. FUP/FYI youth who were unable to enroll in FSS but engaged in education, workforce development, or employment, or employment activities for at least 9 months of the 12-month period preceding the extension. The youth is considered unable to enroll in FSS if the youth has not been offered an FSS slot during the first 36 months of receiving FUP/FYI assistance.
 - a. The youth must have engaged in at least one of the following activities for not less than 9 months of the 12-month period preceding each extension.
 - i. Education:
 1. The youth was engaged in obtaining a “recognized postsecondary credential” or a “secondary school diploma or its recognized equivalent;” or
 2. The youth was enrolled in an “institution of higher education” a “proprietary institution of higher education,” or a “postsecondary vocational institution” as defined in the Higher Education Act.

- ii. Workforce Development: The youth was participating in a career pathway, as such term is defined in section 3 of the Workforce Innovation and Opportunity Act (WIOA).
- iii. Employment: The youth was employed.

3. FUP/FYI youth who meet one of the statutory exceptions:

- a. Are responsible for the care of a dependent child under the age of 6 or for the care of an incapacitated person;
- b. Are regularly and actively participating in a drug addiction or alcohol treatment and rehabilitation program; or
- c. Are incapable of complying with the requirement to participate in an FSS program or engage in education, workforce development, or employment activities, as applicable, due to a documented medical condition.

Responsibilities for administering the Family Unification Program are as follows: The Housing Authority will be responsible wholly or in part for

- 1. accepting referrals from HSD;
- 2. sorting the HCV waiting list to identify applicants who may qualify;
- 3. certifying HCV voucher eligibility and issuing vouchers providing orientation to the Section 8 Housing Choice Voucher Program;
- 4. offering training to HSD and other HSD-subcontract agencies on HCV procedures;
- 5. convening regular meetings with HSD and the Consortium of Care (CoC) Homeless Action Partnership; and
- 6. 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; and
- 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.

All FUP/FYI families and youth will be offered the opportunity to join the Family Self Sufficiency program.

FUP/FYI 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

HUD has made vouchers available for persons participating in the CalWORKs Welfare to Work Program. The Welfare to Work vouchers are reserved for CalWORKs participants. They are intended to be a key part of the strategy to support the efforts of Santa Cruz County families who are working towards self-sufficiency. Welfare to Work vouchers are not issued based on placement on the Housing Choice Voucher waiting list. Instead, eligible referrals are provided by the Santa Cruz County Human Services Department (HSD).

Responsibilities for administering the Welfare to Work vouchers are as follows:

The Housing Authority will be responsible wholly or in part for

1. certifying voucher eligibility;
2. providing orientation with regards to the Section 8 Housing Choice Voucher Program; and
3. approving rental agreements.

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

1. screening and refer CalWORKs participants;
2. assisting CalWORKs participants who receive vouchers with housing-related issues and work with Housing Authority staff to resolve those issues;
3. supporting housing stability for eligible CalWORKs participants who receive vouchers by providing them with comprehensive services including individual assistance in the areas of vocational training and assessment, job search and upgrade, on-the-job training, transportation assistance, child care, participation in Medical/Medi Cruz as appropriate, counseling services for substance abuse, domestic violence and mental health issues and other supportive services; and
4. coordinating participant involvement in programs offered through the Small Business Development Center, Career Centers, and Cabrillo Student Resource Support Network.

If the Human Services Department informs the Housing Authority that a Welfare to Work voucher holder has graduated from the program, the Housing Authority may absorb that program participant into the regular Housing Choice Voucher program if a voucher is available and if the program participant is in good standing, and if the participant has been stably housed for two or more years. At that time, the Welfare to Work voucher would be available for the next eligible family referred by the Human Services Department.

Emergency Housing Vouchers (EHV) (280 Vouchers)

The Department of Housing and Urban Development (HUD) has awarded the Housing Authority Emergency Housing Vouchers (EHV) to continue relief from the COVID-19 pandemic impacts.

Eligibility for these EHV's is limited to individuals and families who are (1) homeless; (2) at risk of homelessness; (3) fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking or human trafficking; or (4) recently homeless and for whom providing rental assistance will prevent the family's homelessness or having high risk of housing instability. EHV's are tenant-based rental assistance under section 8(o) of the United States Housing Act of 1937 (42 U.S.C. 1437f(o)).

The EHV allocation from HUD is accompanied by a one-time service fee to support the efforts of implementing the program. The Housing Authority will use this service fee in accordance with the requirements established in PIH 2021-15, as well as any subsequent HUD guidance. Use of the service fees may include security deposits assistance, owner-related recruitment, incentives, and retention programs, move-in assistance, and tenant readiness services, or any other allowable use that supports the rapid issuance and utilization of these vouchers.

In most respects, EHV's will be administered like the regular HCV program. However, EHV's will 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:

1. 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
2. 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 Housing Authority will operate EHV in accordance with MTW administrative flexibility that are not otherwise in conflict with the EHV Operating Requirements.

The EHV program sunset on September 30, 2023. As of that date, 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 unless new EHV vouchers are awarded by HUD. Therefore, as EHV program participants leave the program, turnover vouchers will not be issued, and the program will eventually end through attrition.

Stability Vouchers (SV) (40 Vouchers)

The Department of Housing and Urban Development (HUD) has awarded the Housing Authority Stability Vouchers (SV) to assist households experiencing or at risk of homelessness, those fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, human trafficking, and veterans and families that include a veteran family member.

Household Eligibility. In accordance with Notice PIH 2022-24, in order to be eligible for a Stability Voucher, a household must meet one of four eligibility criteria:

**1E-5a NOTIFICATION OF PROJECTS
ACCEPTED**

County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

From: Robert Ratner (robert.ratner@santacruzcountyca.gov)

To: pfurlong@billwilsoncenter.org; danielgutierrez@bwcmail.org; vwong@bwcmail.org

Cc: tonygardnerconsulting@yahoo.com; sheryl.norteye@santacruzcountyca.gov

Date: Tuesday, October 15, 2024 at 03:57 PM PDT

Dear Bill Wilson Center colleagues: Thank you for your ongoing work to help ensure safe, stable, and healthy places to live for everyone in our community. Attached you will find information related to your HUD CoC-YHDP FY24 project proposal and the priority ranking of your proposal. Please let us know if you have questions.

Sincerely,

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

FAX: (831) 454-4642



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BWC 2024 Priorities Notice.pdf

126.9kB



H4HP Appeals Policy.pdf

1.3MB



H4HP Board-Approved 2024 CoC and YHDP Projects and Rankings Recommendations CoC Projects.pdf

52kB



October 15, 2024

Re: Bill Wilson Center – Notification of 2024 CoC-YHDP Project Priority Listing

Dear Bill Wilson Center:

Thank you for participating in the 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 Housing for Health Partnership (H4HP) Policy Board-approved CoC Priority Listing, which includes all projects, approvals, scores, ranking, tiering, and maximum budgets.

As noted in the listing, your **Youth Homelessness Demonstration Program (YHDP) Santa Cruz County Shared Housing renewal project** was approved for YHDP funding.

Please let us know if you have any questions.

Again, thank you very much for your participation in the CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner

Robert Ratner, MPH, MD
County of Santa Cruz
Director, Housing for Health Division, Human Services Department
(831) 454-4925; robert.ratner@santacruzcountyca.gov

Cc: Tony Gardner

Attachments

County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

From: Robert Ratner (robert.ratner@santacruzcountyca.gov)

To: helen@cabinc.org; pazp@cabinc.org; emilyw@cabinc.org; elyssas@cabinc.org

Cc: sheryl.norteye@santacruzcountyca.gov; tonygardnerconsulting@yahoo.com

Date: Tuesday, October 15, 2024 at 03:59 PM PDT

Dear Community Action Board (CAB) colleagues: Thank you for your ongoing work to help ensure safe, stable, and healthy places to live for everyone in our community. Attached you will find information related to your HUD CoC-YHDP FY24 project proposal and the priority ranking of your proposal. Please let us know if you have questions.

Sincerely,

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

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H4HP Appeals Policy.pdf

1.3MB



CAB 2024 Priorities Notice.pdf

132.3kB



H4HP Board-Approved 2024 CoC and YHDP Projects and Rankings Recommendations CoC Projects.pdf

52kB



October 15, 2024

Re: CAB, Inc. – Notification of 2024 CoC-YHDP Project Priority Listing

Dear CAB, Inc.:

Thank you for participating in the 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 Housing for Health Partnership (H4HP) Policy Board-approved CoC Priority Listing, which includes all projects, approvals, scores, ranking, tiering, and maximum budgets.

As noted in the listing, your **Youth Homelessness Demonstration Program (YHDP) Youth Homelessness Response Team renewal project** was approved for YHDP funding.

Please let us know if you have any questions.

Again, thank you very much for your participation in the CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner

Robert Ratner, MPH, MD
County of Santa Cruz
Director, Housing for Health Division, Human Services Department
(831) 454-4925; robert.ratner@santacruzcountyca.gov

Cc: Tony Gardner

Attachments

County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

From: Robert Ratner (robert.ratner@santacruzcountyca.gov)

To: joseph.crottogini@santacruzcountyca.gov; david.davis@santacruzcountyca.gov

Cc: sheryl.norteye@santacruzcountyca.gov; tonygardnerconsulting@yahoo.com

Date: Tuesday, October 15, 2024 at 04:13 PM PDT

Dear Health Services Agency – Homeless Persons Health Project colleagues: Thank you for your ongoing work to help ensure safe, stable, and healthy places to live for everyone in our community. Attached you will find information related to your HUD CoC-YHDP FY24 project proposal and the priority ranking of your proposal. Please let us know if you have questions.

Sincerely,

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

FAX: (831) 454-4642



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52kB
-  County HSA 2024 Priorities Notice.pdf
131.2kB
-  H4HP Appeals Policy.pdf
1.3MB



October 15, 2024

Re: County HSA – Notification of 2024 CoC-YHDP Project Priority Listing

Dear County HSA:

Thank you for participating in the 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 Housing for Health Partnership (H4HP) Policy Board-approved CoC Priority Listing, which includes all projects, approvals, scores, ranking, tiering, and maximum budgets.

As noted in the listing, your **MATCH PSH renewal project** was approved for funding in Tier 1.

Please let us know if you have any questions.

Again, thank you very much for your participation in the CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner

Robert Ratner, MPH, MD
County of Santa Cruz
Director, Housing for Health Division, Human Services Department
(831) 454-4925; robert.ratner@santacruzcountyca.gov

Cc: Tony Gardner

Attachments

County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

From: Robert Ratner (robert.ratner@santacruzcountyca.gov)

To: jessica.scheiner@santacruzcountyca.gov; monica.lippi@santacruzcountyca.gov

Cc: sheryl.norteye@santacruzcountyca.gov; tonygardnerconsulting@yahoo.com

Date: Tuesday, October 15, 2024 at 04:26 PM PDT

Hi Monica and Jessica - Attached you will find information on the priority status of HSD CoC funding applications for HMIS, Coordinated Entry, and YHDP Coordinated Entry. Next steps will be to finalize our applications in e-snaps and to support Tony and Sheryl with the overall HUD CoC application submission - review/edit/provide supporting documentation for the CoC-wide application.

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

FAX: (831) 454-4642



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County HSD 2024 Priorities Notice.pdf

136.8kB



H4HP Board-Approved 2024 CoC and YHDP Projects and Rankings Recommendations CoC Projects.pdf

52kB



H4HP Appeals Policy.pdf

1.3MB



October 15, 2024

Re: Santa Cruz County HSD – Notification of 2024 CoC-YHDP Project Priority Listing

Dear Santa Cruz County Human Services Department:

Thank you for participating in the 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 Housing for Health Partnership (H4HP) Policy Board-approved CoC Priority Listing, with all projects, approvals, scores, ranking, tiering, and maximum budgets.

As noted in the listing, your **Homeless Management Information System (HMIS) renewal project** and your **Coordinated Entry Expansion renewal project** were approved for funding in Tier 1. In addition, your **Youth Homelessness Demonstration Program (YHDP) Youth CES renewal project** was approved for YHDP funding. Finally, your **CoC Planning Grant project** was approved for CoC planning grant funding.

Please let us know if you have any questions.

Again, thank you very much for your participation in the CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner

Robert Ratner, MPH, MD
County of Santa Cruz
Director, Housing for Health Division, Human Services Department
(831) 454-4925; robert.ratner@santacruzcountyca.gov

Cc: Tony Gardner

Attachments

County of Santa Cruz HUD CoC-YHDP FY 24 Project Priority Listing

From: Robert Ratner (robert.ratner@santacruzcountyca.gov)

To: arowland@covca.org; hflynn@covca.org

Cc: sheryl.norteye@santacruzcountyca.gov; tonygardnerconsulting@yahoo.com

Date: Tuesday, October 15, 2024 at 04:01 PM PDT

Dear Covenant House colleagues: Thank you for your ongoing work to help ensure safe, stable, and healthy places to live for everyone in our community. Attached you will find information related to your HUD CoC-YHDP FY24 project proposal and the priority ranking of your proposal. Please let us know if you have questions.

Sincerely,

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

FAX: (831) 454-4642



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52kB
-  Covenant 2024 Priorities Notice.pdf
132.2kB
-  H4HP Appeals Policy.pdf
1.3MB



October 15, 2024

Re: Covenant House – Notification of 2024 CoC-YHDP Project Priority Listing

Dear Covenant House:

Thank you for participating in the 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 Housing for Health Partnership (H4HP) Policy Board-approved CoC Priority Listing, which includes all projects, approvals, scores, ranking, tiering, and maximum budgets.

As noted in the listing, your **Youth Homelessness Demonstration Program (YHDP) Youth RRH renewal project** was approved for YHDP funding.

Please let us know if you have any questions.

Again, thank you very much for your participation in the CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner

Robert Ratner, MPH, MD
County of Santa Cruz
Director, Housing for Health Division, Human Services Department
(831) 454-4925; robert.ratner@santacruzcountyca.gov

Cc: Tony Gardner

Attachments

County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

From: Robert Ratner (robert.ratner@santacruzcountyca.gov)

To: kristie.brenda@encompasscs.org; johanna.molnar@encompasscs.org

Cc: tonygardnerconsulting@yahoo.com; sheryl.norteye@santacruzcountyca.gov

Date: Tuesday, October 15, 2024 at 04:04 PM PDT

Dear Encompass colleagues: Thank you for your ongoing work to help ensure safe, stable, and healthy places to live for everyone in our community. Attached you will find information related to your HUD CoC-YHDP FY24 project proposal and the priority ranking of your proposal. Please let us know if you have questions.

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

FAX: (831) 454-4642



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52kB



H4HP Appeals Policy.pdf

1.3MB



ECS 2024 Priorities Notice.pdf

132.5kB



October 15, 2024

Re: ECS – Notification of 2024 CoC-YHDP Project Priority Listing

Dear Encompass Community Services:

Thank you for participating in the 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 Housing for Health Partnership (H4HP) Policy Board-approved CoC Priority Listing, which includes all projects, approvals, scores, ranking, tiering, and maximum budgets.

As noted in the listing, your **Youth Homelessness Demonstration Program (YHDP) Drop-In Center renewal project** was approved for YHDP funding.

Please let us know if you have any questions.

Again, thank you very much for your participation in the CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner

Robert Ratner, MPH, MD
County of Santa Cruz
Director, Housing for Health Division, Human Services Department
(831) 454-4925; robert.ratner@santacruzcountyca.gov

Cc: Tony Gardner

Attachments

County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

From: Robert Ratner (robert.ratner@santacruzcountyca.gov)

To: melisa@fitsantacruz.org; cyndi@fitsantacruz.org; eriqa@fitsantacruz.org

Cc: sheryl.norteye@santacruzcountyca.gov; tonygardnerconsulting@yahoo.com

Date: Tuesday, October 15, 2024 at 04:09 PM PDT

Dear Families In Transition (FIT) colleagues: Thank you for your ongoing work to help ensure safe, stable, and healthy places to live for everyone in our community. Attached you will find information related to your HUD CoC-YHDP FY24 project proposal and the priority ranking of your proposal. Please let us know if you have questions.

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

FAX: (831) 454-4642



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H4HP Appeals Policy.pdf

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FIT 2024 Priorities Notice.pdf

186.5kB



October 15, 2024

Re: FIT – Notification of 2024 CoC-YHDP Project Priority Listing

Dear Families in Transition:

Thank you for participating in the 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 Housing for Health Partnership (H4HP) Policy Board-approved CoC Priority Listing, with all projects, approvals, scores, ranking, tiering, and maximum budgets.

As noted in the listing, your **First Step-Scattered Site Housing Joint TH-RRH project** was approved for funding with a portion of your request in Tier 1 and a portion in Tier 2. In addition, your **Youth Homelessness Demonstration Program (YHDP) Y.A.A.S. Joint TH-RRH project** was approved for YHDP funding. Finally, your **Families and Seniors PSH new project** was not approved for CoC funding and therefore was not ranked. We cannot add your project to the list because the projects that were approved for CoC funding total the maximum amount of funding that we can apply for in e-snaps.

Because your new project was not approved for CoC funding and because a portion of your renewal project is in Tier 2, you are eligible to appeal. The appeals process and grounds for appeal are 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 Thursday, October 17, 2024.**
- **Appeals will be considered by the Appeal Panel by Wednesday, October 23, 2024.**

Please let us know if you have any questions.

Again, thank you very much for your participation in the CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner

Robert Ratner, MPH, MD
County of Santa Cruz
Director, Housing for Health Division, Human Services Department
(831) 454-4925; robert.ratner@santacruzcountyca.gov

Cc: Tony Gardner

Attachments

County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

From: Robert Ratner (robert.ratner@santacruzcountyca.gov)

To: jennyp@hacosantacruz.org; raynep@hacosantacruz.org

Cc: sheryl.norteye@santacruzcountyca.gov; tonygardnerconsulting@yahoo.com

Date: Tuesday, October 15, 2024 at 04:16 PM PDT

Dear Housing Authority colleagues: Thank you for your ongoing work to help ensure safe, stable, and healthy places to live for everyone in our community. Attached you will find information related to your HUD CoC-YHDP FY24 project proposal and the priority ranking of your proposal. Please let us know if you have questions.

Sincerely,

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

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H4HP Appeals Policy.pdf
1.3MB



Housing Authority 2024 Priorities Notice.pdf
184.7kB



October 15, 2024

Re: Housing Authority – Notification of 2024 CoC-YHDP Project Priority Listing

Dear Housing Authority:

Thank you for participating in the 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 Housing for Health Partnership (H4HP) Policy Board-approved CoC Priority Listing, which includes all projects, approvals, scores, ranking, tiering, and maximum budgets.

As noted in the listing, your **Shelter Plus Care Consolidated renewal project** was approved for funding in Tier 1. Also, your **Shelter Plus Care Consolidated Expansion new project** was approved for funding in Tier 2.

Because of the Tier 2 ranking of your Shelter Plus Care Consolidated Expansion new project, you are eligible to appeal. The appeals process and grounds for appeal are 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 Thursday, October 17, 2024.**
- **Appeals will be considered by the Appeal Panel by Wednesday, October 23, 2024.**

Please let us know if you have any questions.

Again, thank you very much for your participation in the CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner

Robert Ratner, MPH, MD
County of Santa Cruz
Director, Housing for Health Division, Human Services Department
(831) 454-4925; robert.ratner@santacruzcountyca.gov

Cc: Tony Gardner

Attachments

County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

From: Robert Ratner (robert.ratner@santacruzcountyca.gov)

To: tstagg@housingmatterssc.org; pkramer@housingmatterssc.org

Cc: tonygardnerconsulting@yahoo.com; sheryl.norteye@santacruzcountyca.gov

Date: Tuesday, October 15, 2024 at 04:18 PM PDT

Dear Housing Matters colleagues: Thank you for your ongoing work to help ensure safe, stable, and healthy places to live for everyone in our community. Attached you will find information related to your HUD CoC-YHDP FY24 project proposals and the priority ranking of your proposals. Please let us know if you have questions.

Sincerely,

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

FAX: (831) 454-4642



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H4HP Appeals Policy.pdf
1.3MB



Housing Matters 2024 Priorities Notice.pdf
185.6kB



October 15, 2024

Re: Housing Matters – Notification of 2024 CoC-YHDP Project Priority Listing

Dear Housing Matters:

Thank you for participating in the 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 Housing for Health Partnership (H4HP) Policy Board-approved CoC Priority Listing, which includes all projects, approvals, scores, ranking, tiering, and maximum budgets.

As noted in the listing, your **801 River Street PSH renewal project** and **180 Together PSH renewal project** were approved for funding in Tier 1. However, your **180 Together PSH Expansion new project** was not approved for CoC funding and therefore was not ranked. We cannot add this project to the list because the projects that were approved for CoC funding total the maximum amount of funding that we can apply for in e-snaps.

Because your new project was not approved for funding, 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 Thursday, October 17, 2024.**
- **Appeals will be considered by the Appeal Panel by Wednesday, October 23, 2024.**

Please let us know if you have any questions.

Again, thank you very much for your participation in the CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner

Robert Ratner, MPH, MD
County of Santa Cruz
Director, Housing for Health Division, Human Services Department
(831) 454-4925; robert.ratner@santacruzcountyca.gov

Cc: Tony Gardner

Attachments

County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

From: Robert Ratner (robert.ratner@santacruzcountyca.gov)

To: jannar@monarchsc.org; leeannl@monarchsc.org; cathrynm@monarchsc.org

Cc: sheryl.norteye@santacruzcountyca.gov; tonygardnerconsulting@yahoo.com

Date: Tuesday, October 15, 2024 at 04:22 PM PDT

Dear Monarch Services colleagues: Thank you for your ongoing work to help ensure safe, stable, and healthy places to live for everyone in our community. Attached you will find information related to your HUD CoC-YHDP FY24 project proposals and the priority ranking of your proposals. Please let us know if you have questions.

Sincerely,

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

FAX: (831) 454-4642



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Monarch 2024 Priorities Notice.pdf
136.8kB



H4HP Appeals Policy.pdf
1.3MB



October 15, 2024

Re: Monarch Services – Notification of 2024 CoC-YHDP Project Priority Listing

Dear Monarch Services:

Thank you for participating in the 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 Housing for Health Partnership (H4HP) Policy Board-approved CoC Priority Listing, which includes all projects, approvals, scores, ranking, tiering, and maximum budgets.

As noted in the listing, your **Monarch DV Bonus renewal project** was approved for funding in Tier 1, and your **DV-Focused Housing and Family Stabilization RRH new project** was also approved for the requested **\$125,000** in Domestic Violence (DV) Bonus funds.

Please let us know if you have any questions.

Again, thank you very much for your participation in the CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner

Robert Ratner, MPH, MD
County of Santa Cruz
Director, Housing for Health Division, Human Services Department
(831) 454-4925; robert.ratner@santacruzcountyca.gov

Cc: Tony Gardner

Attachments

FW: County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

From: Robert Ratner (robert.ratner@santacruzcountyca.gov)

To: sheryl.norteye@santacruzcountyca.gov; tonygardnerconsulting@yahoo.com

Date: Tuesday, October 15, 2024 at 04:38 PM PDT

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

FAX: (831) 454-4642



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From: Robert Ratner

Sent: Tuesday, October 15, 2024 4:29 PM

To: Julie Macecevic <jmacecevic@wafwc.org>; lboule@wafwc.org; Ashley Ponce <aponce@wafwc.org>

Subject: County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

Dear Walnut Avenue Family and Women's Center colleagues: Thank you for your ongoing work to help ensure safe, stable, and healthy places to live for everyone in our community. Attached you will find information related to your HUD CoC-YHDP FY24 project proposals and the priority ranking of your proposals. Please let us know if you have questions.

Sincerely,

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

FAX: (831) 454-4642



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H4HP Appeals Policy.pdf

1.3MB



H4HP Board-Approved 2024 CoC and YHDP Projects and Rankings Recommendations CoC Projects.pdf

52kB



October 15, 2024

Re: WAFWC – Notification of 2024 CoC-YHDP Project Priority Listing

Dear Walnut Avenue Family and Women's Center:

Thank you for participating in the 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 Housing for Health Partnership (H4HP) Policy Board-approved CoC Priority Listing, which includes all projects, approvals, scores, ranking, tiering, and maximum budgets.

As noted in the listing, your **DV-Focused Housing and Employment Program RRH renewal project** was approved for funding in Tier 1, and your **DV-Focused Walnut Avenue Housing and Employment Program RRH Expansion new project** was approved for the Domestic Violence (DV) Bonus, but at a reduced amount of **\$62,569**. Please let us know if it is still viable for you to apply to HUD at this lower amount.

Because your new project was approved for the DV Bonus at a reduced amount, you are eligible to appeal. The appeals process and grounds for appeal are 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 Thursday, October 17, 2024.**
- **Appeals will be considered by the Appeal Panel by Wednesday, October 23, 2024.**

Please let us know if you have any questions.

Again, thank you very much for your participation in the CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner

Robert Ratner, MPH, MD
County of Santa Cruz
Director, Housing for Health Division, Human Services Department
(831) 454-4925; robert.ratner@santacruzcountyca.gov

Cc: Tony Gardner

Attachments

H4HP CoC Policy Board-Approved 2024 CoC/YHDP Projects Selection, Scores, and Ranking									
Applicant Name	Project Name	New or Renewal	Grant Term	Project Component	Score	Status	Rank	Requested From HUD	Reallocated Funds
Tier 1 - \$4,016,945: CoC Board-Approved Tier 1 Amounts and Ranking as Shown									
Monarch Services	DV Bonus RRH	Renewal	1 Year	PH	103	Accepted	1	\$110,691	\$0
Walnut Avenue Family & Women's Center	Housing & Employment Program RRH	Renewal	1 Year	PH	101.3	Accepted	2	\$545,780	\$0
Housing Matters	180 Together PSH	Renewal	1 Year	PH	100.8	Accepted	3	\$313,548	\$0
Santa Cruz County HSA	MATCH PSH	Renewal	1 Year	PH	99.83	Accepted	4	\$986,928	\$0
Housing Matters	801 River Street PSH	Renewal	1 Year	PH	93.2	Accepted	5	\$232,823	\$0
Santa Cruz County HSD	Coordinated Entry Expansion	Renewal	1 Year	SSO	85	Accepted	6	\$228,362	\$0
Santa Cruz County HSD	County of Santa Cruz Homeless Management Information System	Renewal	1 Year	HMIS	83.33	Accepted	7	\$66,782	\$0
Housing Authority of Santa Cruz County	Shelter+Care Consolidate PSH	Renewal	1 Year	PH	93.2	Accepted	8	\$1,406,406	\$0
Families In Transition	First Step-Scattered Site Housing for Families with Children	Renewal	1 Year	Joint TH & PH-RRH	94	Accepted	9	\$125,625	\$0
Tier 2 - \$1,135,503: CoC Board-Approved Tier 2 Amounts and Ranking as Shown							Tier 1 Total:	\$4,016,945	
Families In Transition	First Step-Scattered Site Housing for Families with Children	Renewal	1 Year	Joint TH & PH-RRH	94	Accepted	9B	\$446,327	\$0
Housing Authority of Santa Cruz County	Shelter+Care PSH Consolidate Expansion	New - CoC Bonus	1 Year	PH	105.5	Accepted	10	\$689,176	\$0
DV Bonus - \$187,569: CoC Board-Approved DV Bonus Amounts and Ranking as Shown							Tier 2 Total:	\$1,135,503	
Monarch Services	DV Housing Program	New - DV Bonus	1 Year	Joint TH & PH-RRH	106.8	Accepted	11	\$125,000	\$0
Walnut Avenue Family & Women's Center	Housing & Employment Program RRH	New - DV Bonus	1 Year	PH	99.5	Accepted	12	\$62,569	\$0
Non-Competitive YHDP Projects - \$1,279,864 (Not Ranked): CoC Board-Approved YHDP Projects as Shown							DV Bonus Total:	\$187,569	
Bill Wilson Center	Santa Cruz County Shared Housing	Renewal	1 Year	TH	N/A	Accepted	Not Ranked - YHDP	\$140,935	\$0
Community Action Board of Santa Cruz County, Inc.	YHDP - Youth Homeless Response Team (YHRT)	Renewal	1 Year	PH	N/A	Accepted	Not Ranked - YHDP	\$99,175	\$0
County of Santa Cruz	Youth CES	Renewal	1 Year	SSO	N/A	Accepted	Not Ranked - YHDP	\$60,000	\$0
Covenant House	Youth Rapid Rehousing	Renewal	1 Year	PH	N/A	Accepted	Not Ranked - YHDP	\$438,368	\$0
Encompass Community Services	Drop-In Center	Renewal	1 Year	PH	N/A	Accepted	Not Ranked - YHDP	\$271,903	\$0
Families In Transition of Santa Cruz County, Inc.	Y.A.A.S. (Young Adults Achieving Success)	Renewal	1 Year	PH	N/A	Accepted	Not Ranked - YHDP	\$269,483	\$0
CoC Planning Grant - \$287,157 (Not Ranked): Board-Approved CoC Planning Project as Shown							YHDP Total:	\$1,279,864	
County of Santa Cruz	CoC Planning Grant	New	1 Year	Planning	N/A	Accepted	Not Ranked - CoC Planning	\$287,157	\$0
Rejected Competitive CoC Projects: Board-Rejected Projects as Shown							Planning Total:	\$287,157	
Front Street	East Lake PSH	New - CoC Bonus	3 Years	PH	83.67	Rejected	Not Ranked - Rejected	\$0	\$0
Front Street	Freedom Cottages PSH	New - CoC Bonus	3 Years	PH	85.33	Rejected	Not Ranked - Rejected	\$0	\$0
Families In Transition	Families and Seniors PSH	New - CoC Bonus	1 Year	PH	93.75	Rejected	Not Ranked - Rejected	\$0	\$0
Housing Matters	180 Together PSH Expansion	New - CoC Bonus	1 Year	PH	106.5	Rejected	Not Ranked - Rejected	\$0	\$0

Total Request: \$6,907,038

CoC Applicant Appeals Policy

The Housing for Health (H4H) Policy Board with recommendations from a Review and Ranking Subcommittee approves local project proposals for submission to HUD through the Continuum of Care (CoC) Program. CoC applicants with projects not selected for funding or placed into Tier 2 may appeal the 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 H4H Policy Board and H4H lead agency staff. Appeals Committee members must not have been members of the Review and Ranking Subcommittee, and 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 H4H Policy Board or Review and Ranking Subcommittee (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 **and** 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.

**1E-5c WEB POSTING – CoC-APPROVED
CONSOLIDATED APPLICATION**

Funding Opportunities

Home > For Providers > Funding Opportunities

Last Updated: 10/28/2024

Public Solicitation of Applications: 2024 and 2025 HUD CoC & YHDP Applications and 2024 CoCBUILDS Applications

Final CoC-Approved 2024 CoC Application and Project Priorities (posted October 28, 2024):

- [CoC-Approved 2024 CoC Application](#)
- [CoC-Approved 2024 Project Priorities](#)

Please be advised that the U.S. Department of Housing and Urban Development's (HUD) Notice of Funding Opportunity for the FY2024 and FY2025 Continuum of Care (CoC) Competition and Renewal and Replacement Non-Competitive Award of Youth Homelessness Demonstration Program Grants (CoC/YHDP NOFO) was released on July 31, 2024. The NOFO can be found here: [Continuum of Care \(CoC\) Program Competition](#).

An estimated \$6.88 million is available for one-year grants in Santa Cruz County. The **HUD deadline is October 30, 2024**, although earlier internal deadlines will also apply (see below).

Please also be advised that on July 22, 2024, HUD has released a separate competitive

**3A-1a HOUSING LEVERAGING
COMMITMENT**



County of Santa Cruz



HEALTH SERVICES AGENCY

BEHAVIORAL HEALTH DIVISION

1400 Emeline Ave., Bldg. K, Santa Cruz, CA 95060

Phone:(831) 454-7519 Fax:(831) 454-4770

October 21, 2024

U.S. Department of Housing & Urban Development
Office of Community Planning and Development
1 Sansome St., Suite 1200
San Francisco, CA 94104

Re: Housing Resources Leverage - Shelter Plus Care PSH Expansion New Project

To Whom it may Concern:

Santa Cruz County's Health Services Agency Behavioral Health Division (HSA-BHD) hereby commits to make available at least **6 units** of **non-CoC-funded permanent Supportive Housing** (PSH) for individuals experiencing homelessness with serious mental health issues to expand units that will be available through the Shelter Plus Care Permanent Supportive Housing PSH Expansion Project (new) proposed by the Housing Authority of the County of Santa Cruz Housing (HACOSC). These 6 leveraged units will:

- Represent **slightly more than 25% of the 21 units** to be funded with CoC funds;
- Be located at the No Place Like Home (NPLH)-supported Jessie Street Apartments;
- Be available beginning July 1, 2025 in line with the Shelter Plus Care program year; and
- Be subsidized by HACOSC project-based Section 8 vouchers.

HSA BHD acknowledges that project eligibility is determined and will comply with HUD program and fair housing requirements. HSA BHD will not require any additional eligibility requirements.

HACOSC will keep and make available for inspection records documenting this contribution as required by HUD.

Sincerely,

DocuSigned by:

8196F709E3274C2...

Karen Kern, MPA
Deputy Director, Behavioral Health Division
County of Santa Cruz, Health Services Agency
Karen.Kern@santacruzcountyca.gov

Certificate Of Completion

Envelope Id: 50A739A5DD2C44E6A8A838F749D54905	Status: Completed
Subject: Complete with DocuSign: 2024 County HSA Housing Resources Leverage.doc, 2024 County HSA Service...	
Source Envelope:	
Document Pages: 3	Signatures: 2
Certificate Pages: 5	Initials: 0
AutoNav: Enabled	Envelope Originator:
Envelope Stamping: Enabled	Karen Kern
Time Zone: (UTC-08:00) Pacific Time (US & Canada)	701 Ocean Street
	Santa Cruz, CA 95060
	Karen.Kern@santacruzcountyca.gov
	IP Address: 73.170.157.152

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Storage Appliance Status: Connected	Pool: County of Santa Cruz	Location: DocuSign

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 karen.kern@santacruzcountyca.gov
 Deputy Director
 County of Santa Cruz
 Security Level: Email, Account Authentication (None)

Signature

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Robert Ratner Robert.Ratner@santacruzcountyca.gov Security Level: Email, Account Authentication (None)	COPIED	Sent: 10/23/2024 6:12:34 PM
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Witness Events	Signature	Timestamp
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Notary Events	Signature	Timestamp
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Envelope Summary Events	Status	Timestamps
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Certified Delivered	Security Checked	10/23/2024 6:12:44 PM
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Envelope Summary Events	Status	Timestamps
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Payment Events	Status	Timestamps
Electronic Record and Signature Disclosure		

ELECTRONIC RECORD AND SIGNATURE DISCLOSURE

From time to time, County of Santa Cruz (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to this Electronic Record and Signature Disclosure (ERSD), please confirm your agreement by selecting the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

Getting paper copies

At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after the signing session and, if you elect to create a DocuSign account, you may access the documents for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a \$0.00 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

Withdrawing your consent

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

Consequences of changing your mind

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

All notices and disclosures will be sent to you electronically

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

How to contact County of Santa Cruz:

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: nada.algharib@santacruzcounty.us

To advise County of Santa Cruz of your new email address

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at nada.algharib@santacruzcounty.us and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

If you created a DocuSign account, you may update it with your new email address through your account preferences.

To request paper copies from County of Santa Cruz

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an email to nada.algharib@santacruzcounty.us and in the body of such request you must state your email address, full name, mailing address, and telephone number. We will bill you for any fees at that time, if any.

To withdraw your consent with County of Santa Cruz

To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:

- i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
- ii. send us an email to nada.algharib@santacruzcounty.us and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

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Acknowledging your access and consent to receive and sign documents electronically

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to ‘I agree to use electronic records and signatures’ before clicking ‘CONTINUE’ within the DocuSign system.

By selecting the check-box next to ‘I agree to use electronic records and signatures’, you confirm that:

- You can access and read this Electronic Record and Signature Disclosure; and
- You can print on paper this Electronic Record and Signature Disclosure, or save or send this Electronic Record and Disclosure to a location where you can print it, for future reference and access; and
- Until or unless you notify County of Santa Cruz as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by County of Santa Cruz during the course of your relationship with County of Santa Cruz.

**3A-2a HEALTHCARE FORMAL
AGREEMENT**



County of Santa Cruz



HEALTH SERVICES AGENCY

BEHAVIORAL HEALTH DIVISION

1400 Emeline Ave., Bldg. K, Santa Cruz, CA 95060

Phone:(831) 454-7519 Fax:(831) 454-4770

October 21, 2024

U.S. Department of Housing & Urban Development
Office of Community Planning and Development
1 Sansome St., Suite 1200
San Francisco, CA 94104

Re: Formal Healthcare Services Agreement - Shelter Plus Care PSH Expansion New Project

To Whom it may Concern:

Santa Cruz County's Health Services Agency Behavioral Health Division (HSA-BHD) hereby commits to providing **healthcare services** to the Shelter Plus Care Permanent Supportive Housing (PSH) Expansion Project (new) proposed by the Housing Authority of the County of Santa Cruz Housing (HACOSC). HSA-BHD and HACOSC have a long history collaborating on the provision of healthcare services in HACOSC-administered PSH projects. Our healthcare services commitment for this project will be available beginning July 1, 2025, and will be provided per year over the next 5 years.

Healthcare services provided by HSA-BHD will be tailored to participants in the project and available to all participants who choose the healthcare services. HSA-BHD acknowledges project eligibility is determined and will comply with HUD program and fair housing requirements. HSA-BHD will not require any additional eligibility requirements.

The specific types of healthcare services include Medi-Cal (Medicaid) and Behavioral Health Services Act funded specialty mental health and substance use disorder treatment services as well as enhanced care management and housing-related community services funded by our local Medi-Cal managed care plans.

The total contribution of these healthcare services is **at least \$172,294** per year (which is 25% of the **\$689,176** in Continuum of Care funds requested by the project). The total estimated contribution of healthcare services is based upon current local Medi-Cal managed care rates for enhanced care management services for this target population of \$625 per member per month.

Type of health care services	Ave. annual healthcare costs per person	Ave. # of persons served in CoC Project	Total annual amount of healthcare leverage
Direct provision of specialty behavioral healthcare services (mental health and substance abuse); Enhanced care management services (coordination of physical health care resources)	\$625 PMPM Maximum of \$7,500 per person per year at this rate	27 (21 CoC, 6 NPLH)	\$202,500 (maximum). \$172,294 minimum contribution represents an assumed 15% non-claimable rate for services provided at the current local rate.

HSABHD have confirmed the value of the healthcare services provided are consistent with the local rates and the amount paid for services in our community.

Our contribution for will be eligible under the Outpatient Health Services, Mental Health Services, and Substance Abuse Treatment Services budget line item (BLI) categories. HACOSC will keep and make available for inspection records documenting this contribution as required by HUD.

Sincerely,

DocuSigned by:

 8196F709E3274C2...

Karen Kern
 Deputy Director, Behavioral Health Division

Certificate Of Completion

Envelope Id: 50A739A5DD2C44E6A8A838F749D54905	Status: Completed
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Certificate Pages: 5	Initials: 0
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 karen.kern@santacruzcountyca.gov
 Deputy Director
 County of Santa Cruz
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Signature

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Robert Ratner Robert.Ratner@santacruzcountyca.gov Security Level: Email, Account Authentication (None)	COPIED	Sent: 10/23/2024 6:12:34 PM
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Witness Events	Signature	Timestamp
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Notary Events	Signature	Timestamp
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Completed	Security Checked	10/23/2024 6:12:52 PM
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Electronic Record and Signature Disclosure		

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Getting paper copies

At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after the signing session and, if you elect to create a DocuSign account, you may access the documents for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a \$0.00 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

Withdrawing your consent

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

Consequences of changing your mind

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

All notices and disclosures will be sent to you electronically

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

How to contact County of Santa Cruz:

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To contact us by email send messages to: nada.algharib@santacruzcounty.us

To advise County of Santa Cruz of your new email address

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at nada.algharib@santacruzcounty.us and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

If you created a DocuSign account, you may update it with your new email address through your account preferences.

To request paper copies from County of Santa Cruz

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an email to nada.algharib@santacruzcounty.us and in the body of such request you must state your email address, full name, mailing address, and telephone number. We will bill you for any fees at that time, if any.

To withdraw your consent with County of Santa Cruz

To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:

- i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
- ii. send us an email to nada.algharib@santacruzcounty.us and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

Required hardware and software

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To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to ‘I agree to use electronic records and signatures’ before clicking ‘CONTINUE’ within the DocuSign system.

By selecting the check-box next to ‘I agree to use electronic records and signatures’, you confirm that:

- You can access and read this Electronic Record and Signature Disclosure; and
- You can print on paper this Electronic Record and Signature Disclosure, or save or send this Electronic Record and Disclosure to a location where you can print it, for future reference and access; and
- Until or unless you notify County of Santa Cruz as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by County of Santa Cruz during the course of your relationship with County of Santa Cruz.

3C-2 PROJECT LIST FOR OTHER FEDERAL STATUTES

N/A – CoC does not have projects that propose to serve persons defined as experiencing homelessness under other federal statutes.

1E-2 LOCAL COMPETITION SCORING TOOL

Summary of pt. categories:
 100 pts. Objective (Qs 1-9)
 20 pts. System Performance (Q 3)
 34 pts. Severe Barriers (Qs 1, 2, 4B,
 6C1&4) For Comparable data, see renewal
 application

Santa Cruz County 2024 CoC Renewal Project Reviewer Evaluation Tool

Reviewer Should Write Only in Yellow Fields

Project Name: _____ Reviewer Name: _____ Date: _____ Reviewer Signature: _____

A. AUTO-SCORED QUESTIONS AND REVIEWER COMMENTS

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
1	<p>Housing/Project Type Points will be awarded based upon local priority for the following housing/project types: 10 points for: (a) CES & HMIS (b) Renewal projects of the following types: 9 points for: 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 c. RRH for homeless individuals or families, including unaccompanied youth d. Joint TH and RRH projects 1 bonus point for: Renewal PSH, RRH, or TH-RRH projects serving CH, DedicatedPLUS, or other populations that specifically identify immigrants and/or persons with justice system involvement as an allowable client subpopulation 5 points for: (a) Renewal projects of the following types: a. PSH projects <u>not</u> dedicated 100% to chronically homeless or DedicatedPLUS populations. 0 points for: – All other projects.</p> <p>If none of the above, does application make a good case for the need for the type of project provided?</p>	<p>10 POINTS POSSIBLE Auto-Scored 10 points: CES & HMIS 9 points: <ul style="list-style-type: none"> • PSH – 100% CH • PSH – 100% Ded.+ • RRH • TH-RRH 1 bonus point: <ul style="list-style-type: none"> • PSH, RRH, & TH-RRH with immigrants or justice involved allowable 5 points: <ul style="list-style-type: none"> • PSH – <100% CH or Ded.+ 0 points: <ul style="list-style-type: none"> • All other projects </p>	<p>Staff auto score:</p>	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
2	<p>Priority Population Served – Addresses Chronic Homeless or DV population - 10 pts. maximum auto-scored</p> <p>The project meets the needs of a high priority population as described below:</p> <ul style="list-style-type: none"> • Experiencing chronic homelessness • Survivors or domestic violence <p>If none of the above, does application make a good case for the need to serve the population it does?</p>	<p>10 POINTS POSSIBLE Auto-Scored</p> <p>CH population:</p> <ul style="list-style-type: none"> • 10 points – 100% CH • 7.5 points – 70-99% • 5 points – 50-69% • 2.5 points – 25-49% • 1 point – 1-24% • 0 points – 0%. <p>OR</p> <p>DV population:</p> <ul style="list-style-type: none"> • 10 points – 100% DV dedicated • 0 points – <100%. <p>(CES & HMIS projects will receive 10 points)</p>	Staff auto score:	
3	<p>PERFORMANCE MEASURES</p> <p>PERFORMANCE MEASURES - 20 pts. maximum auto-scored</p> <p><u>CoC Renewals Only:</u> The project has met or exceeded measurable performance expectations in the following areas:</p> <ul style="list-style-type: none"> • Housing Stability • Income • Non-cash mainstream benefits • Program occupancy • Returns to homelessness • Length of stay • Safety (DV projects only) 	<p>20 POINTS POSSIBLE Auto-Scored</p> <p>(CES, HMIS, and first-year projects without a full year of HMIS data will receive 15 points)</p>	Staff auto score:	
3A	<p>CoC RENEWAL HOUSING PROJECTS ONLY:</p>			
3A 1	<p>Housing Stability:</p> <ul style="list-style-type: none"> • 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% 	<p>7 Points Available</p> <ul style="list-style-type: none"> • 7 points – 90% or more • 3½ points – 80%-89% • 0 points - <80% 	Staff auto score:	
3A	<p>Income:</p>	<p>5 Points Available</p>	Staff auto	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
2	<ul style="list-style-type: none"> 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% 	<p>All Income</p> <ul style="list-style-type: none"> 2½ points – 75% or more 1½ points – 65%-74% 0 points - <65% <p>Employment Income</p> <ul style="list-style-type: none"> 2½ points – 25% or more 1½ points – 15%-24% 0 points - <15% 	score:	
3A 3	<p>Non-Cash Mainstream Benefits:</p> <ul style="list-style-type: none"> 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% 	<p>2 Points Available</p> <ul style="list-style-type: none"> 2 points – 50% or more 1 point – 40%-49% 0 points - <40% 	Staff auto score:	
3A 4	<p>Program Occupancy (bed utilization):</p> <ul style="list-style-type: none"> 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 	<p>2 Points Available</p> <ul style="list-style-type: none"> 2 points – 90% or more 1 point – 80%-89% 0 points - <80% 	Staff auto score:	
3A 5	<p>Returns to Homelessness:</p> <ul style="list-style-type: none"> 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% 	<p>2 Points Available</p> <ul style="list-style-type: none"> 2 points – 20% or less 1 point – 21%-30% 0 points - >30% 	Staff auto score:	
3A 6	<p>Length of Stay:</p> <ul style="list-style-type: none"> For PSH only, did you meet the standard by <u>increasing</u> 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 <u>decreasing</u> the annual average LOS in TH or RRH for leavers? – lower LOS average than previous APR year 	<p>2 Points Available</p> <p>PSH:</p> <ul style="list-style-type: none"> 2 points – higher LOS than previous year 0 points – lower LOS than previous year <p>TH & RRH:</p> <ul style="list-style-type: none"> 2 points – lower LOS than previous year 	Staff auto score:	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
		<ul style="list-style-type: none"> 0 points – higher LOS than previous year 		
3A 7	Victim Service Providers only - Safety: <ul style="list-style-type: none"> Please propose at least one relevant measure of the degree of participant safety that you will commit to using in the future. 	Not Scored This Year	N/A	
4	PROGRAM EFFECTIVENESS	20 POINTS POSSIBLE Auto-Scored (CES & HMIS projects will receive 15 points)	Staff auto score:	
4A	Coordinated Entry Participation: The minimum percentage of new clients since 1/1/23 who came from CES referral.	10 Points Available Auto-Scored <ul style="list-style-type: none"> 10 points – 95% - 100% from CES referral 8 points – 90% - 94% 6 points – 85% - 89% 4 points – 80% - 84% 2 points – 75% - 79% 1 point – 70% - 74% 0 points – below 70%. 	<i>Staff auto score:</i>	
4B	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"> Does the project prioritize client selection based on duration of homelessness and vulnerability? Does the project accept all clients regardless of substance use history, or current use? Does the project accept clients who are diagnosed with, or show symptoms of, a mental illness? Does the project accept clients regardless of criminal history? Does the project accept clients regardless of income or financial resources? Does the project use a harm-reduction model for drugs and/or alcohol use? 	10 Points Available Auto-Scored Housing First approaches: <ul style="list-style-type: none"> 1 point “yes” response 0 points “no” response Removing housing barriers: <ul style="list-style-type: none"> 1/2 point per “yes” response 0 points per “no” response 	<i>Staff auto score:</i>	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
	<p>Removing Barriers to Housing: To what extent does your project eliminate the following barriers to housing?</p> <ol style="list-style-type: none"> 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. 			
5	FINANCIAL AND COST EFFECTIVENESS	10 POINTS POSSIBLE Auto-Scored	Staff auto score:	
5A	<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>2 Points Available Auto-Scored</p> <ul style="list-style-type: none"> • 2 points renewal – 75% - 100% housing activities • 1 points renewal – 50% - 74% • 0 points – below 50%. (CES and HMIS projects will receive 2 points) 	<i>Staff auto score:</i>	
5B	<p>Drawdown completeness: The percentage of overall HUD grant drawn down in the most recent completed program year recorded in the most recent APR.</p>	<p>8 Points Available Auto-Scored</p> <ul style="list-style-type: none"> • 8 points – 100% of budgeted funds successfully drawn • 7 points – 98% - 99% • 6 points – 96% - 97% • 5 points – 94% - 95% • 4 points – 92% - 93% • 3 points – 90% - 91% • 2 points – 88% - 89% 	<i>Staff auto score:</i>	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
		<ul style="list-style-type: none"> • 1 point – 86% - 87% • 0 points – below 86%. 		
6	AGENCY EXPERIENCE/CAPACITY	20 POINTS POSSIBLE Auto-Scored	Staff auto score:	
6A	Agency Years of Experience Number of years of agency experience in implementing the proposed program OR similar program type (e.g., RRH or PSH)	10 Points Available Auto-Scored <ul style="list-style-type: none"> • 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 	<i>Staff auto score:</i>	
6B	Capacity Issues Points will be deducted if in the past year (7/1/23-present): (1) the program had a CoC risk assessment AND did not carry out any actions to correct and risk issue(s) identified, (2) the agency has unresolved HUD monitoring findings in CoC programs, or (3) the agency has been late in submitting a CoC APR.	10 Pts Deduction Possible-Auto Scored <ul style="list-style-type: none"> • 3 points deduction – no action risk issues • 3 points deduction – unresolved findings • 4 points deduction – late APR 	<i>Staff auto score:</i>	
7	Mainstream Resources 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.	7 POINTS POSSIBLE Auto-Scored <ul style="list-style-type: none"> • 7 points – 7 - 8 strategies used • 5 points – 5 - 6 used • 3 point – 3 - 4 used • 2 points – 2 used • 1 point – 1 used • 0 points – 0 used 	Staff auto score:	
8	Equity Factors 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: 1. Agency has individuals representing BIPOC in managerial and	10 POINTS POSSIBLE Auto-Scored <ul style="list-style-type: none"> • 1 point per “yes” response • 0 points “no” response 	Staff auto score:	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
	<p>leadership positions</p> <ol style="list-style-type: none"> 2. Agency has individuals representing LGBTQ+ in managerial and leadership positions 3. Agency board of directors includes representation from more than one person with lived experience 4. Agency has relational process for receiving and incorporating feedback from persons with lived experience 5. 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. 6. Agency has provided at least one staff training since 1/1/21 on enhancing equity for BIPOC and/or LGBTQ+. <p>Program participant outcomes:</p> <ol style="list-style-type: none"> 7. Agency has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age 8. Agency has identified programmatic changes needed to make program participant outcomes more equitable for overrepresented races or ethnicities and developed a plan to make those changes 9. Agency has identified programmatic changes needed to make program participant outcomes more equitable for LGBTQ+ persons and developed a plan to make those changes 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. 			
9	<p>Community Collaboration and Participation (3 points possible) To what extent does the applicant agency support the Housing for Health Partnership (H4HP) by: (1) participating in meetings of the H4HP general membership, (2) participating in HMIS by entering client data into HMIS for 100% of its programs that are listed in the 2024 Housing Inventory Chart (HIC); and (3) participating in CES with no housing referral denials except where there is an appropriate reason for denial under an exception listed in the CES Policies and Procedures, section 7.3.5?</p> <p><i>Sub-scores will be determined by H4HP staff based upon</i></p>	<p>3 POINTS POSSIBLE Auto-Scored H4HP meeting participation:</p> <ul style="list-style-type: none"> • 1 point: Agency attends 75% to 100% • 0 points: Agency attends 0% to 74% <p>HMIS participation:</p> <ul style="list-style-type: none"> • 1 point: Has data for 	<p>Staff auto score:</p>	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
	<i>appropriate H4HP and documentation for the period from July 1, 2023, to the present time.</i>	100% HIC <ul style="list-style-type: none"> 0 points: Has data for less than 100% HIC CES participation: <ul style="list-style-type: none"> 1 point: Agency receives CES housing referrals and has no inappropriate denials 0 points: Agency does not receive CES housing referrals OR has had inappropriate denials 		

B. REVIEWER-SCORED QUESTIONS AND REVIEWER COMMENTS

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
6C	Narrative Responses - Past Experience in Key Areas Please (1) describe your agencies prior experience, and (2) provide at least one example of agency success, in the following key areas: <ol style="list-style-type: none"> Priority Population Served - Serving clients who are experiencing chronic homelessness, or are survivors of domestic violence Program Design – Operating a similar type of program CES Participation – Accepting and successfully housing program referrals through CES Housing First – Embracing Housing First approaches and removing participant barriers to housing Mainstream Resources – Implementing strategies to help participants access federal mainstream benefits Equity Factors – Implementing agency leadership, governance, and policy changes and assessing and improving participant outcomes with and equity lens 	10 Points Available Reviewer-Scored <ul style="list-style-type: none"> 2 points – priority population 2 point – program design 1 point – CES participation 2 points – Housing First 1 point – Mainstream resources 2 points – Equity factors 	Reviewer Score:	

	Total Auto-Scored Questions	100 POINTS POSSIBLE	
	Total Reviewer-Scored Questions	10 POINTS POSSIBLE	
	Total Score (Reviewer Add the Above Scores Together)	110 POINTS POSSIBLE	

C. REVIEWER-PROVIDED SUMMARY OF RECOMMENDATIONS TO H4H POLICY BOARD:

1. Recommended for Approval? <input type="checkbox"/> Recommend <input type="checkbox"/> Recommended with issues to address (see below) <input type="checkbox"/> Do not recommend	2. Recommended Funding Amount? <input type="checkbox"/> Full funding as requested <input type="checkbox"/> Reduce funding to the following: \$ _____
List issues for applicant to address if any:	Reasons for reduced funding, if recommended:
3. Recommended Ranking? <input type="checkbox"/> Rank high (highest quality and most needed) <input type="checkbox"/> Rank medium (high quality and needed) <input type="checkbox"/> Rank low (lower quality or less needed)	4. Recommended Tiering? <input type="checkbox"/> Tier 1 (funding nearly certain) <input type="checkbox"/> Tier 2 (funding not certain)

E-Mail Completed Form to tonygardnerconsulting@yahoo.com and sheryl.norteye@santacruzcountyca.gov by **12 pm, Monday, October 7;** also please bring to the meeting.

INSTRUCTIONS

What to complete:

1. **Local CoC renewal application (YHDP does NOT need to submit): Complete the application using this Word document and adding additional sheets as necessary. Include the following attachments as appropriate for your project:**
 - a. Most recently completed Annual Performance Report (APR), if project has operated for at least 1 year
 - b. Latest Independent Audit, only if available
 - c. Summary of any agency client surveys or focus groups conducted in the previous two program years, only if available
 - d. Match letters.
2. **HUD online e-snaps application for renewal projects (YHDP DOES need to submit), including:**
 - a. Project Application, including all required charts, narratives, certifications, and attachments.

Deadline: Friday, September 27, 5 pm for both local renewal CoC project application AND HUD e-snaps application

Where to submit:

1. **Local renewal CoC project application:** Submit via e-mail (no paper copies) to: Sheryl.norteye@santacruzcountyca.gov AND tonygardnerconsulting@yahoo.com
2. **HUD online e-snaps application for renewal projects:** Submit via e-snaps: <https://esnaps.hud.gov/grantium/frontOffice.jsf>. (No need to submit paper to H4H staff or CoC Consultant.)

PROJECT INFORMATION QUESTIONS

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)
a. Homeless Individuals	
1. Total of individuals	
2. Total of disabled persons	
b. Homeless Families	
1. Total of families	
2. Total adults	
3. Total children (under 18)	
c. Total Homeless (a.1+b.2+b.3)	

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)	
h. Immigrant	
i. Justice involved	

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 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. =	\$
Total			\$

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)

Identify the types of projects (Check only 1):

- PSH serving 100% CH or DedicatedPLUS with longest histories of homelessness and most severe barriers, 9 pts
 RRH, 9 pts
 joint TH-RRH, 9 pts
 PSH not serving 100% CH or Dedicated PLUS with longest histories of homelessness & most severe barriers, 5 pts
 Other project types, 0 pts

Bonus point – Serving immigrants and/or justice system-involved as a subpopulation:

- PSH projects serving 100% CH or DedicatedPLUS with longest histories of homelessness and most severe barriers, RRH, or joint TH-RRH that identifies immigrants and/or justice system-involved as an allowable subpopulation, 1 bonus pt.

2. Priority Population Served Addresses Chronic Homeless, or DV Population(s) (check only 1) (N/A for CES or HMIS) (10 points possible)

Please respond to either the chronic homeless 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)?

- 100%, 10 pts
 70-99%, 7.5 pts
 50-69%, 5 pts
 25-49%, 2.5 pts
 1-24%, 1 pt
 0%, 0 pts

OR

What percentage of clients served will be domestic violence survivors as defined by HUD (must match response to 6.f above)?

- 100%, 10 pts
 0-99%, 0 pts

3. Performance Measures – Based on APR (20 points possible) (N/A for HMIS, CES, or first year projects without one year of data)

3A. CoC Housing Renewals only - Please use the attach worksheet to answer the following questions based upon from your most recent APR.

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 since 1/1/23 who came from CES referral.

95-100%, 10 pts 90-94%, 8 pts 85-89%, 6 pts 80-84%, 4 pts 75-79%, 2 pts 70-74%, 1 pt <70% 0 pts

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 projects):

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).

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		
\$ [] TOTAL Housing Funds	\$ [] TOTAL Housing +Service Funds	[] % Housing Funds

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 (4th column above):

100%, 5 pts 98-99%, 4 pts 96-97%, 3 pts 94-95%, 2 pts 92-93%, 1 pts <92% 0 pts

6. Agency Experience/Capacity (20 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).

8+ years experience, 10 pts 5-7 years experience, 8 pts 4-6 years experience, 6 pts 2-3 years experience, 4 pts 1-2 years experience, 2 pts <1 year experience, 0 pts

6B Capacity Issues (answer all that apply):

Please answer the following questions based upon the past year from July 1, 2022 to the present date:

1. Are both the following statements true? a. Agency had a CoC risk assessment, AND b. the agency carried out appropriate actions to correct any risk issues identified in risk assessment. Yes No
If 'yes,' briefly describe the actions your agency has taken to correct risk issue(s) identified:

2. Does the agency have unresolved HUD monitoring findings in CoC programs? Yes No
3. Has the agency been late in submitting its most recent CoC APR? Yes No

6C Narrative Responses - Past Experience in Key Areas (2 pp. maximum) (10 points possible total)

Please (1) **describe** your agencies prior experience, and (2) provide at least **one example** of agency success, in each of the following key areas:

1. Priority Population Served - Serving clients who are experiencing chronic homelessness, or are survivors of domestic violence
2. Program Design – Operating a similar type of program
3. CES Participation – Accepting and successfully housing program referrals through CES
4. Housing First – Embracing Housing First approaches and removing participant barriers to housing
5. Mainstream Resources – Implementing strategies to help participants access federal mainstream benefits
6. Equity Factors – Implementing agency leadership, governance, and policy changes and assessing and improving participant outcomes with and equity lens

7. Mainstream Resources (7 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) (10 points possible)

Please identify which of the following equity factors your program has implemented OR commits to implement within one year:

	Agency leadership, governance, and policies:
<input type="checkbox"/>	1. Agency has individuals representing BIPOC in managerial and leadership positions
<input type="checkbox"/>	2. Agency has individuals representing LGBTQ+ in managerial and leadership positions
<input type="checkbox"/>	3. Agency board of directors includes representation from more than one person with lived experience
<input type="checkbox"/>	4. Agency has relational process for receiving and incorporating feedback from persons with lived experience
<input type="checkbox"/>	5. 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
	6. Agency has provided at least one staff training since 1/1/21 on enhancing equity for BIPOC and/or LGBTQ+
	Program participant outcomes
<input type="checkbox"/>	7. Agency has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age
	8. Agency has identified programmatic changes needed to make program participant outcomes more equitable for overrepresented races or ethnicities and developed a plan to make those changes
<input type="checkbox"/>	9. Agency has identified programmatic changes needed to make program participant outcomes more equitable for LGBTQ+ and developed a plan to make those changes
<input type="checkbox"/>	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

Please note that an additional 3 points is possible for Community Collaboration and Participation. There is no need to submit a response. H4H staff will tabulate scores. 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 Your Most Recently Completed APR Generated from HMIS (or Comparable Database for DV) – CoC Housing Renewals Only.

Please answer the following using your most recently completed APR. 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.

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 RRH and TH-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 Q23c

Formula:

- a. Total number of leavers combined (APR Q23c, Total column, Total row): _____ Leavers
- b. Total number of leavers who exited to permanent destinations (APR Q23c, 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 adult’s 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 Q23c

Formula:

- a. Total number of leavers combined (APR Q23c, Total column, Total row):

_____ Total Leavers

- b. Total number of leavers who exited to non-permanent destinations (APR Q23c, 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 (Leaver's 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 (Leaver's 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:

N/A – no HMIS-based calculation needed.

Summary of pt. categories:

80 pts. Objective (Qs 1-2, 4-9)

10 pts. System Performance (Q 3A1, 5, 6)

40 pts. Severe Barriers (Qs 1, 2, [3A14 5,7,8] 4B, 6C1&4)

Santa Cruz County 2024 CoC New Project Reviewer Evaluation Tool

Reviewer Should Write Only in Yellow Fields

Project Name: _____ Reviewer Name: _____ Date: _____ Reviewer Signature: _____

A. AUTO-SCORED QUESTIONS AND REVIEWER COMMENT

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
1	<p>Housing/Project Type</p> <p>Points will be awarded based upon local priority for the following housing/project types:</p> <p>10 points for:</p> <p>(a) 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> <p>9 points for:</p> <p>a. PSH with rental assistance serving 100% chronically homeless persons with emphasis on the longest histories of homelessness and most severe needs</p> <p>b. PSH with rental assistance serving 100% DedicatedPLUS project type with emphasis on the longest histories of homelessness and most severe needs</p> <p>c. Joint TH and RRH projects</p> <p>d. RRH for homeless individuals or families, including unaccompanied youth</p> <p>1 bonus point for:</p> <p>New PSH, RRH, or TH-RRH projects serving CH, DedicatedPLUS, or other populations that specifically identify immigrants and/or persons with justice system involvement as an allowable client subpopulation</p> <p>10 points for:</p> <p>(b) New DV bonus projects of the following types:</p> <p>a. RRH projects that must follow a Housing First approach</p> <p>b. Joint TH and RRH projects that must follow a Housing First approach</p> <p>c. CES project to meet the needs of DV survivors, demonstrating trauma-informed and victim-centered approach.</p>	<p>10 POINTS POSSIBLE Auto-Scored</p> <p>9 points:</p> <p>New realloc or bonus:</p> <ul style="list-style-type: none"> • PSH – 100% CH • PSH – 100% Ded.+ • RRH • TH-RRH <p>1 bonus point:</p> <ul style="list-style-type: none"> • PSH, RRH, or TH-RRH immigrants or justice involved allowable <p>10 points:</p> <p>New DV Bonus:</p> <ul style="list-style-type: none"> • RRH - Housing 1st • TH-RRH - Housing 1st • CES – DV focused <p>5 points:</p> <p>New realloc or bonus:</p> <ul style="list-style-type: none"> • PSH – <100% CH or Det.+ <p>0 points:</p> <ul style="list-style-type: none"> • All other projects 	<p>Staff auto score:</p>	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
	<p>5 points for: (a) New projects of the following types proposing to use funds reallocated from renewals or CoC bonus funds: a. PSH projects <u>not</u> dedicated 100% to chronically homeless DedicatedPLUS populations.</p> <p>0 points for: – All other projects.</p> <p>If none of the above, does application make a good case for the need for the type of project provided?</p>			
2	<p>Priority Population Served – Addresses Chronic Homeless or DV population - 10 pts. maximum auto-scored The project meets the needs of a high priority population as described below:</p> <ul style="list-style-type: none"> • Experiencing chronic homelessness • Survivors or domestic violence <p>If none of the above, does application make a good case for the need to serve the population it does?</p>	<p>10 POINTS POSSIBLE Auto-Scored CH population:</p> <ul style="list-style-type: none"> • 10 points – 100% CH • 7.5 points – 70-99% • 5 points – 50-69% • 2.5 points – 25-49% • 1 point – 1-24% • 0 points – 0%. <p>OR</p> <p>DV population:</p> <ul style="list-style-type: none"> • 10 points – 100% DV dedicated • 0 points – <100%. <p>(DV CES projects will receive 10 points)</p>	Staff auto score:	
4	PROGRAM EFFECTIVENESS	<p>20 POINTS POSSIBLE Auto-Scored (CES & HMIS projects will receive 15 points)</p>	Staff auto score:	
4A	<p>Coordinated Entry Participation: The minimum percentage of new clients the program commits to taking from CES referral.</p>	<p>10 Points Available Auto-Scored</p> <ul style="list-style-type: none"> • 10 points – 95% - 100% CES commitment • 8 points – 90% - 94% • 6 points – 85% - 89% • 4 points – 80% - 84% • 2 points – 75% - 79% 	Staff auto score:	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
		<ul style="list-style-type: none"> • 1 points – 70% - 74% • 0 points – below 70%. 		
4B	<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> <ol style="list-style-type: none"> 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? <p>Removing Barriers to Housing: To what extent does your project eliminate the following barriers to housing?</p> <ol style="list-style-type: none"> 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. 	<p>10 Points Available Auto-Scored</p> <p>Housing First approaches:</p> <ul style="list-style-type: none"> • 1 point “yes” response • 0 points “no” response <p>Removing housing barriers:</p> <ul style="list-style-type: none"> • 1/2 point per “yes” response • 0 points per “no” response 	Staff auto score:	
5	FINANCIAL AND COST EFFECTIVENESS	10 POINTS POSSIBLE Auto-Scored	Staff auto score:	
5A	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.	<p>10 Points Available Auto-Scored</p> <ul style="list-style-type: none"> • 10 points – 90% - 100% 	<i>Staff auto score:</i>	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
	percentage funding used on non-housing activities (supportive services, services-only operations, and HMIS).	housing activities <ul style="list-style-type: none"> • 8 points – 80% - 89% • 6 points – 70% - 79% • 4 points – 60% - 69% • 2 points – 50% - 99% • 0 points – below 50%. (DV CES projects will receive 8 points)		
6	AGENCY EXPERIENCE/CAPACITY	10 POINTS POSSIBLE Auto-Scored	Staff auto score:	
6A	Agency Years of Experience Number of years of agency experience in implementing the proposed program OR similar program type (e.g., RRH or PSH)	10 Points Available Auto-Scored <ul style="list-style-type: none"> • 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 	<i>Staff auto score:</i>	
6B	Capacity Issues Points will be deducted if in the past year (7/1/23-present): (1) the program had a CoC risk assessment AND did not carry out any actions to correct and risk issue(s) identified, (2) the agency has unresolved HUD monitoring findings in CoC programs, or (3) the agency has been late in submitting a CoC APR.	10 Pt Deduction Possible Auto-Scored <ul style="list-style-type: none"> • 3 points deduction – no action risk issues • 3 points deduction – unresolved findings • 4 points deduction – late APR 	<i>Staff auto score:</i>	
7	Mainstream Resources The number of strategies the program will use 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.	7 POINTS POSSIBLE Auto-Scored <ul style="list-style-type: none"> • 7 points – 7 - 8 strategies used • 5 points – 5 - 6 used • 3 point – 3 - 4 used • 2 points – 2 used • 1 point – 1 used • 0 points – 0 used 	Staff auto score:	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
8	<p>Equity Factors</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> <ol style="list-style-type: none"> 1. Agency has individuals representing BIPOC in managerial and leadership positions 2. Agency has individuals representing LGBTQ+ in managerial and leadership positions 3. Agency board of directors includes representation from more than one person with lived experience 4. Agency has relational process for receiving and incorporating feedback from persons with lived experience 5. 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. 6. Agency has provided at least one staff training since 1/1/21 on enhancing equity for BIPOC and/or LGBTQ+. <p>Program participant outcomes:</p> <ol style="list-style-type: none"> 7. Agency has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age 8. Agency has identified programmatic changes needed to make program participant outcomes more equitable for overrepresented races or ethnicities and developed a plan to make those changes 9. Agency has identified programmatic changes needed to make program participant outcomes more equitable for LGBTQ+ persons and developed a plan to make those changes 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>10 POINTS POSSIBLE Auto-Scored</p> <ul style="list-style-type: none"> • 1 point per “yes” response • 0 points “no” response 	<p>Staff auto score:</p>	
9	<p>Community Collaboration and Participation</p> <p>To what extent does the applicant agency support the Housing for Health Partnership (H4HP) by: (1) participating in meetings of the H4HP general membership; (2) participating in HMIS by entering client data into HMIS for 100% of its programs that are listed in the 2024 Housing Inventory Chart (HIC); and (3) participating in CES with no housing referral denials except where there is an</p>	<p>3 POINTS POSSIBLE Auto-Scored</p> <p>H4HP meeting participation:</p> <ul style="list-style-type: none"> • 1 point: Agency attends 75% to 100% 	<p>Staff auto score:</p>	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
	<p>appropriate reason for denial under an exception listed in the CES Policies and Procedures, section 7.3.5?</p> <p><i>Sub-scores will be determined by H4HP staff based upon appropriate H4HP and documentation for the period from July 1, 2023 to the present time.</i></p>	<ul style="list-style-type: none"> 0 points: Agency attends 0% to 74% HMIS participation: 1 point: Has data for 100% HIC 0 points: Has data for less than 100% HIC CES participation: 1 point: Agency receives CES housing referrals and has no inappropriate denials 0 points: Agency does not receive CES housing referrals OR has had inappropriate denials 		

B. REVIEWER-SCORED QUESTIONS AND REVIEWER COMMENTS

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
3A	NEW CoC HOUSING PROJECTS ONLY – PROGRAM DESIGN	20 POINTS POSSIBLE Reviewer-Scored	Reviewer Score:	
	<p>Narrative Responses: 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"> Are the program annual measurable goals appropriate to the program type and sufficiently challenging? Will the majority of homeless participants come from the streets, emergency shelters, or other appropriate setting given population served and project type? Is the program’s outreach plan sufficient and feasible population served and project type? Are the types and frequency of services appropriate for the population served and project type? Are the strategies to help participants obtain and remain in 	<p>Non-DV projects:</p> <ul style="list-style-type: none"> 4 points – measurable goals 4 points – majority come from streets or shelters 3 points – outreach plan 3 points – supportive services 3 points – obtain PH 3 points – income & live independently <p>DV projects:</p>		

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
	<p>permanent housing appropriate for the population served and project type?</p> <p>6. Are the strategies to help participants increase their employment and income and live independently appropriate for the population served and project type?</p> <p>7. <i>Victim Service Providers only</i> – Is the plan to increase the safety of project participants appropriate and feasible?</p> <p>8. <i>Victim Service Providers only</i> – Does the application clearly describe a feasible plan to implement a Housing First strategy?</p>	<ul style="list-style-type: none"> • 3 points – measurable goals • 3 points – majority come from streets or shelters • 2 points – outreach plan • 2 points – supportive services • 2 points – obtain PH • 2 points – income & live independently • 3 points – safety plan • 3 points Housing First 		
3B	NEW COORDINATED ENTRY PROJECTS ONLY – PROGRAM DESIGN (DV CES ONLY)	20 POINTS POSSIBLE Reviewer-Scored	Reviewer Score:	
	<p>Narrative Responses: The application clearly describes feasible approaches or plans for all of the following DV CES program design factors:</p> <ol style="list-style-type: none"> 1. The geographic accessibility of the proposed system for all persons within the CoC’s geographic area who are seeking information regarding homeless assistance; 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; 3. The standardized assessment process proposed (or the process to choose a standardized assessment system); 4. Whether/how the system will ensure that program participants are directed to the appropriate housing and services to fit their needs; and 5. The strategy for implement a trauma-informed, client-centered approach. 	<p>DV CES projects:</p> <ul style="list-style-type: none"> • 4 points – geographic access • 4 points - Advertising • 4 points – Standard assessment • 4 points – directing to housing & services • 4 points – trauma informed, client centered 		
6C	<p>Narrative Responses - Past Experience in Key Areas</p> <p>Please (1) describe your agencies prior experience, and (2) provide at least one example of agency success, in the following key areas:</p> <ol style="list-style-type: none"> 1. Priority Population Served - Serving clients who are 	<p>10 Points Available</p> <p>Reviewer-Scored</p> <ul style="list-style-type: none"> • 2 points – priority population 	Reviewer Score:	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
	<p>experiencing chronic homelessness, or are survivors of domestic violence</p> <p>2. Program Design – Operating a similar type of program</p> <p>3. CES Participation – Accepting and successfully housing program referrals through CES</p> <p>4. Housing First – Embracing Housing First approaches and removing participant barriers to housing</p> <p>5. Mainstream Resources – Implementing strategies to help participants access federal mainstream benefits</p> <p>6. Equity Factors – Implementing agency leadership, governance, and policy changes and assessing and improving participant outcomes with and equity lens</p>	<ul style="list-style-type: none"> • 2 point – program design • 1 point – CES participation • 2 points – Housing First • 1 point – Mainstream resources • 2 points – Equity factors 		

	Total Auto-Scored Questions	80 POINTS POSSIBLE	
	Total Reviewer-Scored Questions	30 POINTS POSSIBLE	
	Total Score (Reviewer Add the Above Scores Together)	110 POINTS POSSIBLE	

C. REVIEWER-PROVIDED SUMMARY OF RECOMMENDATIONS TO H4H POLICY BOARD:

<p>1. Recommended for Approval?</p> <p><input type="checkbox"/> Recommend</p> <p><input type="checkbox"/> Recommended with issues to address (see below)</p> <p><input type="checkbox"/> Do not recommend</p>	<p>2. Recommended Funding Amount?</p> <p><input type="checkbox"/> Full funding as requested</p> <p><input type="checkbox"/> Reduce funding to the following: \$_____</p>
<p>List issues for applicant to address if any:</p>	<p>Reasons for reduced funding, if recommended:</p>
<p>3. Recommended Ranking?</p> <p><input type="checkbox"/> Rank high (highest quality and most needed)</p> <p><input type="checkbox"/> Rank medium (high quality and needed)</p> <p><input type="checkbox"/> Rank low (lower quality or less needed)</p>	<p>4. Recommended Tiering?</p> <p><input type="checkbox"/> Tier 1 (funding nearly certain)</p> <p><input type="checkbox"/> Tier 2 (funding not certain)</p>

E-Mail Completed Form to tonygardnerconsulting@yahoo.com and sheryl.norteye@santacruzcountyca.gov by **12 pm, Monday, October 7**; also please bring to the meeting.

INSTRUCTIONS

What to complete:

- 1. Local new CoC project application (YHDP does NOT need to submit): Complete the application using this Word document and adding additional sheets as necessary. Include the following attachments as appropriate for your project:**
 - a. Latest Independent Audit, only if available
 - b. Summary of any agency client surveys or focus groups conducted in the previous two program years, only if available
 - c. Match letters.
- 2. HUD online e-snaps application for new projects (YHDP DOES need to submit), including:**
 - a. Project Application, including all required charts, narratives, certifications, and attachments.

Deadline: Friday, September 27, 5 pm for both local new CoC project application AND HUD e-snaps application

Where to submit:

- 1. Local new CoC project application:** Submit via e-mail (no paper copies) to: Sheryl.norteye@santacruzcountyca.gov AND tonygardnerconsulting@yahoo.com
- 2. HUD online e-snaps application for new projects:** Submit via e-snaps: <https://esnaps.hud.gov/grantium/frontOffice.jsf>. (No need to submit paper to H4H staff or CoC Consultant.)

PROJECT INFORMATION QUESTIONS

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)
a. Homeless Individuals	
1. Total of individuals	
2. Total of disabled persons	
b. Homeless Families	
1. Total of families	
2. Total adults	
3. Total children (under 18)	
4. Total disabled persons	
c. Total Homeless (a.1+b.2+b.3)	

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)	
h. Immigrant	
i. Justice involved	

f. 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			
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. =	\$
Total			\$

g. 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)

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
--

Identify the types of projects (Check only 1):

Bonus and/or Reallocation: <input type="checkbox"/> PSH serving 100% CH or Dedicated PLUS with longest histories of homelessness and most severe barriers, 9 pts <input type="checkbox"/> RRH, 9 pts <input type="checkbox"/> joint TH-RRH, 9 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 DV Bonus: <input type="checkbox"/> RRH Housing 1 st , 10 pts <input type="checkbox"/> TH-RRH Housing 1 st , 10 pts, <input type="checkbox"/> CES-DV, trauma-informed, client-centered, 10 pts
--

Bonus point – Serving immigrants and/or justice system-involved as a subpopulation:

<input type="checkbox"/> PSH projects serving 100% CH or Dedicated PLUS with longest histories of homelessness and most severe barriers, RRH, or joint TH-RRH that identifies immigrants and/or justice system-involved as an allowable subpopulation, 1 bonus pt.
--

2. Priority Population Served Addresses Chronic Homeless or DV Population(s) (check only 1) (10 points possible)

Please respond to either the chronic homeless 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 domestic violence survivors as defined by HUD (must match response to 6.f 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 – CoC 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 measurable goals:

1. Obtain/remain in permanent housing:

2. Increase skills and income:

3. Achieve greater self-determination:

4. Victim Service Providers only - Safety: (not scored this year): Please identify at least one safety-related measure:

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 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:

3C. Program Design – New DV Coordinated Entry Projects Only:

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/services to fit their needs

3B5. The strategy for implement a trauma-informed, client-centered approach

4. Program Effectiveness (N/A for DV CES) (20 points possible)

4A. Coordinated Entry Participation:

Identify the percentage of clients who you commit will come from 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 DV CES projects):

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).

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		
\$ [] TOTAL Housing Funds	\$ [] TOTAL Housing +Service Funds	[] % Housing Funds

6. Agency Experience/Capacity (20 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
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6B Capacity Issues (answer all that apply):

Please answer the following questions based upon the past year from July 1, 2022 to the present date:

1. Are both the following statements true? a. Agency had a CoC risk assessment, AND b. the agency carried out appropriate actions to correct any risk issues identified in risk assessment. Yes No
If ‘yes,’ briefly describe the actions your agency has taken to correct risk issue(s) identified:

2. Does the agency have unresolved HUD monitoring findings in CoC programs? Yes No
3. Has the agency been late in submitting its most recent CoC APR? Yes No

6C Narrative Responses - Past Experience in Key Areas (2 pp. maximum) (10 points possible total)

Please (1) **describe** your agencies prior experience, and (2) provide at least **one example** of agency success, in each of the following key areas:

1. Priority Population Served - Serving clients who are experiencing chronic homelessness, or are survivors of domestic violence
2. Program Design – Operating a similar type of program
3. CES Participation – Accepting and successfully housing program referrals through CES
4. Housing First – Embracing Housing First approaches and removing participant barriers to housing
5. Mainstream Resources – Implementing strategies to help participants access federal mainstream benefits
6. Equity Factors – Implementing agency leadership, governance, and policy changes and assessing and improving participant outcomes with and equity lens

7. Mainstream Resources (7 points possible)

Please check each activity your project will implement 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) (10 points possible)

Please identify which of the following equity factors your program has implemented OR commits to implement within one year:

	Agency leadership, governance, and policies:
<input type="checkbox"/>	1. Agency has individuals representing BIPOC in managerial and leadership positions
<input type="checkbox"/>	2. Agency has individuals representing LGBTQ+ in managerial and leadership positions
<input type="checkbox"/>	3. Agency board of directors includes representation from more than one person with lived experience
<input type="checkbox"/>	4. Agency has relational process for receiving and incorporating feedback from persons with lived experience
<input type="checkbox"/>	5. 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
	6. Agency has provided at least one staff training since 1/1/21 on enhancing equity for BIPOC and/or LGBTQ+
	Program participant outcomes
<input type="checkbox"/>	7. Agency has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age
	8. Agency has identified programmatic changes needed to make program participant outcomes more equitable for overrepresented races or ethnicities and developed a plan to make those changes
<input type="checkbox"/>	9. Agency has identified programmatic changes needed to make program participant outcomes more equitable for LGBTQ+ and developed a plan to make those changes
<input type="checkbox"/>	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

Please note that an additional 3 points is possible for Community Collaboration and Participation. There is no need to submit a response. H4H staff will tabulate scores. Please see the Evaluation Criteria item 9 for details.

**1E-2a SCORED FORMS FOR ONE
PROJECT**

Santa Cruz County 2024 CoC Renewal Project Reviewer Evaluation Tool

Reviewer Should Write Only in Yellow Fields

Project Name: MATCH PSH

Reviewer Name: Karen Kern

Date: 10/6/24

Reviewer Signature: KK

A. AUTO-SCORED QUESTIONS AND REVIEWER COMMENTS

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
1	<p>Housing/Project Type Points will be awarded based upon local priority for the following housing/project types: 10 points for: (a) CES & HMIS (b) Renewal projects of the following types: 9 points for: 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 c. RRH for homeless individuals or families, including unaccompanied youth d. Joint TH and RRH projects 1 bonus point for: Renewal PSH, RRH, or TH-RRH projects serving CH, DedicatedPLUS, or other populations that specifically identify immigrants and/or persons with justice system involvement as an allowable client subpopulation 5 points for: (a) Renewal projects of the following types: a. PSH projects <u>not</u> dedicated 100% to chronically homeless or DedicatedPLUS populations. 0 points for: – All other projects.</p> <p>If none of the above, does application make a good case for the need for the type of project provided?</p>	<p>10 POINTS POSSIBLE Auto-Scored 10 points: CES & HMIS 9 points: • PSH – 100% CH • PSH – 100% Ded.+ • RRH • TH-RRH 1 bonus point: • PSH, RRH, & TH-RRH with immigrants or justice involved allowable 5 points: • PSH – <100% CH or Ded.+ 0 points: • All other projects</p>	<p>Staff auto score: 10</p>	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
2	<p>Priority Population Served – Addresses Chronic Homeless or DV population - 10 pts. maximum auto-scored</p> <p>The project meets the needs of a high priority population as described below:</p> <ul style="list-style-type: none"> • Experiencing chronic homelessness • Survivors or domestic violence <p>If none of the above, does application make a good case for the need to serve the population it does?</p>	<p>10 POINTS POSSIBLE Auto-Scored</p> <p>CH population:</p> <ul style="list-style-type: none"> • 10 points – 100% CH • 7.5 points – 70-99% • 5 points – 50-69% • 2.5 points – 25-49% • 1 point – 1-24% • 0 points – 0%. <p>OR</p> <p>DV population:</p> <ul style="list-style-type: none"> • 10 points – 100% DV dedicated • 0 points – <100%. <p>(CES & HMIS projects will receive 10 points)</p>	<p>Staff auto score: 10</p>	
3	<p>PERFORMANCE MEASURES</p> <p>PERFORMANCE MEASURES - 20 pts. maximum auto-scored</p> <p><u>CoC Renewals Only:</u> The project has met or exceeded measurable performance expectations in the following areas:</p> <ul style="list-style-type: none"> • Housing Stability • Income • Non-cash mainstream benefits • Program occupancy • Returns to homelessness • Length of stay • Safety (DV projects only) 	<p>20 POINTS POSSIBLE Auto-Scored</p> <p>(CES, HMIS, and first-year projects without a full year of HMIS data will receive 15 points)</p>	<p>Staff auto score: 14.5</p>	<p>Low % of ADULTs leaving with income (7%) – plan to improve? 60% return to homelessness – barriers?</p>
3A	<p>CoC RENEWAL HOUSING PROJECTS ONLY:</p>			
3A 1	<p>Housing Stability:</p> <ul style="list-style-type: none"> • 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% 	<p>7 Points Available</p> <ul style="list-style-type: none"> • 7 points – 90% or more • 3½ points – 80%-89% • 0 points - <80% 	<p><i>Staff auto score:</i> 7</p>	
3A	<p>Income:</p>	<p>5 Points Available</p>	<p><i>Staff auto</i></p>	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
2	<ul style="list-style-type: none"> 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% 	<p>All Income</p> <ul style="list-style-type: none"> 2½ points – 75% or more 1½ points – 65%-74% 0 points - <65% <p>Employment Income</p> <ul style="list-style-type: none"> 2½ points – 25% or more 1½ points – 15%-24% 0 points - <15% 	<p>score: 1.5</p>	
3A 3	<p>Non-Cash Mainstream Benefits:</p> <ul style="list-style-type: none"> 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% 	<p>2 Points Available</p> <ul style="list-style-type: none"> 2 points – 50% or more 1 point – 40%-49% 0 points - <40% 	<p>Staff auto score: 2</p>	
3A 4	<p>Program Occupancy (bed utilization):</p> <ul style="list-style-type: none"> 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 	<p>2 Points Available</p> <ul style="list-style-type: none"> 2 points – 90% or more 1 point – 80%-89% 0 points - <80% 	<p>Staff auto score: 2</p>	
3A 5	<p>Returns to Homelessness:</p> <ul style="list-style-type: none"> 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% 	<p>2 Points Available</p> <ul style="list-style-type: none"> 2 points – 20% or less 1 point – 21%-30% 0 points - >30% 	<p>Staff auto score: 0</p>	60%
3A 6	<p>Length of Stay:</p> <ul style="list-style-type: none"> For PSH only, did you meet the standard by <u>increasing</u> 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 <u>decreasing</u> the annual average LOS in TH or RRH for leavers? – lower LOS average than previous APR year 	<p>2 Points Available</p> <p>PSH:</p> <ul style="list-style-type: none"> 2 points – higher LOS than previous year 0 points – lower LOS than previous year <p>TH & RRH:</p> <ul style="list-style-type: none"> 2 points – lower LOS than previous year 	<p>Staff auto score: 2</p>	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
		<ul style="list-style-type: none"> 0 points – higher LOS than previous year 		
3A 7	Victim Service Providers only - Safety: <ul style="list-style-type: none"> Please propose at least one relevant measure of the degree of participant safety that you will commit to using in the future. 	Not Scored This Year	N/A	
4	PROGRAM EFFECTIVENESS	20 POINTS POSSIBLE Auto-Scored (CES & HMIS projects will receive 15 points)	Staff auto score: 20	
4A	Coordinated Entry Participation: The minimum percentage of new clients since 1/1/23 who came from CES referral.	10 Points Available Auto-Scored <ul style="list-style-type: none"> 10 points – 95% - 100% from CES referral 8 points – 90% - 94% 6 points – 85% - 89% 4 points – 80% - 84% 2 points – 75% - 79% 1 point – 70% - 74% 0 points – below 70%. 	<i>Staff auto score:</i> 10	
4B	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"> Does the project prioritize client selection based on duration of homelessness and vulnerability? Does the project accept all clients regardless of substance use history, or current use? Does the project accept clients who are diagnosed with, or show symptoms of, a mental illness? Does the project accept clients regardless of criminal history? Does the project accept clients regardless of income or financial resources? Does the project use a harm-reduction model for drugs and/or alcohol use? 	10 Points Available Auto-Scored Housing First approaches: <ul style="list-style-type: none"> 1 point “yes” response 0 points “no” response Removing housing barriers: <ul style="list-style-type: none"> 1/2 point per “yes” response 0 points per “no” response 	<i>Staff auto score:</i> 10	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
	<p>Removing Barriers to Housing: To what extent does your project eliminate the following barriers to housing?</p> <ol style="list-style-type: none"> 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. 			
5	FINANCIAL AND COST EFFECTIVENESS	10 POINTS POSSIBLE Auto-Scored	Staff auto score: 7	
5A	<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>2 Points Available Auto-Scored</p> <ul style="list-style-type: none"> • 2 points renewal – 75% - 100% housing activities • 1 points renewal – 50% - 74% • 0 points – below 50%. (CES and HMIS projects will receive 2 points) 	<i>Staff auto score:</i> 2	
5B	<p>Drawdown completeness: The percentage of overall HUD grant drawn down in the most recent completed program year recorded in the most recent APR.</p>	<p>8 Points Available Auto-Scored</p> <ul style="list-style-type: none"> • 8 points – 100% of budgeted funds successfully drawn • 7 points – 98% - 99% • 6 points – 96% - 97% • 5 points – 94% - 95% • 4 points – 92% - 93% • 3 points – 90% - 91% • 2 points – 88% - 89% 	<i>Staff auto score:</i> 5	95.8% drawdown

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
		<ul style="list-style-type: none"> • 1 point – 86% - 87% • 0 points – below 86%. 		
6	AGENCY EXPERIENCE/CAPACITY	20 POINTS POSSIBLE Auto-Scored	Staff auto score: 10	
6A	Agency Years of Experience Number of years of agency experience in implementing the proposed program OR similar program type (e.g., RRH or PSH)	10 Points Available Auto-Scored <ul style="list-style-type: none"> • 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 	<i>Staff auto score:</i> 10	
6B	Capacity Issues Points will be deducted if in the past year (7/1/23-present): (1) the program had a CoC risk assessment AND did not carry out any actions to correct and risk issue(s) identified, (2) the agency has unresolved HUD monitoring findings in CoC programs, or (3) the agency has been late in submitting a CoC APR.	10 Pts Deduction Possible-Auto Scored <ul style="list-style-type: none"> • 3 points deduction – no action risk issues • 3 points deduction – unresolved findings • 4 points deduction – late APR 	<i>Staff auto score:</i> 0	No seeing unresolved finding?
7	Mainstream Resources 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.	7 POINTS POSSIBLE Auto-Scored <ul style="list-style-type: none"> • 7 points – 7 - 8 strategies used • 5 points – 5 - 6 used • 3 point – 3 - 4 used • 2 points – 2 used • 1 point – 1 used • 0 points – 0 used 	Staff auto score: 7	
8	Equity Factors 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: 1. Agency has individuals representing BIPOC in managerial and	10 POINTS POSSIBLE Auto-Scored <ul style="list-style-type: none"> • 1 point per “yes” response • 0 points “no” response 	Staff auto score: 9	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
	<p>leadership positions</p> <ol style="list-style-type: none"> 2. Agency has individuals representing LGBTQ+ in managerial and leadership positions 3. Agency board of directors includes representation from more than one person with lived experience 4. Agency has relational process for receiving and incorporating feedback from persons with lived experience 5. 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. 6. Agency has provided at least one staff training since 1/1/21 on enhancing equity for BIPOC and/or LGBTQ+. <p>Program participant outcomes:</p> <ol style="list-style-type: none"> 7. Agency has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age 8. Agency has identified programmatic changes needed to make program participant outcomes more equitable for overrepresented races or ethnicities and developed a plan to make those changes 9. Agency has identified programmatic changes needed to make program participant outcomes more equitable for LGBTQ+ persons and developed a plan to make those changes 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. 			
9	<p>Community Collaboration and Participation (3 points possible) To what extent does the applicant agency support the Housing for Health Partnership (H4HP) by: (1) participating in meetings of the H4HP general membership, (2) participating in HMIS by entering client data into HMIS for 100% of its programs that are listed in the 2024 Housing Inventory Chart (HIC); and (3) participating in CES with no housing referral denials except where there is an appropriate reason for denial under an exception listed in the CES Policies and Procedures, section 7.3.5?</p> <p><i>Sub-scores will be determined by H4HP staff based upon</i></p>	<p>3 POINTS POSSIBLE Auto-Scored H4HP meeting participation:</p> <ul style="list-style-type: none"> • 1 point: Agency attends 75% to 100% • 0 points: Agency attends 0% to 74% <p>HMIS participation:</p> <ul style="list-style-type: none"> • 1 point: Has data for 	<p>Staff auto score: 3</p>	

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
	<i>appropriate H4HP and documentation for the period from July 1, 2023, to the present time.</i>	100% HIC <ul style="list-style-type: none"> 0 points: Has data for less than 100% HIC CES participation: <ul style="list-style-type: none"> 1 point: Agency receives CES housing referrals and has no inappropriate denials 0 points: Agency does not receive CES housing referrals OR has had inappropriate denials 		

B. REVIEWER-SCORED QUESTIONS AND REVIEWER COMMENTS

No.	Scoring Criteria	How Score is Calculated	Score	Reviewer Comments if Any
6C	Narrative Responses - Past Experience in Key Areas Please (1) describe your agencies prior experience, and (2) provide at least one example of agency success, in the following key areas: <ol style="list-style-type: none"> Priority Population Served - Serving clients who are experiencing chronic homelessness, or are survivors of domestic violence Program Design – Operating a similar type of program CES Participation – Accepting and successfully housing program referrals through CES Housing First – Embracing Housing First approaches and removing participant barriers to housing Mainstream Resources – Implementing strategies to help participants access federal mainstream benefits Equity Factors – Implementing agency leadership, governance, and policy changes and assessing and improving participant outcomes with and equity lens 	10 Points Available Reviewer-Scored <ul style="list-style-type: none"> 2 points – priority population 2 point – program design 1 point – CES participation 2 points – Housing First 1 point – Mainstream resources 2 points – Equity factors 	Reviewer Score: 10	1 2 1 2 2 2

	Total Auto-Scored Questions	100 POINTS POSSIBLE	90.5
	Total Reviewer-Scored Questions	10 POINTS POSSIBLE	10
	Total Score (Reviewer Add the Above Scores Together)	110 POINTS POSSIBLE	100.5

C. REVIEWER-PROVIDED SUMMARY OF RECOMMENDATIONS TO H4H POLICY BOARD:

1. Recommended for Approval? <input checked="" type="checkbox"/> Recommend <input type="checkbox"/> Recommended with issues to address (see below) <input type="checkbox"/> Do not recommend	2. Recommended Funding Amount? <input checked="" type="checkbox"/> Full funding as requested <input type="checkbox"/> Reduce funding to the following: \$ _____
List issues for applicant to address if any:	Reasons for reduced funding, if recommended:
3. Recommended Ranking? <input type="checkbox"/> Rank high (highest quality and most needed) <input checked="" type="checkbox"/> Rank medium (high quality and needed) <input type="checkbox"/> Rank low (lower quality or less needed)	4. Recommended Tiering? <input checked="" type="checkbox"/> Tier 1 (funding nearly certain) <input type="checkbox"/> Tier 2 (funding not certain)

E-Mail Completed Form to tonygardnerconsulting@yahoo.com and sheryl.norteye@santacruzcountyca.gov by **12 pm, Monday, October 7;** also please bring to the meeting.

INSTRUCTIONS

What to complete:

- 1. Local CoC renewal application (YHDP does NOT need to submit): Complete the application using this Word document and adding additional sheets as necessary. Include the following attachments as appropriate for your project:**
 - a. Most recently completed Annual Performance Report (APR), if project has operated for at least 1 year
 - b. Latest Independent Audit, only if available \
 - c. Summary of any agency client surveys or focus groups conducted in the previous two program years, only if available
 - d. Match letters.
- 2. HUD online e-snaps application for renewal projects (YHDP DOES need to submit), including:**
 - a. Project Application, including all required charts, narratives, certifications, and attachments.

Deadline: Friday, September 27, 5 pm for both local renewal CoC project application AND HUD e-snaps application

Where to submit:

- 1. Local renewal CoC project application:** Submit via e-mail (no paper copies) to: Sheryl.norteye@santacruzcountyca.gov AND tonygardnerconsulting@yahoo.com
- 2. HUD online e-snaps application for renewal projects:** Submit via e-snaps: <https://esnaps.hud.gov/grantium/frontOffice.jsf>. (No need to submit paper to H4H staff or CoC Consultant.)

PROJECT INFORMATION QUESTIONS

a. Applicant Organization Name & Mission (25 words maximum): The mission of the Santa Cruz County Homeless Persons Health Project (HHPH) is to eliminate homelessness by ensuring accessible, comprehensive health care and secure housing for everyone.

b. Project Name and Service Site Address: MATCH – HPHP, 115-A Coral Street, Santa Cruz, CA 95060

c. Brief Project Description, Including Housing and Services, Population Served, Clients Needs, Service Approach, Service Partnerships, Innovations, and Outcomes and Success

The Meaningful Answers to Chronic Homelessness (MATCH) program provides permanent supportive housing for 42 persons (in 41 units) who are chronically homeless and have long-term substance use issues, often accompanied by multiple, co-occurring health and mental health conditions, or a physical or behavioral health disability. For MATCH, HPHP contracts with Front St. Housing, Inc. (FSHI), a nonprofit agency that provides property management services including housing search, master leasing, and monthly rent collections and payments to contracted landlords. HPHP and FSHI, have successfully collaborated on MATCH since its inception in 2006. All residents are linked to a service team and an individual case manager who provide services tailored to each person’s needs. Services may include health and behavioral health (mental health and substance use disorder services), dental care, benefits advocacy, case management, employment assistance, transportation, money management, and assistance with food and other necessities. While there is no requirement to accept services, the program requests at a minimum that each participant meet and communicate regularly with their service coordinator and have a means of obtaining and responding to messages. HPHP has an after-hours housing on-call number for residents, landlords and property managers. MATCH uses a housing first, harm reduction model; participants do not need to be clean and sober. However, service coordinators do encourage and support efforts to reduce substance use and coordinate access to treatment and sobriety support for many participants.

d. Estimated Total Homeless Persons Served Per Day (point-in-time):

Estimated Total Number Served	Per day (point-in-time)
a. Homeless Individuals	
1. Total of individuals	43
2. Total of disabled persons	40
b. Homeless Families	
1. Total of families	2
2. Total adults	2
3. Total children (under 18)	3
c. Total Homeless (a.1+b.2+b.3)	47

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)	100%
b. Severely Mentally Ill	71%

c. Chronic Substance Abusers	83%
d. Veterans	0%
e. Persons with HIV/AIDS	0%
f. Victims of Domestic Violence	26%
g. Unaccompanied Youth (Under 18 years of age)	0%
h. Immigrant	0%
i. Justice involved	0%

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. Case Management	Weekly	5. MediCal and SS Benefits	As Needed
2. Healthcare	As Needed	6. Dental Care	As Needed
3. Substance and Behavioral Health Services	As Needed	7. Food and Transportation	As Needed
4. Housing Support	Weekly	8. Money Management	Weekly

g. Total HUD Dollar Request: \$986,928. 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	\$829,332		
2. Rental Assistance (from chart below)			
3. Supportive Services	\$61,615		
4. Operations	\$44,545		
5. HMIS			
6. Admin (HUD Approved Amount)	\$51,436		

b. Rental Assistance Units	FMR rent	No. of mos.	Total
No. 0-bed units: 22	\$ 3,056	x mos. = 12	\$ 806,784
No. 1-bed units: 18	\$ 3,221	x mos. = 12	\$ 695,736
No. 2-bed units: 2	\$ 4,223	x mos. = 12	\$ 101,352
No. 3-bed units:	\$	x mos. =	\$
Total			\$1,603,872

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)

Identify the types of projects (Check only 1):

<input checked="" type="checkbox"/> PSH serving 100% CH or DedicatedPLUS with longest histories of homelessness and most severe barriers, 9 pts	<input type="checkbox"/> RRH, 9 pts
<input type="checkbox"/> joint TH-RRH, 9 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	

Bonus point – Serving immigrants and/or justice system-involved as a subpopulation:

<input checked="" type="checkbox"/> PSH projects serving 100% CH or DedicatedPLUS with longest histories of homelessness and most severe barriers, RRH, or joint TH-RRH that identifies immigrants and/or justice system-involved as an allowable subpopulation, 1 bonus pt.
--

2. Priority Population Served Addresses Chronic Homeless, or DV Population(s) (check only 1) (N/A for CES or HMIS) (10 points possible)

Please respond to either the chronic homeless 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 checked="" 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 domestic violence survivors as defined by HUD (must match response to 6.f above)?
<input type="checkbox"/> 100%, 10 pts <input type="checkbox"/> 0-99%, 0 pts

3. Performance Measures – Based on APR (20 points possible) (N/A for HMIS, CES, or first year projects without one year of data)

3A. CoC Housing Renewals only - Please use the attach worksheet to answer the following questions based upon from your most recent APR.

3A1. Housing Stability:

For PSH project only, what percentage of your leavers and stayers remained in permanent housing for at least 7 months? 92%

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? 72%

For all projects, what percentage of ADULT program leavers and stayers combined had earned income? 9%

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? 51%

3A4. Program Occupancy (bed utilization):

For all projects, what was the average bed utilization rate for the operating year? 95%

3A5. Returns to Homelessness:

For all projects, what percentage of program leavers exited to non-permanent housing destinations? 60%

3A6. Length of Stay (LOS):

For PSH only, what was the average length of stay in the permanent housing days for leavers? Ave. # days - 864
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 since 1/1/23 who came from CES referral.

95-100%, 10 pts 90-94%, 8 pts 85-89%, 6 pts 80-84%, 4 pts 75-79%, 2 pts 70-74%, 1 pt <70% 0 pts

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): 6 # 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): 8 # Yes

5. Financial and Cost Effectiveness (10 points possible)

5.A Housing vs. Service Funding (N/A for HMIS or CES projects):

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).

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	877,599	
\$ Rental Assistance		
\$ Housing Operations	38,090	
\$ TOTAL Housing Funds	\$ 915,689 TOTAL Housing +Service Funds	95.8 % Housing Funds

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)
\$ 945,315	\$ 905,753	\$ 39,562	% 95.8 Drawn Down

b. Answer the following for the percentage actually drawn down (4th column above):

- 100%, 5 pts 98-99%, 4 pts 96-97%, 3 pts 94-95%, 2 pts 92-93%, 1 pts <92% 0 pts

6. Agency Experience/Capacity (20 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).

- 8+ years experience, 10 pts 5-7 years experience, 8 pts 4-6 years experience, 6 pts 2-3 years experience, 4 pts 1-2 years experience, 2 pts <1 year experience, 0 pts

6B Capacity Issues (answer all that apply):

Please answer the following questions based upon the past year from July 1, 2022 to the present date:

1. Are both the following statements true? a. Agency had a CoC risk assessment, AND b. the agency carried out appropriate actions to correct any risk issues identified in risk assessment. Yes No

If ‘yes,’ briefly describe the actions your agency has taken to correct risk issue(s) identified:

2. Does the agency have unresolved HUD monitoring findings in CoC programs? Yes No

3. Has the agency been late in submitting its most recent CoC APR? Yes No

6C Narrative Responses - Past Experience in Key Areas (2 pp. maximum) (10 points possible total)

Please (1) **describe** your agencies prior experience, and (2) provide at least **one example** of agency success, in each of the following key areas:

1. Priority Population Served - Serving clients who are experiencing chronic homelessness, or are survivors of domestic violence
2. Program Design – Operating a similar type of program
3. CES Participation – Accepting and successfully housing program referrals through CES
4. Housing First – Embracing Housing First approaches and removing participant barriers to housing
5. Mainstream Resources – Implementing strategies to help participants access federal mainstream benefits
6. Equity Factors – Implementing agency leadership, governance, and policy changes and assessing and improving participant outcomes with and equity lens

1) Priority Population Served

The Homeless Persons Health Project (HPHP), established in 1987, is one of four health centers managed by the County of Santa Cruz. We have managed the Meaningful Answers To Chronic Homelessness (MATCH) housing program since its inception in 2006.

Over 75% of HPHP's patient population (of approximately 2,000 total individuals last fiscal year) experience homelessness, and many are chronically homeless.

We provide primary care, integrated behavioral health, street medicine, and home visiting care to all our patients, including victims of domestic violence, justice involved patients, and immigrants, regardless of insurance.

Some are referred to, and even transported to local refuge for domestic violence survivors, and some are housed in one of our three housing programs.

The average length of stay for our current MATCH residents is over 6.5 years. Of the many success stories we have, this one stands out for the past year. One of our participants informed us that since he was now housed, he wanted to give back any way he can to his community. He has a physical handicap (has one arm), but does not let this stop him. He always shows up during our outreach efforts in South County, and volunteers to provide help to others. Trust us when we say he gets as much done as anyone else.

2) Program Design

Our housing program is unique when compared to other housing programs because we are also a Federally Qualified Health Center, and designated as a Health Care for the Homeless site by the Health Resources and Services Administration (HRSA). This means all of our case managers are health care professionals who provide direct access to health services to all our housing clients who wish to obtain it. We coordinate care for all our patients to meet their needs and document all encounters in our electronic health record, in addition to utilizing HMIS.

In addition to our MATCH housing program, we also manage the Housing Authority's Shelter Plus Care Consolidate program, as well as Nuevo Sol, which is funded by the State's Department of Housing and Community Development.

While there are differences in each program, we utilize the same housing first model in each, as well as work with the County's Human Services Department, and their Housing for Health (H4H) division, which is the lead agency for our County Continuum of Care (CoC). As such, they are the keepers of the County Coordinated Entry System (CES).

Between all three programs, we case manage over 100 participants in permanent supportive housing.

3) CES Participation

100% of the people housed in our program, since the inception of Coordinated Entry (CE) in Santa Cruz County, have come from referrals through CE. We work diligently with H4H, while still advocating for our patients who require housing, but whose name has not come to the top of the community queue.

This past year, we transferred three of our MATCH housing units to the County's Behavioral Health Division (BH), working closely with H4H management and BH case managers to place individuals in those units. This care coordination will be used when Harvey West Studios opens its doors, and at least 60 BH clients will move in.

4) Housing First

HPHP strictly follows the Housing First paradigm, as required by the federal government's Housing and Urban Development (HUD) agency. Whether someone is actively using some type of substance, requires care and medications for behavioral health issues, or has some type of debilitating illness or other disability, we place them in housing, and utilize harm reduction, motivational interviewing, and patient centered approaches to help them adjust.

One of our participants had been street homeless for several decades. Coordinating with the staff at the shelter he was staying at, one of our nurses who has worked with him for several years, our Mental Health Client Specialists (housing case managers), admin staff, and his payee, we successfully moved him into housing. He was not sure about moving to another part of the county. Frequent trips from several staff, deliveries of groceries, and securing the belongings he desired, has greatly improved his situation.

5) Mainstream Resources

We are a Federally Qualified Health Center, with an array of medical, behavioral health, and case management staff. We work closely with Enhanced Care Management (ECM) providers, and two of our housing case managers are also ECM case managers. This enables them to refer participants for enhanced care when needed, and relieve the burden of the participant having to coordinate multiple sources of care, as well as funding opportunities for deposits, move-in costs, etc. As a Health Center we strive to connect any

of our patients that need help to services that are available. This includes benefits advocacy, specialized health referrals, and much more.

We have been working on a complex SSI case for one of our participants. To date, we have secured his SSI benefits for him, and now are working with his payee and the SSA on a significant sum he is owed as back pay, from when his application was initially filed.

6) Equity Factors

The County of Santa Cruz Health Services Agency has an equity statement and an Equity Officer. Santa Cruz County is an EEO, and does not turn away anyone based on race, color, creed, age, disabilities, etc., at any agency or program throughout the county. We apply Culturally and Linguistically Appropriate Services (CLAS) standards in all areas of care.

HPPH provides medical help and treatment regardless of ability to pay. This extends to our MATCH housing program, wherein we are not required to run background checks as part of the conditions for housing, thus not ruling out anyone who meets the chronic homelessness and disability criteria.

The demographics of MATCH, as well as our other housing programs, shows our equity lens is clear and bright, and the racial, financial, and other makeup of our programs, is very much in line with the proportionate makeup of the overall population of Santa Cruz County, and exceeds it in some cases for historically, unfairly treated groups and ethnicities.

7. Mainstream Resources (7 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 checked="" type="checkbox"/>	1. Project case managers systematically assist clients in completing applications for mainstream benefit programs.
<input checked="" type="checkbox"/>	2. Agency systematically analyzes its projects’ APR and other data to assess and improve access to mainstream programs.
<input checked="" type="checkbox"/>	3. Agency leadership meets at least three times a year to discuss and improve clients’ participation in mainstream programs.
<input checked="" type="checkbox"/>	4. Project staff are trained at least once per year on how to identify eligibility and mainstream program changes.
<input checked="" 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 checked="" type="checkbox"/>	6. Agency supplies transportation to clients to attend mainstream benefit appointments, employment training, or jobs.
<input checked="" type="checkbox"/>	7. Project staff systematically follow-up to ensure that mainstream benefits are received.
<input checked="" 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) (10 points possible)

Please identify which of the following equity factors your program has implemented OR commits to implement within one year:

	Agency leadership, governance, and policies:
<input checked="" type="checkbox"/>	1. Agency has individuals representing BIPOC in managerial and leadership positions
<input checked="" type="checkbox"/>	2. Agency has individuals representing LGBTQ+ in managerial and leadership positions
<input checked="" type="checkbox"/>	3. Agency board of directors includes representation from more than one person with lived experience
<input checked="" type="checkbox"/>	4. Agency has relational process for receiving and incorporating feedback from persons with lived experience
<input checked="" type="checkbox"/>	5. 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
<input checked="" type="checkbox"/>	6. Agency has provided at least one staff training since 1/1/21 on enhancing equity for BIPOC and/or LGBTQ+
	Program participant outcomes
<input checked="" type="checkbox"/>	7. Agency has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age
<input checked="" type="checkbox"/>	8. Agency has identified programmatic changes needed to make program participant outcomes more equitable for overrepresented races or ethnicities and developed a plan to make those changes
<input type="checkbox"/>	9. Agency has identified programmatic changes needed to make program participant outcomes more equitable for LGBTQ+ and developed a plan to make those changes
<input checked="" type="checkbox"/>	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

Please note that an additional 3 points is possible for Community Collaboration and Participation. There is no need to submit a response. H4H staff will tabulate scores. 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 Your Most Recently Completed APR Generated from HMIS (or Comparable Database for DV) – CoC Housing Renewals Only.

Please answer the following using your most recently completed APR. 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.

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): 53 Participants
- b. Enter total numbers of leavers and stayers combined who stayed 181 days or longer (APR Q22a1, Total column, rows 5 – 10): 5 > 181 Days
- c. **Percentage participants stayed 7 mos. (b/a x 100=%):** 94.3 %

For RRH and TH-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 Q23c

Formula:

- a. Total number of leavers combined (APR Q23c, Total column, Total row): Leavers
- b. Total number of leavers who exited to permanent destinations (APR Q23c, 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): 43 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): 28 Had Income
- c. **Percentage adults with income (b/a x 100=%):** 65 %

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)

___43___ 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):

___4___ Had Earned Income

- c. **Percentage adult’s participants with earned income (b/a x 100=%):** ___9%___%

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):

___43___ 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):

___22___ 1 or more Non-Cash Benefit

- c. **Percentage participants one or more non-cash (b/a x 100=%):** ___51___%

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]:

95% for HoH **___110___% total beds**

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 Q23c

Formula:

- a. Total number of leavers combined (APR Q23c, Total column, Total row):

___5___ Total Leavers

- b. Total number of leavers who exited to non-permanent destinations (APR Q23c, Total column, Total Persons Exiting to a Positive Destination row subtracted from Total row = total leavers who exited to non-permanent destinations):

___3___ 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=%): ___60___%

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 (Leaver's column, *Average Length* row):

Average length of stay: 864 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 (Leaver's 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:

N/A – no HMIS-based calculation needed.

**1E-5b LOCAL COMPETITION
SELECTION RESULTS**

H4HP CoC Policy Board-Approved 2024 CoC/YHDP Projects Selection, Scores, and Ranking									
Applicant Name	Project Name	New or Renewal	Grant Term	Project Component	Score	Status	Rank	Requested From HUD	Reallocated Funds
Tier 1 - \$4,016,945: CoC Board-Approved Tier 1 Amounts and Ranking as Shown									
Monarch Services	DV Bonus RRH	Renewal	1 Year	PH	103	Accepted	1	\$110,691	\$0
Walnut Avenue Family & Women's Center	Housing & Employment Program RRH	Renewal	1 Year	PH	101.3	Accepted	2	\$545,780	\$0
Housing Matters	180 Together PSH	Renewal	1 Year	PH	100.8	Accepted	3	\$313,548	\$0
Santa Cruz County HSA	MATCH PSH	Renewal	1 Year	PH	99.83	Accepted	4	\$986,928	\$0
Housing Matters	801 River Street PSH	Renewal	1 Year	PH	93.2	Accepted	5	\$232,823	\$0
Santa Cruz County HSD	Coordinated Entry Expansion	Renewal	1 Year	SSO	85	Accepted	6	\$228,362	\$0
Santa Cruz County HSD	County of Santa Cruz Homeless Management Information System	Renewal	1 Year	HMIS	83.33	Accepted	7	\$66,782	\$0
Housing Authority of Santa Cruz County	Shelter+Care Consolidate PSH	Renewal	1 Year	PH	93.2	Accepted	8	\$1,406,406	\$0
Families In Transition	First Step-Scattered Site Housing for Families with Children	Renewal	1 Year	Joint TH & PH-RRH	94	Accepted	9	\$125,625	\$0
Tier 2 - \$1,135,503: CoC Board-Approved Tier 2 Amounts and Ranking as Shown							Tier 1 Total:	\$4,016,945	
Families In Transition	First Step-Scattered Site Housing for Families with Children	Renewal	1 Year	Joint TH & PH-RRH	94	Accepted	9B	\$446,327	\$0
Housing Authority of Santa Cruz County	Shelter+Care PSH Consolidate Expansion	New - CoC Bonus	1 Year	PH	105.5	Accepted	10	\$689,176	\$0
DV Bonus - \$187,569: CoC Board-Approved DV Bonus Amounts and Ranking as Shown							Tier 2 Total:	\$1,135,503	
Monarch Services	DV Housing Program	New - DV Bonus	1 Year	Joint TH & PH-RRH	106.8	Accepted	11	\$125,000	\$0
Walnut Avenue Family & Women's Center	Housing & Employment Program RRH	New - DV Bonus	1 Year	PH	99.5	Accepted	12	\$62,569	\$0
Non-Competitive YHDP Projects - \$1,279,864 (Not Ranked): CoC Board-Approved YHDP Projects as Shown							DV Bonus Total:	\$187,569	
Bill Wilson Center	Santa Cruz County Shared Housing	Renewal	1 Year	TH	N/A	Accepted	Not Ranked - YHDP	\$140,935	\$0
Community Action Board of Santa Cruz County, Inc.	YHDP - Youth Homeless Response Team (YHRT)	Renewal	1 Year	PH	N/A	Accepted	Not Ranked - YHDP	\$99,175	\$0
County of Santa Cruz	Youth CES	Renewal	1 Year	SSO	N/A	Accepted	Not Ranked - YHDP	\$60,000	\$0
Covenant House	Youth Rapid Rehousing	Renewal	1 Year	PH	N/A	Accepted	Not Ranked - YHDP	\$438,368	\$0
Encompass Community Services	Drop-In Center	Renewal	1 Year	PH	N/A	Accepted	Not Ranked - YHDP	\$271,903	\$0
Families In Transition of Santa Cruz County, Inc.	Y.A.A.S. (Young Adults Achieving Success)	Renewal	1 Year	PH	N/A	Accepted	Not Ranked - YHDP	\$269,483	\$0
CoC Planning Grant - \$287,157 (Not Ranked): Board-Approved CoC Planning Project as Shown							YHDP Total:	\$1,279,864	
County of Santa Cruz	CoC Planning Grant	New	1 Year	Planning	N/A	Accepted	Not Ranked - CoC Planning	\$287,157	\$0
Rejected Competitive CoC Projects: Board-Rejected Projects as Shown							Planning Total:	\$287,157	
Front Street	East Lake PSH	New - CoC Bonus	3 Years	PH	83.67	Rejected	Not Ranked - Rejected	\$0	\$0
Front Street	Freedom Cottages PSH	New - CoC Bonus	3 Years	PH	85.33	Rejected	Not Ranked - Rejected	\$0	\$0
Families In Transition	Families and Seniors PSH	New - CoC Bonus	1 Year	PH	93.75	Rejected	Not Ranked - Rejected	\$0	\$0
Housing Matters	180 Together PSH Expansion	New - CoC Bonus	1 Year	PH	106.5	Rejected	Not Ranked - Rejected	\$0	\$0

Total Request: \$6,907,038

**1E-5 NOTIFICATION OF PROJECTS
REJECTED - REDUCED**

County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

From: Robert Ratner (robert.ratner@santacruzcountyca.gov)

To: melisa@fitsantacruz.org; cyndi@fitsantacruz.org; eriqa@fitsantacruz.org

Cc: sheryl.norteye@santacruzcountyca.gov; tonygardnerconsulting@yahoo.com

Date: Tuesday, October 15, 2024 at 04:09 PM PDT

Dear Families In Transition (FIT) colleagues: Thank you for your ongoing work to help ensure safe, stable, and healthy places to live for everyone in our community. Attached you will find information related to your HUD CoC-YHDP FY24 project proposal and the priority ranking of your proposal. Please let us know if you have questions.

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

FAX: (831) 454-4642



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H4HP Board-Approved 2024 CoC and YHDP Projects and Rankings Recommendations CoC Projects.pdf

52kB



H4HP Appeals Policy.pdf

1.3MB



FIT 2024 Priorities Notice.pdf

186.5kB



October 15, 2024

Re: FIT – Notification of 2024 CoC-YHDP Project Priority Listing

Dear Families in Transition:

Thank you for participating in the 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 Housing for Health Partnership (H4HP) Policy Board-approved CoC Priority Listing, with all projects, approvals, scores, ranking, tiering, and maximum budgets.

As noted in the listing, your **First Step-Scattered Site Housing Joint TH-RRH project** was approved for funding with a portion of your request in Tier 1 and a portion in Tier 2. In addition, your **Youth Homelessness Demonstration Program (YHDP) Y.A.A.S. Joint TH-RRH project** was approved for YHDP funding. Finally, your **Families and Seniors PSH new project** was not approved for CoC funding and therefore was not ranked. We cannot add your project to the list because the projects that were approved for CoC funding total the maximum amount of funding that we can apply for in e-snaps.

Because your new project was not approved for CoC funding and because a portion of your renewal project is in Tier 2, you are eligible to appeal. The appeals process and grounds for appeal are 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 Thursday, October 17, 2024.**
- **Appeals will be considered by the Appeal Panel by Wednesday, October 23, 2024.**

Please let us know if you have any questions.

Again, thank you very much for your participation in the CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner

Robert Ratner, MPH, MD
County of Santa Cruz
Director, Housing for Health Division, Human Services Department
(831) 454-4925; robert.ratner@santacruzcountyca.gov

Cc: Tony Gardner

Attachments

County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

From: Robert Ratner (robert.ratner@santacruzcountyca.gov)

To: rzigrang@frontst.com; slaberg@sbcglobal.net; amccabe@frontst.com

Cc: sheryl.norteye@santacruzcountyca.gov; tonygardnerconsulting@yahoo.com

Date: Tuesday, October 15, 2024 at 04:11 PM PDT

Dear Front Street colleagues: Thank you for your ongoing work to help ensure safe, stable, and healthy places to live for everyone in our community. Attached you will find information related to your HUD CoC-YHDP FY24 project proposal and the priority ranking of your proposal. Please let us know if you have questions.

Sincerely,

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

FAX: (831) 454-4642



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-  H4HP Board-Approved 2024 CoC and YHDP Projects and Rankings Recommendations CoC Projects.pdf
52kB
-  H4HP Appeals Policy.pdf
1.3MB
-  Front Street 2024 Priorities Notice.pdf
185.8kB



October 15, 2024

Re: Front Street – Notification of 2024 CoC-YHDP Project Priority Listing

Dear Front Street:

Thank you for participating in the 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 Housing for Health Partnership (H4HP) Policy Board-approved CoC Priority Listing, which includes all projects, approvals, scores, ranking, tiering, and maximum budgets.

As noted in the listing, your **Lake Street PSH and Freedom Cottages PSH new projects** were not approved for CoC funding and therefore not ranked. It appears the Lake Street PSH project may be ineligible for funding because CoC funds cannot pay for rehabilitation costs incurred prior to the award, and the Freedom Cottages project may also be ineligible because the housing is already occupied and new projects cannot serve people who are no longer homeless. Also, we cannot add your projects to the list even if eligible because the other projects that were approved total the maximum amount of funding that we can apply for in e-snaps.

Because your Lake Street PSH and Freedom Cottages PSH new projects were not approved, you are eligible to appeal. The appeals process and grounds for appeal are 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 Thursday, October 17, 2024.**
- **Appeals will be considered by the Appeal Panel by Wednesday, October 23, 2024.**

Please let us know if you have any questions.

Again, thank you very much for your participation in the CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner

Robert Ratner, MPH, MD
County of Santa Cruz
Director, Housing for Health Division, Human Services Department
(831) 454-4925; robert.ratner@santacruzcountyca.gov

Cc: Tony Gardner
Attachments

County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

From: Robert Ratner (robert.ratner@santacruzcountyca.gov)

To: tstagg@housingmatterssc.org; pkramer@housingmatterssc.org

Cc: tonygardnerconsulting@yahoo.com; sheryl.norteye@santacruzcountyca.gov

Date: Tuesday, October 15, 2024 at 04:18 PM PDT

Dear Housing Matters colleagues: Thank you for your ongoing work to help ensure safe, stable, and healthy places to live for everyone in our community. Attached you will find information related to your HUD CoC-YHDP FY24 project proposals and the priority ranking of your proposals. Please let us know if you have questions.

Sincerely,

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

FAX: (831) 454-4642



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-  H4HP Board-Approved 2024 CoC and YHDP Projects and Rankings Recommendations CoC Projects.pdf
52kB
-  H4HP Appeals Policy.pdf
1.3MB
-  Housing Matters 2024 Priorities Notice.pdf
185.6kB



October 15, 2024

Re: Housing Matters – Notification of 2024 CoC-YHDP Project Priority Listing

Dear Housing Matters:

Thank you for participating in the 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 Housing for Health Partnership (H4HP) Policy Board-approved CoC Priority Listing, which includes all projects, approvals, scores, ranking, tiering, and maximum budgets.

As noted in the listing, your **801 River Street PSH renewal project** and **180 Together PSH renewal project** were approved for funding in Tier 1. However, your **180 Together PSH Expansion new project** was not approved for CoC funding and therefore was not ranked. We cannot add this project to the list because the projects that were approved for CoC funding total the maximum amount of funding that we can apply for in e-snaps.

Because your new project was not approved for funding, 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 Thursday, October 17, 2024.**
- **Appeals will be considered by the Appeal Panel by Wednesday, October 23, 2024.**

Please let us know if you have any questions.

Again, thank you very much for your participation in the CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner

Robert Ratner, MPH, MD
County of Santa Cruz
Director, Housing for Health Division, Human Services Department
(831) 454-4925; robert.ratner@santacruzcountyca.gov

Cc: Tony Gardner

Attachments

FW: County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

From: Robert Ratner (robert.ratner@santacruzcountyca.gov)

To: sheryl.norteye@santacruzcountyca.gov; tonygardnerconsulting@yahoo.com

Date: Tuesday, October 15, 2024 at 04:38 PM PDT

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

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From: Robert Ratner

Sent: Tuesday, October 15, 2024 4:29 PM

To: Julie Macecevic <jmacecevic@wafwc.org>; lboule@wafwc.org; Ashley Ponce <aponce@wafwc.org>

Subject: County of Santa Cruz HUD CoC-YHDP FY24 Project Priority Listing

Dear Walnut Avenue Family and Women's Center colleagues: Thank you for your ongoing work to help ensure safe, stable, and healthy places to live for everyone in our community. Attached you will find information related to your HUD CoC-YHDP FY24 project proposals and the priority ranking of your proposals. Please let us know if you have questions.

Sincerely,

Robert Ratner, MPH, MD

DIRECTOR

COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: robert.ratner@santacruzcountyca.gov

PHONE: (831) 454-4925

FAX: (831) 454-4642



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WAFWC 2024 Priorities Notice.pdf

187.3kB



H4HP Appeals Policy.pdf

1.3MB



H4HP Board-Approved 2024 CoC and YHDP Projects and Rankings Recommendations CoC Projects.pdf

52kB



October 15, 2024

Re: WAFWC – Notification of 2024 CoC-YHDP Project Priority Listing

Dear Walnut Avenue Family and Women's Center:

Thank you for participating in the 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 Housing for Health Partnership (H4HP) Policy Board-approved CoC Priority Listing, which includes all projects, approvals, scores, ranking, tiering, and maximum budgets.

As noted in the listing, your **DV-Focused Housing and Employment Program RRH renewal project** was approved for funding in Tier 1, and your **DV-Focused Walnut Avenue Housing and Employment Program RRH Expansion new project** was approved for the Domestic Violence (DV) Bonus, but at a reduced amount of **\$62,569**. Please let us know if it is still viable for you to apply to HUD at this lower amount.

Because your new project was approved for the DV Bonus at a reduced amount, you are eligible to appeal. The appeals process and grounds for appeal are 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 Thursday, October 17, 2024.**
- **Appeals will be considered by the Appeal Panel by Wednesday, October 23, 2024.**

Please let us know if you have any questions.

Again, thank you very much for your participation in the CoC program competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner

Robert Ratner, MPH, MD
County of Santa Cruz
Director, Housing for Health Division, Human Services Department
(831) 454-4925; robert.ratner@santacruzcountyca.gov

Cc: Tony Gardner

Attachments

H4HP CoC Policy Board-Approved 2024 CoC/YHDP Projects Selection, Scores, and Ranking									
Applicant Name	Project Name	New or Renewal	Grant Term	Project Component	Score	Status	Rank	Requested From HUD	Reallocated Funds
Tier 1 - \$4,016,945: CoC Board-Approved Tier 1 Amounts and Ranking as Shown									
Monarch Services	DV Bonus RRH	Renewal	1 Year	PH	103	Accepted	1	\$110,691	\$0
Walnut Avenue Family & Women's Center	Housing & Employment Program RRH	Renewal	1 Year	PH	101.3	Accepted	2	\$545,780	\$0
Housing Matters	180 Together PSH	Renewal	1 Year	PH	100.8	Accepted	3	\$313,548	\$0
Santa Cruz County HSA	MATCH PSH	Renewal	1 Year	PH	99.83	Accepted	4	\$986,928	\$0
Housing Matters	801 River Street PSH	Renewal	1 Year	PH	93.2	Accepted	5	\$232,823	\$0
Santa Cruz County HSD	Coordinated Entry Expansion	Renewal	1 Year	SSO	85	Accepted	6	\$228,362	\$0
Santa Cruz County HSD	County of Santa Cruz Homeless Management Information System	Renewal	1 Year	HMIS	83.33	Accepted	7	\$66,782	\$0
Housing Authority of Santa Cruz County	Shelter+Care Consolidate PSH	Renewal	1 Year	PH	93.2	Accepted	8	\$1,406,406	\$0
Families In Transition	First Step-Scattered Site Housing for Families with Children	Renewal	1 Year	Joint TH & PH-RRH	94	Accepted	9	\$125,625	\$0
Tier 2 - \$1,135,503: CoC Board-Approved Tier 2 Amounts and Ranking as Shown							Tier 1 Total:	\$4,016,945	
Families In Transition	First Step-Scattered Site Housing for Families with Children	Renewal	1 Year	Joint TH & PH-RRH	94	Accepted	9B	\$446,327	\$0
Housing Authority of Santa Cruz County	Shelter+Care PSH Consolidate Expansion	New - CoC Bonus	1 Year	PH	105.5	Accepted	10	\$689,176	\$0
DV Bonus - \$187,569: CoC Board-Approved DV Bonus Amounts and Ranking as Shown							Tier 2 Total:	\$1,135,503	
Monarch Services	DV Housing Program	New - DV Bonus	1 Year	Joint TH & PH-RRH	106.8	Accepted	11	\$125,000	\$0
Walnut Avenue Family & Women's Center	Housing & Employment Program RRH	New - DV Bonus	1 Year	PH	99.5	Accepted	12	\$62,569	\$0
Non-Competitive YHDP Projects - \$1,279,864 (Not Ranked): CoC Board-Approved YHDP Projects as Shown							DV Bonus Total:	\$187,569	
Bill Wilson Center	Santa Cruz County Shared Housing	Renewal	1 Year	TH	N/A	Accepted	Not Ranked - YHDP	\$140,935	\$0
Community Action Board of Santa Cruz County, Inc.	YHDP - Youth Homeless Response Team (YHRT)	Renewal	1 Year	PH	N/A	Accepted	Not Ranked - YHDP	\$99,175	\$0
County of Santa Cruz	Youth CES	Renewal	1 Year	SSO	N/A	Accepted	Not Ranked - YHDP	\$60,000	\$0
Covenant House	Youth Rapid Rehousing	Renewal	1 Year	PH	N/A	Accepted	Not Ranked - YHDP	\$438,368	\$0
Encompass Community Services	Drop-In Center	Renewal	1 Year	PH	N/A	Accepted	Not Ranked - YHDP	\$271,903	\$0
Families In Transition of Santa Cruz County, Inc.	Y.A.A.S. (Young Adults Achieving Success)	Renewal	1 Year	PH	N/A	Accepted	Not Ranked - YHDP	\$269,483	\$0
CoC Planning Grant - \$287,157 (Not Ranked): Board-Approved CoC Planning Project as Shown							YHDP Total:	\$1,279,864	
County of Santa Cruz	CoC Planning Grant	New	1 Year	Planning	N/A	Accepted	Not Ranked - CoC Planning	\$287,157	\$0
Rejected Competitive CoC Projects: Board-Rejected Projects as Shown							Planning Total:	\$287,157	
Front Street	East Lake PSH	New - CoC Bonus	3 Years	PH	83.67	Rejected	Not Ranked - Rejected	\$0	\$0
Front Street	Freedom Cottages PSH	New - CoC Bonus	3 Years	PH	85.33	Rejected	Not Ranked - Rejected	\$0	\$0
Families In Transition	Families and Seniors PSH	New - CoC Bonus	1 Year	PH	93.75	Rejected	Not Ranked - Rejected	\$0	\$0
Housing Matters	180 Together PSH Expansion	New - CoC Bonus	1 Year	PH	106.5	Rejected	Not Ranked - Rejected	\$0	\$0

Total Request: \$6,907,038

CoC Applicant Appeals Policy

The Housing for Health (H4H) Policy Board with recommendations from a Review and Ranking Subcommittee approves local project proposals for submission to HUD through the Continuum of Care (CoC) Program. CoC applicants with projects not selected for funding or placed into Tier 2 may appeal the 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 H4H Policy Board and H4H lead agency staff. Appeals Committee members must not have been members of the Review and Ranking Subcommittee, and 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 H4H Policy Board or Review and Ranking Subcommittee (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 **and** 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.

**1E-5d NOTIFICATION OF CoC-
APPROVED CONSOLIDATED
APPLICATION**

CoC-Approved 2024 HUD CoC Application and Project Priorities Posted

From: [Housing for Health Partnership \(housingforhealth@santacruzcounty.us\)](mailto:housingforhealth@santacruzcounty.us)

To: tonygardnerconsulting@yahoo.com

Date: Monday, October 28, 2024 at 04:44 PM PDT

[View this email in your browser](#)



CoC-Approved 2024 HUD Continuum of Care (CoC) Application and Project Priorities Posted

October 28, 2024

Dear Community Stakeholders,

We are pleased to report that the CoC-approved 2024 CoC Application with attachments and the CoC-approved 2024 Project Priorities listing all project applications that were accepted and ranked, new and renewal, [are now available for your review](#).

To review these documents directly, please click the following links:

- [CoC-Approved 2024 CoC Application](#)
- [CoC-Approved 2024 Project Priorities](#)

Thank you to everyone who participated in this year's CoC Program competition! We are very close to the final application submission. Please do not hesitate to contact Housing for Health at Sheryl.norteye@santacruzcountyca.gov or tonygardnerconsulting@yahoo.com if you have any questions.



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1D-2a HOUSING FIRST EVALUATION

Families In Transition - 2024 CoC/YHDP Project Evaluation Risk Assessment Results

From: Sheryl Norteye (sheryl.norteye@santacruzcountyca.gov)
To: cyndi@fitsantacruz.org
Cc: tonygardnerconsulting@yahoo.com; Robert.Ratner@santacruzcountyca.gov
Date: Tuesday, July 16, 2024 at 11:41 AM PDT

Dear Families In Transition,

We have conducted the attached risk assessment(s) of your Agency's CoC/YHDP project(s). Please see attached letter, Risk Assessment, and an overview of the Housing for Health Risk Assessment process for the CoC. Kindly review and let our CoC consultant, Tony Gardner (copied) and I know if you have any questions.

Regards

Sheryl Norteye
SENIOR HUMAN SERVICES ANALYST
COUNTY OF SANTA CRUZ – HUMAN SERVICES DEPARTMENT
HOUSING FOR HEALTH DIVISION

EMAIL: Sheryl.norteye@santacruzcountyca.gov
PHONE: (831) 454-7329
CELL: (831) 359-2932



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-  7 FIT YAAS 2024 H4H CoC PROGRAM RISK ASSESSMENT TOOL.docx
27.6kB
-  FIT 2024 Risk Assessment Letter.pdf
151.6kB
-  Overview of the Housing For Health Risk Assessment Process for CoC.pdf
54.1kB
-  6 FIT First Step 2024 H4H CoC PROGRAM RISK ASSESSMENT TOOL.docx
27.2kB



July 16, 2024

Re: 2024 Project Evaluation Risk Assessment Results

Dear Families in Transition:

The Santa Cruz County Housing for Health (H4H) Division has established an annual process for evaluating Continuum of Care (CoC) and Youth Homelessness Demonstration (YHDP) projects. The process starts with risk assessments of all CoC and YHDP renewal projects (with the exception of projects that are new, have been transferred to a new agency, or have been discontinued). For each project, the assessor completes a nine-question risk assessment tool based upon a desk review of project documentation (e.g., annual performance reports [APRs], audits, spending reports, and HUD monitoring letters). Low risk projects (0-15% of responses are “no”) do not receive further monitoring or evaluation, medium risk projects (16-40% of responses are “no”) generally do not receive further monitoring and evaluation unless staff determine that additional review should occur, and high-risk projects (41-100% of responses are “no”) typically do receive further monitoring and evaluation subject to staff determination. A summary of the risk assessment process is attached.

We have conducted the attached risk assessment(s) of Families in Transition’s (FIT) CoC/YHDP project(s). Following is a summary of the results:

1. Project: **First Step RRH**

Risk Level: Low (11% “no”)

Recommendation: No further monitoring or evaluation recommended.

2. Project: **YAAS RRH**

Risk Level: Low (11% “no”)

Recommendation: No further monitoring or evaluation recommended.

Please use the attached completed risk assessment tools(s) to correct any risk issues. We are providing this information well ahead of the forthcoming local CoC funding competition. The local competition will include one or more questions asking you what steps have taken to correct identified risk issues.

Please let us know if you have any questions.

Thank you for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,



Sheryl Northey
Senior Human Services Analyst, Housing for Health Division

Cc: Tony Gardner
Robert Ratner

Attachments:

1. Overview of H4H risk assessment process
2. Completed risk assessment tool(s)

Overview of H4H Risk Assessment Process for CoC & YHDP Projects

The Housing for Health (H4H) risk assessment provides a quantitative analysis of key risk factors that drive the Division's Continuum of Care (CoC) and Youth Homelessness Demonstration Program (YHDP) project monitoring plan for the year. The H4H team completes the Risk Assessment tool on each active CoC and YHDP project in the portfolio on an annual basis. The results of the tool are used to inform the type of monitoring that a project may receive.

The risk assessment tool tracks project competency in key areas of performance and compliance valued by both the US Department of Housing and Urban Development (HUD) and H4H including:

- Performance/Reporting
- Fiscal Compliance
- Program Management
- Grants Management
- HMIS Data
- Coordinated Entry.

The risk assessment tool weighs all compliance indicators equally. Each CoC project receives a score based on its performance on the indicators. Results are grouped by percentages into scoring ranges:

1. **Low Risk** projects receive a score of 0-15%
2. **Moderate Risk** projects receive a score of 16%-40%
3. **High Risk** projects receive a score of 41%-100%.

Low Risk projects do not receive a monitoring. However, if a low-risk project has not received a monitoring for *three years or more*, then staff may determine based on judgment whether some level of additional monitoring should occur.

Moderate Risk projects generally do not receive further monitoring. However, staff may determine based on relatively high score in the Moderate Risk range (e.g., 33%) and judgment that some level of additional monitoring should occur.

High Risk projects will typically receive additional monitoring subject to staff determination.

Sources of data for the risk assessments include, but are not limited to:

- Latest project APR
- Latest agency audit
- Latest local project application and esnaps project application
- Last two years of H4H or HUD monitoring findings letters and correspondence
- Last two years of HUD spending reports.

6. Families in Transition/First Step RRH

PROGRAM YEAR REVIEW: 12/1/22-11/30/23 ASSESSOR: Sheryl Norteye

DATE: 6/25/24

PURPOSE: The Risk Assessment process guides H4H in developing a monitoring process for the year. The answers to the questions provided below are the basis for developing an individual project monitoring strategy. This includes: identifying which agencies/projects will be monitored; establishing a monitoring schedule and timeframe; indicating a method of monitoring (on-site or desk); and describing the scope of monitoring (program, finance, both). This tool will be implemented each year prior to the opening of the CoC competition.

	Risk Indicator	Source	No	Yes	N/A	Reviewer Comments
1.	PERFORMANCE/REPORTING: The agency completed an accurate APR and submitted it in a timely manner? (Previous year)	APR	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2.	FISCAL COMPLIANCE: The agency completed and submitted in a timely manner, an annual audit or A-133 (if applicable) with no major findings? (Previous year)	Annual audit	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3.	PERFORMANCE/REPORTING: The agency operates its project using Housing First Principles and Low Barrier approaches to engagement? (Previous year)	Local & E-snaps applications	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4.	PROGRAM: The agency has resolved all problems, findings and/or concerns identified by H4H or HUD? (Previous 2 years)	H4H or HUD findings letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5.	PROGRAM: This agency has experienced a stable staffing pattern that ensures quality project continuity (Previous year)	Local & E-snaps applications	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6.	FISCAL: The agency submits timely quarterly financial drawdowns for payment? (Previous year)	Local & E-snaps applications	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7.	PROGRAM: This agency accepts 100% of new clients for its housing project through CES (Previous year)	Local & E-snaps applications	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8.	DATA: This agency generally has good data quality as defined by the HMIS Policies and Procedures? (Previous year)	APR	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Errors: SSN (29%), Income at Annual Assess. (22%)
9.	FISCAL COMPLIANCE: This agency has expended 95% or more of its project award? (Previous 2 years)	APR & HUD Spending Report	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Total Questions	9
Total "No" Responses	1
Total "Yes" Responses	8
Total "N/A" Responses	0
Total "No" Percentage	11%
Total "Yes" Percentage	89%
Total "N/A" Percentage	0%
Risk Level Based on "No" Percentage (Low, Medium, High)	Low

0% - 15%	Low
16% - 40%	Medium
41% - 100%	High

No monitoring this year
Possible monitoring this year - staff judgment
Monitoring this year



Housing First Standards Assessment Tool

Overview: This tool aims to assess and document how closely a housing and service provider adheres to the recommended best practice standards of the Housing First model, in the context of the broader work to implement a Housing First orientation at the system-level. This tool specifically evaluates project-level fidelity to Housing First, which directly impacts a system’s fidelity to Housing First. In addition to the universal best practice standards identified in this tool, Continuums should also take into account their local community context and local written standards pertaining to Housing First when assessing projects. A Continuum of Care can use this tool to prompt discussion and to make recommendations for improvement to projects that identify themselves as meeting the Housing First requirements, and homeless service providers can use this tool as a self-

Provider Info tab: The Provider Information tab should be completed *prior* to beginning the assessment. Specifically, the **Project Name, Project Type, Target Sub-Population served, and Date of Assessment** fields need to be completed in order to populate the assessment standards and report summary with questions that are specific to the project type and population. Please complete this section prior to printing any standards for assessment.

Standards: The standards have been arranged into the following categories: *Access, Evaluation, Services, Housing, Leases, and Project-Specific*. The “Tab” chart at the bottom of this page describes each of the categories in more detail. Some of the categories are not applicable for all project types, and those standards do not need to be completed, (see “Project Type/Applicable standards” chart for the list of which standards need to be completed for each project type.)

Project Type	Applicable Standards
Coordinated Entry	Access & Evaluation; Project-specific
Street Outreach	Access & Evaluation; Project-specific
Emergency Shelter	Access & Evaluation; Service & Housing; Project-specific
Transitional Housing	Access & Evaluation; Service & Housing; Leases; Project-specific
Rapid Rehousing	Access & Evaluation; Service & Housing; Leases; Project-specific
Permanent Supportive Housing	Access & Evaluation; Service & Housing; Leases; Project-specific

Safeguarding: Please keep in mind safeguarding concerns when assessing projects. In particular, we advise Continuums of Care to work with projects with victims of domestic violence to make sure that adequate safety and confidentiality policies and practices are in place before beginning assessments.

Scoring: For each standard, there are three scoring criteria: “Say It”, “Document It”, and “Do It” (as explained further below). To show that a project is in full compliance with each standard, the assessor should mark “Always” for each scoring criteria. Use the drop down in the three columns to the right to select “Always” or “Somewhat” or “Not at all”. Once an answer is chosen, the Report Summary tab will automatically update to reflect the answers.

- “Say It” means that project and agency staff can describe verbally what they do concerning each standard. The assessor should be able to identify that the organizational culture supports the standard by how staff talks about what is done.
- “Document It” means that there is written documentation that supports the project’s compliance with each standard. Written documentation could include Policies and Procedures, Personnel Handbooks, Professional Development Plans, Project Rules, etc.
- “Do It” means that the assessor was able to find evidence that supports the project’s compliance with each standard. Evidence could include information contained in client or other administrative files, client acknowledgement that something is being done, staff can point to documentation that supports implementation of the standard, etc.

Assessor Notes: A cell below each individual standard allows the assessor to add optional notes about the information collected for that particular standard. The notes can include where information was found, what questions were asked, who answered the questions, what additional information is needed to be able to mark that standard as “Always”, “Sometimes,” or “Not at all”.

Tab	Description	Purpose
Instructions	Tool overview and aim	Offers instruction to users on the assessment tool
Provider Info	Input provider, project and general assessment information	Determines project-specific standards for consideration
Standards - Access & Evaluation	Input compliance with standards concerning participant access to the project and input, project evaluation and performance management	Assesses whether access and evaluation are compliant with Housing First principles
Standards - Leases	Input compliance with standards concerning the lease and occupancy agreements, where applicable	Assesses whether leases and occupancy agreements are compliant with Housing First principles
Standards - Services & Housing	Input compliance with standards concerning the service and housing models and structure, where applicable	Assesses whether services and housing are compliant with Housing First principles
Standards – Project-Specific	Prompts assessment standards based on project type and targeted sub-populations served by the project, where applicable	Assesses whether specific project standards are compliant with Housing First principles
Report Summary	Displays assessment scores and conclusions, and highlights non-compliant standards	Printable summary of the assessment



Provider Information

Please complete the information below on the organization being assessed.

Provider Information	
Provider's Legal Name	Families in Transition Santa Cruz County, Inc.
Acronym (If Applicable)	FIT
Year Incorporated	1992
EIN	77-0327992
Street Address	406 Main St. #326
Zip Code	95076

Project Information	
Project Name	First Step-Scattered Site Housing for Families with Children
Project Budget	571,952
Grant Number	CA2249T9T082300
Name of Project Director	Melisa Vierra
Project Director Email Address	melisa@fitsantacruz.org
Project Director Phone Number	(831)728-2548
Which best describes the project *	Joint Transitional Housing & Rapid Rehousing
<i>If project is a Safe Haven, please choose project type that it most operates like, e.g. shelter, transitional housing, or permanent housing</i>	
Are your services targeted to any of the following populations specifically? Please select one if so, as this impacts your assessment questions.	Youth and Young Adults

*Please note that when you select a project type, particular standards may not be relevant.

Management Information	
Name of CEO	Melisa Vierra
CEO Email Address	melisa@fitsantacruz.org
CEO Phone Number	(831)728-2548
Name of Staff Member Guiding Assessment	Cyndi Valdez
Staff Email Address	cyndi@fitsantacruz.org
Staff Phone Number	(831)740-2947

Assessment Information	
Name of Assessor	Cyndi Valdez
Organizational Affiliation of Assessor	HMIS/Data Manager
Assessor Email Address	cyndi@fitsantacruz.org
Assessor Phone Number	(831)740-2947
Date of Assessment	Oct 16 2024



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

No.	Standard	Access Definition / Evidence	Say It	Document it	Do it
Access 1	Projects are low-barrier	Admission to projects is not contingent on pre-requisites such as abstinence of substances, minimum income requirements, health or mental health history, medication adherence, age, criminal justice history, financial history, completion of treatment, participation in services, "housing readiness," history or occurrence of victimization, survivor of sexual assault or an affiliated person of such a survivor or other unnecessary conditions unless required by law or funding source. <i>Optional notes here</i>	Always	Always	Always
Access 2	Projects do not deny assistance for unnecessary reasons	Procedures and oversight demonstrate that staff do everything possible to avoid denying assistance or rejecting an individual or family for the reasons listed in Access Standard #1. <i>Optional notes here</i>	Always	Always	Always
Access 3	Access regardless of sexual orientation, gender identity, or marital status	Equal access is provided in accordance with the 2012 and 2016 Equal Access Rules, meaning that any project funded by HUD must ensure equal access for persons regardless of one's sexual orientation or marital status, and in accordance with one's gender identity. Adult only households, regardless of marital status, should have equal access to projects (if these project types are not available within a CoC, the CoC should conduct an assessment to determine if these project types are needed and work with providers to accommodate the need). Please see Equal Access Rules here: https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/ <i>Optional notes here</i>	Always	Always	Always
Access 4	Admission process is expedited with speed and efficiency	Projects have expedited admission processes, to the greatest extent possible, including helping participants obtain documentation required by funding sources, as well as processes to admit participants regardless of the status of their eligibility documentation whenever applicable. <i>Optional notes here</i>	Always	Always	Always
Access 5	Intake processes are person-centered and flexible	Intake and assessment procedures are focused on the individual's or family's strengths, needs, and preferences. Projects do not require specific appointment times, but have flexible intake schedules that ensure access to all households. Assessments are focused on identifying household strengths, resources, as well as identifying barriers to housing that can inform the basis of a housing plan as soon as a person is enrolled in the project.	Always	Always	Always

		<i>Optional notes here</i>			
Access 6	The provider/project accepts and makes referrals directly through Coordinated Entry	Projects actively participate in the CoC-designated Coordinated Entry processes as part of streamlined community-wide system access and triage. If these processes are not yet implemented, projects follow communities' existing referral processes. Referrals from Coordinated Entry are rarely rejected, and only if there is a history of violence, the participant does not want to be in the project, there are legally valid grounds (such as restrictions regarding sex offenders) or some other exceptional circumstance that is well documented.	Always	Always	Always
		<i>Optional notes here</i>			
Access 7	Exits to homelessness are avoided	Projects that can no longer serve particular households utilize the coordinated entry process, or the communities' existing referral processes if coordinated entry processes are not yet implemented, to ensure that those individuals and families have access to other housing and services as desired, and do not become disconnected from services and housing. Households encounter these exits under certain circumstances, such as if they demonstrate violent or harassing behaviors, which are described within agencies' regulation-adherent policies.	Always	Always	Always
		<i>Optional notes here</i>			
Name		Participant Input Definition / Evidence	Say It	Document it	Do it
Participant Input 1	Participant education is ongoing	Project participants receive ongoing education on Housing First principles as well as other service models employed in the project. In the beginning of and throughout tenancy, participants are informed about their full rights and responsibilities as lease holders, including the potential causes for eviction.	Always	Always	Always
		<i>Optional notes here</i>			
Participant Input 2	Projects create regular, formal opportunities for participants to offer input	Input is welcomed regarding the project's policies, processes, procedures, and practices. Opportunities include involvement in: quality assurance and evaluation processes, a participant leadership/advisory board, processes to formally communicate with landlords, the design of and participation in surveys and focus groups, planning social gatherings, integrating peer specialists and peer-facilitated support groups to compliment professional services.	Always	Always	Always
		<i>Optional notes here</i>			



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

Standard	Lease and Occupancy Definition / Evidence	Say It	Document It	Do It
Leases 1	<p>Housing is considered permanent (not applicable for Transitional Housing)</p> <p>Housing is not time-limited (though rent assistance may be) and leases are automatically renewable upon expiration, except with prior notice by either party.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Leases 2	<p>Participant choice is fundamental</p> <p>A participant has, at minimum, choices in deciding the location and type of housing based on preferences from a range of housing types and among multiple units, as available and as practical. In project-based settings, participants should be offered choice of units within a particular building, or within the portfolio of single site properties. In projects that use shared housing, i.e. housing with unrelated roommates, participants should be offered choice of roommates, as available and as practical. Additionally, as applicable, participants are able to choose their roommates when sharing a room or unit.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Leases 3	<p>Leases are the same for participants as for other tenants</p> <p>Leases do not have any provisions that would not be found in leases held by any other tenant in the property or building and is renewable per the participants' and owner's choice. People experiencing homelessness who receive help moving into permanent housing should have leases that confer the full rights, responsibilities, and legal protections under Federal, state, and local housing laws. For transitional housing, there may be limitations on length of stay, but a lease/occupancy agreement should look like a lease that a person would have in the normal rental market.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Leases 4	<p>Participants receive education about their lease or occupancy agreement terms</p> <p>Participants are also given access to legal assistance and encouraged to exercise their full legal rights and responsibilities. Landlords and providers abide by their legally-defined roles and responsibilities.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Leases 5	<p>Measures are used to prevent eviction</p> <p>Property or building management, with services support, incorporates a culture of eviction avoidance, reinforced through practices and policies that prevent lease violations and evictions among participants, and evict participants only when they are a threat to self or others. Clear eviction appeal processes and due process is provided for all participants. Lease bifurcation is allowed so that a tenant or lawful occupant who is a victim of a criminal act of physical violence committed against them by another tenant or lawful occupant is not evicted, removed or penalized if the other is evicted.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Leases 6	<p>Providing stable housing is a priority</p> <p>Providers engage in a continued effort to hold housing for participants, even if they leave their housing for short periods due to treatment, illness, or any other temporary stay outside of the unit.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Leases 7	<p>Rent payment policies respond to tenants' needs (as applicable)</p> <p>While tenants are accountable to the rental agreement, adjustments may be needed on a case by case basis. As necessary, participants are given special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements.</p> <p><i>Optional notes here</i></p>	Always	Always	Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

Standard	Services Definition / Evidence	Say it	Document it	Do it
Services 1	<p>Projects promote participant choice in services</p> <p>Participants are able to choose from an array of services. Services offered are housing focused and include the following areas of support: employment and income, childhood and education, community connection, and stabilization to maintain housing. These should be provided by linking to community-based services.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Services 2	<p>Person Centered Planning is a guiding principle of the service planning process</p> <p>Person-centered Planning is a guiding principle of the service planning process</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Services 3	<p>Service support is as permanent as the housing</p> <p>Service connections are permanently available and accessible for participants in Permanent Supportive Housing. Rapid Re-Housing projects should, at a minimum, be prepared to offer services for up to 6 months after the rental assistance ends. In emergency shelter and transitional housing, services are available as long as the participant resides in the unit or bed – and up to 6 months following exit from transitional housing.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Services 4	<p>Services are continued despite change in housing status or placement</p> <p>Wherever possible, participants continue to be offered services even if they lose their housing unit or bed (for congregate projects), or if they are placed in a short-term inpatient treatment. Ideally, the service relationship should continue, despite a service hiatus during some institutional stays.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Services 5	<p>Participant engagement is a core component of service delivery</p> <p>Staff provide effective services by developing relationships with participants that provide immediate needs and safety, develop trust and common ground, making warm hand-offs to other mainstream service providers, and clearly explain staff roles. Engagement is regular and relationships are developed over time.</p>	Always	Always	Always

Population 2	Projects include positive youth development principles	<p>Youth projects should include positive youth development orientation. Positive youth development builds on strengths and resiliency. By focusing on strengths and assets, rather than what might be “wrong,” youth are empowered and are equipped to make positive decisions.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Population 3	Staff use harm reduction practices and approaches	<p>Youth models employ a harm reduction and recovery orientation, including those developed for youth and young adults with substance use and addictions. Projects may make abstinence-based models available for youth and young adults; however, the choice should lie with the participant, not with the project.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Population 4	Project design accounts for the age of youth and young adults to be served	<p>Developmentally-appropriate project design ensures that project entry and on-going participation is not predicated on behaviors or experiences that youth and young adults may not currently have or if they were older would not result in consequences. For example, projects should accept and allow continued participation for youth who do not have income or immediate prospects of income because their age has not allowed them the opportunity to gain employment.</p> <p><i>Optional notes here</i></p>	Always	Always	Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

	Standard	Project -Specific Standards	Say It	Document it	Do it
Project 1	Quick access to RRH assistance	A Rapid Re-housing project ensures quick linkage to rapid re-housing assistance, based on participant choice. <i>Optional notes here</i>	Always	Always	Always
Project 2	RRH services support people in maintaining their housing	Participants and staff understand that a primary goal of rapid re-housing is to end homelessness and move participants to permanent housing as quickly as possible, regardless of perceived barriers. <i>Optional notes here</i>	Always	Always	Always
Project 3	Providers continuously assess a participant's need for assistance	On an ongoing basis, providers assess a participant's needs for continued assistance and provide tailored assistance based on those assessments. <i>Optional notes here</i>	Always	Always	Always
Project 4	Transitional housing is focused on safe and quick transitions to permanent housing	Participants and staff understand that the primary goals of transitional housing are to provide temporary accommodations that are safe, respectful, and responsive to individual needs, address the services needs of participants, and re-house participants in permanent housing as quickly as possible, regardless of other personal issues or concerns, and as desired by the participant. Participation in transitional housing services does not inhibit participants from moving to permanent housing when they choose to. Assessment and planning for permanent housing placement begins as soon as the individual or family expresses a desire to transition to permanent housing. <i>Optional notes here</i>	Always	Always	Always
Project 5	TH projects provide appropriate services	TH projects provide appropriate services to meet the participants health and safety needs (e.g., persons in early recovery; domestic violence survivors; those who need special accommodations) when there are no permanent housing solutions available (with or without supportive services) or when the participant chooses transitional housing. Services are not required in order to participate in housing.	Always	Always	Always

Optional notes here

No additional standards

Optional notes here

No additional standards

Optional notes here

No additional standards

Optional notes here

	Standard	Population Specific Standards	Say It	Document It	Do It
Population 1	Services are offered	Services are focused on ensuring that youth transition to independence.	Always	Always	Always
		<i>Optional notes here</i>			



Housing First Standards: Assessment Summary

Families in Transition Santa Cruz County, Inc.
16-Oct-24

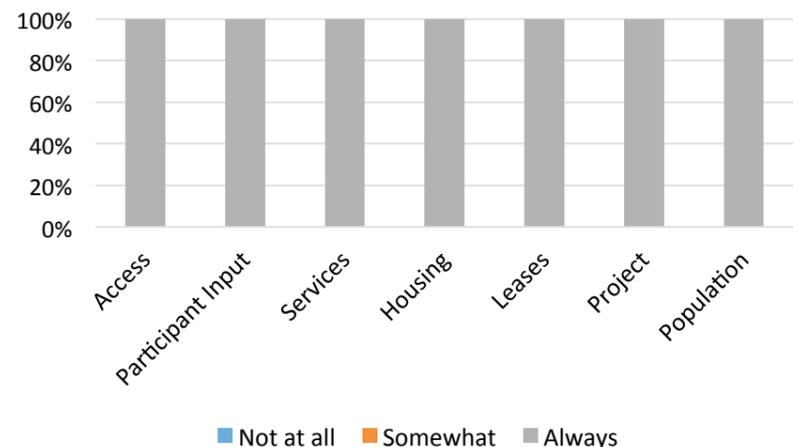
Some standards have not been evaluated. Please return and complete all standards before finalizing report.

Your score: 216
Max potential score: 216

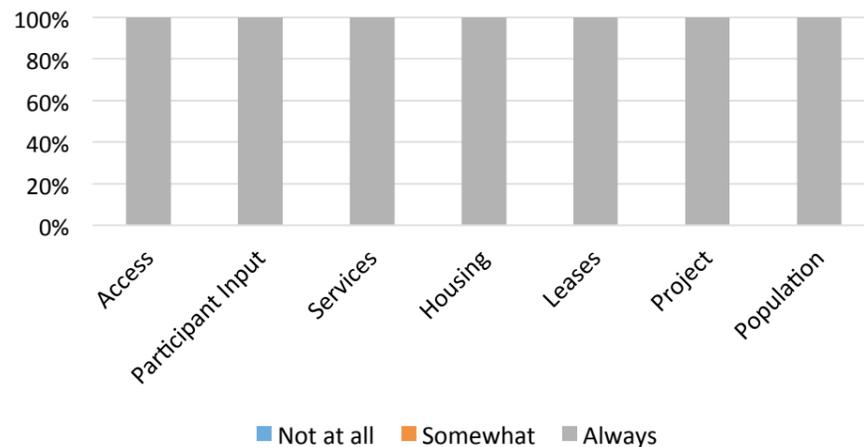
Score is calculated by awarding 1 point for standards answered 'sometimes' and 2 points for standards answered 'always'. Categories that are not applicable for your project are not included in the maximum potential score.



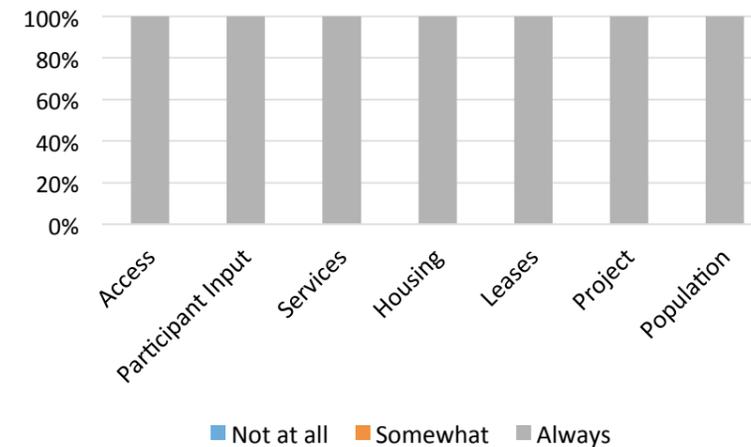
Percentage of Standards "Said"



Percentage of Standards "Documented"



Percentage of Standards "Done"



Non-Compliant Standards ("Not at all" to Whether Standard is Said)

**1D-11a LETTER SIGNED BY WORKING
GROUP**



October 21, 2024

To: Collaborative Applicant, County of Santa Cruz, Housing for Health Division

Re: 2024 HUD CoC NOFO Letter of Support of Priorities from Youth Lived Expertise Action Board

Dear Collaborative Applicant:

We are writing on behalf of the Continuum of Care's (CoC) Youth Lived Expertise Action Board (YLEAB), which is comprised of five young people with current or recent lived experience of homelessness in Santa Cruz County. As a group, we represent varied backgrounds and life experiences, and are passionate about collaborating for community change. The YLEAB is the primary vehicle for the input of currently or recently unhoused youth on key CoC matters through discussion and decisions on a range of governance, policy, funding priority, programmatic, and service delivery recommendations. We are compensated for our time and expertise at \$25 per hour for a 20-hour monthly commitment that includes meeting preparation, materials review, travel time, and meeting time.

The YLEAB met on October 21, 2024, and one of our agenda items was to consider support for the CoC's priorities for serving individuals, families, and youth experiencing severe service needs in Santa Cruz County as reflected in the CoC's Strategic Framework for Addressing Homelessness, Coordinated Entry Policies and Procedures, Program Standards, Ignore No More youth plan, and 2024 Public Solicitation of CoC/YHDP Applications.

This letter expresses YLEAB's strong support for the CoC's priorities, summarized in the above documents, for serving individuals, families, and unaccompanied youth experiencing severe service needs. These include:

- Prioritizing individuals, families, and unaccompanied youth with the highest level of service needs for housing and services.
- Providing wraparound services that include supports and treatment to address the needs of those with the most complex health and daily living needs.
- Ensuring all CoC, YHDP, and ESG-funded projects follow the Housing First philosophy aimed at meeting project participants where they are, and monitoring project to ensure compliance with Housing First.
- Furnishing training opportunities to ensure providers have the tools needed to effectively serve participants with high service needs in a way that meets Housing First, is trauma-informed, is participant-driven, and focuses on evidence-based service approaches, such as Positive Youth Development.
- Collecting feedback from adults and youth with lived experience, and using this feedback to shape the CoC's priorities in serving those with severe service needs.

We look forward to our continued collaboration with the CoC and community to connect individuals, families, and unaccompanied youth to the housing and services they need to become and remain housed and self-sufficient.

Sincerely,


Malu Divakar


Mollie Velasquez


Kyro Malak


Sam Tujague


Makayla Nored



October 21, 2024

To: Collaborative Applicant, County of Santa Cruz, Housing for Health Division

Re: 2024 HUD CoC NOFO Letter of Support of Priorities from Lived Expertise Action Board

Dear Collaborative Applicant:

We are writing on behalf of the Continuum of Care's (CoC) Lived Expertise Action Board (LEAB), which is comprised of five individuals with current or recent lived experience of homelessness in Santa Cruz County. As a group, we represent varied backgrounds and life experiences, and are passionate about collaborating for community change. The LEAB is the primary vehicle for the input of currently or recently unhoused adults on key CoC matters through discussion and decisions on a range of governance, policy, funding priority, programmatic, and service delivery recommendations. We are compensated for our time and expertise at \$25 per hour for a 20-hour monthly commitment that includes meeting preparation, materials review, travel time, and meeting time.

On October 21, 2024, the LEAB met, and one of our agenda items was to consider support for the CoC's priorities for serving individuals and families experiencing severe service needs throughout Santa Cruz County as reflected in the CoC's Strategic Framework for Addressing Homelessness, Coordinated Entry Policies and Procedures, Written Program Standards, and local 2024 Public Solicitation of CoC Applications.

This letter is to express LEAB's wholehearted support for the CoC's priorities, summarized in the above documents, for serving individuals and families experiencing severe service needs. These include:

- Prioritizing individuals, families, and unaccompanied youth with the highest level of service needs for housing and services.
- Providing wraparound services that include supports and treatment to address the needs of those with the most complex health and daily living needs.
- Ensuring all CoC, YHDP, and ESG-funded projects follow the Housing First philosophy aimed at meeting project participants where they are, and monitoring project to ensure compliance with Housing First.
- Furnishing training opportunities to ensure providers have the tools needed to effectively serve participants with high service needs in a way that meets Housing First, is trauma-informed, is participant-driven, and focuses on evidence-based service approaches.
- Collecting feedback from adults and youth with lived experience, and using this feedback to shape the CoC's priorities in serving those with severe service needs.

We look forward to our continued collaboration with the CoC and community to connect individuals, families, and unaccompanied youth to the housing and services they need to become and remain housed and self-sufficient.

Sincerely,


Manuel Caceres


Alyson Greene

Rosie Garcia


Hugo Morales

Lisa A. Bordenave

**2A-6 HUD'S HOMELESS DATA
EXCHANGE (HDX) COMPETITION
REPORT**

2024 HDX Competition Report

2024 Competition Report - SPM Data

CA-508 - Watsonville/Santa Cruz City & County CoC
FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than the look back stop date or client's date of birth, whichever is later.

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.

Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

Metric	Universe (Persons)	Average LOT Homeless (bed nights)	Median LOT Homeless (bed nights)
1.1 Persons in ES-EE, ES-NbN, and SH	977	157.5	101.0
1.2 Persons in ES-EE, ES-NbN, SH, and TH	1,093	178.8	112.0

b. This measure is based on data element 3.917

This measure includes data from each client's Living Situation (Data Standards element 3.917) response as well as time spent in permanent housing projects between Project Start and Housing Move-In. This information is added to the client's entry date, effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

Metric	Universe (Persons)	Average LOT Homeless (bed nights)	Median LOT Homeless (bed nights)
1.1 Persons in ES-EE, ES-NbN, SH, and PH (prior to "housing move in")	1,284	913.4	426.0
1.2 Persons in ES-EE, ES-NbN, SH, TH, and PH (prior to "housing move in")	1,416	894.3	422.0

Measure 2: Returns to Homelessness for Persons who Exit to Permanent Housing (PH) Destinations

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

Metric	Total # of Persons Exited to a PH Destination (2 Yrs Prior)	Returns to Homelessness in Less than 6 Months (0 - 180 days)		Returns to Homelessness from 6 to 12 Months (181 - 365 days)		Returns to Homelessness from 13 to 24 Months (366 - 730 days)		Number of Returns in 2 Years	
	Count	Count	% of Returns	Count	% of Returns ⁴	Count	% of Returns ⁶	Count	% of Returns ⁸
Exit was from SO	7	0	0.0%	1	14.3%	0	0.0%	1	14.3%
Exit was from ES	276	22	8.0%	15	5.4%	12	4.4%	49	17.8%
Exit was from TH	56	1	1.8%	0	0.0%	1	1.8%	2	3.6%
Exit was from SH	0	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Exit was from PH	292	9	3.1%	9	3.1%	24	8.2%	42	14.4%
TOTAL Returns to Homelessness	631	32	5.1%	25	4.0%	37	5.9%	94	14.9%

Measure 3: Number of Homeless Persons

Metric 3.1 - Change in PIT Counts

Please refer to PIT section for relevant data.

Metric 3.2 - Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

Metric	Value
Universe: Unduplicated Total sheltered homeless persons	1,122
Emergency Shelter Total	1,008
Safe Haven Total	0
Transitional Housing Total	149

2024 HDX Competition Report

2024 Competition Report - SPM Data

CA-508 - Watsonville/Santa Cruz City & County CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

This measure is divided into six tables capturing employment and non-employment income changes for system leavers and stayers. The project types reported in these metrics are the same for each metric, but the type of income and universe of clients differs. In addition, the projects reported within these tables are limited to CoC-funded projects.

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

Metric	Value
Universe: Number of adults (system stayers)	101
Number of adults with increased earned income	5
Percentage of adults who increased earned income	5.0%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

Metric	Value
Universe: Number of adults (system stayers)	101
Number of adults with increased non-employment cash income	42
Percentage of adults who increased non-employment cash income	41.6%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

Metric	Value
Universe: Number of adults (system stayers)	101
Number of adults with increased total income	44
Percentage of adults who increased total income	43.6%

Metric 4.4 – Change in earned income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	93
Number of adults who exited with increased earned income	26
Percentage of adults who increased earned income	28.0%

Metric 4.5 – Change in non-employment cash income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	93
Number of adults who exited with increased non-employment cash income	19
Percentage of adults who increased non-employment cash income	20.4%

Metric 4.6 – Change in total income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	93
Number of adults who exited with increased total income	37
Percentage of adults who increased total income	39.8%

2024 HDX Competition Report

2024 Competition Report - SPM Data

CA-508 - Watsonville/Santa Cruz City & County CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

Measure 5: Number of Persons who Become Homeless for the First Time

This measures the number of people entering the homeless system through ES, SH, or TH (Metric 5.1) or ES, SH, TH, or PH (Metric 5.2) and determines whether they have any prior enrollments in the HMIS over the past two years. Those with no prior enrollments are considered to be experiencing homelessness for the first time.

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

Metric	Value
Universe: Person with entries into ES-EE, ES-NbN, SH or TH during the reporting period.	886
Of persons above, count those who were in ES-EE, ES-NbN, SH, TH or any PH within 24 months prior to their entry during the reporting year.	271
Of persons above, count those who did not have entries in ES-EE, ES-NbN, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	615

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

Metric	Value
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1,244
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	334
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	910

2024 HDX Competition Report

2024 Competition Report - SPM Data

CA-508 - Watsonville/Santa Cruz City & County CoC
 FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

Measure 6 is not applicable to CoCs in this reporting period.

Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

This measures positive movement out of the homeless system and is divided into three tables: movement off the streets from Street Outreach (Metric 7a.1); movement into permanent housing situations from ES, SH, TH, and RRH (Metric 7b.1); and retention or exits to permanent housing situations from PH (other than PH-RRH)

Metric 7a.1 – Change in SO exits to temp. destinations, some institutional destinations, and permanent housing destinations

Metric	Value
Universe: Persons who exit Street Outreach	82
Of persons above, those who exited to temporary & some institutional destinations	3
Of the persons above, those who exited to permanent housing destinations	3
% Successful exits	7.3%

Metric 7b.1 – Change in ES, SH, TH, and PH-RRH exits to permanent housing destinations

Metric	Value
Universe: Persons in ES-EE, ES-NbN, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	1,061
Of the persons above, those who exited to permanent housing destinations	511
% Successful exits	48.2%

Metric 7b.2 – Change in PH exits to permanent housing destinations or retention of permanent housing

Metric	Value
Universe: Persons in all PH projects except PH-RRH who exited after moving into housing, or who moved into housing and remained in the PH project	167
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	158
% Successful exits/retention	94.6%

2024 HDX Competition Report

2024 Competition Report - SPM Data

CA-508 - Watsonville/Santa Cruz City & County CoC

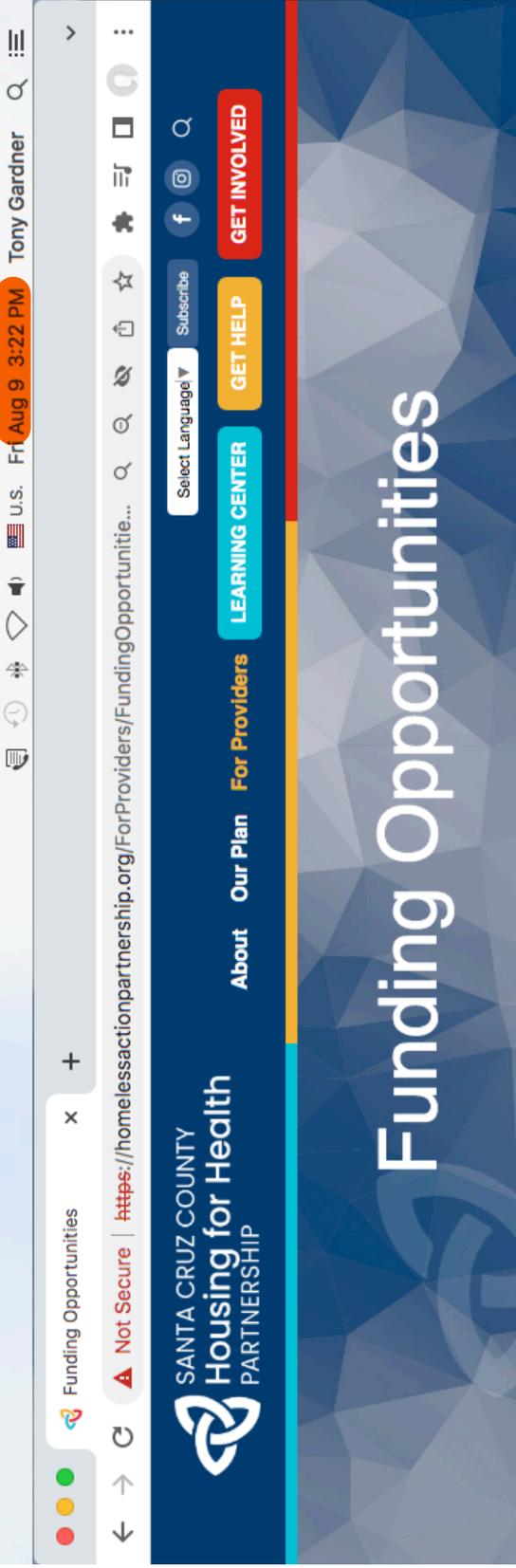
FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

System Performance Measures Data Quality

Data coverage and quality will allow HUD to better interpret your SPM submissions.

Metric	All ES, SH	All TH	All PSH, OPH	All RRH	All Street Outreach
Unduplicated Persons Served (HMIS)	1,008	149	195	1,080	126
Total Leavers (HMIS)	784	80	32	522	79
Destination of Don't Know, Refused, or Missing (HMIS)	39	0	0	19	47
Destination Error Rate (Calculated)	5.0%	0.0%	0.0%	3.6%	59.5%

**OTHER: 1E-1 Web Posting of Local
Competition Deadline**



Home > For Providers > Funding Opportunities

Last Updated: 8/9/2024

Public Solicitation of Applications: 2024 and 2025 HUD CoC & YHDP Applications and 2024 CoCBuilds Applications

Please be advised that the U.S. Department of Housing and Urban Development's (HUD) Notice of Funding Opportunity for the FY2024 and FY2025 Continuum of Care (CoC) Competition and Renewal and Replacement Non-Competitive Award of Youth Homelessness Demonstration Program Grants (CoC/YHDP NOFO) was released on July 31, 2024. The NOFO can be found here: [Continuum of Care \(CoC\) Program Competition](#). An estimated \$6.88 million is available for one-year grants in Santa Cruz County. The **HUD deadline is October 30, 2024**, although earlier internal deadlines will also apply (see below).

Please also be advised that on July 22, 2024, HUD has released a separate competitive one-time Continuum of Care Builds Notice of Funding Opportunity (CoCBuilds NOFO). The CoCBuilds NOFO can be found here: [Continuum of Care \(CoC\) Builds](#). Qualified proposals must be for a single new permanent supportive housing project for individuals or families experiencing homelessness where a household member has a disability through new construction, acquisition, or rehabilitation. Additionally, no more than 20 percent of the award may be used for other eligible CoC Program activities (e.g., supportive services and operating costs), and no more than 10 percent may be used for project administration. **\$5 million** is the maximum available within the Santa Cruz County CoC for a **single grant** with a two, three, four, or five-year timeframe. The **HUD deadline is November 21, 2024** for the CoCBuilds application, but again earlier internal deadlines will also apply (see below).

Interested applicants for the CoC/YHDP and CoCBuilds NOFO funds are invited to apply, must participate in the local Santa Cruz County CoC funding process, and are strongly encouraged to attend an Applicant Orientation Session to be held twice to accommodate people's schedules on Tuesday, August 27, 10:30 a.m. - 12:30 pm in person and Wednesday, August 28, 2:00 p.m. - 4:00 p.m. remotely. The remote session will be recorded and posted to the H4H website. The agenda for each session will include:

1. Overview of the HUD CoC/YHDP and CoCBuilds Competitions
2. Local Process and Timeline
3. Local Applications and Scoring
4. Question and Answer.

The location for the Tuesday in-person session is:

2005 Wharf Road, Capitola – Capitola Library - Ow Family Community Room.

The Zoom link for the Wednesday remote session is:

<https://santacruzcounty-us.zoomgov.com/j/1607862777?pwd=Gh5aEi0jtsbdA1re1X1r4SzNuCqVRo.1>

Meeting ID: 160 786 2777

Passcode: 676683

Attendance at one of the sessions is highly recommended for representatives of any organization that is a:

1. Current CoC grantee
2. Current YHDP grantee
3. Non-CoC funded agency interested in applying for CoC or CoCBuilds NOFO 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. The CoC also encourages applications from organizations led by, representing, and/or serving LGBTQ+ or races and ethnicities that may be over-represented in the homeless population.

Local application, policies and procedures, and prioritization materials for both NOFOs will be posted by August 23.

What is the Role of the Housing for Health Partnership and the Housing for Health Division?

Our CoC, known locally as the H4HP, is the local body charged by HUD with carrying out a collaborative process for prioritizing and selecting local projects for CoC/YHDP and CoCBuilds funds. The County Human Services Department H4H Division staffs the H4HP and is the HUD-required Collaborative Applicant for the CoC, responsible for coordinating the process and submitting a consolidated application to HUD for CoC/YHDP funds and serving as the applicant (with the selected project sponsor) for CoCBuilds funds. More details on the local process will be provided at the Applicant Orientation Session.

How Much CoC/YHDP Funding is Available and How Can it be Used?

The possible overall competitive funding for the Santa Cruz County CoC is **\$6,879,318**, which includes the following:

- **\$4,463,272** for one-year renewal of existing CoC projects, or reallocation to the following allowable new project types: permanent supportive housing, rapid rehousing, joint transitional housing and rapid rehousing, and/or coordinated entry system.
- **\$1,285,268** for one-year renewal of existing YHDP projects, or replacement or reallocation of the projects with new projects that better meet youth needs.
- **\$689,176** for one or more new CoC bonus projects of the following allowable types: permanent supportive housing, rapid rehousing, joint transitional housing and rapid rehousing, and/or coordinated entry system.
- **\$159,849** for one Domestic Violence (DV) bonus projects of the following allowable types serving a 100% DV population: rapid rehousing, joint transitional housing and rapid rehousing, and/or coordinated entry system.
- **\$287,157** for one non-competitive CoC planning project.

How Much CoCBuilds Funding is Available and How Can it be Used?

\$5,000,000 is the maximum possible total (before FMR adjustments) for one Santa Cruz County project adding new units of permanent supportive housing through new construction, acquisition, or rehabilitation. In addition, no more than 20% of the award may be used for other eligible CoC activities and 10% for Admin, which would total at maximum as follows:

- **\$1,000,000** for project-based rental assistance (PBRA), supportive services, and operating costs

- **\$1,000,000** for project-based rental assistance (PBRA), supportive services, and operating costs
- **\$500,000** for project admin costs.

What Are the Key Local Dates and Deadlines?

Following is the summary local timeline. Please note local dates are still subject to change. However, HUD deadlines remain fixed. Please check the H4H website regularly for any updates.

- 8/23/24 – H4H makes available the local application policies and procedures and application materials by posting them on the H4HP website
- 8/27/24, 10:30 a.m. to 12:30 a.m.– In-Person Applicant Orientation Session
- 8/28/24, 2:00 p.m. to 4:00 p.m. – Virtual Applicant Orientation Session
- **9/27/24, 5:00 p.m. – Local CoC deadline for proposals (local applications AND e-snaps applications)**
- 10/14/24 – Local CoC selection/ranking decisions sent to applicants
- 10/23/24 – End of local appeals period
- 10/30/24 – HUD deadline for CoC/YHDP applications and project priorities in e-snaps
- 11/21/24 - HUD deadline for CoCBuils application in grants.gov.

Thank you very much for your interest in the HUD CoC/YHDP and CoCBuils programs. Please do not hesitate to contact Sheryl Norteye at Sheryl.norteye@santacruzcountyca.gov or Tony Gardner at tonygardnerconsulting@yahoo.com if you have any questions.