

## Before Starting the Special CoC Application

You must submit both of the following parts in order for us to consider your Special NOFO Consolidated Application complete:

1. the CoC Application, and
2. the CoC Priority Listing.

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

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

1. The Special Notice of Funding Opportunity (Special NOFO) for specific application and program requirements.
2. The Special NOFO Continuum of Care (CoC) Application Detailed Instructions for Collaborative Applicants 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.

CoC Approval is Required before You Submit Your CoC's Special NOFO CoC Consolidated Application

- 24 CFR 578.9 requires you to compile and submit the Special NOFO CoC Consolidated Application 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 the [Specific Attachment Name] attachment to the 4A. 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

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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**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

1A-5.	<b>New Projects</b>	
	Complete the chart below by indicating which funding opportunity(ies) your CoC applying for projects under. A CoC may apply for funding under both set asides; however, projects funded through the rural set aside may only be used in rural areas, as defined in the Special NOFO.	
1.	<b>Unsheltered Homelessness Set Aside</b>	Yes
2.	<b>Rural Homelessness Set Aside</b>	No

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

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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1B-1.	<b>Web Posting of Your CoC Local Competition Deadline–Advance Public Notice. (All Applicants)</b>	
	Special NOFO Section VII.B.1.b.	
	You must upload the Local Competition Deadline attachment to the 4A. Attachments Screen.	
	Enter the date your CoC published the deadline for project application submission for your CoC's local competition.	08/08/2022

1B-2.	<b>Project Review and Ranking Process Your CoC Used in Its Local Competition. (All Applicants)</b>	
	Special NOFO Section VII.B.1.a.	
	You must upload the Local Competition Scoring Tool attachment to the 4A. Attachments Screen.	
	Select yes or no in the chart below to indicate how your CoC ranked and selected new project applications during your CoC's 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

1B-3.	<b>Projects Rejected/Reduced–Notification Outside of e-snaps. (All Applicants)</b>	
	Special NOFO Section VII.B.1.b.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4A. Attachments Screen.	
1.	Did your CoC reject or reduce any project application(s)?	No
2.	Did your CoC inform the applicants why their projects were rejected or reduced?	No
3.	If you selected yes, for element 1 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, list the latest date of any notification. For example, if you notified applicants on 6/26/22, 6/27/22, and 6/28/22, then you must enter 6/28/22.	

<b>1B-3a.</b>	<b>Projects Accepted–Notification Outside of e-snaps. (All Applicants)</b>	
	<b>Special NOFO Section VII.B.1.b.</b>	
	<b>You must upload the Notification of Projects Accepted attachment to the 4A. Attachments Screen.</b>	
	<b>Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, list the latest date of any notification. For example, if you notified applicants on 6/26/22, 6/27/22, and 6/28/22, then you must enter 6/28/22.</b>	09/15/2022
<b>1B-4.</b>	<b>Web Posting of the CoC-Approved Special NOFO CoC Consolidated Application. (All Applicants)</b>	
	<b>Special NOFO Section VII.B.1.b.</b>	
	<b>You must upload the Web Posting–Special NOFO CoC Consolidated Application attachment to the 4A. Attachments Screen.</b>	
	<b>Enter the date your CoC posted its Special NOFO CoC Consolidated Application on the CoC’s website or affiliate’s website–which included:  1. the CoC Application, and  2. Priority Listings.</b>	10/18/2022

## 2A. System Performance

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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<b>2A-1.</b>	<b>Reduction in the Number of First Time Homeless—Risk Factors.</b>	
	Special NOFO Section VII.B.2.b.	
	Describe in the field below:	
	1. how your CoC determined which risk factors your CoC uses to identify persons becoming homeless for the first time;	
	2. how your CoC addresses individuals and families at risk of becoming homeless; and	
	3. provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time or to end homelessness for individuals and families.	

**(limit 2,500 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 333-person random survey for the PIT count asked several first-time time homeless risk factor questions. Key risk factors revealed: lost job (26%), eviction (18%), substance abuse (13%), domestic violence (10%), and landlord raised rent (10%). Smart Path CES has used HMIS data to identify first-time homelessness risk factors, including: DV; job loss or loss of benefits leading to eviction; and health issues, e.g., substance use and emergency hospitalizations. Providers have noted all of the above, as well as the high cost of rental housing and rising evictions connected to the pandemic.

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

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

2A-2.	Length of Time Homeless–Strategy to Reduce. (All Applicants)	
	Special NOFO Section VII.B.2.c.	
	Describe in the field below:	
1.	your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;	
2.	how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.	

**(limit 2,500 characters)**

1. The CoC's strategy to reduce the length-of-time individuals and families remain homeless involves addressing systems barriers and the lack of affordable housing and PSH, all of which slow or prevent exits from homelessness. To address these issues, the CoC has set 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 all PSH 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 established 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, Smart Path CES uses assessment questions on length of homelessness and a by-name registry to identify and prioritize persons with the longest length-of-time experiencing homelessness for PSH. This builds upon Project 180 Together and Rehousing Wave surges that together have housed 1,295 persons as of August 2022. Also, the CoC has prioritizes creating new PSH; adopted CPD 16-11, established the Housing Authority Section 8 preference for Disabled Medically Vulnerable (DMV) Homeless; and made use of the Housing Authority moving on programs to free S+C and DMV vouchers spaces for persons with very long length-of-time experiencing homelessness.

3. Responsible: Smart Path CES Team.

2A-3.	Successful Permanent Housing Placement or Retention. (All Applicants)	
	Special NOFO Section VII.B.2.d.	
	Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in:	
1.	emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and	
2.	permanent housing projects retain their permanent housing or exit to permanent housing destinations.	

**(limit 2,500 characters)**

1. The CoC has successfully improved both its rate of exit to PH in spite of the extremely high-cost rental market in Santa Cruz. How the CoC will continue doing so: implementation of Smart Path 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 that have housed 1,295 persons through August; the use of County-funded housing navigation teams and 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 (DMV) 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 for housing of one-time pandemic resources, such ESG-CV and EHV.

2. Last year, the CoC achieved a 97.2% PH retention rate. How the CoC will continue having a high PH retention rate: steady increases in the number of PH subsidies (making staying housed possible for extremely low-income persons) through HCV preferences for DMV persons experiencing homelessness, and special purpose homeless-targeted program 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.

<b>2A-4.</b>	<b>Returns to Homelessness–CoC’s Strategy to Reduce Rate. (All Applicants)</b>	
	Special NOFO Section VII.B.2.e.	

Describe in the field below:

1.	how your CoC identifies individuals and families who return to homelessness;
2.	your CoC’s strategy to reduce the rate of additional returns to homelessness; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the rate individuals and persons in families return to homelessness.

(limit 2,500 characters)

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

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

<b>2A-5.</b>	<b>Increasing Employment Cash Income–Strategy. (All Applicants)</b>	
	Special NOFO Section VII.B.2.f.	

Describe in the field below:	
1.	the strategy your CoC has implemented to increase employment cash sources;
2.	how your CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
3.	provide the organization name or position title that is responsible for overseeing your CoC’s strategy to increase income from employment.

**(limit 2,500 characters)**

1. The CoC help persons experiencing homelessness increase their employment incomes through support, education, and training activities for career advancement and higher paying jobs. Important strategies include: setting annual performance targets for increasing employment (this year 25% employed); closely monitoring CoC-funded program employment performance as reported in the APR; supporting homeless-targeted employment programs such Homeless Garden Project (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 has strategies to work with mainstream employment organizations, e.g., by partnered 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 veterans; and initiating an H4H staff-led TAY professional development and mentorship project within HSD.

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

2A-5a.	Increasing Non-employment Cash Income—Strategy. (All Applicants)	
	Special NOFO Section VII.B.2.f.	
	Describe in the field below:	
	1. the strategy your CoC has implemented to increase non-employment cash income;	
	2. your CoC's strategy to increase access to non-employment cash sources; and	
	3. provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.	

**(limit 2,500 characters)**

1. The CoC works to help persons experiencing homelessness to apply for and receive all the cash benefits to which they are entitled thereby maximizing their non-employment incomes. Key CoC strategies in this area include: setting annual performance targets for increasing total overall income (75% maintained or increased income); closely monitoring CoC-funded program non-employment income performance; and requiring all CoC and ESG programs to help participants apply for as many appropriate mainstream income and non-income benefits as possible, e.g., CalWORKS, SSI, SNAP, and WIC.

2. The CoC uses the following key strategies to increase access to non-employment cash income for persons experiencing homelessness: training case managers at all agencies on how to help participants identify, apply for, and receive cash benefits, gather documents, to attend benefits appointments, and to overcome any barriers to program access that client may be experiencing; supporting the County Homeless Persons Health Project'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 HSD benefits eligibility module and the HSD benefits eligibility call center.

3. Responsible: System Operations, Data and Evaluation Committee

## 2B. Coordination and Engagement–Inclusive Structure and Participation

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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2B-1.	<b>Inclusive Structure and Participation–Participation in Coordinated Entry. (All Applicants)</b>	
	Special NOFO Sections VII.B.3.a.(1)	
	In the chart below for the period from May 1, 2021 to April 30, 2022:	
	1. select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or	
	2. select Nonexistent if the organization does not exist in your CoC’s geographic area:	

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

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

2B-2.	Open Invitation for New Members. (All Applicants)	
	Special NOFO Section VII.B.3.a.(2), V.B.3.g.	

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

(limit 2,500 characters)

1. The CoC communicates the new member invitation at least twice per year and new members can sign up anytime on the CoC website homepage. Under the Get Involved tab, the CoC invites applications from any person or organization committed to ensuring all residents within the County have stable, safe, and healthy places to live. Interested applicants can easily apply by completing the simple 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 twice a year via a separate e-mail list serve to a long list of stakeholder organizations and persons and are posted on the CoC Facebook page. This list is regularly updated.

2. All communications are sent in plain text to be easily machine readable and posted on our website, which is reviewed against Website Content Accessibility Guidelines (WCAG). 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 include captioning for hearing impaired and screen reader for visually impaired persons.

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

4. Finally, the following CoC members serving culturally specific groups receive every invitation: Mental Health Community Action Network, Central Coast Center for Independent Living and Encompass (Disabilities); FIT, Pajaro Valley Shelter Services, and Salvation Army (Latinx); and CAB, Inc., United Way of Santa Cruz County (UW), and Community Foundation (CF) of Santa Cruz County (Black, Latinx, Indigenous, other Persons of Color). The Executive Directors of CAB, UW, CF, and CoC Board member Susan True are founding members of Rise Together Santa Cruz County. The goal of Rise Together is to invest in work led by, for, and in support of BIPOC in Santa Cruz County.

2B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness. (All Applicants)	
	Special NOFO Section VII.B.3.a.(3)	

Describe in the field below how your CoC:	
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness or an interest in preventing and ending homelessness;
2.	communicated information during public meetings or other forums your CoC uses to solicit public information; and
3.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

(limit 2,500 characters)

1. The CoC solicits and considers opinions through biannual CoC community meetings attended by a broad range 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, CoC committee and working group meetings, and the CoC list serve, which includes more than 200 interested agencies or persons. Also, CoC Board meetings are open to the public and 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, during which the members of the public can comment on CoC items.

2. During public meetings, the CoC communicates orally and in writing in the form of written staff memoranda or presentations and background information for each agenda item. The agenda and written materials are sent to our list serve a few days before the meeting and are posted on the website. CoC members can also communicate by asking CoC staff to send their communications or notices (e.g., job postings or housing openings) to the entire CoC list serve.

3. Public input has positively impacted a broad array of issues, including CoC governance, Cares Act funding priorities, CoC rating criteria, CES redesign, HMIS restructuring, COVID-19 sheltering and health and social distancing protocols, updates and reports on the 3-Year Strategic Plan, State and COVID-19 funding sources, emergency interventions and a rehousing wave strategy, public engagement and information, and more.

2B-4.	Public Notification for Proposals from Organizations Not Previously Funded. (All Applicants)	
	Special NOFO Section VII.B.3.a.(4)	

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

(limit 2,500 characters)

1. On August 8, 2022, the CoC issued an e-blast to a broad list of stakeholders and possible applicants providing notice that the CoC and supplemental NOFO competitions were open and accepting applications. The notice included an invitation to participate in orientation sessions for applicants interested in CoC or supplemental funds. The invitation, process timeline, and application materials were also posted on the CoC’s publicly available website and sent to the CoC’s list serve of all known interested organizations.

2. The solicitation and application policies and procedures manual specifically highlighted the process was OPEN TO NEW APPLICANTS that had never received CoC funds. A section on p. 28 specifically invited and offered technical assistance to new applicants, and those representing groups overrepresented in the homeless population. Three new applicants did apply, Monarch Services, Covenant House, and Community Bridges.

3. Virtual applicant orientations were held twice - August 10 and August 12 – to ensure the opportunity for all potential applicants to attend. The orientation sessions and the written CoC and supplemental application policies and procedures document included information and explanations about how to complete 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 for submission to HUD.

4. As explained in writing and orally, the CoC used an objective rating process for selecting and ranking CoC and supplemental NOFO projects. Proposals were reviewed and rated with a 100-point rating tool using objective criteria and HMIS-based performance benchmarks. On September 7, the CoC Review and Ranking Subcommittee met virtually to review the applications, aggregate scores, and other project performance data, and to develop project selection and ranking recommendations (unanimously). On September 14, the CoC Board approved the final projects selections and ranking (again unanimously). The ranking list was posted online and public notification sent out on September 16.

5. The CoC uses the following to improve information accessibility: website WCAG guidelines, accessible PDF documents, Teams captioning and screen reader, and linear content design that works well with assistive devices, logical tab order, consistent navigation structure, and alt attributes.

## 2C. Coordination / Engagement—with Federal, State, Local, Private, and Other Organizations

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

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- Frequently Asked Questions

2C-1.	<b>Coordination with Federal, State, Local, Private, and Other Organizations. (All Applicants)</b>	
	Special NOFO Section VII.B.3.b.	
	In the chart below:	
	1. select yes or no for entities listed that are included in your CoC’s coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or	
	2. select Nonexistent if the organization does not exist within your CoC’s geographic area.	

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with Planning or Operations of Projects
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving 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

2C-2.	CoC Consultation with ESG Program Recipients. (All Applicants)	
	Special NOFO Section VII.B.3.b.	

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

**(limit 2,500 characters)**

1. The CoC regularly consults with the State of California ESG Program (only ESG recipient in the CoC) through ESG workshops, webinars, weekly office hours, trainings, phone/email interactions, written comment, and survey input on policy and funding allocations. This past year, the CoC members also provided public comment on, or completed surveys for, the 2021-22 CAPER, CDBG-DR Action Plan Amendment, 2022-23 annual action plan, 2019-20 annual action plan amendment relating to CDBG-CV and ESG-CV. Finally, CoC members participated in a HOME-ARP focus group and survey, Cares Act webinars and trainings; and weekly Cares Act ESG-CDBG office hours.

2. The CoC works with the State ESG Program to evaluate ESG project performance. Per State procedures, competitive ESG projects are ranked by the CoC and submitted to the State competition, while the CoC directly selects non-competitive RRH projects. The CoC Board makes project decisions based on need, priorities, performance, and design. In 2020, the CoC received \$9.5 million in ESG-CV funds through direct allocation from the State. The CoC sub-awarded these funds to critically needed programs for COVID-19 non-congregate and semi-congregate shelter, emergency food; outreach services, HMIS, and a rapid rehousing program to rehouse people from COVID-19 shelters. The CoC manages the remaining funds, monitors grantees, compiles HMIS data, and submits performance reports to the State.

3. Santa Cruz County HIC, PIT, and HMIS performance data were provided each Consolidated Plan jurisdiction: the State, Santa Cruz, and Watsonville. 4. Each year, CoC staff provide data gathering and written text for Santa Cruz and Watsonville Con Plan updates and provide HIC, PIT, project HMIS performance, and financial data when submitting applications and reports for the ESG and ESG-CV program.

2C-3.	Discharge Planning Coordination. (All Applicants)	
	Special NOFO Section VII.B.3.c.	

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

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

2C-4.	CoC Collaboration Related to Children and Youth–SEAs, LEAs, School Districts. (All Applicants)
	Special NOFO Section VII.B.3.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

2C-4a.	CoC Collaboration Related to Children and Youth–SEAs, LEAs, School Districts–Formal Partnerships. (All Applicants)
	Special NOFO Section VII.B.3.d.

Describe in the field below:

1.	how your CoC collaborates with the entities checked in Question 2C-4; and
2.	the formal partnerships your CoC has with the entities checked in Question 2C-4.

(limit 2,500 characters)

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

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

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

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

Formal partnerships with LEAs include: (1) the SCCOE SIT’s participation in the YHDP-funded Youth Homelessness Response Team; (2) Cabrillo College’s participation in HEAP-funded housing assistance students; and (3) the CoC’s participation in the SCCOE SIT’s 30-year-old McKinney-Vento Education of Homeless Children and Youth (EHCY) program. The EHCY grant funds positions to furnish more intensive case management and advocacy for homeless students, coordination of staff training on legal rights, and trauma-informed care and inclusive responses to homeless youth.

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

2C-4b.	CoC Collaboration Related to Children and Youth—Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services. (All Applicants)	
	Special NOFO Section VII.B.3.d.	

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

(limit 2,500 characters)

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

Educational policies and liaison:

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

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

- Ensuring that homeless children and youth in their programs are in school and are receiving all educational services they are entitled to; and
- Coordinating with the CoC, the Department of Social Services, the County Office of Education, the McKinney-Vento Coordinator, the McKinney-Vento Educational Liaisons, and other mainstream providers as needed.

2C-5.	Mainstream Resources–CoC Training of Project Staff. (All Applicants)	
	Special NOFO Section VII.B.3.e.	

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

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

2C-5a.	Mainstream Resources–CoC Collaboration with Project Staff Regarding Healthcare Organizations. (All Applicants)	
	Special NOFO Section VII.B.3.e.	

Describe in the field below how your CoC:

1.	systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC's geographic area;
2.	works with project staff to collaborate with healthcare organizations to assist program participants with enrolling in health insurance;
3.	provides assistance to project staff with the effective use of Medicaid and other benefits; and
4.	works with projects to promote SOAR certification of program staff.

(limit 2,500 characters)

1. The CoC uses multiple methods to provide information on mainstream benefits. The CoC's Lead Agency (County Human Services Department -HSD) has an Employment and Benefits Division that provides access to TANF, Immigrant Assistance, Medicaid, SNAP, and General Assistance (GA). HSD staff distribute materials at CoC membership meetings and monthly Human Care Alliance meetings that include program toolkits, fact sheets, partner agency resources, and updates. CoC staff send similar information via e-blast upon request of HSD staff. Also, HSD directs program staff to its website, which has current information on mainstream benefits. HSD has an online benefits application system that allows CoC agencies to submit applications on clients' behalf and has extensive information on programs. 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. The CoC collaborates with Health Improvement Partnership (HIP), Central Coast Alliance for Health (CAAH), Dignity Health, First Five Santa Cruz, and Community Health Centers to assist clients to apply and receive Medicaid, Medicare, and Covered California benefits. Each is conducts outreach to promote enrollment in and use of health insurance.
  
3. The CoC and agencies collaborate with County Health Services Agency (HSA) and Santa Cruz Community Health Centers to assist homeless people to access community health, mental health, and substance use services. HSA's Homeless Persons Health Project (HHP) is a Healthcare for the Homeless-funded project providing mobile outreach, its own clinic on a homeless campus, medical care, behavioral care, and benefits advocacy. HIP includes CoC agencies in a range of care coordination efforts (e.g., behavioral health network). The CoC is working with CCAH to link providers to California Advancing and Innovating Medi-Cal (CalAIM) resources for enhanced case management and in lieu services.
  
4. Our CoC Lead staff person is SOAR-trained and another CoC staff member has attended State HDAP Learning Forums that included SOAR training. CoC member CCCIL has case managers who are SOAR-trained. HHP 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.

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

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

3A-1.	<b>Rehabilitation/New Construction Costs–New Projects. (Rural Set Aside Only).</b> Special NOFO Section VII.A.	
If the answer to the question below is yes, you must upload the CoC Letter Supporting Capital Costs attachment to the 4A. Attachments Screen.		
Is your CoC requesting funding for any new project(s) under the Rural Set Aside for housing rehabilitation or new construction costs?		No

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

The CoC Special NOFO page provides HUD-approved resources to assist you in completing the Special NOFO CoC Application, including:

- Special Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness
- 24 CFR part 578
- Special NOFO CoC Application Navigational Guide
- Section 3 Resources
- Frequently Asked Questions

3B-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. (Rural Set Aside Only)	
	Special NOFO Section VII.C.	

Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
--	----

3B-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. (Rural Set Aside Only)	
	Special NOFO Section VII.C.	
	You must upload the Project List for Other Federal Statutes attachment to the 4A. Attachments Screen.	
	If you answered yes to question 3B-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 - no projects serving persons experiencing homelessness under other federal statutes.

## 4A. Attachments Screen For All Application Questions

Please read 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 and reduces file size. 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.<br>- 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).<br>- We must be able to read everything you want us to consider in any attachment.                           |
|  | 7. | Open attachments once uploaded to ensure they are the correct attachment for the required Document Type.  |

Document Type	Required?	Document Description	Date Attached
1B-1. Local Competition Announcement	Yes	Local Competition...	10/13/2022
1B-2. Local Competition Scoring Tool	Yes	Local Competition...	10/13/2022
1B-3. Notification of Projects Rejected-Reduced	Yes	Notification Proj...	10/13/2022
1B-3a. Notification of Projects Accepted	Yes	Notification of P...	10/13/2022
1B-4. Special NOFO CoC Consolidated Application	Yes		
3A-1. CoC Letter Supporting Capital Costs	No		
3B-2. Project List for Other Federal Statutes	No		
P-1. Leveraging Housing Commitment	No	Leveraging Housin...	10/13/2022
P-1a. PHA Commitment	No	PHA Commitment	10/13/2022
P-3. Healthcare Leveraging Commitment	No		
P-9c. Lived Experience Support Letter	No		
Plan. CoC Plan	Yes	CoC Plan	10/17/2022

## **Attachment Details**

**Document Description:** Local Competition Announcement Deadline

## **Attachment Details**

**Document Description:** Local Competition Scoring Tools

## **Attachment Details**

**Document Description:** Notification Projects Reduced or Rejected

## **Attachment Details**

**Document Description:** Notification of Projects Accepted

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** Leveraging Housing Commitment

## **Attachment Details**

**Document Description:** PHA Commitment

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## Attachment Details

**Document Description:** CoC Plan

## Submission Summary

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

Page	Last Updated
1A. CoC Identification	10/05/2022
1B. Project Review, Ranking and Selection	10/05/2022
2A. System Performance	10/05/2022
2B. Coordination and Engagement	10/05/2022
2C. Coordination and Engagement–Con't.	10/05/2022
3A. New Projects With Rehab/New Construction	No Input Required
3B. Homelessness by Other Federal Statutes	10/05/2022
4A. Attachments Screen	Please Complete
Submission Summary	No Input Required

**1B-1 LOCAL COMPETITION  
ANNOUNCEMENT & DEADLINE**

## Important Update: 2022 HUD CoC Funding and HUD Supplemental Application

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From: Housing for Health Partnership (housingforhealth@santacruzcounty.us)

To: tonygardnerconsulting@yahoo.com

Date: Monday, August 8, 2022, 11:59 AM PDT

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[View this email in your browser](#)



Dear Community Stakeholders,

Please be advised that the U.S. Department of Housing and Urban Development's (HUD) Notice of Funding Opportunity (NOFO) for the 2022 Continuum of Care (CoC) Program Competition and Non-Competitive Award of Youth Homelessness Demonstration Program (YHDP) Renewal and Replacement Grants was released on August 1, 2022. The NOFO can be found [here](#). Qualified applications are invited for projects within Santa Cruz County. An estimated total of **\$5.5 million** is available for one-year grants. The HUD deadline is September 30, 2022, although earlier internal deadlines will also apply as detailed below.

Please also be advised that HUD has released a separate but related CoC Supplemental NOFO to Address Unsheltered and Rural Homelessness. The Supplemental NOFO can be found [here](#). Qualified applications are invited for projects that will support coordinated approaches, grounded in Housing First and public health principles, to reduce the prevalence of unsheltered homelessness within Santa Cruz County. An estimated total of **\$1.055 million** is competitively available for three-year grants. The HUD deadline is October 20, 2022, but again earlier internal deadlines will also apply as detailed below.

Interested applicants for the CoC and Supplemental NOFO funds are invited and strongly encouraged to attend a virtual Applicant Orientation Session to be held twice to accommodate people's schedules on **Wednesday, August 10, 2:30 - 4:00 pm** and **Friday, August 12, 12:45 - 2:15 pm** via Zoom meeting. The sessions will be recorded and posted to the H4H website. The agenda for each session will include:

1. Overview of the HUD CoC and Supplemental Program Competition
2. Local Process and Timeline
3. Local Applications and Scoring
4. Question and Answer

The Zoom link for the Wednesday session is:

<https://us06web.zoom.us/j/85721813412?pwd=R0hzWDNlL2hTNk5aTmMrczZvOWM0dz09>

Meeting ID: 857 2181 3412

Passcode: 003565

The Zoom link for the Friday session is:

<https://us06web.zoom.us/j/86004354477?pwd=OE9wbytkbnRTbFRmR3pxVHdMOHV2QT09>

Meeting ID: 860 0435 4477

Passcode: 716349

Attendance 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 Supplemental 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.

When available, local application, process, and prioritization materials for both NOFOs will be posted on the Santa Cruz County Housing for Health Partnership (H4HP) website under [Funding Opportunities](#). Please check this site regularly as new materials will be added or updated periodically.

**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 and Supplemental 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 and Supplemental funds. More details on the local process will be provided at the Applicant Orientation Session. The H4H contact e-mail is [housingforhealth@santacruzcounty.us](mailto:housingforhealth@santacruzcounty.us).

**How Much CoC Funding is Available and How Can it be Used?** The possible overall competitive funding for the Santa Cruz County CoC is **\$5,500,656**, which includes the following:

- **\$3,783,900** 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* of the projects by their existing grantees with new projects that better meet youth needs.
- **\$189,195** 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.
- **\$90,218** for one or more 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.
- **\$152,075** for one non-competitive CoC planning project.

**How Much CoC Supplemental (Unsheltered) Funding is Available and How Can it be Used?** The possible overall competitive funding for our the Santa Cruz County CoC is **\$1,055,676**, which includes the following:

- **\$1,024,006** for three years (\$341,335 per year) for new projects of the following allowable project types: permanent supportive housing, rapid rehousing, joint transitional housing and rapid rehousing, Supportive Services Only and/or and/or coordinated entry system.
- **\$31,670** for one three-year (\$10,557 per year) non-competitive CoC planning project.

**What Are the Key Local Dates and Deadlines?** Following is the summary tentative 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.

- **8/10/22**, 2:30 to 4:00 – Virtual Applicant Orientation Session.
- **8/12/22**, 2:30 to 4:00 – Virtual Applicant Orientation Session.
- **8/31/22**, 5:00 – Local CoC deadline for proposals (local applications AND Esnaps applications).
- **9/15/22** – Local CoC selection/ranking decisions sent to applicants.
- 9/30/22 – HUD deadline for CoC applications and project priorities.
- 10/20/22 - HUD deadline for Supplemental CoC applications and project priorities.

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

Sincerely,

Tony Gardner  
H4HP CoC Consultant



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2022



August 8, 2022

Newsletter: Notice of Funding Opportunity for Continuum of Care Program Competition and Non-Competitive Award of Youth Homelessness Demonstration Program

**In this issue:** Information on the upcoming Notice of Funding Opportunity

August 4, 2022

Press Release: Point-in-Time Census Shows Progress Among Vulnerable Groups, Slight Overall Increase

August 1, 2022

Newsletter: Homeless Garden Project Event

**In this issue:** Dr. Robert Ratner, Manager of the Santa Cruz County's Housing for Health Division of the Human Services Department, speaks at Day of Digging Event

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**July 26, 2022**

**Newsletter: July 26, 2022**

**In this issue:** CORE Funding Updates, Info for Eviction and Tenant Rights

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**July 15, 2022**

**Newsletter: Supplement Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness**

**In this issue:** Information on how to apply for the Special NOFO

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**June 28, 2022**

**Newsletter: Funding Opportunity: Emergency Solutions Grant**

**In this issue:** Emergency Solutions Grant information

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**June 24, 2022**

**Newsletter: June 24, 2022**

**In this issue:** Project Homekey Award Update, Evolution of temporary housing resources

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**May 27, 2022**

**Newsletter: May 27, 2022**

**In this issue:** Emergency Housing Vouchers, Health Insurance and Health Care, Affordable Housing and Health Clinic Project Updates

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**May 16, 2022**

**Newsletter: May 16, 2022**

**In this issue:** Affordable housing month, regional housing allocation, project homekey updates

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**April 19, 2022**

**Newsletter: April 19, 2022**

**In this issue:** Rent protections extended, landlord event & H4HP members needed

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**March 29, 2022**

**Newsletter: March 29, 2022**

**In this issue:** Recent funding updates, apply for H4HP membership and more!

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**March 18, 2022**

**Newsletter: March 18, 2022**

**In this issue:** Funding opportunity, Project Homekey, CoC Community Meeting & more

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**February 8, 2022**

**Newsletter: February 8, 2022**

**In this issue:** CalWORKs funding update, landlord webinar & PIT Count help needed

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**January 14, 2022**

**Newsletter: January 14, 2022**

**In this issue:** Point-In-Time Count date change, volunteers still needed

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2021



2020



2019



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**Address:** 1000 Emeline Ave., Santa Cruz, CA 95060

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## ***Santa Cruz County 2022 CoC and Supplemental NOFO Process Timeline***

Each year, the Housing for Health Partnership (H4HP) administers the Continuum of Care (CoC) Program Competition for HUD funds. This calendar serves as a guide for CoC applicants who are considering applying for new or renewal funds from HUD through either the CoC or Supplemental NOFOs. Please note the dates are tentative and may change. Please do contact H4H at [housingforhealth@santacruzcounty.us](mailto:housingforhealth@santacruzcounty.us) or me at [tonygardnerconsulting@yahoo.com](mailto:tonygardnerconsulting@yahoo.com) with questions.

<b>Event</b>	<b>Date/Deadline</b>
<b>HUD releases 2022 Unsheltered NOFO</b>	<b>June 22, 2022</b>
<b>H4H issues initial <i>local</i> notice of Unsheltered NOFO to agencies</b>	<b>July 11, 2022</b>
<b>HUD releases 2022 CoC NOFO</b>	<b>August 1, 2022</b>
<b>H4H issues initial <i>local</i> notice of CoC NOFO to agencies</b>	<b>August 1, 2022</b>
<b>H4H releases Combined Public Solicitation of Applications for Unsheltered and Regular CoC funds &amp; invitation to Applicant Orientation Session</b>	<b>August 8, 2022</b>
<b>Virtual Applicant Orientation Session #1 (recorded)</b>	<b>August 10, 2022, 2:30-4:00</b> via Zoom
<b>Virtual Applicant Orientation Session #2 (recorded)</b>	<b>August 12, 2022, 12:45-2:15</b> via Zoom
<b>Local deadline CoC and Unsheltered application materials (via e-mail) and HUD applications (via e-snaps) (at least 30 days before HUD deadline)</b>	<b>August 31, 2022 5:00</b>
<b>H4H Policy Board meeting to review Unsheltered and Regular NOFO recommendations and to confirm decisions on project approvals/rejections, ranking/tiering</b>	<b>September 14, 2022, 1:00-5:00 (latest)</b> via Teams
<b>Written decisions sent to applicants (at least 15 days before HUD deadline)</b>	<b>September 15, 2022</b>
<b>Regular CoC Application and Project Priorities web posted (at least 2 days before HUD deadline)</b>	<b>September 28, 2022</b>
<b>HUD deadline CoC Application &amp; Project Priorities</b>	<b>September 30, 2022, 4:59 PST</b>
<b>Finalize Unsheltered CoC Application &amp; Action Plan and housing and health partnerships</b>	<b>October – October 18, 2022</b>
<b>Unsheltered CoC Application and Project Priorities web posted (at least 2 days before HUD deadline)</b>	<b>October 18, 2022</b>
<b>HUD deadline Unsheltered Application &amp; Project Priorities</b>	<b>October 20, 2022, 4:59 PST</b>

# Funding Opportunities

## State & Federal

### 2022 Continuum of Care Program Competition and Non-Competitive Award of Youth Homelessness Demonstration Program Renewal and Replacement Grants

The U.S. Department of Housing and Urban Development's (HUD) Notice of Funding Opportunity (NOFO) for the 2022 Continuum of Care (CoC) Program Competition and Non-Competitive Award of Youth Homelessness Demonstration Program (YHDP) Renewal and Replacement Grants was released on August 1, 2022. The NOFO can be found here. Qualified applications are invited for projects within Santa Cruz County. An estimated total of **\$5.5 million** is available for one-year grants. The HUD deadline is September 30, 2022, although earlier internal deadlines will also apply as detailed below.

Final CoC Application Materials:

- [2022 CoC Application](#)
- [2022 Project Priorities Listing](#)

Application materials:

- [2022 YHDP Replacement Project Local Application for CoC Approval](#)
- [Draft Combined NOFO Process Timeline](#)
- [H4H 2022 New Project Application Form](#)
- [H4H 2022 Renewal Project Local Application Form](#)
- [Match Format](#)
- [Santa Cruz County 2022 CoC Local Evaluation Checklist](#)
- Santa Cruz County 2022 CoC NOFO Solicitation Policies and Procedures [PDF File](#) [MS Word Doc](#)
- [Santa Cruz County 2022 CoC Objective Rating](#)
- [Santa Cruz County 2022 CoC Renewal Project Scoring Tool](#)
- [Santa Cruz County CoC 2022 New Project Scoring Tool](#)

[Supplemental Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness](#)

The US Department of Housing and Urban Development has released the Continuum of Care (CoC) Supplemental Notice of Funding Opportunity to Address Unsheltered and Rural Homelessness (Special NOFO).

This is a first-of-its-kind package of resources to address unsheltered homelessness and homeless encampments. The funds available nationally through the Special NOFO will be \$322 million, including \$54 million set aside for rural communities.

Please note, this is not the regular Annual CoC NOFO, which is expected to be announced soon, but a supplemental NOFO to address unsheltered and rural homelessness. For further information please visit: [HUD's Special CoC NOFO page](#) and [HUD Exchange's CoC Program Supplemental NOFO page](#).

Applying for project funding through the Special NOFO will require participating in our local CoC Housing for Health (H4H) Partnership process for prioritizing, ranking and selecting projects. H4H Partnership staff and consultants are currently developing the local process and materials. Local application process details and materials will soon be posted. Stay tuned for a public invitation to a Special NOFO Applicant Orientation Session.

#### Application materials:

- [H4H2022 New Unsheltered NOFO Project Application Form](#)
- [Santa Cruz County 2022 Supplemental Local Evaluation Checklist](#)
- [Santa Cruz County 2022 Supplemental NOFO Objective Rating](#)
- [Santa Cruz County 2022 Supplemental Unsheltered NOFO Solicitation Policies and Procedures](#)
- [Santa Cruz County 2022 New Supplemental NOFO Project Scoring Tool](#)

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**PUBLIC SOLICITATION OF APPLICATIONS**

**2022 Local Supplemental Unsheltered Notice of Funding Opportunity (NOFO)**

**Project Evaluation & Application Policies and Procedures**

Process Summary

Requirements

Rating Criteria

Timeline

Instructions

**Prepared by Housing for Health Partnership Staff**

August 2022

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## OVERVIEW OF THE HUD SUPPLEMENTAL NOFO

### *Introduction*

The purpose of this Supplemental NOFO to Address Unsheltered and Rural Homelessness (Supplemental NOFO) is to target efforts to reduce unsheltered homelessness, particularly in communities with very high levels of unsheltered homelessness and homelessness in rural areas. Through the Supplemental NOFO, HUD will award funding to communities to implement coordinated approaches -- grounded in Housing First and public health principles -- to reduce the prevalence of unsheltered homelessness, and improve services engagement, health outcomes, and housing stability among highly vulnerable unsheltered individuals and families.

The Supplemental NOFO was released on June 22, 2022, opening the competition making available **approximately \$322 million**, including \$267,500,000 for an Unsheltered Homelessness set-aside and \$54,500,000 for Rural Homelessness set aside (Santa Cruz County projects not eligible). Consolidated applications for Supplemental funds are due to HUD **October 20, 4:59PM Pacific**. For further information about the Supplemental NOFO, go to: <https://www.hudexchange.info/news/coc-program-supplemental-nofo-address-unsheltered-and-rural-homelessness/>.

Before the Supplemental application is submitted to HUD, our CoC, the Housing for Health Partnership (H4HP), is required to hold a local competition to determine which projects will be included consolidated Supplemental application, along with their relative priority. The results of the local competition dictate for which projects the CoC will seek funding. This local competition is being carried out concurrently with the annual 2020 Continuum of Care (CoC) funding competition. Additional information about project application requirements and standards for the Supplemental funding (as well as for the CoC funding) will be available at the upcoming Applicant Orientation Session.

### *Funding Available & Three-Year Grant Term*

**\$1,055,676** is the possible total for Santa Cruz County projects as listed in NOFO Appendix A. This includes:

- **\$1,024,006** over *three years* (\$341,335 per year) for **new** projects of following allowable project types: permanent supportive housing (PSH), rapid rehousing (RRH), combined transitional housing and RRH (TH-RRH), supportive services only (SSO) and/or coordinated entry system (CES).
- **\$31,670** for a three-year (\$10,557 per year) CoC planning project.

Santa Cruz County **does not have any qualified rural areas**, so HUD's separate funding, requirements, and procedures for the rural set aside will not be discussed in this document.

**In 2022, funds are NOT available for:**

- CoC renewal projects
- Emergency shelter
- Homelessness prevention projects
- New TH.

## ***HUD Will Select Projects***

HUD will select CoCs for the Unsheltered set aside funding based on CoC score, meaning the highest scoring CoC will have its rated and ranked projects that pass threshold requirements conditionally selected for funding. HUD will select projects in this manner until no more funds are available.

However, HUD has determined that geographic diversity requires that it fund no more than 10 CoCs per state, including both the Unsheltered and Rural set asides. Thus, if the 11<sup>th</sup> CoC in a state is the next highest scoring, it will be skipped over for a lower scoring CoC in another state, and so on.

## ***HUD's Homeless Policy & Program Priorities***

CoCs and Project Applications will be evaluated based on how they further HUD's policy priorities.

1. **Unsheltered Homelessness.** Recent analysis of homelessness data shows that people experiencing unsheltered homelessness report significantly greater health challenges and experiences of trauma and violence than their sheltered peers. This NOFO supports this highly vulnerable population by supporting CoCs in their efforts to identify people living in unsheltered situations, including encampments, and connects them with health and housing resources. It also supports CoCs in their efforts to enhance their HMIS to collect more comprehensive data on people experiencing unsheltered homelessness.
2. **Unsheltered Homelessness and Individuals and Families Experiencing Homelessness with Severe Service Needs in Rural Areas.** To support CoCs in their efforts to end unsheltered homelessness in their rural areas, this NOFO targets resources to rural areas and provides additional eligible activities to address some of the unique needs of rural areas.
3. **Providing Assistance on Tribal Lands.** Indian Tribes and Tribally Designated Housing Entities (TDHE) are eligible recipients. This NOFO provides incentives for creating projects that serve individuals and families in geographic areas that have high levels of homelessness, housing distress, or poverty, such as, for example, Trust Lands and Reservations.
4. **Involving a Broad Array of Stakeholders in the CoC's Efforts to Reduce Homelessness.** This NOFO supports and encourages CoCs to invite a variety of stakeholders to develop and implement a CoC Plan to Serve Individuals and Families Experiencing Homelessness with Severe Service Needs.
5. **Advancing Equity.** In nearly every community, Black, Indigenous, and other people of color as well as individuals who identify as LGBTQ+ and individuals with disabilities are substantially overrepresented in the homeless population. CoCs should be reviewing their strategies to support and serve underserved communities in their geographic area, identify barriers that led to any disparities in communities being served, and take steps to eliminate these includes, in conjunction with people experiencing homelessness, reviewing local policies, procedures, and processes to determine where and how to address such disparities.
6. **Use a Housing First approach.** Housing First prioritizes rapid placement and stabilization in permanent housing. Projects funded under this NOFO should help individuals and families move quickly into permanent housing without service participation requirements or preconditions, and the CoC should measure and help projects reduce the length of time people experience homelessness as well as ensure projects are correctly implementing a Housing First approach. Additionally, CoCs should engage landlords and property owners to identify an inventory of housing available for RRH and PSH participants.

## ***Who can be Served***

Eligibility for the Unsheltered Set Aside is persons who meet paragraphs 1 or 4 of the HUD “homeless” definition, i.e.:

**Paragraph 1. People who are living in a place not meant for human habitation, in emergency shelter, in transitional housing, or are exiting an institution** where they temporarily resided if they were in shelter or a place not meant for human habitation before entering the institution. The only significant change from existing practice is that people will be considered homeless if they are exiting an institution where they resided for up to 90 days (it was previously 30 days), and were homeless immediately prior to entering that institution.

**Paragraph 4. People who are fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening situations** related to violence; have no other residence; and lack the resources or support networks to obtain other permanent housing.

Based on the purposes of the Supplemental NOFO, projects should prioritize serving individuals and families who are **currently unsheltered** or have **histories of unsheltered homelessness**, and should support and serve **underserved communities** and provide equitable housing interventions.

For information HUD requirements for documenting “homeless” status, please see HUD’s homeless status guidance available at: <https://www.hudexchange.info>.

### Some Types of People who are NOT Eligible

People who are homeless under paragraphs 2 and 3 of the HUD “homeless” definition, i.e.:

**Paragraph 3. People who are losing their primary nighttime residence, which may include a motel or hotel or a doubled up situation, within 14 days** and lack resources or support networks to remain in housing. HUD had previously allowed people who were being displaced within 7 days to be considered homeless. The regulation also describes specific documentation requirements for this category.

**Paragraph 4. Families with children or unaccompanied youth who are unstably housed and likely to continue in that state.** This is a new category of homelessness, and it applies to families with children or unaccompanied youth (up to age 24) who have not had a lease or ownership interest in a housing unit in the last 60 or more days, have had two or more moves in the last 60 days, and who are likely to continue to be unstably housed because of disability or multiple barriers to employment. New and renewal RRH, Joint TH-RRH, and SSO projects may serve persons in this category only if HUD has approved the CoC to do so; new and renewal PSH projects may not serve persons in this category.

People who are NOT homeless, e.g.:

- Paying excessive amount for housing, housing is substandard, or the housing is crowded;
- Living with relatives or friends;
- Living in a Board and Care, Adult Congregate Living Facility, or similar place;
- Being discharged from an institution (after a stay of 90 consecutive days or more); or
- Utilizing Housing Choice Vouchers, except Katrina evacuees that received Katrina
- Disaster Housing Assistance Program (KDH4HP) Housing Choice Vouchers.

## ***Eligible Project Applicants***

Eligible project applicants: nonprofits, local governments, public housing agencies, and tribes or TDHES.

## ***Eligible CoC Program Components***

Following are the project types or components eligible for Supplemental NOFO funding:

**Permanent housing** (PH) is defined as community-based housing without a designated length of stay in which formerly homeless individuals and families live as independently as possible. The CoC Program may fund two types of permanent housing: (1) **permanent supportive housing** (PSH), which is permanent housing with indefinite leasing or rental assistance paired with services to help homeless people with disabilities achieve housing stability; and (b) **rapid re-housing** (RRH), a model that emphasizes housing search and relocation services and short- and medium-term rental assistance to move homeless people as rapidly as possible into permanent housing.

**Combined transitional housing & rapid rehousing** (TH-RRH) combines these two existing program components into a single project to serve individuals and families experiencing homelessness. Participants may only receive up to 24-months of total assistance. When a program participant is enrolled in a Joint TH and PH-RRH component project, the recipient must be able to provide both components, including the units supported by the TH component and the tenant-based rental assistance and services provided through the PH-RRH component, to all participants. A program participant may choose to receive only the TH unit, or the assistance provided through the PH-RRH component, but the recipient must make both types of assistance available.

**Supportive services only** (SSO) is a program component limited to recipients providing services to individuals and families not residing in housing operated by the recipient. SSO recipients may use the funds to conduct outreach to sheltered and unsheltered homeless persons, link clients with housing or other necessary services, and provide ongoing support. SSO projects may be offered in a structure or structures at one central site, or in multiple buildings at scattered sites where services are delivered. Projects may also be operated independent of a building (e.g., street outreach) and in a variety of community-based settings, including in homeless programs operated by other agencies.

**Homeless Management Information System** Funds under this component may be used only by HMIS leads for leasing a structure in which the HMIS operates, for operating the structure in which the HMIS is housed, and/or for covering other costs related to establishing, operating, and customizing a CoC's HMIS.

## ***Eligible Cost Types***

Following are the cost categories eligible for Supplemental NOFO:

**Leasing** is an eligible cost category under the PH, TH, SSO, and HMIS program components. Funds may be used to lease individual units or all or part of structures. Rents must be reasonable and, in the case of individual units, the rent paid may not exceed HUD-determined fair market rents. Leasing funds may not be used for units or structures owned by the recipient, subrecipient, or their parent organization. When

leasing funds are used to pay rent on units, the lease must be between the recipient or the subrecipient and the landowner, with a sublease or occupancy agreement with the program participant. The recipient may charge the program participant an occupancy charge consistent with the interim CoC rule.

**Rental assistance** is an eligible cost category under the PH and TH-RRH program components and may be tenant-based (TBRA), sponsor-based (SBRA), or project-based (PBRA), depending upon the component type. Rental assistance may be short-term for up to 3 months; medium-term for 4 to 24 months; or long-term for more than 24 months. The length of assistance depends upon the component type under which the cost is funded. Recipients must serve as many program participants as shown in their funding application to HUD, but, if the amount reserved for the term of the grant exceeds the amount needed to pay actual costs, the excess funds may be used to cover property damage, rent increases, or the rental needs of a greater number of program participants. When rental assistance funds are used to pay rent on units, the lease must be between the program participant and the landowner.

**Supportive services** are eligible costs under the PH, TH-RRH, and SSO program components, including Coordinated Entry. All eligible services types are listed in the box, and any cost not listed is ineligible. As in the past, services must be offered to residents of PSH and TH-RRH for the full period of their residence. RRH programs must require program participants to meet with a case manager at least monthly. Services may be provided to formerly homeless individuals for up to six months after their exit from homelessness, including the six months following exit from a transitional housing project. Eligible costs include the cost of providing services, the salary and benefits of staff providing services, and materials and supplies used in providing services.

**Eligible Types of Services**

- Annual assessment of service needs
- Assistance with moving costs
- Case management
- Child care operations or vouchers
- Education services
- Employment assistance and job training
- Food (meals or groceries)
- Housing search and counseling
- Legal services
- Life skills training
- Outpatient mental health services
- Outpatient health services
- Outreach services
- Outpatient substance abuse treatment
- Transportation
- Utility deposits

**Operating costs** are eligible under the PH, TH-RRH, and HMIS program components. Funds may be used to pay the day-to-day operating costs in a single structure or individual housing units, including maintenance (such as scheduled replacement of major systems), repair, building security (when CoC Program funds pay for more than 50 percent of the facility by unit or area), electricity, gas, water, furniture, equipment, property insurance, and taxes. These costs may not be combined with rental assistance costs within the same structure.

**HMIS Costs** related to contributing client data to or maintaining data in the CoC's HMIS or a comparable database for victim services providers or legal services providers are eligible costs under the PH, TH-RRH, SSO, and HMIS program components. Eligible HMIS costs include hardware, equipment and software costs; training and overhead; and HMIS-related staffing costs.

**Project Administration** These costs (limited to 10% of the grant request) include expenses related to the overall administration of the grant, such as management, coordination, monitoring, and evaluation activities and environmental review.

Note - **Acquisition, new construction, and rehabilitation** are NOT eligible cost categories.

### Indirect Costs

**Indirect Costs** (also known as “facilities and administrative costs” defined at 2 CFR 200.56) are eligible under the CoC Program for all project types, and if the applicant does not have an approved federally negotiated indirect cost rate, the applicant may use a *de minimus* rate of 10 percent of modified total direct costs. If a renewal project decides to request indirect costs, it must carve the amount out of other program costs.

## ***New Project Threshold Requirements***

For new projects, the review process considers applicant and subrecipient eligibility and capacity, project eligibility, and project quality as part of the threshold review. Project Eligibility Threshold: HUD will review eligibility threshold requirements on a pass/fail standard, and if standards are not met, the project will be rejected from the competition.

### **Applicants and subrecipients must:**

- Be eligible under the CoC Program and Supplemental NOFO
- Demonstrate financial and management capacity and experience to carry out the project and to administer Federal funds
- Submit required certifications
- Propose an eligible population for the project type, as designated by the CoC Program and Supplemental NOFO
- Show that the project is cost-effective, with costs not deviating substantially from the norm in that locale for similar project activities
- Agree to participate in HMIS (except for victim service providers who must use a comparable database).

**Project Quality Threshold:** HUD will review all new project applications to determine if they meet project quality threshold requirements with clear and convincing evidence. The housing and services proposed must be appropriate to the needs of the program participants and the community.

- For new PSH or RRH projects, applications must receive at least 3 out of 4 possible points, and must meet the 3<sup>rd</sup> point, to be funded. Quality threshold factors include:
  1. Whether the type of housing, number, and configuration of units will fit the needs of the program participants
  2. Whether the type of the supportive services offered (regardless of funding source) will ensure that participants obtain or retain permanent housing
  3. Whether the plan to connect clients to benefits meets program participant needs
  4. Whether participants are assisted in obtaining and remaining permanent housing in a manner that fits their needs.
- For new TH-RRH projects, applications must receive at least 4 out of 6 possible points, and must meet the 4<sup>th</sup> point, to be funded. Quality threshold factors include:
  1. Whether the type of housing, number, and configuration of units will fit the needs of the program participants
  2. The proposed project will provide enough rapid rehousing assistance to ensure that at any given time a program participant may move from transitional housing to permanent housing. This may be demonstrated by identifying a budget that has twice as many resources for the rapid rehousing portion of the project than the TH portion, by having twice as many PH-RRH units at a point in time as TH units, or by demonstrating that the budget and units are appropriate for the

- population being served by the project
3. Whether the type of the supportive services offered (regardless of funding source) will ensure that participants obtain or retain permanent housing
  4. Whether the plan to connect clients to benefits meets program participant needs
  5. Whether participants are assisted in obtaining and remaining permanent housing in a manner that fits their needs
  6. Whether the project has low barriers to entry and prioritizes rapid placement and stabilization in housing.
- For new SSO projects for centralized or coordinated assessment systems, applications must receive at least 3 out of 5 possible points, and must meet the 5<sup>th</sup> point, to be funded. Quality threshold factors include:
    1. Whether the system is easily accessible to all in the CoC's geography who are seeking information about homelessness assistance
    2. Whether the advertising strategy is designed to reach persons with the highest barriers
    3. Whether there is a standardized assessment process
    4. Whether the project ensures participants are directed to housing/services that fit their needs
    5. Whether the plan to connect clients to benefits meets program participant needs.

**Other threshold requirements:**

- Project applicants and potential subrecipients must have satisfactory capacity, drawdowns, and performance for existing grant(s), as evidenced by timely reimbursement of subrecipients, regular drawdowns, and timely resolution of any monitoring findings
- For expansion projects, project applicants must clearly articulate the part of the project that is being expanded. Additionally, the project applicants must clearly demonstrate that they are not replacing other funding sources
- Project applicants must demonstrate they will be able to meet all timeliness standards
- HUD reserves the right to deny the funding request for a new project, if the request is made by an existing recipient that HUD finds to have significant issues related to capacity, performance, or unresolved audit/monitoring finding related to one or more existing grants. Additionally, HUD reserves the right to withdraw funds if no APR is submitted on the prior grant.

***More About the Allowable Project Types***

PSH projects:

- May use grant funds for:
  - Leasing
  - Operations
  - Rental Assistance
  - Supportive Services
  - HMIS
  - Administration
- Must be fully dedicated to (100%) to chronically homeless individuals and families or to the populations allowed by the DedicatedPLUS project type
- Should use a Housing First approach. Housing First is a model of housing assistance that is offered without preconditions (such as sobriety or a minimum income threshold). Service participation requirements are now allowed. Rapid placement and stabilization in permanent housing are primary goals

- May be single site or scattered site
- Services must be offered based on residents needs
- A tenant lease is required, must be for at least one year, must be renewable, and terminable only for cause.

RRH projects:

- May use grant funds for:
  - Short term (up to 3 months) and/or medium-term (3-24 months) tenant-based rental assistance (must be at full FMR)
  - Supportive services
  - HMIS
  - Administration
- May serve homeless individuals and families, including unaccompanied youth
- Lease is required; must be renewable, for a term of at least one year (regardless of the length of assistance provided), and terminable only for cause.
- Project must:
  - Limit rental assistance to no more than 24 months per household
  - Limit services to no more than 6 months after rental assistance stops
  - Re-evaluate at least once per year whether the project participant continues to lack the resources and support networks necessary to retain housing without CoC assistance
  - Offer supportive services (may include any eligible CoC Program supportive service). Project participants should have access to a wide array of supportive services designed to help them retain stable, long-term housing
  - Require project participants to meet with a case manager at least monthly.
- Project may (in line with written RRH program standards adopted by the H4HP):
  - Set a maximum amount of rental assistance that a project participant may receive
  - Set a maximum number of months (up to 24 months) that a project participant may receive rental assistance
  - Set a maximum number of times that a participant may receive rental assistance
  - Require project participants to share in the costs of rent.

Joint TH and RRH projects:

- May use grant funds for:
  - Leasing of a structure or units
  - Operating costs to provide transitional housing
  - Short or medium-term tenant-based rental assistance on behalf of program participants to pay for the RRH portion of the project
  - Supportive services
  - HMIS
  - Project administrative costs
- May serve homeless families and/or individuals
- Must use Housing First
- Must be able to provide both components, including the units supported by the TH component and the rental assistance and services provided through the RRH component, to all participants
- A participant may choose to receive only the TH unit or the assistance provided through the RRH component, but the project must make both types of assistance available
- Must provide enough RRH assistance to ensure that at any given time a program participant

may move from TH to permanent housing. This may be demonstrated by identifying a budget that has twice as many resources for the rapid rehousing portion of the project than the TH portion, by having twice as many PH-RRH units at a point in time as TH units, or by demonstrating that the budget and units are appropriate for the population being served by the project

- Must limit total assistance to 24 months.

#### HMIS projects:

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

#### CES projects:

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

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

#### Funding Levels and Adjustments

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

#### Timeliness

- Proof of site control, match, environmental review, and the documentation of financial feasibility must be completed within 12 months of the announcement of the award, or 24 months in the case of funds for acquisition, rehabilitation, or new construction. The 12-month deadline may be extended by HUD for up to 12 additional months upon a showing of compelling reasons for delay due to factors beyond the control of the recipient or subrecipient
- In order to expend funds within statutorily required deadlines, applicants funded for new sponsor-based and project-based rental assistance must execute the grant agreement and begin providing rental assistance within 2 years. However, HUD strongly encourages all rental assistance to begin within 12 months of award. Applicants unable to begin within 12 months should consult with the local HUD CPD Field Office.

#### New Project Grant Terms

As mentioned earlier, all projects will have an initial grant term of three years. In following years, projects are expected to be eligible annually for one year of renewal funding. Thus in year 4, an initial three-year grant for \$300,000 would be able to apply for \$100,000 in one-year renewal funding, and then continue to do so in following years.

## ***Match Requirements***

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

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

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

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

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

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

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

CoCs and applicants are required to apply for Supplemental funds electronically through HUD's *e-snaps* system. Santa Cruz County projects must participate in the Santa Cruz Supplemental application through *e-snaps*. The e-snaps online grant application and management system, training materials, Frequently Asked Questions, and additional resources are available at: <https://www.hudexchange.info>.

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

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

In essence, applicants will:

1. Create a User Profile (new users only): First, create a user name and password

2. Project Applicant Profile: Second, fill out and submit a Project Applicant Profile form AND
3. Project Application: Finally, register for, fill out and submit a Supplemental Project Application form for each project and provide applicable attachments.

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

As required by HUD, the H4HP Policy Board must approve (or reject) and rank all projects correctly submitted in e-snaps. This includes CoC planning projects. If not correctly submitted, projects cannot be approved or ranked in e-snaps and thus cannot be funded.

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

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

The Santa Cruz County H4HP's CoC Consultant will be available to answer questions about e-snaps at [tonygardnerconsulting@yahoo.com](mailto:tonygardnerconsulting@yahoo.com). ***Before contacting the consultant, please attempt to answer your own question by reading the applicable e-snaps information or training materials.***

### ***Use of Energy Star***

The H4HP fully supports HUD's policy to promote energy-efficient housing. All Supplemental CoC-funded projects are encouraged to purchase and use Energy Star labeled products. Applicants constructing, rehabilitating, or maintaining housing or community facilities are encouraged to promote energy efficiency in design and operations. They are urged especially to purchase and use products that display the Energy Star label. Applicants providing housing assistance or counseling services are encouraged to promote Energy Star materials and practices, as well as buildings constructed to Energy Star standards, to both homebuyers and renters. Applicants are encouraged to undertake program activities that include developing Energy Star promotional and information materials, providing outreach to low- and moderate-income renters and buyers on the benefits and savings when using Energy Star products and appliances, utilizing Energy Star-designated products in the construction or rehabilitation of housing units, and replacing worn products or facilities such as light bulbs, water heaters, furnaces, etc., with Energy Star products to reduce operating costs. For further information about Energy Star, please go to <http://www.energystar.gov/>.

## LOCAL SANTA CRUZ COUNTY 2022 CoC PROJECT EVALUATION PROCESS

### ***Role of the Santa Cruz County Housing for Health Partnership (H4HP)***

Applicants for new project Supplemental funding in 2022 must participate in the local consolidated application being coordinated by the Santa Cruz H4HP. The process includes applying for funds, providing information as needed for the consolidated application, and participating in planning meetings. The key local deadlines and requirements are listed in the separately provided combined CoC and Supplemental Process Timeline. Please note that the dates and requirements are subject to change. The best way to keep track of such changes is to attend all the meetings; however, we will make our best effort to keep everyone informed! Technical assistance is available from the CoC Consultant at [tonygardnerconsulting@yahoo.com](mailto:tonygardnerconsulting@yahoo.com).

### ***Types of Projects Prioritized & Number Projects to be Funded***

All eligible projects are encouraged to apply for Supplemental NOFO funds in the local competition. We anticipate that given point-in-time count data trends, the H4H Policy Board will prioritize the following project type (although this is subject to change since the HUD-required CoC Plan for Serving Individuals and Families With Severe Service Needs is still under development):

#### **New PSH projects that:**

- Serve individuals with **severe service needs** (such as chronic mental illness, substance addiction, and/or chronic health conditions such as HIV/AIDS) and **currently unsheltered** or with a **histories of unsheltered homelessness**;
- Use Supplemental funds primarily for needed **housing activities** (e.g., rental assistance, leasing, operations) as opposed to service costs;
- Leverage healthcare and other mainstream resources for service costs; and
- Leverage **mainstream housing** or **public housing authority vouchers** for additional housing.

In addition, given the relatively small annual amounts available we anticipate that the H4H Policy Board will make only **one PSH award** and **one CoC planning award**.

We will keep you posted of any changes to the project priorities or number of projects to be funded.

### ***Encouragement of New Applicants, Applicants Representing LGBTQ+, and Applicants Representing Races/Ethnicities Overrepresented in the Homeless***

The H4HP is open to and encourages applications from entities that have not previously been awarded CoC funds. Applications are also encouraged from organization led by, representing, and/or serving LGBTQ+ or races and ethnicities that may be over-represented in the homeless population. Any prospective or new applicants are requested to contact at [tonygardnerconsulting@yahoo.com](mailto:tonygardnerconsulting@yahoo.com) to learn more about the Supplemental application goals, requirements and process. In addition, prospective and new applicants will be invited to participate in all of the process steps below, including the Applicant Orientation Session and on-call technical assistance.

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

- H4H staff issue an internal (Santa Cruz County) notice of funding with an application timeline specifying key requirements, criteria including system performance measures, dates, and deadlines.
- CoC Consultant holds an Applicant Orientation Session to brief all prospective, new, and existing applicants about the requirements and process and to make sure every applicant has the necessary information and evaluation and application-related materials to apply.
- CoC Consultant furnishes on-going technical assistance to all applicants e-mail regarding technical requirements and *e-snaps*.
- H4H requires that local Project Proposals using H4HP-created evaluation forms with required attachments be submitted along with *e-snaps* applications for review and ranking by the H4HP Board (at least 30 days before the HUD deadline).
- The H4HP Board meets to approve or reject, score, rank new project applications, and to possibly to hear applicant presentations.
- H4H staff provide notice to applicants regarding project approval or rejection, rank order, and any reduction (at least 15 days before the HUD deadline). Minutes of the decisions will be made available to all CoC Members, and will posted online with the Project Priority listings.
- H4H requires that complete and accurate Project Applications be submitted in *e-snaps* with all HUD-required forms (CoC staff will conduct a thorough technical review of the Project Applications and may amend them back in *e-snaps* for correction and re-submission).
- H4H posts the Supplemental CoC Application and Project Priorities submission online for public review (at least two days before the HUD deadline).
- H4H submits the final 2022 Supplemental application in *e-snaps* to HUD, including the Supplemental Application, Project Applications, and Project Priority Listings.

Please see the attached 2022 Combined CoC and Supplemental Process Timeline for further details.

## ***H4HP Board Rating and Ranking and Publicly Announced Objective Criteria***

HUD requires that the community review, approve (or reject), rank all new projects submitted. As in previous years, this process will be carried out by the H4HP Board with members selected for (1) lack of conflict of interest, (2) knowledge of the community and homelessness issues, and (3) representative of varied sector interests.

H4HP Board members will engage in a fair, objective decision process that may include the following:

1. Signing the H4HP Board's No Conflict of Interest Policy and recusal in any cases of conflict.
2. Reviewing, rating, and evaluating local projects using previously publicly announced objective criteria that include system performance measures.
3. The local applications and Evaluation Criteria will include project HMIS data used to measure project and system performance in line with national HEARTH Act performance objectives.
4. Proposal question and answer with applicants (if needed).
5. Discussion of the local applications in the context of recent data, local CoC plan to address the target population, and HUD priorities and needs, performance metrics, etc.
6. Vote on the approval (or rejection) and rank order of each project.

7. As mentioned above, all applicants will receive notice regarding project approval (or rejection), rank order, and any reduction (at least 15 days before the HUD deadline). Minutes of the rating and ranking decisions, and bonus selection, will be made available to all CoC Members, and will be posted online with the Project Priority listings (at least two days before the HUD deadline).

### **Deadlines and Proposal Requirements**

Please see the attached Combined Process Timeline and Local Proposal Instructions/Checklist.

### **On-Call Technical Assistance: New and Existing Applicants**

If you need on-call technical assistance please don't hesitate to contact the H4HP CoC Consultant at [tonygardnerconsulting@yahoo.com](mailto:tonygardnerconsulting@yahoo.com).

### **Resource Information**

1. 2022 Supplemental NOFA Competition Page: <https://www.hudexchange.info/programs/e-snaps/coc-supplemental-nofo-to-address-unsheltered-rural-homelessness/>
2. 2022 CoC NOFA: [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition)
3. HUD Announcement of 2022 Supplemental NOFO Release: <https://www.hudexchange.info/news/coc-program-supplemental-nofo-address-unsheltered-and-rural-homelessness/>
4. CoC Program Interim Rule (24 CFR part 578): <https://www.hudexchange.info/resource/2035/cocprogram-interim-rule-formatted-version/>
5. Training and Resources: [www.hudexchange.info/homelessness-assistance/](http://www.hudexchange.info/homelessness-assistance/)
6. Code of Conduct for HUD Grant Programs: [www.hud.gov/program\\_offices/spm/gmomgmt/grantsinfo/conduct](http://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/conduct)
7. Subscribe to HUD Listserv: [www.hudexchange.info/maillinglist](http://www.hudexchange.info/maillinglist)
8. HUD Exchange, Ask A Question (AAQ): <https://www.hudexchange.info/program-support/myquestion/>
9. HUD Websites: [www.hud.gov](http://www.hud.gov); [www.hudexchange.info](http://www.hudexchange.info)
10. Access E-snaps Application System: <https://esnaps.hud.gov>
11. E-snaps Information: <https://www.hudexchange.info/programs/e-snaps/>
12. Santa Cruz County H4HP webpage: <http://homelessactionpartnership.org/>

Separate Attachments:

1. Local Combined CoC and Supplemental Process Timeline
2. Local Objective Project Rating and Scoring Criteria
3. 2022 Renewal Project Scoring Tool
4. 2022 New Project Scoring Tool
5. 2022 Local Proposal Instructions and Checklist

# **1B-2 LOCAL COMPETITION SCORING TOOL**

**a. Applicant Organization Name & Mission (25 words maximum):**

**b. Project Name and Service Site Address:**

**c. Detailed Project Description (4 pages maximum), Including (1) Housing and Services, (2) Population Served Including But Not Limited to Those Traditional Underserved Such as BIPOC or LGBTQ+, (3) Clients Needs, Service Approach Including Including But Not Limited to Housing First, (4) Leveraging Mainstream HealthCare and Service Resources, (5) Leveraging Mainstream and PHA Housing Resources, and (6) How the Project will Address a Community Plan to Serve Individuals or Families With Severe Service Needs and are Currently Unsheltered or Have Histories of Unsheltered Homelessness.**

**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. Currently Unsheltered	
i. Currently Sheltered With History of Unsheltered Homelessness	

**f. Total HUD Dollar Request, 3 Years: \$ . Please Complete Summary Project Budget:**

a. Project Activity	b. HUD Dollar Request	c. Cash Match	d. Total Project Budget (HUD+Match)
1. Real Property Leasing			
2. Rental Assistance (from chart below)			
3. Supportive Services			
4. Operations			
5. HMIS			
6. Admin (HUD Approved Amount)			

b. Rental Assistance Worksheet	FMR rent	No. of mos.	Total
Size/no. Units			
No. 0-bed units:	\$	x mos. =	\$
No. 1-bed units:	\$	x mos. =	\$
No. 2-bed units:	\$	x mos. =	\$
No. 3-bed units:	\$	x mos. =	\$
<b>Total</b>			\$

**g. Value of Written Leverage Commitments if Any (attach written commitments)**

Written Leverage Commitments	Total Amount	Percentage of Total HUD Dollar Request (see 8 above)
Mainstream Healthcare	\$	
Mainstream Services (Non-health)	\$	
Mainstream Public Housing Auth.	\$	
Mainstream Housing (non-PHA)	\$	

**SCORING QUESTIONS**

**1. Housing/Project Type (10 points possible)**

1A. Identify the types of project (Check only 1):

<input type="checkbox"/> New PSH serving individuals with <b>severe service needs</b> (such as chronic mental illness, substance addiction, and/or chronic health conditions such as HIV/AIDS) and <b>currently unsheltered</b> or with a <b>histories of unsheltered homelessness</b> , 10 pts <input type="checkbox"/> New CoC Planning grant, 10 pts <input type="checkbox"/> New RRH serving individuals with <b>severe service needs</b> (such as chronic mental illness, substance addiction, and/or chronic health conditions such as HIV/AIDS) and <b>currently unsheltered</b> or with <b>histories of unsheltered homelessness</b> , 5 pts <input type="checkbox"/> All other eligible project types, 0 pts
--

**2. Population Served – Addresses Populations With Severe Service Needs (10 points possible)**

What percentage of clients to be served who have **severe service needs** (e.g., such as chronic mental illness, substance addiction, and/or chronic health conditions such as HIV/AIDS) and **currently unsheltered** or with **histories of unsheltered homelessness**?

100%, 10 pts  
  75-99%, 5 pts  
  1-74%, 0 pts

**3. Program Design (up to 20 points possible)**

**3A. Program Design:**

**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:

**3A2. Where Participants Will Come From:**

Enter the percentage of homeless participants(s) that will come from the following places (should equal 100%):

- \_\_\_\_ % Persons who came from the street or other locations not meant for human habitation.
- \_\_\_\_ % Persons who came from Emergency Shelters.
- \_\_\_\_ % Persons in TH who came directly from the street or Emergency Shelters.
- \_\_\_\_ % Persons who came from other place fitting HUD homeless definition. List places: \_\_\_\_\_

**3A3. Outreach Plan:**

Briefly describe the **outreach plan** to bring homeless people into the project:

**3A4. Type and Frequency of Services:**

Types of Services Participants Will Receive With Frequency: daily, weekly, bi-weekly monthly, bi-monthly, or semi-annually:

Service Type	Frequency	Service Type	Frequency
1.		5.	
2.		6.	
3.		7.	
4.		8.	

**3A5. Obtaining and Remaining in Permanent Housing:**

Briefly describe how participants will be assisted both to **obtain and also remain in permanent housing**:

**3A6. Increasing Incomes and Self-Sufficiency:**

Briefly describe how participants will increase their **employment** and income **and** maximize their ability to **live independently**:

**3A7. Community Plan – Persons With Severe Needs**

Briefly describe how the project will address a community plan to serve individuals or families with **severe service needs** and are **currently unsheltered** or have **histories of unsheltered homelessness**:

**4. Program Effectiveness (20 points possible)**

**4A. Coordinated Entry Participation:**

Identify the percentage of clients who you commit will come 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):**

Percentage of *program* funding (not including admin) proposed to be used on housing activities (acquisition, construction, rehab, and housing operations) vs. percentage funding used on non-housing activities (supportive services, services-only operations, and HMIS). (N/A for CES and HMIS)

Enter HUD funds for Housing Activities – 3 Years	Enter Total of Housing + Services (not including Admin)	% of HUD funds used on Housing (Total Housing /Total Housing+Services = % Housing Funds)
\$ Leasing		
\$ Rental Assistance		
\$ Housing Operations		
<b>\$ TOTAL Housing Funds</b>	<b>\$ TOTAL Housing +Service Funds</b>	<b>% Housing Funds</b>

**6. Agency Experience/Capacity (10 points possible)**

**6A. Years of Experience (check only 1):**

Check the number of years of agency experience in implementing the proposed program OR similar program (e.g., RRH or PSH).

<input type="checkbox"/> 8+ years experience, 10 pts	<input type="checkbox"/> 5-7 years experience, 8 pts	<input type="checkbox"/> 4-6 years experience, 6 pts	<input type="checkbox"/> 2-3 years experience, 4 pts	<input type="checkbox"/> 1-2 years experience, 2 pts	<input type="checkbox"/> <1 year experience, 0 pts
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**6B Capacity Issues (answer all that apply):**

Please answer the following questions based upon the past year from September 10, 2021 to the present date:

1. Has HUD disencumbered funds from the agency’s CoC programs?  Yes  No
2. Does the agency have unresolved HUD monitoring findings in CoC programs?  Yes  No
3. Has the agency been late in submitting a CoC APR?  Yes  No

**7. Mainstream Resources (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:

<b>Agency leadership, governance, and policies:</b>	
<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
<input type="checkbox"/>	6. Agency has provided at least one staff training since 1/1/21 on enhancing equity for BIPOC and/or LGBTQ+
<b>Program participant outcomes</b>	
<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
<input 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 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. Scores will be tabulated by H4HP staff. Please see the Evaluation Criteria item 9 for details.*

**Santa Cruz County 2022 New Supplemental NOFO Project Scoring Tool**

Reviewer: \_\_\_\_\_ Check that not conflicted per CoC policy \_\_

Agency/Project: \_\_\_\_\_

No.	Scoring Criteria	Points Possible	Points
1	<p><b>Housing/Project Type</b> Points will be awarded based upon local priority for the following housing/project types: <b>10 points for:</b> (a) <b>New PSH</b> projects that:</p> <ol style="list-style-type: none"> <li>a. Serve individuals with <b>severe service needs</b> (such as chronic mental illness, substance addiction, and/or chronic health conditions such as HIV/AIDS) and <b>currently unsheltered</b> or with <b>histories of unsheltered homelessness</b></li> <li>b. Use Supplemental funds primarily for needed <b>housing activities</b> (e.g., rental assistance, leasing, operations) as opposed to service costs</li> <li>c. Leverage <b>healthcare</b> and <b>other mainstream resources</b> for service costs</li> <li>d. Leverage <b>mainstream housing</b> or <b>public housing authority vouchers</b> for additional housing.</li> <li>e. <b>New CoC Planning</b> project.</li> </ol> <p><b>5 points for:</b> (a) <b>New RRH</b> projects that:</p> <ol style="list-style-type: none"> <li>a. Serve individuals or families with <b>severe service needs</b> (such as chronic mental illness, substance addiction, and/or chronic health conditions such as HIV/AIDS) and <b>currently unsheltered</b> or with a <b>histories of unsheltered homelessness</b></li> <li>b. Use Supplemental funds primarily for needed <b>housing activities</b> (e.g., rental assistance) not service costs</li> <li>c. Leverage <b>healthcare</b> and <b>other mainstream resources</b> for service costs</li> <li>d. Leverage <b>mainstream housing</b> or <b>public housing authority vouchers</b> for additional housing.</li> </ol> <p><b>0 points for:</b> – All other eligible projects.</p>	<p><b>10 POINTS POSSIBLE</b> 10 points:  <ul style="list-style-type: none"> <li>• PSH – individuals with severe service needs, etc.</li> <li>• CoC Planning</li> </ul>                     5 points:  <ul style="list-style-type: none"> <li>• RRH – individuals and families with severe service needs, etc.</li> </ul>                     0 points:  <ul style="list-style-type: none"> <li>• All other eligible projects</li> </ul> </p>	
2	<p><b>Population Served - Addresses Populations With Severe Service Needs (10 points possible)</b> Points will be for the percentage of clients to be served who have <b>severe service needs</b> (e.g., such as chronic mental illness, substance addiction, and/or chronic health conditions such as HIV/AIDS) and <b>currently unsheltered</b> or with a <b>histories of unsheltered homelessness</b>.</p>	<p><b>10 POINTS POSSIBLE</b></p> <ul style="list-style-type: none"> <li>• 10 points – 100% served are the above</li> <li>• 5 points – 75-99% served are the above</li> <li>• 0 points – 0%-74% served are the above</li> </ul>	

<b>3A</b>	<b>PROGRAM DESIGN</b>	<b>20 POINTS POSSIBLE</b>	
	<p>Housing where participants will reside is fully described and appropriate to the program design proposed. Program design includes provision of appropriate supportive services. Consider:</p> <ol style="list-style-type: none"> <li>1. Are the program annual measurable goals appropriate to the program type and sufficiently challenging?</li> <li>2. Will the majority of homeless participants come from the streets, emergency shelters, or other appropriate setting given population served and project type?</li> <li>3. Is the program’s outreach plan sufficient and feasible population served and project type?</li> <li>4. Are the types and frequency of services appropriate for the population served and project type?</li> <li>5. Are the strategies to help participants obtain and remain in permanent housing appropriate for the population served and project type?</li> <li>6. Are the strategies to help participants increase their employment and income and live independently appropriate for the population served and project type?</li> <li>7. The project well addresses a community plan to serve individuals or families with severe service needs and are currently unsheltered or have histories of unsheltered homelessness.</li> </ol>	<ul style="list-style-type: none"> <li>• 2 points – measurable goals</li> <li>• 2 points – majority come from streets or shelters</li> <li>• 1 points – outreach plan</li> <li>• 2 points – supportive services</li> <li>• 2 points – obtain PH</li> <li>• 1 points – income &amp; live independently</li> <li>• 10 points – well addressing community plan sever needs, currently unsheltered, histories of unsheltered</li> </ul>	
<b>4</b>	<b>PROGRAM EFFECTIVENESS</b>	<b>20 POINTS POSSIBLE</b>	
<b>4A</b>	<p>Coordinated Entry Participation: The minimum percentage of new clients the program commits to taking from CES referral.</p>	<p><b>10 Points Available</b></p> <ul style="list-style-type: none"> <li>• 10 points – 95% - 100% CES commitment</li> <li>• 8 points – 90% - 94%</li> <li>• 6 points – 85% - 89%</li> <li>• 4 points – 80% - 84%</li> <li>• 2 points – 75% - 79%</li> <li>• 1 points – 70% - 74%</li> <li>• 0 points – below 70%.</li> </ul>	
<b>4B</b>	<p>Housing First Fidelity Assessment: Serving People with the Highest Barriers to Housing: To what extent does your project embrace the following Housing First approaches?</p> <ol style="list-style-type: none"> <li>1. Does the project prioritize client selection based on duration of homelessness and vulnerability?</li> <li>2. Does the project accept all clients regardless of substance use history, or current use?</li> <li>3. Does the project accept clients who are diagnosed with, or show symptoms of, a mental illness?</li> <li>4. Does the project accept clients regardless of criminal history?</li> </ol>	<p><b>10 Points Available</b></p> <p>Housing First approaches:</p> <ul style="list-style-type: none"> <li>• 1 point “yes” response</li> <li>• 0 points “no” response</li> </ul> <p>Removing housing barriers:</p> <ul style="list-style-type: none"> <li>• 1/2 point per “yes” response</li> <li>• 0 points per “no” response</li> </ul>	

	<p>5. Does the project accept clients regardless of income or financial resources?</p> <p>6. Does the project use a harm-reduction model for drugs and/or alcohol use?</p> <p>Removing Barriers to Housing: To what extent does your project eliminate the following barriers to housing?</p> <ol style="list-style-type: none"> <li>1. No minimum income</li> <li>2. No required current employment</li> <li>3. No required state issued photo id</li> <li>4. Need not show sobriety (drugs or alcohol)</li> <li>5. OK to have symptoms of mental illness</li> <li>6. Need not have transportation</li> <li>7. No required specific disabling condition (e.g., MH, SA, HIV/AIDS)</li> <li>8. Need not show use medication.</li> </ol>		
<b>5</b>	<b>FINANCIAL AND COST EFFECTIVENESS</b>	<b>10 POINTS POSSIBLE</b>	
<b>5A</b>	Housing vs. Service Funding: The percentage of 3-year <i>program</i> funding (not including admin) proposed to be used on housing activities (acquisition, construction, rehab, and housing operations) vs. percentage funding used on non-housing activities (supportive services, services-only operations, and HMIS).	<b>10 Points Available</b> <ul style="list-style-type: none"> <li>• 10 points – 90% - 100% housing activities</li> <li>• 8 points – 80% - 89%</li> <li>• 6 points – 70% - 79%</li> <li>• 4 points – 60% - 69%</li> <li>• 2 points – 50% - 99%</li> <li>• 0 points – below 50%.</li> </ul>	
<b>6</b>	<b>AGENCY EXPERIENCE/CAPACITY</b>	<b>10 POINTS POSSIBLE</b>	
<b>6A</b>	<b>Agency Years of Experience</b> Number of years of agency experience in implementing the proposed program OR similar program type (e.g., RRH or PSH)	<b>10 Points Available</b> <ul style="list-style-type: none"> <li>• 10 points – 8+ years</li> <li>• 8 points – 5 to 7 years</li> <li>• 6 points – 4 to 6 years</li> <li>• 4 points – 2 to 3 years</li> <li>• 2 points – 1 to 2 years</li> <li>• 0 points – below 1 year</li> </ul>	
<b>6B</b>	<b>Capacity Issues</b> Points will be deducted if in the past year (9/10/21-present): (1) HUD has disencumbered funds from the agency’s CoC programs, (2) the agency has unresolved HUD monitoring findings in CoC programs, or (3) the agency has been late in submitting a CoC APR.	<b>10 Pts Deduction Possible</b> <ul style="list-style-type: none"> <li>• 4 points deduction – disencumbered funds</li> <li>• 4 points deduction – unresolved findings</li> <li>• 4 points deduction – late APR</li> </ul>	
<b>7</b>	<b>Mainstream Resources</b> The number of strategies the program has identified to help clients access federal mainstream benefits, including Medicaid; State	<b>7 POINTS POSSIBLE</b> <ul style="list-style-type: none"> <li>• 7 points – 7 - 8 strategies used</li> </ul>	

	<p>Children’s Health Insurance Program; TANF (CalWORKS); Food Stamps; SSI; Workforce Investment Act; <i>Employment Income</i>; Welfare to Work Grant Programs; and, Veterans Health Care.</p>	<ul style="list-style-type: none"> <li>• 5 points – 5 - 6 used</li> <li>• 3 point – 3 - 4 used</li> <li>• 2 points – 2 used</li> <li>• 1 point – 1 used</li> <li>• 0 points – 0 used</li> </ul>	
<p><b>8</b></p>	<p><b>Equity Factors</b>  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"> <li>1. Agency has individuals representing BIPOC in managerial and leadership positions</li> <li>2. Agency has individuals representing LGBTQ+ in managerial and leadership positions</li> <li>3. Agency board of directors includes representation from more than one person with lived experience</li> <li>4. Agency has relational process for receiving and incorporating feedback from persons with lived experience</li> <li>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.</li> <li>6. Agency has provided at least one staff training since 1/1/21 on enhancing equity for BIPOC and/or LGBTQ+.</li> </ol> <p>Program participant outcomes:</p> <ol style="list-style-type: none"> <li>7. Agency has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age</li> <li>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</li> <li>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</li> <li>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.</li> </ol>	<p><b>10 POINTS POSSIBLE</b></p> <ul style="list-style-type: none"> <li>• 1 point per “yes” response</li> <li>• 0 points “no” response</li> </ul>	
<p><b>9</b></p>	<p><b>Community Collaboration and Participation</b>  To what extent does the applicant agency support the Housing for Health Partnership (H4HP) by participating in meetings of the H4HP general membership, and participate in HMIS by entering client data into HMIS for 100% of its programs that are listed in the 2021 Housing Inventory Chart (HIC)?</p> <p><i>Sub-scores will be determined by H4HP staff based upon</i></p>	<p><b>3 POINTS POSSIBLE</b>  H4HP meeting participation:</p> <ul style="list-style-type: none"> <li>• 2 points: Agency attends 75% to 100%</li> <li>• 1 point: Agency attends 51% to 74%</li> <li>• 0 points: Agency</li> </ul>	

	<i>appropriate H4HP and documentation for the period from September 1, 2020 to the present time.</i>	attends 0% to 50% HMIS participation: <ul style="list-style-type: none"> <li>• 1 point: Has data for 100% HIC</li> </ul> 0 points: Has data for less than 100% HIC	
	<b>TOTAL</b>	<b>100 POINTS POSSIBLE</b>	

## **Santa Cruz County Supplemental NOFO Objective Rating/Scoring Criteria – 100 Points Possible**

The following objective rating and scoring criteria are aligned with the priorities of *Housing for a Healthy Santa Cruz: A Strategic Framework for Addressing Homelessness in Santa Cruz County*, the HUD 2022 Supplemental NOFO, and with recent point-in-time trend data. Each Local Project Proposal for Supplemental NOFO funds will be scored using the following publicly announced objective criteria. The H4HP Board will use the scores to help determine whether each proposal is approved (or rejected) and its rank order. Each scoring criterion relates to a particular question in the Local Project Proposal Form.

### **1. Housing/Project Type (10 points possible)**

10 points, including –

10 points for:

(a) **New PSH** projects that:

- a. Serve individuals with **severe service needs** (such as chronic mental illness, substance addiction, and/or chronic health conditions such as HIV/AIDS) and **currently unsheltered** or with **histories of unsheltered homelessness**
- b. Use Supplemental funds primarily for needed **housing activities** (e.g., rental assistance, leasing, operations) as opposed to service costs
- c. Leverage **healthcare** and **other mainstream resources** for service costs
- d. Leverage **mainstream housing** or **public housing authority vouchers** for additional housing.

(b) **New CoC Planning** project.

5 points for:

(a) **New RRH** projects that:

- a. Serve individuals or families with **severe service needs** (such as chronic mental illness, substance addiction, and/or chronic health conditions such as HIV/AIDS) and **currently unsheltered** or with a **histories of unsheltered homelessness**
- b. Use Supplemental funds primarily for needed **housing activities** (e.g., rental assistance) as opposed to service costs
- c. Leverage **healthcare** and **other mainstream resources** for service costs
- d. Leverage **mainstream housing** or **public housing authority vouchers** for additional housing.

0 points for:

– All other eligible projects.

### **2. Population Served - Addresses Populations With Severe Service Needs (10 points possible)**

Points will be for the percentage of clients to be served who have **severe service needs** (e.g., such as chronic mental illness, substance addiction, and/or chronic health conditions such as HIV/AIDS) and **currently unsheltered** or with a **histories of unsheltered homelessness** as follows:

10 points – 100% served are the above

5 points – 75-99% served are the above

0 points – 0%-74% served are the above.

### **3. Program Design (20 points possible)**

3A. Please briefly identify:

- 3A1. Your program goals to be measured annually in the HUD Annual Performance Report (APR);
- 3A2. Where your homeless participants will come from;
- 3A3. Your outreach plan to bring participants in;
- 3A4. The types and frequency of services participants will receive;
- 3A5. How participants will be helped to obtain and remain in permanent housing;
- 3A6. How participants will be helped to increase their employment and income and live independently;
- 3A7. How the project will address a community plan to serve individuals or families with severe service needs and are currently unsheltered or have histories of unsheltered homelessness.

#### **4. Program Effectiveness (20 points possible)**

##### **4A. Coordinated entry participation (10 points)**

Minimum percent of new clients the project commits to taking from CES referral:

- 10 points – 95% - 100% from CES referral
- 8 points – 90% - 94%
- 6 points – 85% - 89%
- 4 points – 80% - 84%
- 2 points – 75% - 79%
- 1 points – 70% - 74%
- 0 points – below 70%.

##### **4B. Housing First fidelity assessment (10 points possible)**

Serving People with the Highest Barriers to Housing (6 points):

To what extent does your project embrace the following Housing First approaches?

1. Does the project prioritize client selection based on duration of homelessness and vulnerability?
2. Does the project accept all clients regardless of substance use history, or current use?
3. Does the project accept clients who are diagnosed with, or show symptoms of, a mental illness?
4. Does the project accept clients regardless of criminal history?
5. Does the project accept clients regardless of income or financial resources?
6. Does the project use a harm-reduction model for drugs and/or alcohol use?

Each “yes” response receives 1 point; each “no” response receives 0 points.

##### **Removing Barriers to Housing (4 points)**

To what extent does your project eliminate the following barriers to housing?

1. No minimum income
2. No required current employment
3. No required state issued photo id
4. Need not show sobriety (drugs or alcohol)
5. OK to have symptoms of mental illness
6. Need not have transportation
7. No required specific disabling condition (e.g., MH, SA, HIV/AIDS)
8. Need not show use medication.

Each “yes” response receives 1 point; each “no” response receives 0 points.

#### **5. Financial and Cost Effectiveness (10 points possible)**

##### **5A. Housing vs. service funding**

Percentage of 3-year *program* funding (not including admin) proposed to be used on housing activities (rental assistance, leasing, and housing operations) vs. percentage funding used on non-housing activities (supportive services, services-only operations, and HMIS).

- 10 points – 90% - 100% housing activities
- 8 points – 80% - 89%
- 6 points – 70% - 79%
- 4 points – 60% - 69%
- 2 points – 50% - 99%
- 0 points – below 50%.

**6. Agency Experience/Capacity (10 points possible)**

6A. Agency Experience: Years of experience in implementing the proposed program or similar program types (e.g., PSH or RRH) (10 points)

- 10 points – 8+ years
- 8 points – 5 to 7 years
- 6 points – 4 to 6 years
- 4 points – 2 to 3 years
- 2 points – 1 to 2 years
- 0 points – below 1 year.

**6B. Capacity Issues:** Points will be deducted if in the past year (9/10/21-present): (1) HUD has disencumbered funds from the agency’s CoC programs, (2) the agency has unresolved HUD monitoring findings in CoC programs, or (3) the agency has been late in submitting a CoC APR. (10-point deduction possible)

- 4 points deduction – disencumbered funds
- 4 points deduction – unresolved findings
- 4 points deduction – late APR.

**7. Mainstream Resources (7 points possible)**

Please check each strategy your program uses to help clients access federal mainstream benefits, including Medicaid; State Children’s Health Insurance Program; TANF (CalWORKS); Food Stamps; SSI; Workforce Investment Act; *Employment Income*; Welfare to Work Grant Programs; and, Veterans Health Care. Points will be allocated as follows:

- 7 points – 7 - 8 strategies used
- 5 points – 5 - 6 strategies used
- 3 point – 3 - 4 strategies used
- 2 points – 2 strategies used
- 1 point – 1 strategy used
- 0 points – 0 strategies used.

**8. Equity Factors (10 points possible)**

Check each factor below that your agency has implemented or commits to implement within one year. Agency leadership, governance, and policies:

- 1 point - Agency has individuals representing BIPOC in managerial and leadership positions
- 1 point - Agency has individuals representing LGBTQ+ in managerial and leadership positions
- 1 point - Agency board of directors includes representation from more than one person with lived experience
- 1 point - Agency has relational process for receiving and incorporating feedback from persons with lived experience
- 1 point - Agency has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers.

1 point – Agency has provided at least one staff training since 1/1/21 on enhancing equity for BIPOC and/or LGBTQ+.

Program participant outcomes:

1 point - Agency has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age

1 point - Agency has identified programmatic changes needed to make program participant outcomes more equitable for overrepresented races or ethnicities and developed a plan to make those changes

1 point - Agency has identified programmatic changes needed to make program participant outcomes more equitable for LGBTQ+ persons and developed a plan to make those changes

1 point - Agency is working with HMIS lead to develop a schedule for reviewing HMIS data with disaggregation by race, ethnicity, gender identity, and or/age.

**9. Community Collaboration and Participation (3 points possible)** *Sub-scores will be determined by H4H staff based upon appropriate H4HP and documentation for the period from September 1, 2021 to the present time.*

Does the applicant agency participate in Housing for Health Partnership activities mandated by HUD, as follows?

1. H4HP general membership meeting participation: 2 points possible
  - a. 0 points: Agency attends 0% to 50% of H4HP general membership meetings.
  - b. 1 point: Agency attends 51% to 74% of H4HP general membership meetings.
  - c. 2 points: Agency attends 75% to 100% of H4HP general membership meetings.
2. HMIS participation: 1 points possible
  - a. 0 point: Has data in HMIS for less than 100% of agency housing programs listed in the 2021 homeless housing inventory (HIC)
  - b. 1 points: Has data in HMIS for all (100%) of housing programs listed in the 2021 HIC.

***No question/response on the applications (staff have already totaled these points for you using relevant data on the applicant's H4HP and HMIS participation)***

**1B-3 NOTIFICATION OF  
PROJECTS REJECTED-REDUCED**

**N/A – There were no project applications that were rejected or reduced.**

CA-508 Final H4H (CoC) Board Approved Supplemental Unsheltered 2022 Project Approvals and Ranking							
Rank	Score	Applicant Name	Project Name	New or Renewal	Grant Term	Project Component	Total HUD Budget
<b>Supplemental Unsheltered NOFO - \$1,055,676 - APPROVED</b>							
1	89	Housing Matters	Harvey West Studios	New - Unsheltered	3 Years	PSH	<b>\$1,024,006</b>
2	83	Santa Cruz County HSD	Unsheltered CoC Planning Grant	New - Unsheltered	3 Years	Planning	<b>\$31,670</b>
<b>Total Supplemental Approved</b>							<b>\$1,055,676</b>

**Competitive Supplemental Projects Declined - NONE**

**1B-3a NOTIFICATION OF  
PROJECTS ACCEPTED**

## RE: Housing Matters - Notification of 2022 CoC Project Priority Listing

---

From: Robert Ratner (robert.ratner@santacruzcounty.us)

To: tstag@housingmatterssc.org

Cc: esimpson@housingmatterssc.org; tonygardnerconsulting@yahoo.com; pkramer@housingmatterssc.org

Date: Thursday, September 15, 2022, 4:44 PM PDT

---

Hi all – you're correct Tom. This is a reallocation project in Tier 1 and as a result it will get funded barring an extreme calamity.

Separately, the CoC also approved of working with Housing Matters on the Unsheltered NOFO application Housing Matters proposed and improving the application in a collaborative fashion to increase the chances of securing HUD funding. More on that at a later point.

Robert Ratner, MPH, MD

County of Santa Cruz

Director, Housing for Health Division, Human Services Department

(831) 454-4925; [robert.ratner@santacruzcounty.us](mailto:robert.ratner@santacruzcounty.us)

---

**From:** Tom Stagg <tstag@housingmatterssc.org>

**Sent:** Thursday, September 15, 2022 4:41 PM

**To:** Robert Ratner <Robert.Ratner@santacruzcounty.us>

**Cc:** Evyn Simpson <esimpson@housingmatterssc.org>; tonygardnerconsulting <tonygardnerconsulting@yahoo.com>; Phil Kramer <pkramer@housingmatterssc.org>

**Subject:** Re: Housing Matters - Notification of 2022 CoC Project Priority Listing

\*\*\*\***CAUTION:**This is an EXTERNAL email. Exercise caution. DO NOT open attachments or click links from unknown senders or unexpected email.\*\*\*\*

Hi Robert,

Thank you!

I have a clarification question: On the submission, I had the 801 River expansion grant as a Bonus application.

This list shows that the CoC is re-allocating funds for the expansion which was one of the ideas that was raised earlier. I just want to confirm that change.

It doesn't affect our project plans, but it does feel like it is more likely to be approved by HUD (and being in Tier 1) which is much appreciated.

Best,

Tom

On Thu, Sep 15, 2022 at 4:30 PM Robert Ratner <[Robert.Ratner@santacruzcounty.us](mailto:Robert.Ratner@santacruzcounty.us)> wrote:

Robert Ratner, MPH, MD

County of Santa Cruz

Director, Housing for Health Division, Human Services Department

(831) 454-4925; [robert.ratner@santacruzcounty.us](mailto:robert.ratner@santacruzcounty.us)

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**Tom Stagg**  
Chief Initiatives Officer  
(831) 458-6020  
[housingmatterssc.org](http://housingmatterssc.org)  
Pronouns: he/him/his

**Resolving Homelessness Together** *since 1986*

## Unsheltered NOFO Draft Notification Letters and Final List

---

From: tony gardner (tonygardnerconsulting@yahoo.com)

To: robert.ratner@santacruzcounty.us

Cc: sheryl.norteye@santacruzcounty.us

Date: Friday, September 16, 2022, 11:23 AM PDT

---

Hi Robert,

Attached please find the above-referenced documents. Please let me know if changes to the letters are needed. Sorry I did not get the list to you before today's H4H newsletter went out!

The letters can go out now, if you want but there is no rush since we are still far from the 15 day deadline for the Unsheltered NOFO. October 5, 2022 is the deadline for sending them.

Thanks!

Tony

***Tony Gardner Consulting***

415.458.2460 land

415.717.9336 mobile tonygardnerconsulting@yahoo.com



County HSD 2022 Unsheltered Priorities Notice.docx  
93.3kB



Housing Matters 2022 Unsheltered Priorities Notice.docx  
103.7kB



Final CA-508 H4H 2022 Board Unsheltered Approvals and Ranking List.pdf  
41.3kB

CA-508 Final H4H (CoC) Board Approved Supplemental Unsheltered 2022 Project Approvals and Ranking							
Rank	Score	Applicant Name	Project Name	New or Renewal	Grant Term	Project Component	Total HUD Budget
Supplemental Unsheltered NOFO - \$1,055,676 - <b>APPROVED</b>							
1	89	Housing Matters	Harvey West Studios	New - Unsheltered	3 Years	PSH	\$1,024,006
2	83	Santa Cruz County HSD	Unsheltered CoC Planning Grant	New - Unsheltered	3 Years	Planning	\$31,670
<b>Total Supplemental Approved</b>							<b>\$1,055,676</b>

<b>Competitive Supplemental Projects Declined - NONE</b>
--

September 16, 2022

Re: County HSD – Notification of 2022 Unsheltered NOFO Project Priority Listing

Dear County HSD:

Thank you for participating in the 2022 Santa Cruz County Unsheltered Notice of Funding Opportunity (NOFO) 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 (CoC) Policy Board-approved 2022 Unsheltered NOFO Priority Listing, which includes all projects, approvals, scores, ranking, and maximum budgets.

As noted in the listing, your **Unsheltered CoC Planning Grant** was selected and ranked second.

Please let us know if you have any questions.

Again, thank you very much for your participation in the 2022 Unsheltered NOFO competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner  
Housing for Health Director

Cc: Tony Gardner

Attachments

September 16, 2022

Re: Housing Matters– Notification of 2022 Unsheltered NOFO Project Priority Listing

Dear Housing Matters:

Thank you for participating in the 2022 Santa Cruz County Unsheltered Notice of Funding Opportunity (NOFO) 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 (CoC) Policy Board-approved 2022 Unsheltered NOFO Priority Listing, which includes all projects, approvals, scores, ranking, and maximum budgets.

As noted in the listing, your **Harvey West Studios PSH new project** was selected and ranked first. The CoC also approved working with Housing Matters on your Unsheltered NOFO e-snaps application toward improving the application in a collaborative fashion to increase the chances of securing HUD funding.

Please let us know if you have any questions.

Again, thank you very much for your participation in the 2022 Unsheltered NOFO competition, and for your efforts on behalf of persons experiencing homelessness in Santa Cruz County.

Sincerely,

Robert Ratner  
Housing for Health Director

Cc: Tony Gardner

Attachments

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## 2022 Santa Cruz County Point-in-Time (PIT) Count Report Released

Applied Survey Research and the Housing for Health Division have released the [final 2022 PIT Count report on homelessness in Santa Cruz County](#). This report provides data regarding the number and characteristics of people experiencing homelessness in Santa Cruz County on a single night in February 2022. This data is collected to provide a "snapshot" of the homeless population and provide insight into necessary funding and resources for Santa Cruz County.

Special attention is given to particular populations, including chronically homeless persons, veterans, families, unaccompanied children (under the age of 18) and transition-age youth (between ages 18 and 24). Unstably-housed persons living without assistance in hotels/motels, in doubled-up situations or temporarily in a jail or hospital are not included in this effort.

To better understand the dynamics of homelessness over time, results from previous years are provided where available and applicable. [Click here for a copy of current and prior reports](#).

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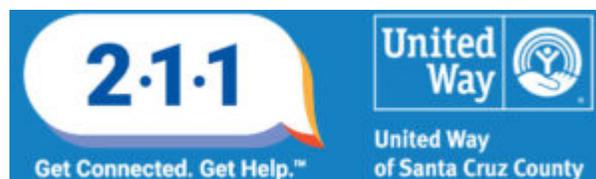
## Project Homekey Update

Santa Cruz County submitted four applications for the state's second round [Project Homekey](#) funding to create more permanent supportive and affordable housing for people experiencing or at-risk of homelessness within the County. Two of the four projects have received award letters from the state. One received a denial of funding and encouragement to apply in the next funding round. The fourth project is still pending a final decision.

On Tuesday, September 20, the County Board of Supervisors will take action on the Park Haven Plaza project at 2838 Park Avenue in Soquel. We encourage you to participate through written or verbal comments to the Board, either in person or by Zoom. You can view the agenda for this meeting [here](#).

## Funding Update – Local Continuum of Care Review and Project Rankings Announced

The Housing for Health Partnership Policy Board approved and finalized recommendations from a subcommittee related to the [FY 2022 Housing and Urban Development \(HUD\) Continuum of Care \(CoC\) Notice of Funding Opportunity](#) local application submittal and review process. To review the locally approved project reallocations, renewals and new grants [click here](#). Individual agencies will receive project-specific notifications about their proposals this week. The final communitywide HUD CoC application and specific project grant proposals must be submitted by September 30, 2022.



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Free Resource: 2-1-1 for Housing and Homeless Services

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Anyone facing eviction or who is at risk of homelessness should text "Rent" to 211211 or call 211 for resources and services. [Visit the 2-1-1 Santa Cruz County Website for more details.](#)

2-1-1 Santa Cruz County, a program of [United Way of Santa Cruz](#), is the comprehensive information and referral service for Santa Cruz County. The program connects callers and texters with information about health and human services available to them. 2-1-1 has resources specific to [Housing and Homeless Services](#).



### **Become a Housing for Health Partner member today!**

[Housing for Health Partnership \(H4HP\)](#) membership is open and free to any person or organization committed to a collaborative effort, focused on ensuring all Santa Cruz County residents have stable, safe and healthy places to live.

#### **H4HP Membership includes:**

- Invitations to participate, learn and provide feedback at community meetings.
- Chances to express opinions through surveys and voting opportunities.
- Events to network with others working on a shared goal.
- And more!

To apply click [here](#).



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January 19, 2022

Phil Kramer  
Chief Executive Officer  
Housing Matters  
115B Coral Street  
Santa Cruz, CA 95060

RE: Project Base Proposal for Harvey West Studios, 119 Coral Street, Santa Cruz CA

Dear Phil Kramer:

The Housing Authority of the County of Santa Cruz (HACSC) conditionally approves an award of sixty (60) project-based vouchers (PBV) to Housing Matters for the Harvey West Studios development at 119 Coral Street, Santa Cruz, CA. The 60 PBVs are based on the Housing Matters proposal. The commitment of the units is for an initial contract term of twenty (20) years with a likely option to renew.

The project-based units are all intended to serve as permanent supportive housing for persons experiencing homelessness. As such, the units are considered Excepted units for purposes of the project cap. The project will not provide any “regular” PBV units for top applicants on the existing Housing Choice Voucher waitlist. The conditional award of PBV units includes:

- Fifteen (15) units will be VASH units as authorized in writing by the Veterans Administration.
- Fifteen (15) units will be Shelter plus Care units as authorized in writing by the Homeless Persons Health Project at the Health Services Agency of the County of Santa Cruz. Please note project basing Shelter Plus Care units may require additional HUD approval.
- Fifteen (15) units will be Disabled and Medically Vulnerable (DMV) units.
- Fifteen (15) units will be Mainstream units, pending approval of the Housing for Health Division in the Human Services Department of the County of Santa Cruz.

The project waitlist and referral plan for these sixty (60) PBV units are subject to review and approval by the Housing Authority.

The full award of these vouchers is conditioned upon:

1. Written approval from Housing for Health for fifteen (15) Mainstream vouchers.
2. Housing Matters suspending referrals into the tenant-based Disabled Medically Vulnerable (DMV) program so that attrition can occur, thereby creating capacity for vouchers to be project-based.
3. Execution of an Agreement to Enter into Housing Assistance Payment Contract for New Construction (AHAP) with Housing Matters.

4. Completion of the development of the subject property, and Housing Authority approval that all the units pass the HUD housing quality standards inspection.
5. Housing Authority review and approval of the referral process for the units will be required. Additionally, the Housing Authority may charge an administrative fee to cover costs associated with monitoring compliance of the excepted units.
6. Compliance with the Housing Authority of the County of Santa Cruz's Administrative Plan.
7. Approval from HUD in compliance with all HUD program regulations and requirements, including documentation to meet the standards set forth in 24 CFR 983, Section 504 of the Rehabilitation Act of 1973, 24 CFR part 8, the Fair Housing Amendments Act of 1988, and 24 CFR 100.205.
8. Compliance with all applicable Fair Housing Requirements including providing all outreach and application materials in Spanish and English.

The Housing Authority retains the right to re-evaluate the selection of the proposal if progress isn't achieved in a reasonable time.

We enthusiastically support the proposal and look forward to working with you to develop new quality affordable housing. If you have any questions regarding the award of these vouchers, please contact Rayne Pérez, Principal Management Analyst, at 831-454-5958 or at [raynep@hacosantacruz.org](mailto:raynep@hacosantacruz.org).

Sincerely,

A handwritten signature in blue ink, appearing to be 'JP', with a large circular flourish at the end.

Jennifer Panetta  
Executive Director

**DEPARTMENT OF VETERANS AFFAIRS**  
**Palo Alto Health Care System**  
**3801 Miranda Ave.**  
**Palo Alto, CA 94304**



January 4, 2022

HUD Headquarters, Room 4216  
Attn: Phyllis Smelkinson  
451 7th St., SW  
Washington, DC 20410-5000

RE: Letter of Support to Project-Base 15 HUD-VASH Vouchers in Santa Cruz County

To Whom It May Concern:

This letter is to state the support of VA Palo Alto Health Care System for the request to convert 15 HUD-VASH Housing Choice vouchers to Project-Based vouchers. The vouchers will be used for the proposed Harvey West Studios project located at 119 Coral Street in Santa Cruz, CA.

The 15 Project-Based vouchers will add to the available permanent housing stock in Santa Cruz County, which is currently experiencing a shortage of available affordable permanent housing.

For questions, please contact Mona Bazzi, HUD-VASH Program Manager, at 650-776-4595.

Sincerely,

**Mona Bazzi** Digitally signed by Mona Bazzi  
Date: 2022.01.04 12:09:03  
-08'00'

---

Mona Bazzi LCSW, HUD-VASH Program Manager  
VA Palo Alto Health Care System

**DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT  
DIVISION OF STATE FINANCIAL ASSISTANCE**

2020 W. El Camino Avenue, Suite 670, 95833  
P. O. Box 952054  
Sacramento, CA 94252-2054  
(916) 263-2771  
[www.hcd.ca.gov](http://www.hcd.ca.gov)



August 29, 2022

Karen Kern, Senior Behavioral Health Manager  
County of Santa Cruz  
1400 Emeline Avenue  
Santa Cruz, CA 95060

Phil Kramer, Chief Executive Officer  
Housing Matters  
115 B Coral Street  
Santa Cruz, CA 95060

Dear Karen Kern and Phil Kramer:

**RE: Award Announcement – No Place Like Home Program  
Competitive and Noncompetitive Allocations, Round 4  
Notice of Funding Availability, Fiscal Year 2021/2022  
County of Santa Cruz and Housing Matters  
Contract No. 21-NPLH-17354 – *Harvey West***

The California Department of Housing and Community Development is pleased to announce that the County of Santa Cruz and Housing Matters (Awardees) have been awarded a No Place Like Home (NPLH) Program, Round 4, award in the amount of \$18,174,282. This letter constitutes notice of the designation of NPLH Program funds for Harvey West:

<b>NPLH Competitive Capital Loan Amount</b>	<b>NPLH Competitive COSR Grant Amount</b>
\$18,174,282	\$0
<b>NPLH Noncompetitive Capital Loan Amount</b>	<b>NPLH Noncompetitive COSR Grant Amount</b>
\$0	\$0

Awardees will be able to draw down funds when the Standard Agreement is fully executed, and any general and special conditions have been cleared in writing. In addition, expenditures may not be incurred prior to the execution of the Standard Agreement.

County of Santa Cruz and Housing Matters  
Contract No. 21-NPLH-17354 – *Harvey West*  
August 29, 2022  
Page 2

The Department intends to issue a Standard Agreement within 90 days of receipt of the documentation required to execute this contract. An NPLH representative will be in communication with you within a week to discuss and confirm any documents needed.

Congratulations on your successful application. For further information, please contact Tanya Danna, NPLH Program Manager, Program Design and Implementation Branch, at (916) 776-7709 or [Tanya.Danna@hcd.ca.gov](mailto:Tanya.Danna@hcd.ca.gov).

Sincerely,

A handwritten signature in blue ink that reads "Jennifer Seeger". The signature is fluid and cursive, with the first name being more prominent.

Jennifer Seeger  
Deputy Director  
Division of State Financial Assistance

1600 Green Hills Road, Ste. 101  
Scotts Valley, CA 95066-4981  
831-430-5500

950 East Blanco Road, Ste. 101  
Salinas, CA 93901-4487  
831-755-6000

530 West 16th Street, Ste. B  
Merced, CA 95240-4710  
209-381-5300



June 3, 2021

Phil Kramer  
Executive Director  
Housing Matters  
PO Box 1319  
Santa Cruz, CA 95061

Dear Mr. Kramer:

It is my pleasure to inform you that the Central California Alliance for Health's Board of Commissioners approved your Capital Implementation grant in the amount of \$2,500,000 to Housing Matters on April 28, 2021.

Your signed Grant Agreement is due to the Alliance by June 28, 2021 via DocuSign signature submission. Your Grant Agreement establishes the purpose, terms and conditions of the grant award. Please review the Grant Agreement very carefully, including its reporting requirements. Grant funds will be distributed based upon the terms and payment schedule outlined in the Agreement. You will receive a confirmation email from the Grant Program once your fully executed agreement and follow up forms are available in the online grant portal. You will also receive a Grantee Checklist outlining the key steps for Alliance grants.

Please note, the first payment will not be issued until Housing Matters has notified the Alliance that all other financing for the project has been secured.

Please note, you will have a period of up to nine (9) months from the Grant Effective Date to begin construction of your capital project. We would like to partner with you on any press release, construction signage or other recognition of the Alliance's contribution to your project. Please contact Jessica Finney, Grant Program Manager, at (831) 430-2547 or [jfinney@cchah-alliance.org](mailto:jfinney@cchah-alliance.org) regarding this topic.

If you have any questions or any technical difficulties using the DocuSign process, please contact Grant Program staff at [grants@cchah-alliance.org](mailto:grants@cchah-alliance.org) or (831) 430-5784.

We are proud to partner with you to expand Medi-Cal capacity in our community, ensuring Medi-Cal members receive timely access to quality services.

Sincerely,

A handwritten signature in blue ink that reads "Kathleen McCarthy".

Kathleen McCarthy  
Strategic Development Director

## **Agreement for Medi-Cal Capacity Grant**

This Agreement for Medi-Cal Capacity Grant (Agreement), effective upon the date of the last signature below (Grant Effective Date), is entered into in order to specify the terms and conditions under which Santa Cruz-Monterey-Merced Managed Medical Care Commission, doing business as Central California Alliance for Health (the Alliance) agrees to provide funds (Grant) through the Alliance Medi-Cal Capacity Grant Program (Program) for grant #0121-HM-CI to or on behalf of Housing Matters (Grantee).

### **Recitals**

*Whereas*, the Alliance has established the Program to offer grants to health care providers and community organizations to support efforts that advance the Alliance mission to provide timely access to quality health care services and to increase Medi-Cal capacity in the Alliance's service area;

*Whereas*, the Program will focus the provision of available funds in the areas of provider capacity, behavioral health and substance use disorder services, high utilizer support resources for medically fragile Alliance members, and healthy eating and active living; and

*Whereas*, the Alliance has made a decision to award funds to Grantee based on the application submitted by Grantee for a Grant under the Program (Grant Application, which is expressly incorporated herein);

*Now Therefore*, the Alliance and Grantee agree that all funds awarded as a Grant under the Program shall be subject to the terms and conditions of this Agreement.

1. Statement of Services. The "Statement of Services" is attached hereto and hereby incorporated into this Agreement as Exhibit 1, and sets forth the services to be provided by Grantee under this Agreement.
2. Incorporation of Grant Request. The Grantee represents that all information contained in the original Grant Application is true, accurate and complete in all material respects. Grantee further agrees that it will notify the Alliance promptly of any material change in information submitted in the original Grant Application, including any significant change in contract status for the provision of Medi-Cal services, organizational leadership or contact information.
3. Amount and Purpose of Grant. The amount of the Grant shall be set forth in Exhibit 1 in consideration of and on condition that the sum be expended only for the purposes of carrying out the Statement of Services in Exhibit 1. Grantee shall use any and all funds provided through the Grant solely as set forth in Exhibit 1. Unless specifically provided in this Agreement or in Exhibit 1, no part of the Grant may be used to fund administrative services or other operating expenses of the Grantee, even if those services are utilized to support the services set forth in Exhibit 1. No part of the Grant may be used to fund expenses related to lobbying or political action by the Grantee. To the extent that Grantee is unable to use any part of the Grant funds as set forth in the Statement of Services, Grantee shall notify the Alliance and return any funds that have not been or cannot be expended as provided in Exhibit 1. Grantee agrees to assume any obligation to furnish any additional funds that may be necessary to complete the Statement of

Services in Exhibit 1. All costs accrued for services or supplies prior to the execution of Agreement are not eligible for reimbursement unless specifically provided for in the terms of Exhibit 1.

4. Payment Schedule. The schedule for the payment of the Grant is set forth in Exhibit 1.

5. Payment Documentation. The timing, scope and format of the documentation that Grantee shall provide to the Alliance to request Grant funds is set forth in Exhibit 1. The Alliance reserves the right to request additional documentation as it deems necessary to validate the use of Grant funds, either before or after use by Grantee, and shall have the right at its sole discretion to withhold any payment pending any questions that it may have regarding the use of funds. The Alliance reserves the right to enter into a separate agreement with a third party to ensure that the covenants of this Agreement are met by the Grantee, including but not limited to those of sections 1, 3, and 6.

6. Books and Records. Grantee agrees to maintain satisfactory financial accounts, documents and records for the Grant and to make them available to the Alliance, the State of California, the United States Department of Health and Human Services or the Comptroller General of the United States, or otherwise required by law, for auditing at reasonable times. Grantee also agrees to retain such financial accounts, documents and records for three years following termination or completion of the Grant. Grantee agrees to maintain and make available for inspection by the Alliance accurate records of all of its costs, disbursements and receipts with respect to its activities under this Agreement.

7. Grant Announcements. Any materials used to advertise, announce or otherwise inform the public, including individuals served by Grantee, of the receipt of the Grant provided for hereunder shall describe the Grant and the services funded by the Grant accurately, and in a way that conforms to the purpose statement in the scope of services set forth in Exhibit 1. Any such materials that mention or include information about the Alliance shall not be published or in any other way communicated without the prior approval of the Alliance. Any such materials that mention or include information about the Alliance shall refer to the health plan as Central California Alliance for Health. Any published list of funders who have supported activities related to this grant should include the Alliance.

8. Legal Compliance. If Grantee is a participant in the Medi-Cal program as of the Grant Effective Date, Grantee agrees that the Grant award and the payment of Grant funds by the Alliance pursuant to this Agreement is conditioned on Grantee's continuing compliance with all applicable requirements of federal and California law related to Grantee's participation in the Medi-Cal program. Grantee shall notify the Alliance immediately in the event that Grantee or any employee or agent of Grantee whose employment was in part financed using Grant funds is suspended or excluded from participation in any state or federal health care program, including Medi-Cal or Medicare.

9. Term and Termination.

- a. This Agreement, including Exhibit 1, shall be effective on the Grant Effective Date. This Agreement shall remain in effect so long as the Statement of Services in Exhibit

1 is in effect, and in any event shall terminate no earlier than one year after the date of the last payment made to Grantee or on Grantee's behalf under this Agreement.

- b. This Agreement may only be rescinded, modified or amended by mutual agreement in writing.
- c. The Alliance may terminate this Agreement if Grantee (i) fails to return the partially executed Agreement within 60 calendar days of the Alliance Board's grant award decision date, or such later date as the parties may mutually agree upon in writing; (ii) fails to comply with the terms of this Agreement; (iii) terminates its agreement to participate in the Alliance provider network or Medi-Cal program for any reason, including without cause; or (iv) ceases accepting new Medi-Cal patients prior to reaching assigned capacity or otherwise materially curtails its operations as a provider.
- d. The Alliance may terminate this Agreement or cease providing payments hereunder in the event that the Alliance determines in its sole discretion (i) that further payments as set forth in the Agreement and/or Exhibit 1 could violate laws or regulations, including laws or regulations in existence on the Effective Date that may have been clarified or subject to new or changed interpretation, or (ii) in the event of a natural disaster or other event that causes the Alliance to be unable to fulfill its commitment hereunder.
- e. This Agreement and the Alliance's obligation to make further payment hereunder shall terminate immediately in the event that Grantee ceases operations or in the event of Grantee's insolvency, which insolvency shall be considered to have occurred when Grantee makes an assignment for the benefit of creditors, files a petition in bankruptcy, is adjudicated insolvent or bankrupt, if a receiver or trustee is appointed with respect to a substantial part of such other party's property, or a proceeding is commenced against it which will substantially impair Grantee's ability to carry out the Statement of Services in Exhibit 1. The Alliance reserves the maximum rights it is entitled to under any law and under the terms of this Agreement to seek return of any payments already made prior to Grantee's cessation of operations or insolvency, and to ensure that no funds provided pursuant to this Agreement, no matter when they were provided, shall be used for the purpose of paying Grantee's general creditors or for any purpose other than as specifically set forth in Exhibit 1.

10. Effect of Termination. In the event of termination, this Agreement and Exhibit 1 shall terminate and have no further force or effect with respect to either party as of the effective date of termination established in writing, except that all obligations arising or accruing prior to termination, including use or return of Grant funds, shall be performed in accordance with the terms of the Agreement in effect as of the date such obligations arose or accrued and shall survive termination. The provision of sections 6, 7, 11, 12 and 13 of this Agreement shall remain in effect for any occurrences arising out of performance of the Agreement prior to termination.

11. Remedies.

- a. Grantee shall return to the Alliance any Grant funds that Grantee cannot document that it has used to carry out the scope of services provided for in Exhibit 1.
- b. In the event Grantee fails to complete the full scope of services that are to be carried out over the course of time as contemplated in Exhibit 1, Grantee may be required to return any Grant funds that it has already received under this Agreement, even if such funds were properly used. Grantee's specific obligation to return funds is provided for in Exhibit 1.
- c. In addition to any other provision of this Agreement, if the Alliance determines, at its sole discretion, that Grantee has substantially violated or failed to carry out any provision of this Agreement, including but not limited failure to provide documentation provided for in section 5 hereof, the Alliance may, in addition to any other legal remedies it may have, refuse to make any further grant payments to Grantee or on Grantee's behalf under this or any other grant agreement, and may demand the return of all or part of the grant funds previously received by Grantee or on Grantee's behalf, which Grantee shall immediately pay to the Alliance. The Alliance may also avail itself of any other remedies available under the law.

12. Compliance with Services Agreement. If Grantee is a party to services agreement with the Alliance, Grantee shall comply with all of the requirements in such agreement, including any nondiscrimination provisions.

13. Indemnification. Each Party ("Indemnifying Party"), at its own expense, agrees to defend, indemnify and hold harmless the other Party ("Indemnified Party") and any of Indemnified Party's affiliates, subsidiaries, directors, officers, employees, representatives, and agents from and against any and all liabilities, losses, costs, expenses (including, without limitation, attorneys' fees), damages, claims, suits, and/or demands (including, without limitation, those based on the injury to or death of any person or damage to property), directly or indirectly arising out of, or resulting from, (i) any act or omission of Indemnifying Party related to any of its obligations performed hereunder, (ii) any breach of Indemnifying Party's representations or warranties set forth in this Agreement, and/or (iii) any actual or alleged infringement, misappropriation, or other violation of any third party rights or any laws or regulations relating to Indemnifying Party's performance of its obligations under this Agreement.

14. Independent Contractors. The parties hereto are independent contractors and neither the Alliance nor Grantee is an agent or employee of the other.

15. Severability. Except as provided in section 9.d, if any provision of this Agreement or the application thereof is held invalid, that invalidity shall not affect other provisions or applications of the Agreement which can be given effect without the invalid provision or application, and to this end the provisions of this Agreement are severable.

16. Waiver. No terms or provision hereof will be considered waived by either party, and no breach excused by either party, unless such waiver or consent is in writing and signed on behalf of the party against whom the waiver is asserted. No consent by either party to, or waiver of, a

breach by either party, whether expressed or implied will constitute consent to, waiver of, or excuse of any other, different, or subsequent breach by either party.

17. Assignment. This Agreement shall not be assigned by the Grantee either in whole or in part.

18. This Agreement shall supersede any prior oral or written understandings or communications between the parties and constitutes the entire agreement of the parties with respect to the subject matter hereof. This Agreement may not be amended or modified, except in writing signed by both parties.

19. This Agreement may be executed in separate counterparts, each of which shall be deemed to be an original, and all of which taken together constitute one and the same instrument. Telecopied or scanned signatures will be deemed to have the same effect as an original.

For the Grantee:

Signature: Phil Kramer

Name: Phil Kramer

Title: Executive Director

Date: 06/04/2021

For Central California Alliance for Health:

Signature: 

Name: Stephanie Sonnenshine

Title: CEO

Date: 06/07/2021

**EXHIBIT 1**  
**CAPITAL PROGRAM IMPLEMENTATION GRANT STATEMENT OF SERVICES**

This Exhibit 1 sets forth the additional terms and conditions that are applicable to Grantees receiving a Capital Program Implementation Grant (Grant) from the Alliance.

**Award Date:** April 28, 2021

**Grant #:** 0121-HM-CI

**Grantee Name:** Housing Matters

**Grant Amount:** The Grant Amount shall not exceed **\$2,500,000**.  
*Final grant payments will depend on verification of actual expenses but will not exceed 75% of total actual expenses up to the approved amount.*

**Grant Effective Date:** This Grant shall be effective on the Grant Effective Date (date of the last signature on Agreement) and shall expire 39 months after Grant Effective Date, or such later date as the parties may mutually agree upon in writing.

**Grant Term:** 39 months

**Purpose of Grant:** To support the 180 Permanent Supportive Project (new construction) as described in the approved Grant Application, that is or will be located at 119 Coral St., Santa Cruz, CA 95060, to provide services to Medi-Cal members currently experiencing homelessness with chronic medical and behavioral health conditions.

**Outcomes:**

1. By February 2023, Housing Matters will establish with the Alliance a process for prioritizing Alliance members for placement according to the Alliance's high utilizer criteria and Housing Matter's existing coordinated entry system.
2. By July 2023, Housing Matters will complete construction on 120 units of permanent supportive housing and obtain certificate of occupancy for 180 Permanent Supportive Housing Project (Project) at 119 Coral Street in Santa Cruz, CA.
3. By September 2023, all permanent supportive housing units will be fully occupied, with 90% of residents being Medi-Cal members (Alliance Eligible Residents).
4. By September 2023, Housing Matters will ensure that on-site case management services are available/provided and individual services plans are developed for all Alliance Eligible Residents receiving case management services.
5. By September 2024, Housing Matters shall use best efforts to achieve goal of 80% of the original Alliance Eligible Residents placed remain housed at the Project.

**Capital Implementation Grant Terms and Conditions**

1. **Duration.** Grantee shall have a period of 39 months from the Grant Effective Date to complete all activities that were submitted for funding in its Grant Application, which

were approved by the Alliance for funding in its Grant Award, and all required reporting.

2. **Payment Schedule.** Payments shall be made to Grantee by the Alliance according to the schedule provided below, subject to the receipt of all documentation reasonably required by the Alliance, and all other terms of the Agreement:
  - a. First Payment. The first payment shall be based on costs for the major milestones described in the approved Grant Application and designated in the final project budget (Milestones), and outlined below. The first payment shall be paid within twenty (20) business days of Housing Matters notifying the Alliance no later than October 1, 2021 that all other financing for the project has been secured.
  - b. Interim Payments. There shall be two additional interim payments based on costs for the Milestones outlined below. These payments shall be paid within twenty (20) business days of receipt of a progress report (narrative and original project budget versus actual expenses) and verification of project expenses incurred since the previous payment. Progress report should include documentation (e.g., project management report, inspection report, permit) demonstrating that specified milestones have been completed.
  - c. Final Payment. Final payment of 10% of the Grant Award shall be paid within twenty (20) business days of the receipt by the Alliance of a progress report indicating that all Milestones of the project have been completed. The progress report will include a narrative, original project budget versus actual expenses, and verification of project expenses incurred since the previous payment. Progress report should include documentation demonstrating that the project is complete (e.g. certificate of occupancy).
  - d. Milestones and Percentage Payments.
    - Phase One:
      1. Obtain building permits.
      2. Obtain general contractor bids.
      3. Complete construction budget.Due Date: 12/31/21  
Payment Percentage: 10%
    - Phase Two:
      1. Begin construction.
      2. Sign general contractor contract.
      3. Sign modular factory construction contract.Due Date: 05/31/22  
Payment Percentage: 80%
    - Phase Three:
      1. Complete all construction.
      2. Obtain certificate of occupancy.

Due Date: 06/30/23

Payment Percentage: 0%

3. **Project Timing.** In order to maintain continued eligibility for the award of funds hereunder, Grantee must meet the following project milestones:
- a. Construction Start Date. In order to maintain eligibility for the interim payments provided for in Section 2 hereof, Grantee must begin construction of the project within nine (9) months of the Grant Effective Date (“Construction Start Date”).
  - b. Project Completion Date. In order to maintain eligibility for the award of the final payment provided for in Section 2 hereof, Grantee must complete construction no later than 18 months after the Construction Start Date (“Project Completion Date”).
  - c. Documentation. Grantee shall provide the Alliance with notice in the form requested by the Alliance of the Construction Start Date and the Project Completion Date, and provide the Alliance with such further documentation as it may request to verify that Grantee has actually begun and/or completed the project as required under this section. Failure to provide requested documentation shall be cause for the Alliance to withhold any portion of the Grant Amount otherwise payable under the Agreement.
  - d. Discretion of Alliance. If Grantee fails to meet the required Construction Start Date, or the required Project Completion Date, the Alliance shall have the discretion to withhold interim or final payments hereunder, as the case may be, and may, at its sole discretion, change or adjust any of the deadlines provided for herein, including requiring such additional documentation or changes as it shall determine to be reasonable and necessary for the completion of the project under an alternative schedule.
4. **Use of Funds.**
- a. Grant funds may only be used for the purpose of paying expenses that are actually incurred by Grantee in carrying out the Statement of Services during the 39-month period for which the grant has been provided. Expenses that may be funded by Capital Implementation Grants are those described in the final approved project budget.
  - b. Funds may be used for capital expenditures only, which can include equipment and furnishings that are necessary for the delivery of care or equipment essential to the operation of the facility. However, funds cannot be used for the following purposes, and any amounts budgeted for such unapproved uses will be deducted from payment amounts awarded hereunder:
    - i. Funds cannot be used for rental subsidies, operating costs or services.

- ii. In the event that the grant award provides funding for a project that was already in progress on the Grant Effective Date, activities completed or costs incurred prior to approval of the grant request by the Alliance will not be considered.
- iii. All project-related costs are site-specific, and must relate to, occur, or be used at the single proposed site that was contained in the Grant Application.

5. **Other Capital Implementation Terms and Conditions.** Grantee agrees that its receipt of funds is conditioned on meeting the requirements of this section 5, to the extent that such requirements are applicable to the type of grant it has been awarded, and that if these requirements are not met, the Alliance may withhold payment hereunder, and may at its discretion exercise any legal or equitable rights it may have for the return of Grant funds received hereunder. Grantee shall also provide the Alliance with such documentation as Alliance may request that demonstrates to the satisfaction of the Alliance that Grantee has satisfied and will satisfy the requirements set forth in this Section 5, at any time during the course of the duration of the Agreement.

- a. Legal Status. Grantee represents that it is a 501(c)(3) nonprofit or governmental entity that provides services to a significant volume of Medi-Cal members in the Alliance service area.
- b. Additional Financial Commitments. Grantee represents that the Grant Amount received hereunder represents no more than 75% of total project costs, and that Grantee has already secured the remaining 25% of funding necessary to complete the implementation of the site-specific project for which the Grant has been awarded, from sources other than the Alliance, which sources can include as donations, in-kind products and/or services, cash or documented loans or lines of credit, and/or other state, local or grant funding.
- c. Proof of Ownership, Lease Agreement or Intent to Purchase. Grantee has secured long-term rights to use the site-specific facility for which the grant was awarded, by one of the following means:
  - i. Grantee has furnished proof of its legal ownership of the facility to the Alliance; or
  - ii. Grantee has secured long-term lease agreement for the facility, and provided a copy of the lease to the Alliance; or
  - iii. Grantee has proposed funding for the acquisition of a facility and provided letter of intent to purchase with Grant Application.
- d. On-Site Services for Transitional/Permanent Supportive Housing. If Grantee has received a Capital Implementation Grant for transitional or permanent supportive housing projects, Grantee represents that medical and/or social supportive services as described in approved Grant Application will be available to medically fragile Medi-Cal residents with complex needs at the proposed site and be funded by sources other than Alliance grant programs. Grantee shall work with the Alliance

to select medically fragile Medi-Cal members for placement in Grant-funded supportive housing.

- e. Useful Life. Grantee represents that, upon completion of the project, the facility will serve Medi-Cal members as set forth in the approved Grant Application for a period of not less than 10 years. If the facility ceases to service Medi-Cal members prior to the end of this 10 year period according to the approved Grant Application and the terms and conditions provided for herein, Grantee shall provide the Alliance with at least 90 days advance notice prior to the date upon which the facility ceases. In the event that the Grantee ceases using the facility to serve Medi-Cal members, Grantee shall pay to the Alliance a prorated amount of the Grant Amount, as follows:
- i. Less than Three Years. If Grantee uses the facility to serve Medi-Cal members for less than three years after receipt of the final payment, Grantee shall pay the Alliance an amount equal to 80% of the Grant Amount.
  - ii. Less than Five Years. If Grantee uses the facility to serve Medi-Cal members for three or more but less than five years after receipt of the final payment, Grantee shall pay the Alliance an amount equal to 50% of the Grant Amount.
  - iii. Less than Seven Years. If Grantee uses the facility to serve Medi-Cal members for five or more but less than seven years after receipt of the final payment, Grantee shall pay the Alliance an amount equal to 20% of the Grant Amount.
  - iv. Less than Ten Years. Grantee uses the facility to serve Medi-Cal members for seven or more but less than 10 years after receipt of the final payment, Grantee shall pay the Alliance an amount equal to 10% of the Grant Amount.
  - v. Waiver of Repayment Obligation. The Alliance may waive all or some of Grantee's repayment obligation if the Alliance determines in its sole discretion that Grantee's failure to continue using the facility for the benefit of Medi-Cal members is attributable to circumstances that are beyond Grantee's control.
  - vi. Serving Medi-Cal Members at a Different Facility. The Alliance may waive Grantee's repayment obligation if Grantee ceases to occupy the facility but continues to serve Medi-Cal members without interruption at a different facility that is at least as large as the facility for which Grantee has received a Grant hereunder, and that is within the service area of the Alliance.
  - vii. Operation of Facility by Third Party. If Grantee sells the facility or leases or subleases the facility to a third party, or enters into any transaction through which Grantee no longer owns or leases or has responsibility for the operation of the facility as provided under section 5(c), Grantee shall pay to the Alliance the prorated amounts set forth in section 5(e) unless such third party is deemed by the Alliance, exercising its sole discretion, to be qualified to, and agrees in

writing to, continue serving Medi-Cal Members under the same terms and conditions that Grantee has agreed to as set forth herein and in the Grant Application. Grantee shall provide the Alliance with at least 90 days advance notice of a transaction described herein.

6. **Reporting.** Grantee shall provide the Alliance with three progress reports due upon completion of each Milestone phase as indicated in Payment Schedule (Section 2 above). Grantee shall also provide a final report due one year from project completion or no later than the end of the Grant Term. The reporting templates will be provided by the Alliance and available on the online grant portal. Grantee will submit the progress and final reports through the Alliance's online grant portal. Failure to submit these report(s) will delay interim or final payments of Grant Amount and may disqualify Grantee from receiving future grant funding from the Alliance.
7. **Evaluation and Monitoring.** The Alliance may monitor and conduct evaluation of operations under this Grant. This may include a visit from Alliance staff to observe the Grantee's operations related to Grant, discuss the Program with the Grantee's personnel, and review financial or other records and materials connected with the activities financed by this Grant.
8. **Compliance with Other Obligations.** Grantee shall comply with laws and regulations and any regulatory agreements, commitments or undertakings that are imposed on Grantee as a result of its receipt of funding from other sources pursuant to section 5(b) hereof.



2160 41st Avenue | Capitola, California 95010 | Tel: 831.454.9455 | Fax: 831.469.3712 | www.hacosantacruz.org  
Also serving Hollister and San Juan Bautista | Tel: 831.637.0487

October 13, 2022

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

Letter of Commitment Regarding:

1. Pairing Stability Vouchers with CoC-Funded Supportive Services, and
2. Working with the CoC and Other Stakeholders to Develop a Prioritization Plan for Stability Vouchers and Preferences for the HCV Program Through Coordinated Entry

To Whom it May Concern:

The Housing Authority of the County of Santa Cruz (HACSC) hereby commits to working with the Santa Cruz County Continuum of Care (CoC) to pair Stability Vouchers with CoC-funded supportive services. HACSC has applied for, and looking forward to receiving, Stability Vouchers. The purpose of pairing these vouchers with CoC-funded supportive services will be to ensure that highly vulnerable voucher holders with histories of unsheltered homelessness and severe service needs will in fact receive the supportive services they need to obtain and remain permanently housed. It will also support the CoC's Plan for Serving Individuals and Families Experiencing Homelessness With Severe Service Needs. Pairing of Stability Vouchers with CoC-funded supportive services will be assured by requiring a service provider agreement to provide supportive services to the voucher holder.

In addition, HACSC hereby commits to working with the CoC and other stakeholders to develop a prioritization plan for the Stability Vouchers to be carried out through the Coordinated Entry System, known locally as Smart Path to Housing and Health (Smart Path CES). The purpose of the prioritization plan will be to target Stability Vouchers to vulnerable persons experiencing homelessness with histories of unsheltered homelessness and severe service needs, including persons fleeing domestic violence or abuse. This will be assured by requiring evidence that individuals and families referred for Stability Vouchers were prioritized using Smart Path CES.

HACSC already has a prioritization plan, developed with the CoC, relating to a limited HCV waiting list preference for disabled, medically vulnerable persons experiencing homelessness (DMV Vouchers). This limited preference serves 150 individuals or families all of whom have severe service needs and histories of chronic homelessness, were prioritized through Smart Path CES, and have a case management plan with a Santa Cruz County services provider. HACSC commits to continued collaboration with the CoC and other stakeholders regarding prioritization for DMV Vouchers.

Sincerely,

Jenny Panetta  
Executive Director

Cc: Robert Ratner, Housing for Health Director (CoC Lead)

## **Comprehensive Santa Cruz County CoC Plan to Serve Individuals and Families Experiencing Homelessness With Severe Service Needs**

### **P-1. Leveraging Housing Resources.**

The Watsonville/Santa Cruz City & County Continuum of Care (CoC) – CA-508, known as the Housing for Health Partnership, maintains a core commitment to increasing the number of permanent, safe, healthy, and affordable housing opportunities available to individuals and families experiencing homelessness. According to the National Low Income Housing Coalition “Out of Reach 2022” report, Santa Cruz County is the second most expensive rental market in the country and the most expensive based on the incomes of average renters. The current CoC work plan, Housing for a Healthy Santa Cruz County, was adopted by the County and the four cities in the region and identifies housing affordability and development as one of its core goals. Our CoC actively partners with a local nonprofit organization, Housing Santa Cruz County, to promote the benefits of affordable housing and to advocate for local, state, and federal policy changes that expand housing affordability.

The Housing for Health Partnership (CoC) is staffed by county employees in the County Human Services Department Housing for Health Division. The Division was created in November 2020 and has engaged in a range of initiatives to expand affordable housing as part of its CoC and County government roles. Since the creation of the Division, the County has invested local dollars to create two new full-time, high level management positions, dedicated to expanding housing and affordable housing development throughout the County. The County Behavioral Health Department has secured more than \$27.6M of California No Place Like Home funding to support the creation of 352 more affordable housing units with 169 of these units dedicated as permanent supportive housing for individuals with disabilities and histories of homelessness. The County Housing for Health Division has secured over \$17M in California Project Homekey funding to date to develop 55 new units of permanent supportive housing for veterans, families, and youth experiencing homelessness in unincorporated areas of the County. In addition to funding secured for these specific projects, the County Health and Human Services Departments secured over \$4.6M in one-time state health and human services funding to invest in supportive housing projects over the next year.

Our Unsheltered Homelessness Notice of Funding Opportunity (NOFO) proposal requests project-based rental assistance for 13 studio units at Harvey West Studios, a proposed 120-unit permanent supportive housing project on a health and human services campus within the City of Santa Cruz. The campus includes the Homeless Persons Health Project (HPHP), a federally qualified health care for the homeless program, and a satellite dental clinic operated by Los Dientes. The local Medi-Cal managed care plan, the Central California Alliance for Health, has invested one-time and ongoing funding to support the development of the project and ongoing health and housing services.

The project has secured over \$26M in state funding and over \$9M in private contributions to cover capital and operating costs. The Housing Authority of Santa Cruz County has committed a mix of at least 60 project-based subsidies for the overall project. An additional state funding award is anticipated for late 2022 with anticipated project completion and occupancy in 2024. An award of Special Notice funding will enable the project to set-aside 13 units for unsheltered individuals with significant health care needs and barriers to securing and maintaining housing.

**P-1a. Development of New Units and Creation of Housing Opportunities – Leveraging Housing.**  
*See separate Leveraging Housing Commitment.*

**P-1b. Development of New Units and Creation of Housing Opportunities – PHA Commitment.**  
*See separate PHA Commitment.*

**P-1c. Landlord Recruitment.**

The Watsonville/Santa Cruz City & County Continuum of Care (CoC) – CA-508, known as the Housing for Health Partnership, maintains a strong working relationship and several formal agreements with the Housing Authority of the County of Santa Cruz. Together these entities collaborate to maximize the use of over 1,100 permanent housing subsidies for households at-risk of or currently experiencing homelessness including VASH, Emergency Housing Vouchers, Mainstream, Family Unification Program (FUP), and limited preference Housing Choice Vouchers. Landlord recruitment and retention are critical for the successful utilization of these tenant-based subsidy resources. Using State and federal funding, these efforts have been continually expanded and strengthened in the past three years based on the following new practices implemented and the lessons learned in the process.

The current landlord recruitment strategy involves a county-contract with a primary nonprofit service provider that acts as a “Real Estate Partner” for property agents with units for rent in the community. The centralization of property agent/landlord recruitment is a new strategy for the CoC launched nearly two years ago. This single agency serves as the “case manager” for property owners and managers looking for support in conducting business with the Housing Authority and with a mix of supportive service providers. This organization operates a 24-hour, 7day per week hotline for property agents to contact with support needs related to lease-up, ongoing tenancy, and tenancy termination issues, if necessary. This team includes supervision and support from licensed real estate professionals. The organization can pay for short-term unit holds to allow for pairing of subsidies and tenants with specific units.

In addition to this centralized real estate partner role, the Housing Authority and County have established a series of financial incentives for participating landlords. HUD Emergency Housing Voucher (EHV) funding has been used to provide \$2,000 initial lease-up incentives for landlords participating in this program. Given the local success of leasing up EHV units, the incentive program is being expanded to all tenant-based vouchers targeting individuals at-risk of or experiencing homelessness within the County. The County of Santa Cruz is utilizing local and state funding to provide the Housing Authority with the additional resources necessary to expand this \$2,000 incentive. In addition to the \$2,000 incentive, the Housing Authority maintains a risk mitigation fund with contributions from local government agencies providing up to \$5,000 of funding if a landlord participating in a Housing Authority program has expenses related to lease terminations and unit damages. Funds set aside for risk mitigation have never been fully utilized but the availability of the resource has increased landlord participation.

The third key component of our landlord recruitment strategy is the pairing of vouchers and voucher holders with specific housing navigation teams that assist clients through the process of applying for and securing a housing subsidy, finding a unit, moving in, and living in housing with a voucher. Over the

past two years, the CoC has established three dedicated teams serving this function in addition to teams affiliated with the VA. A fourth team is being added this year. These housing navigation and tenancy sustaining services teams have low staff to client ratios and the resources needed to conduct intensive field-based work throughout the County.

Complementing the three pillars of centralized landlord recruitment, incentives, and dedicated housing navigation services are coordinated marketing and outreach efforts to property agents. Landlord recruitment partners within the CoC have advertised in local media outlets, conducted outreach and education events directed at property agents, and recognized the efforts of local property owners and agents in helping to address homelessness. Property agent educational and consulting events and recognition ceremonies are planned for the upcoming calendar year. Local partners have also had success in securing housing units within affordable housing low-income housing tax credit properties typically unaffordable to households experiencing homelessness.

Combined these efforts have resulted in one of the highest lease-up percentages for EHV's in California with nearly all the over 200 lease-ups representing units secured within the last 18 months. The tools have resulted in a broader geographic spread of subsidized units due to the flexibility associated with EHV's. With the resources above, EHV and other homeless targeted vouchers have been used in every jurisdiction within the County as well as in neighboring counties of Monterey and Santa Clara. Our Housing Authority partnering is conducting more detailed analyses on the geographic distribution of vouchers based on a mix of characteristics, including, but not limited to, voucher type, household size, race and ethnicity, and target population. The analysis will be shared with the CoC as part of our ongoing collaboration. Area for continued growth and improvement include reinforcing and supporting the distinct roles of housing navigators versus centralized real estate partner staff, expanding the landlord incentive program, deepening partnerships with tax credit affordable housing sites, expanding marketing and outreach efforts through educational and acknowledgement events, and increasing the utilization of data to drive decision-making and landlord engagement efforts.

The CoC and Housing Authority are developing collaborative data analysis strategies to map out the locations of secured units in the community and associated variables. The centralized nonprofit real estate partnership program utilizes a Salesforce database to track and manage property agent relationships and leads. The Housing Authority maintains centralized data on all subsidized units and participating households. HMIS data includes information about client needs and services provided.

The Housing Authority currently conducts analyses that include geo-mapping of secured units and breakdowns based on household size and configuration, race and ethnicity, and gender. This analysis will help identify properties that could become more formally recognized as building-specific supportive housing sites with dedicated on-site supportive services. The data will also be used to identify the geographic spread of tenant-based subsidized units and areas where more targeted landlord recruitment efforts may be needed to increase access to specific neighborhoods within the County.

## **P-2. Leveraging Healthcare Resources—New PSH/RRH Project.**

*Upload Health Care Leveraging Commitment.*

### **P-3. Current Strategy to Identify, Shelter, and House Individuals and Families Experiencing Unsheltered Homelessness.**

#### ***P-3.a Current Street Outreach Strategy.***

The Watsonville/Santa Cruz City & County Continuum of Care (CoC) is focused on improving and supporting three distinct forms of outreach to unsheltered homeless persons within the County. These approaches include:

- (1) Emergency and urgent calls for service to address real and perceived imminent health and safety risks for unsheltered individuals and impacted community members.
- (2) Outreach and support to ensure public spaces remain safe for unsheltered individuals and other community members.
- (3) Proactive, geographically based, multi-disciplinary outreach teams that utilize a critical time intervention practice to link unsheltered individuals with ongoing health, housing, and human service resources.

Emergency and urgent call response efforts typically involve law enforcement, fire, or emergency health care personnel as the lead response agency depending on the nature of the requests received. Several law enforcement agencies within the County have implemented Crisis Intervention Training (CIT) for officers and have developed community policing units focused on responding to calls for service related to unsheltered homelessness. The County Behavioral Health Department has established partnerships with local law enforcement agencies to embed licensed clinical staff with officers to respond to behavioral health crisis and consultation calls for service. These collaborative services are available 5-7 days/week in three jurisdictions, the cities of Santa Cruz, Watsonville, and unincorporated areas, within the County. The CoC works with first responder staff to provide updates on available resources and connections for unsheltered individuals and is exploring ways to establish a first responder HMIS connection to help with mapping the locations of encampments throughout the County.

The three largest jurisdictions within the County operate public property management outreach programs, including Watsonville Works and Downtown Streets Team, in partnership with local nonprofit organizations. These programs engage individuals currently experiencing homelessness in efforts to keep public spaces clean and safe for unsheltered individuals and other community members. These programs also provide work experience, educational, and job training opportunities for unsheltered individuals. The County Human Services Department provides matching employment and training funds for these programs that also receive local jurisdictional contributions. The CoC works with these programs to link participants and outreach teams with the local coordinated entry system and process. These programs generally operate Monday – Friday from 8am – 5 pm.

The County Health Services Agency, Human Services Department, and CoC continue working together to establish proactive, geographically based, multi-disciplinary street outreach teams. These teams bring together street medicine providers with the Homeless Persons Health Project (HHP), behavioral health staff, critical time intervention (CTI) case managers, and peers to engage and provide brief, focused follow-up for unsheltered individuals in specific geographic areas of the County. These teams focus on unsheltered individuals with significant health care needs, including co-occurring mental health and substance use disorders, and barriers to obtaining homes without

support. The County Behavioral Health Department secured Substance Abuse and Mental Health Services Administration (SAMHSA) funds to launch new and expanded teams in a project effort known as Healing the Streets. The Behavioral Health Department also continues to utilize SAMHSA PATH funding, City of Santa Cruz funding, and Mental Health Services Act (MHSA) funding to support a nonprofit operated program known as the Encompass Downtown Outreach team. All these teams work to help people experience homelessness in specific regions with housing, outpatient behavioral health and health care services, meaningful social connection and activities, and income, employment, and public benefits.

CTI is an evidenced-based practice that involves working with clients through distinct phases of care and linking them with housing and ongoing supports to increase their likelihood of securing stable homes, health care, community connections, and meaningful activities. Members of the outreach teams practice motivational interviewing, harm reduction, and trauma-informed practices in their work. Team members are diverse, and representative of the communities served with services available in Spanish. Team members work to link participants with culturally relevant resources. Peer roles for individuals with lived experience of homelessness are part of the Healing the Streets model. These multi-disciplinary teams currently cover the cities of Watsonville and Santa Cruz and generally operate Monday – Friday from 8am – 5 pm. The SAMHSA-funded Healing the Streets project involves robust tracking of client outcomes and a system process evaluation focused on improving local outreach coordination efforts and impact.

The CoC has worked with our HMIS vendor, BitFocus, to establish an outreach module for use by outreach teams throughout the County. The outreach module allows for geographic mapping of encampments and locations of unsheltered individuals. The module links this information with other HMIS data. The tool combined with point-in-time count geographic data on unsheltered individuals provides an opportunity for our CoC to better understand the geography of unsheltered homelessness within the County and to track client movement and outcomes over time. The module contains an encampment health and safety assessment that can be used to provide alerts to other outreach staff and to prioritize efforts to address unsheltered homelessness within the County. These data elements can also help identify unsheltered individuals with significant health care needs and barriers to securing homes. In addition to the build out and implementation of the outreach module, our CoC has developed a performance metrics dashboard that can track program performance by project type, agency, and date range. The dashboard tracks data quality, services provided, duration of enrollments, public benefits and income improvements, housing outcomes, and time to secure housing. The dashboard allows for cross agency and project comparisons and the identification of positive outcome practices to share throughout the CoC.

The CoC is currently updating its coordinated entry practices to enhance collaboration among outreach teams and to increase outreach team access to specific resources. This includes providing outreach teams with access to a countywide, centralized, flexible housing problem solving fund that provides one-time financial resources that can help people secure permanent homes. Funds can be used for travel, security deposits and rent, furnishings, application fees, and other short-term housing-related needs. Within the new coordinated entry framework, designated outreach teams will have responsibility for referring and connecting high-need households with specific set-aside shelter bed capacity. The CoC will be sponsoring initial and ongoing monthly trainings and resource sharing meetings for “connectors” that perform defined roles of crisis and housing needs assessments,

housing problem solving, and linkages within the coordinated entry system. Outreach teams will have designated embedded “connector” staff members.

**P-3.b. Current Strategy to Provide Immediate Access to Low-Barrier Shelter and Temporary Housing for Individuals and Families Experiencing Unsheltered Homelessness.**

The local response to the COVID-19 pandemic involved the creation of low-barrier semi-congregate and non-congregate shelter operations for unsheltered individuals. A centralized referral system was created to prioritize access to shelter for individuals over age 65 and those with chronic health conditions that increased their risk for severe COVID-19 disease. Low barrier shelter policies were implemented that allowed unsheltered people to have more private accommodations and to bring pets, partners, and personal belongings into sheltering programs. Shelter capacity more than doubled during the peak of the pandemic sheltering response. A significant number of unsheltered individuals that refused prior shelter offers moved into low-barrier options during the pandemic.

The resources available to operate COVID-19 shelters have declined and the community has returned to temporary housing capacity levels in existence prior to the pandemic. Among the new practices emerging over the past three years from the pandemic includes the development of CoC standards for low-barrier, housing navigation center (service-enriched and housing-focused shelter) operations. The CoC’s operational committee developed the standards to reflect the expectations of operators receiving CoC-linked funding. The CoC has shifted from using limited resources to support seasonal shelter and managed camps to supporting year-round, housing-outcome focused, low-barrier, and service-enriched shelters. The physical layouts of shelters have also changed to support more private accommodations, pets, and storage of personal belongings. CoC supported shelters actively participate in the local coordinated entry system and receive referrals of unsheltered persons through regional outreach teams. Direct referrals of unsheltered individuals via outreach teams represents a shift away from using shelter waiting lists to fill vacant beds.

In another new practice, the CoC actively partners with our local Medi-Cal (Medicaid) managed care plan that provides funding for recuperative care and short-term post-hospitalization housing for unsheltered individuals recuperating from acute health care conditions. Unsheltered individuals with Medi-Cal and acute health care needs can be referred to this health care system supported and financed sheltering program through our Homeless Persons Health Project (HPHP), a Federally Qualified Health Care for the Homeless Program; local emergency departments and hospitals; or skilled nursing facilities. HPHP and one of our low-barrier shelter operators collaborate to support the operations of this shelter program.

In addition to temporary housing programs receiving CoC and health care system funding, the County has temporary housing programs and safe sleeping/camping programs funded by local city jurisdictional and private funds. Referrals to these programs generally occur outside of the coordinated entry system as part of local encampment response efforts or through direct referrals to operators. These programs contain a mix of lower-barrier safe sleeping programs and higher barrier transitional housing. Participants in these programs have opportunities to receive coordinated entry assessments and linkages to CoC-supported services, rapid rehousing, and permanent supportive housing.

The 2022 point-in-time count for our community estimated there were over 1,700 unsheltered individuals on a single night in February. Current temporary housing capacity (shelter and transitional housing) is below 500 beds countywide. The gap between temporary housing capacity and need limits immediate access to temporary housing for unsheltered individuals. To address this issue, the CoC is prioritizing access to shelter for unsheltered individuals and families with high health care needs and barriers to obtaining housing. Referrals come directly from outreach teams contacting unsheltered individuals. Prior to the pandemic, HMIS data indicates a significant portion (more than 55%) of households entering shelter and transitional housing programs were coming from other shelters or couch surfing situations. This percentage has decreased to 39%. Shifting to outreach provider referrals ensures unsheltered individuals with higher needs and barriers receive priority access to limited temporary housing capacity.

### **P-3.c Current Strategy to Provide Immediate Access to Low Barrier Permanent Housing for Individuals and Families Experiencing Unsheltered Homelessness.**

The CoC implements a Housing First approach in matching individuals to CoC-supported rapid rehousing and permanent supportive housing programs. Matches and referrals to available permanent housing programs are based on coordinated entry assessments of vulnerability and barriers to obtaining housing without support. Individuals living without shelter and longer histories of homelessness are more likely to get matched to these resources. Participation in services, complete abstinence from addictive substances, treatment, or enrollment in a temporary housing program are not preconditions for receiving referrals to a permanent housing resource. CoC supported programs focus on hiring diverse staff, inclusive of people with lived experience and individuals with language skills and cultural connections with the clients served within specific programs.

Matching unsheltered individuals to permanent housing requires ongoing efforts to maintain contact with individuals through street outreach, maintenance of updated contact information in HMIS, and helping to support individuals to maintain connections with others through phones, email, mail service, and personal and professional relationships. The maintenance of contact information in HMIS is a new data quality metric for our CoC.

Rapid rehousing and permanent supportive housing programs within the County are now structured to include housing navigation services that can outreach and engage unsheltered individuals in programs. This represents a change in the past three years where individuals often needed to be enrolled in a program and working with a provider prior to getting matched to a permanent housing resource. Once referred to a program, staff have up to three days to begin initiating outreach efforts to referred individuals and five business days to make 3-5 separate outreach and engagement attempts. Updates on the status of referrals must be made within HMIS within two weeks of the initial referral.

Housing navigators have access to a centralized, flexible, one-time housing assistance fund developed over the past three years that can help with one-time expenses related to securing housing. For individuals matched to a tenant-based permanent supportive housing voucher, the Housing Authority and a centralized, countywide nonprofit real estate partnership program provide landlord incentives, housing authority subsidy management support, and rental unit search assistance. The combination of housing navigators that conduct outreach and engagement work, a centralized flexible housing assistance fund, housing unit search and subsidy management support, and landlord incentives have

enhanced our CoCs efforts to help unsheltered households move directly into permanent housing. Our CoC has one of the highest Emergency Housing Voucher (EHV) lease-up rates in California within the context of one of the most expensive rental markets in the United States. According to data from the Housing Authority, lease-up rates for participants in programs using the leveraged landlord search assistance resources are significantly higher than other programs targeting households experiencing homelessness or at-risk of homelessness that have not had access to these resources. The CoC and Housing Authority are expanding these resources to all programs targeting people experiencing or at-risk of homelessness because of the demonstrated success with EHVs.

#### **P-4. Updating the CoC's Strategy to Identify, Shelter, and House Individuals Experiencing Unsheltered Homelessness with Data and Performance.**

Over the past two years our CoC has undergone significant changes including the development and implementation of a three-year framework for addressing homelessness – Housing for a Healthy Santa Cruz, a new governance charter and name (Housing for Health Partnership), a new staff support structure within a County Human Services Department, updated HMIS contracts and management, and a focus on using qualitative and quantitative data to manage system performance. The County Human Services Department has a business analytics unit helping to provide unprecedented support to the CoC related to data and performance management.

The Housing for a Healthy Santa Cruz framework includes specific systemwide HMIS performance metric targets for shelter, transitional housing, rapid rehousing, and permanent supportive housing. The primary metrics are lengths of stay and percentage of exits to permanent housing. The business analytics team has developed monthly dashboards to track progress on the specific metrics. Our HMIS vendor has developed a performance metrics dashboard accessible to all providers that tracks services provided, data quality, income, benefit, and housing outcome metrics.

Our CoC also maintains a system inflow and outflow dashboard that identifies the number of newly homeless and returning households experiencing homelessness in the County. This dashboard breaks out data based on those enrolled in housing programs and non-housing programs to create a picture of sheltered and unsheltered households. In addition to this dashboard, our community maintains population specific actively homeless data sets that identify individuals currently experiencing homeless by subpopulation groups – veterans, youth, families with children, and people with disabilities.

In addition to reports solely using HMIS data, our business analytics team has been able to match HMIS data to other internal Human Services data on public benefits, long-term care, and child welfare involvement. These reports help highlight overlap in populations served by these different systems. A specific dashboard with filters has been developed to explore access to public benefits among homeless individuals enrolled in specific programs. This tool can be used to review access to public benefits among unsheltered people enrolled in outreach and other HMIS programs creating opportunities for quality improvement. In addition to this HMIS and Human Services cross-system data matching, our CoC is partnering with a local Health Information Exchange and Medi-Cal (Medicaid) managed care program to explore ways to conduct population level analytics on the health care needs and utilization of homeless individuals within the community.

Our CoC is initiating the use of new HMIS tools to support our efforts to assist unsheltered households with access to temporary and permanent housing. Within the past year, we built out and launched the use of an HMIS outreach module that allows for geographic mapping of unsheltered individuals and encampments throughout the county. This tool will assist with coordinating outreach efforts and connections with unsheltered individuals. The CoC plans to test the use of this module with law enforcement and emergency responders to include them in this coordination. The Encompass Downtown Outreach program continues to accept referrals and partner with businesses in downtown Santa Cruz to connect with people experiencing homelessness in the area. The outreach module has the potential to help connect people in this area of the County with appropriate resources. The module allows for population and performance outcome analysis and monitoring. We also launched a building and unit inventory module pilot project to track and fill available shelter beds and housing slots within the community more closely. As part of our permanent housing partnership with the Housing Authority, we established a voucher tracking assessment within HMIS to identify and track individuals that have been referred to permanent housing subsidy voucher programs.

In addition to using quantitative data for population level analytics and performance management, our CoC is working to promote the use of HMIS and data system partnerships for enhancing care coordination and communication across providers and systems. For example, a youth rapid rehousing provider was recently able to connect with an unsheltered youth because of notes and contact information contained within HMIS.

Our CoC is also committed to collecting and using qualitative information to improve our collective efforts. Our point-in-time count process includes the collection of survey data from sheltered and unsheltered individuals including questions on support needed to obtain permanent housing, government assistance received, reasons for not receiving government assistance, and the types of services and assistance most frequently used. As part of our local efforts to update our coordinated entry policies and procedures, our CoC conducted focus group meetings to collect input on desired changes to the coordinated entry process.

Our current CoC governance structure includes an operational committee and HMIS user group. Both groups review available system data and make recommendations for improving practices to achieve improved outcomes and data quality. In general, facilitators of these groups focus on identifying high performing efforts and learning and building from practices generating positive outcomes for the community.

Our proposed Harvey West Studios program involves expanding building-based permanent supportive housing capacity for chronically homeless individuals with significant health care needs and barriers to obtaining housing without support. The proposed approach stems from local data showing most permanent supportive housing in the community is tenant-based, scattered site, and dependent on securing units in the private rental market. Our CoC has made significant progress in utilizing tenant-based permanent supportive housing resources over the past few years. However, this type of permanent supportive housing requires more resources per unit than building or site-based permanent supportive housing. Scattered-site permanent supportive housing also takes longer to secure housing units than established site-based projects. Building-based supportive housing also can help create access to permanent housing for individuals that may not be able to secure housing in the private market due to a variety of barriers including, but not limited to, credit, criminal, or legal histories. Our 2022 PIT count

data showed a significant increase in the number of unsheltered individuals with substance use disorders and histories of criminal justice involvement. Local HMIS data also indicates individuals with substance use disorders have some of the highest rates of returns to homelessness among participants in scattered site permanent supportive housing programs. The proposed thirteen units that would be secured through funding from this NOFO would be dedicated to unsheltered chronically homeless households with a preference for those with histories of substance use disorders and criminal justice involvement. Low-barrier shelter resources may be used as a bridge step prior to move-in for some households matched to the proposed permanent supportive housing units. The services and supports available at the proposed site are anticipated to increase the likelihood of long-term housing stability and health for this target population. Our NOFO proposal represents an example of using data to develop new system resources to address documented needs.

#### **P-5. Identify and Prioritize Households Experiencing or with Histories of Unsheltered Homelessness**

Our proposed NOFO project involves project-based rental assistance for 13 building-based permanent supportive housing units on a campus with intensive health and human services available on site. The units will be targeted to unsheltered, chronically homeless individuals with a preference for those with histories of substance use disorders and criminal justice involvement. Individuals will be referred to the site via the CoC's coordinated entry process. The property management team will follow Housing First principles and work to accept tenants regardless of sobriety, participation in services or treatment, history of incarceration, credit, or history of eviction. Applicants for units will need to complete required building-specific documentation including, but not limited to, providing identification documents, income and status verifications, and other tenant application materials.

To be eligible for the proposed units, individuals must be unsheltered at the time of referral and have documentation of their chronic homelessness status. Preference will be given to households with histories of substance use disorders and criminal justice involvement. The CoC's current and planned coordinated entry housing needs assessment tool collects information that will help with this matching process. Newly established local HMIS policies include an expectation that providers update coordinated entry information on specific individuals at least every 90 days to include current living situation, housing needs assessment, and status update information. This change was implemented to ensure more accurate and timely matching of individuals to specific resources.

Linking unsheltered individuals with CoC matched resources requires intentional strategies to help connect individuals to the coordinated entry process and the proposed new units as well as other available permanent housing resources. Our CoC proposes the use of HUD unsheltered NOFO planning grant funding to help train and support "connectors" working with large numbers of unsheltered individuals. This includes ensuring key outreach staff members receive the training and resources necessary to participate in the local coordinated entry process and system. In addition to supporting outreach providers, our proposed effort will focus on expanding coordinated entry "connector" capacity by strategically engaging mainstream system partners that serve large numbers of unsheltered individuals in the County. This includes substance use treatment providers, emergency responders, hospitals and emergency departments, and key law enforcement partners. The County of Santa Cruz recently established an internal Office of the Public Defender. The County Public Defender is a member of our CoC policy board. Most clients served by the public defender are unstably housed or experiencing

unsheltered homelessness. As part of this planning effort, the CoC will work closely with the Office of the Public Defender to link their internal social work team with the coordinated entry process.

Part of the role of “connectors” within the coordinated entry system is to help individuals secure the documentation required to obtain permanent housing. The CoC will provide a checklist, training, and resources to help connectors with supporting individuals to obtain the documentation needed to secure housing generally and permanent supportive housing specifically. Our CoC has a nonprofit service organization that specializes in helping unhoused individuals obtain photo identifications, social security cards, and birth certificates. The organization includes volunteer notaries, and they offer regularly scheduled support sessions in geographically distributed locations throughout the County. They also provide education and training to other providers around the steps needed to secure documents required by most housing providers and employers. The same organization also offers document storage options for individuals concerned about losing their important documents. Our local HMIS implementation allows for the upload and storage of key documents with client permission. The local CoC staff work for the County Human Services Department and with client written permission can request electronic copies of documents that may be stored by the department as part of public benefits applications.

An additional role for “connectors” in the community is to link individuals with needed health and human service resources in addition to housing resources that will include County mental health and SUD services and CalAIM-funded health, enhanced case management, and housing support services. The CoC’s updated coordinated entry housing needs assessment has questions related to health and human resource needs and spaces to document efforts to link people with desired resources. The CoC will be sponsoring regular resource sharing and training opportunities for “connectors” to learn about available community resources and approaches for helping individuals meet health, housing, and human service needs.

At the time of referral to the proposed permanent supportive housing units, prioritized clients may need housing navigation support to transition from unsheltered homelessness into a home. If matched clients do not have this support, CoC staff involved with the coordinated entry matching process will work to link individuals with housing navigation support from on-site building based services staff or via external teams in the community. A CoC supported centralized one-time housing assistance fund is available to help individuals with some move-in related expenses. If matched clients cannot be located or refuse an offer of a resource, this information will be noted in HMIS, and the next prioritized client will be contacted.

#### **P-6. Involving Individuals with Lived Experience of Homelessness in Decision Making– Meaningful Outreach**

The CoCs current governance charter outlines the need for implementation and support of a youth advisory working group and a lived experience advisory work group that provide policy and practice feedback to the CoC’s operational committee and policy board. The prior CoC governing board included a long-term member with lived experience of homelessness. The working groups have specific representation seats and voting privileges on both the CoC operational committee and policy board. The new governance charter was established during the COVID-19 pandemic. The CoC is undergoing a process to re-establish the youth advisory working group and to start a new lived experience working group. As part of the FY 2022 HUD CoC NOFO, the CoC established a small working group of people

with lived experience to provide rating and ranking input on CoC renewal and new applications including the proposed new unsheltered NOFO application for Harvey West Studios, provide advice on the establishment of the formal Lived Experience Working Group, and give input on the CoC's priorities and plans for serving vulnerable individuals and families experiencing homelessness with severe service needs. This group will be identifying outreach efforts, whether direct or through social media, to recruit members for the Lived Experience Working Group.

The CoC is launching additional efforts to expand lived experience involvement in decision making. The County Human Services Department has funded a three-year lived experience leadership development contract with Housing Matters, the proposed nonprofit grant recipient for the Harvey West Studios unsheltered NOFO permanent supportive housing project. The leadership development work includes recruiting and supporting interested individuals to participate in decision-making and policy conversations as well as outreach and educational events.

The CoC has a contract with a participatory-based research firm that supports the implementation of the point-in-time count of persons experiencing homelessness. This firm hires and trains people with lived experience of homelessness to serve as guides for count volunteers. Individuals with lived experience are also recruited and trained to administer standardized community surveys as part of the point in time count. In the upcoming year, the CoC and County will be working to expand their existing contract with the research firm, to hire and train people with lived experience to establish an annual coordinated entry evaluation and reporting process. Many local provider organizations within the CoC actively recruit people with lived experience of homelessness to fill key direct service and other operational positions within their organizations. Some programs have specifically designated peer positions.

Within the past two years, the CoC prioritized access to training and ongoing coaching in strength-based care management practice for housing navigation and tenancy sustaining services programs. A core tenant of this practice is supporting participants to establish and work on personally established goals that build on their personal assets and community resources. The implementation of this practice supports a culture of participant directed decision-making in the development of their goals and support plans. Housing Matters, the Harvey West Studios lead applicant and proposed grant recipient has actively participated in the strength-based practice trainings and coaching process.

**P-6a. Involving Individuals with Lived Experience of Homelessness in Decision Making – Letter of Support from Working Group of Individuals with Lived Experience of Homelessness.**

*See separate Letter of Support.*

**P-7. Supporting Underserved Communities and Supporting Equitable Community Development.**

The CoC has a robust process for identifying underserved populations by analyzing racial and other disparities in provision and outcomes of housing related 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 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 discussed the data at meetings of the CoC

Board and CoC membership, which is representative of the varied races and ethnicities in the county and includes person with lived experience of homelessness.

The CoC's 2022 analysis showed marked disparities among the following underserved subpopulations: Blacks/African Americans and Multiple Races. It also showed increase levels of homelessness among the Hispanic/Latinx population. More specifically, 2022 PIT data found an increase of 65% over 2019 in homelessness among Blacks/Africans and a 25% increase among the Hispanic/Latinx population;; 2021 HMIS data found that of persons served the following had the worst rate of successful PH exits from programs: 13% - Multiple Race and 20% - Blacks/Africans. The analysis also found significant disparities in permanent housing exits for other underserved groups, including those with substance use disorders, HIV/AIDS, and Veterans.

The CoC definition of homelessness excludes individuals "couch surfing" or in overcrowded living situations. However, McKinney-Vento Department of Education data on homelessness considers these categories in their definition of homelessness. The level of Department of Education "homelessness" among K-12 Hispanic/Latinx students represents close to 90% of the "homeless" student population in the County in the 2021-22 school year. CoC resources historically do not intersect with this population because they do not meet the HUD definition of literal homelessness. The 2022 PIT count showing a rise in literal homelessness among the Hispanic/Latinx population likely represents a concerning trend of moving from "at-risk" to "literal" homelessness among this population group. Culturally and geographically centered preventive services are critical to addressing this trend.

PIT count and local HMIS data indicate that white individuals are more likely to meet HUD's chronic homeless definition. There are multiple possible explanations for this trend including limited access to health care for disability documentation among communities of color, stigma and perceptions associated with the word "disability" in particular communities, and economic and wage disparities and discrimination rather than disabling health conditions playing a larger contributor role to rates of homelessness among communities of color. The dedication of resources to "chronic homelessness" may be contributing to disparate access to CoC resources within Santa Cruz County. Expanding CoC resources for those without disabling conditions could help address this racial and ethnic disparity in access.

As for strategy, through the 2022 California Homeless Housing Assistance Prevention (HHAP) Round 3 funding process, the CoC carried out goal setting steps that included preparing a 2018 – 2020 trend analysis of HMIS disaggregated data, pinpointing specific disparities shown, and developing proposed trackable goals for 2021-24 for addressing the disparities. In June 6, 2022, the CoC Board discussed the trend data, the disparities shown, and approved a 3-year action plan for addressing the disparities. Also in June 2022, the County Board of Supervisors approved the 3-year action plan as part of its approval of the HHAP-3 funding application.

Our CoC and providers have taken or are taking steps to address identified disparities:

- Staff of the Housing for Health (H4H) Division (CoC Lead) are participating in one-on-one and group coaching sessions on racial/ethnic disparities as part of a Human Services Department (HSD)-wide commitment.

- CoC staff with the HSD Analytics Division established and monitored a countywide operational objective to ensure Latinx households living in COVID-19 shelters had equal access to permanent supportive housing and other resources.
- HSD, including the H4H Division, is evaluating recruitment, and hiring practices to help ensure workforce diversity.
- H4H has maintained several bilingual positions to address language barriers.
- Many homeless assistance providers have implemented agency-wide equity initiatives that aim to lift the voices of groups impacted by disparities (staff and clients), address cultural sensitivity and language, and increase diversity in leadership positions.
- The CoC is changing its coordinated entry system assessment tool to address established racial and ethnic biases inherent in the VI-SPDAT tool.
- The CoC is developing new emergency shelter standards that address barriers experienced by underserved groups.
- In its 3-year strategic Housing for a Healthy Santa Cruz Framework, the CoC has committed to system planning through an equity and inclusion lens and a periodic equity analysis of coordinated entry data.
- The CoC has specifically outreached to small, non-traditional, organizations representing underserved or marginalized communities by specifically contacting them and encouraging them in CoC and ESG funding solicitations and by offering special one-on-one technical assistance.
- The CoC has begun planning a working group of persons of color to advise on goals and strategies for addressing racial/ethnic disparities under the principle of “nothing for us without us.” A key task will be to identify culturally responsive outreach strategies.
- The CoC is developing new HMIS measures to better track access and outcomes for all program types by demographics and cause, e.g., first time homelessness, permanent housing rates, returns to homelessness, program outreach and enrollment (including for planned navigation centers/low-barrier shelters), and the new centralized flexible housing assistance fund.
- The CoC is including culturally responsive outreach strategies as part of significant new investments in prevention programs and tenancy sustaining services.
- The CoC is working with the County Health Services Agency to understand the 2022 PIT count data indicating a potential rise in the number of people experiencing homelessness and living with HIV/AIDS.
- The CoC is partnering with the Housing Authority to analyze geographic trends in the utilization of housing vouchers by household size and composition including racial and ethnic demographics.