

Before Starting the CoC Application

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

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

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

1. The FY 2022 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2022 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2022 CoC Program Competition on behalf of your CoC.

- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

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

Attachments

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

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

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

1A. Continuum of Care (CoC) Identification

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

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

1A-1. CoC Name and Number: NY-505 - Syracuse, Auburn/Onondaga, Oswego, Cayuga Counties CoC

1A-2. Collaborative Applicant Name: United Way of Central New York

1A-3. CoC Designation: CA

1A-4. HMIS Lead: United Way of Central New York

1B. Coordination and Engagement–Inclusive Structure and Participation

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

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

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

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

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

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

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

(limit 2,500 characters)

1. The CoC holds its Annual Housing & Homeless Coalition Membership Meeting in June of each year. Leading up to that meeting, potential new members are solicited through a variety of methods including in the CoC's Weekly newsletter, communication via listserv, the CoC's website, and social media. The CoC also solicits and accepts new members year-round. The CoC staff also provides presentations about the coalition and extends training opportunities to new or potential members. New partners are also invited to give presentations of their services in CoC meetings.
2. CoC announcements are posted in PDF or DOCX format that include searchable and machine-readable text. In addition, the CoC's data dashboard was designed with a color scheme visible to people with color blindness. The CoC also has partnerships to translate documents to Braille, if requested.
3. The CoC has many member organizations that serve culturally specific communities including Black/African American, Latino, LGBTQ+, and persons with disabilities. The CoC continues to reach out to organizations to extend membership. These efforts have included conducting demographic surveys of the CoC Board to identify gaps in representation of culturally specific communities to ensure that board recruitment and CoC membership are reflective of the communities served in the homelessness system.

1B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.	
	NOFO Section VII.B.1.a.(3)	
	Describe in the field below how your CoC:	
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;	
2.	communicated information during public meetings or other forums your CoC uses to solicit public information; and	
3.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.	

(limit 2,500 characters)

1.The CoC solicits and considers opinions from a broad array of organizations by targeting board recruitment to sectors both directly and indirectly involved in ending and preventing homelessness. This includes but is not limited to board representation from local government, the health sector, private foundations, Lived Experience Boards, fair housing, legal services, public housing authorities and other affordable housing providers. Voting members of the general CoC include housing service providers, victim service providers, and youth service providers. The CoC holds various committees, most of which are open to the public to discuss strategies for ending and preventing homelessness. The CoC also has two Lived Experience boards, one comprised of youth, and one comprised of adults with lived expertise to guide community strategies to end homelessness. The CoC solicits opinions from stakeholders in committees and the Advisory Board in all decision-making, including but not limited to Coordinated Entry policies, HMIS policies, and governance policies. The CoC also routinely surveys members and non-members to solicit feedback.

2.The CoC’s general membership meetings are open to the public and accessible to all who are interested. The CoC has an open listserv to communicate these meetings. The CoC also uses social media to announce meetings and activities. The CoC also sends out a weekly newsletter with meeting times, dates, and updates on efforts to end and prevent homelessness. The CoC opens all policies annually for edits and feedback from the community. This includes an annual gaps and needs survey to solicit feedback from people who have experienced homelessness in the past or are currently experiencing homelessness. The CoC uses a variety of methods to capture stakeholder feedback such as using surveying tools, open discussions, presentations, and online collaboration tools like Mural.

3.The CoC debriefs from all meetings and public forums in the advisory board and general membership meetings. Decisions regarding policies created by the CoC are discussed openly and require vote and approval from CoC member organizations, Lived Experience Boards, and CoC advisory board when changing policies or processes in the homelessness system. Minutes and audio/video recordings are kept on all CoC board meetings and available to the public.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
	NOFO Section VII.B.1.a.(4)	

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

(limit 2,500 characters)

1. On August 10, 2022, the Collaborative Applicant released the notice that it was accepting and considering proposals for new and renewal applications. The notice was posted on the CoC’s website, sent to its listserv, and announced on social media. The CoC staff also hosted two sessions, open to the public, reviewing the RFPs, funding priorities, and review of the ranking and reallocation protocols. The release of the materials communicated that the CoC was accepting proposals from agencies that have previously not been funded. This year, the CoC had five non CoC-funded organizations submit applications.
2. Application instructions, NOFO schedule, and ranking protocols were released alongside the funding opportunity. Agencies applying for new funding were asked to submit narrative RFPs, project budgets, proof of financial stability, and match documentation to the CoC Collaborative Applicant. Renewal applicants were provided with a competition report scoring the agency based on past performance and a short narrative RFP. Responses to all narrative applications were due August 26, 2022. All RFPs were submitted by email to the CoC Collaborative Applicant.
3. As outlined in the publicly posted CoC Ranking and Rating Protocol, new applications are scored by the Performance Evaluation and Selection committee of the CoC. The Committee is made up of CoC Board Members whose agencies are not directly funded by CoC or ESG, including members from the Lived Experience Boards. The Committee confirms that a project application meets all threshold criteria which includes being an eligible project applicant, commitment to using HMIS or a comparable database, using the CoC’s Coordinated Entry system, CoC Membership, commitment to housing first, and proof of agency’s good fiscal management. Projects meeting all threshold requirements are then scored based on narrative responses regarding project design, community need, agency’s capacity, ability to serve intersectional identities, performance measures, and cost effectiveness. The top scoring applications are ranked in the submission to HUD until the funding threshold. Any projects that do not score high enough to be submitted to HUD are notified and provided technical assistance to prepare the organization for submission in the following year’s competition.
4. The CoC posted all funding materials on its website in accessible formats, including written and video/audio postings of the informational funding sessions.

1C. Coordination and Engagement

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

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

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

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

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

(limit 2,500 characters)

1. The CoC and ESG Administrators collaborate on both ESG and ESG-CV funding. The CoC Director and Deputy Director review funding applications in the ESG process. The CoC and ESG Administrators collaborated to design and implement ESG-CV funding including reviewing data, creating a committee to discuss funding priorities, and collaborating on the plan submitted to HUD. CoC Staff and ESG Administrators meet at minimum bi-weekly to review ESG-CV implementation.
2. The CoC HMIS Administrator assists the ESG recipients in evaluating performance of subrecipients using data from the HMIS, including tracking returns to shelter and other system performance measures. The CoC provides ESG recipients with up-to-date data analysis about community needs in order to inform funding decisions based on local data. The CoC also monitors ESG projects during HMIS monitoring and monitors adherence to Coordinated Entry policies and procedures.
3. The CoC provides reports of localized PIT and HIC data to the Consolidated Planning jurisdictions, including analysis of need as well as the raw data.
4. The CoC Director assists in developing and updating the Consolidated Plans for its Consolidated Plan Jurisdictions. The CoC Director provides data on gaps and needs and trends in homelessness to update the plan. The CoC uses meetings and its listserv to assist jurisdictions in gathering information to inform the Consolidated Plan. The CoC also provides written priorities for use in the Consolidated Plans.

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

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

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	No
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	No
5.	Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers.	No
6.	Other. (limit 150 characters)	

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

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

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	No
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

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

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

(limit 2,500 characters)

The CoC has formal partnerships with LEAs in its Runaway and Homeless Youth (RHY) Advisory Committee membership in each of its three counties, designed to provide collaboration and coordination related to ending youth homelessness. CoC members and Staff regularly attend trainings, advocacy meetings and quarterly McKinney-Vento Liaison meetings comprised of liaisons from across the CoC region. These RHY Advisory Committees are attended by school district McKinney-Vento liaisons, educational and workforce development providers, juvenile justice personnel, and homeless services providers. During each RHY Advisory Committee meeting, McKinney-Vento liaisons give updates regarding overall federal and state policies and procedures or provide information regarding changes and events taking place within their own specific school district. Problem solving occurs during Committee meeting as issues such as eligibility and transportation are discussed among the McKinney-Vento liaisons and RHY service providers. The Onondaga County Youth Bureau Coordinator currently acts as Chair of the CoC advisory board. The CoC also works with school district McKinney Vento liaisons in school districts to share data during the Point in Time and Youth Needs Assessment. The RHY Coordinator and members of the various RHY programs also attend annual training events conducted by NYS TEACHS, the McKinney-Vento Advocacy Program contracted by the NYS Department of Education. NYS TEACHS provides CoC staff and RHY staff with in-depth individual assistance when dealing with families seeking to maintain their educational status despite being homeless. RHY staff also provide clients and family members with direct NYS TEACHS contact information so families can also understand and advocate as they so choose.

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

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

(limit 2,500 characters)

All emergency shelters have policies and systems in place to ensure children receive educational services via the McKinney-Vento Act. Family shelters work closely with the school districts to coordinate bussing and enrollment so that students miss the fewest possible days of school while experiencing homelessness. Shelter staff transport students as early as day one to their home school until bussing has been arranged. For families who are placed in emergency hotels, case managers facilitate buses. School districts have three business days to ensure children can attend school while experiencing homelessness. Every CoC funded agency also has a designated staff person to educate families and children about their rights regarding accessing school.

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

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

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

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

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

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

(limit 2,500 characters)

1.The CoC opens CoC wide policies for feedback and changes from organizations and members of the CoC annually. This includes Victim Service Providers from all CoC-covered counties and other organizations providing services to survivors. CoC policies are sent out to members for review in advance. Meetings are held to discuss feedback and proposed changes. Members of the CoC’s Lived Experience Boards are also a part of this process to include their expertise in all policy decisions. Some of the lived experience board members are survivors of domestic violence.

2.The CoC discusses trauma informed care practices with all CoC programs during workgroup meetings. The CoC provides trauma informed care information during Coordinated Entry and assessment training. During CoC monitoring, training logs for CoC project staff are assessed to ensure that staff have been trained in trauma informed practices. The Victim Service Providers are able to provide advocacy services, such as support in court, legal services navigation, and safety planning. VSPs provide these services whether or not someone is being temporarily housed in DV specific emergency shelter. The VSPs also work with CoC organizations to provide trauma informed services.

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

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

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

(limit 2,500 characters)

1.1. Using planning dollars, the CoC provides free semi-annual trainings to community on trauma informed care and best practices in serving survivors of domestic violence. These CoC trainings are open to both member and non-member organizations, especially those working directly with people experiencing homelessness. The CoC has also hosted panels of Victim Service Advocates to do presentations and do question and answer sessions for case managers working in CoC and non-CoC funded programs. All CoC and ESG funded project staff are required to attend a training that addresses best practices. The CoC Collaborative Applicant staff check agency training logs during monitoring to ensure all staff have received the training.

2. The Coordinated Entry System has been developed to ensure anonymity of survivors whereas Victim Service Providers are providing access to Coordinated Entry, ensuring that best practices of serving survivors are used to not re-traumatize survivors during the assessment process. The CoC does not currently have dedicated CE staff, and staff from community agencies serve as assessors for the Coordinated Entry System. Assessors are trained annually on administering assessments and Coordinated Entry policies and procedures, including serving survivors of domestic violence.

1C-5b.	Using De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	

Describe in the field below:

1.	the de-identified aggregate data source(s) your CoC uses for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and
2.	how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.

(limit 2,500 characters)

1.The CoC collects Point in Time and annual aggregate data from comparable databases from the three Victim Service Providers within the CoC to assess the needs related to those experiencing domestic violence, dating violence, sexual assault, and stalking. The data elements collected include gender, race, ethnicity, household composition & type, youth, veteran status, disabling conditions, and all data points needed for participation in the Coordinated Entry process.

2.The CoC uses data from comparable databases, along with the data pulled from HMIS, such as housing, referrals, advocacy, and specialized services used by survivors of domestic violence to assess need. With this data, the CoC is able to assess trends in this population and services needed in order to ensure that specialized needs are addressed for not just those experiencing domestic violence, dating violence, sexual assault and stalking, but for all vulnerable populations. This data is then used by all agencies and organizations within the CoC to help support the allocation of funding for these vulnerable populations.

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

(limit 2,500 characters)

1. All CoC projects are required to provide participants with documentation regarding rights to emergency transfer. Project participants sign off that this documentation is provided, and the signed certification is kept in the client file. The CoC monitors adherence in this requirement in CoC monitoring. The CoC also monitors Permanent Supportive Housing sub-leases and rental agreements to ensure that VAWA protections are outlined. Rapid Rehousing programs are strongly encouraged to work with landlords to include protections in leases. Victim Service Providers also work with survivors in programming to better understand legal rights and protections.

2. Individuals and families request an emergency transfer to the agency providing CoC program assistance. The CoC program staff collect all necessary information and send the transfer to the CoC staff. The individual or family requesting the transfer is immediately prioritized for a new housing placement.

1C-5d.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section VII.B.1.e.	
	Describe in the field below how your CoC ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have access to all of the housing and services available within the CoC's geographic area.	

(limit 2,500 characters)

Survivors of domestic violence, dating violence, sexual assault, or stalking can access all housing and services available by appearing at any homeless assistance agency within the community. Access to emergency shelter is through a single point of access through the local Departments of Social Services. The CoC is in a Right to Shelter state and no prioritization is needed to access shelter services. The CoC has a No Wrong Door policy. Survivors gain access to projects through referral to the Coordinated Entry System. The referrals are de-identified by shelter staff and contain only the minimum information required for proper prioritization. Once a referral is received, the client is placed on the CoC prioritization list using the deidentified number. Participants may not be denied access to the Coordinated Entry process on the basis that the participant is or has been a victim of domestic violence (DV), dating violence, sexual assault or stalking. Survivors have equal access to all available CoC programs and services that fit the client’s needs.

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

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

1.	safety protocols,
2.	planning protocols, and
3.	confidentiality protocols.

(limit 2,500 characters)

1.The CoC has created a separate de-identified Coordinated Entry list for survivors of domestic violence, dating violence, sexual assault, and stalking as a safety protocol. Survivor’s referrals are not completed in HMIS, they are placed in a safe drop box only accessible to assessors and Coordinated Entry staff.

2.Coordinated Entry referrals are de-identified by shelter staff and contain only the minimum information required for proper prioritization when planning. Once a referral is received, the participants placed on the CoC prioritization list using the deidentified number. When a participant is matched to a housing program, the program staff reaches out to shelter providers using the deidentified number to determine if the participant is interested in the program. The participant is only identified once they meet with the housing program staff to maintain safety and confidentiality during the planning process.

3.Programs providing Domestic Violence services may opt out of HMIS participation but must utilize a comparable database to collect HUD required data elements. Participants are free to decide what information they provide during any assessment process. This includes but is not limited to the Entry assessments by shelter or housing providers that are done upon entry, and the assessment to determine program eligibility. Providers are prohibited from denying assessment or services to a participant if the participant refuses to provide certain pieces of information, unless the information is necessary to establish or document program eligibility. Providers are also prohibited from denying services to participants if the participant refuses their data to be shared via HMIS. All CoC and ESG funded programs are required to have and adhere to confidentiality policies. The location of all family violence shelters, and all program participant housing locations are kept confidential.

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

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

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

Describe in the field below:	
1.	whether your CoC updates its CoC-wide anti-discrimination policy, as necessary, based on stakeholder feedback;
2.	how your CoC assisted providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination;

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

(limit 2,500 characters)

1.The CoC opens all policies and procedures, including the CoC-wide anti-discrimination policy annually for comment and edits. The CoC is also a REDI community and has an equity committee that meets monthly. The CoC encourages members from all CoC and ESG agencies to sit on the committee. The CoC has representation from Fair Housing, Volunteer Lawyers Project, and County members on the committee. The committee created a CoC-wide plan to create an equitable system free of discrimination at all levels. The CoC encourages the community to follow the CoC-wide plan.

2.The CoC offers Equal Access training annually and requires all CoC project staff to attend. The CoC also offers a Social Agency training that covers the basics of sexuality and gender, statistics, health disparities, and misconceptions around the LGBTQ+ community, and offers suggestions on best practices or approaches when working with or conversing with the community.

3.During project monitoring CoC staff check that all agencies adhere to their agency's requirements, along with the CoC's requirements for incorporating cultural and linguistic competencies surrounding all special populations; including immigrants, refugees, and other generation populations; youth; individuals with disabilities; and lesbian, gay, bisexual, transgender, queer, or questioning (LGBTQ) persons. CoC staff review agencies' nondiscrimination and equal opportunity policies. The CoC also reviews agency training logs to ensure that all staff received the required HUD Equal Access training along with other nondiscrimination and equity trainings.

4.The CoC sends a written monitoring report that addresses noncompliance with the CoC's anti-discrimination policies. The report includes all recommendations and is sent to the agency's Executive Director. The CoC provides the agency with HUD resources and offers technical assistance to get the project in compliance. The CoC requires a Corrective Action Plan be completed and sent back to the CoC staff for review.

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

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

Enter information in the chart below for the two largest PHAs highlighted in gray on the FY 2021 CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with--if there is only one PHA in your CoC's geographic area, provide information on the one:

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

Auburn Housing Authority	20%	No	No
Syracuse Housing Authority	20%	Yes-HCV	Yes

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs. NOFO Section VII.B.1.g.
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Describe in the field below:

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

(limit 2,500 characters)

1. The CoC maintains two advisory board seats for the two of the largest area PHAs, Auburn Housing Authority and Syracuse Housing Authority, to facilitate better partnerships and strategic planning. The CoC continues to encourage PHAs to adopt homeless preference. Currently, there are homeless preferences in the largest PHA for veterans receiving HUD VASH vouchers and people who are currently fleeing domestic violence. The CoC has a partnership with one of its largest PHAs for the mainstream voucher program to facilitate moving on from PSH. In addition, the CoC partnered with its largest PHAs for the emergency housing voucher program which prioritized literally homeless households using the coordinated entry system as a source of referrals.

2. N/A

1C-7b.	Moving On Strategy with Affordable Housing Providers. Not Scored—For Information Only
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Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:

1.	Multifamily assisted housing owners	Yes
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes
	Other (limit 150 characters)	
5.		

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry. NOFO Section VII.B.1.g.
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In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process?

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

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness. NOFO Section VII.B.1.g.	
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1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	Yes
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	Mainstream Vouchers

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV). NOFO Section VII.B.1.g.	
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	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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1C-7e.1.	List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program. Not Scored–For Information Only	
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	Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
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If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.

PHA
Syracuse Housing ...
NYS Housing Trust...
City of Fulton

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

Name of PHA: Syracuse Housing Authority

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

Name of PHA: NYS Housing Trust Fund Corporation

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

Name of PHA: City of Fulton

1D. Coordination and Engagement Cont'd

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

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

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

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2022 CoC Program Competition.	27
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2022 CoC Program Competition that have adopted the Housing First approach.	27
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2022 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

Describe in the field below:

1.	how your CoC evaluates every recipient—that checks Housing First on their Project Application—to determine if they are actually using a Housing First approach;
2.	the list of factors and performance indicators your CoC uses during its evaluation; and
3.	how your CoC regularly evaluates projects outside of the competition to ensure the projects are using a Housing First approach.

(limit 2,500 characters)

1. The CoC reviews narrative responses and project design to ensure that recipients are designing projects that promote and use a Housing First approach. The CoC requires using the Housing First approach as a threshold requirement during the local competition. The CoC includes the Housing First requirements in the local application to ensure that projects do not have precondition requirements at intake and will not discharge participants due to lack of project or treatment participation. Reviewers scoring local projects are given rubrics that assess, and score based on Housing First commitments. If a project checks Housing First commitment but then does not incorporate the Housing First approach in its narrative responses would be scored low and not moved forward into the priority list for funding.

2. The CoC uses the following factors and performance indicators to ensure a new project is using a Housing First approach: person-centered planning, project implementation including how projects plan to begin housing project participants quickly, housing placement and retention which includes discharging planning, limiting returns to homelessness, and Coordinated Entry commitment.

3. The CoC regularly evaluates outside of the competition to ensure programs are using a Housing First approach through its Coordinated Entry and CoC & ESG project monitoring. The CoC requires that 100% of CoC and ESG programs operate under the Housing First model to prioritize rapid placement and stabilization in permanent housing in the written standards and trains housing providers and CES assessors in Housing First practices. Housing programs are required to have Housing First policies that are reviewed during CoC monitoring visits. All participants who enter the homeless system are placed on the Coordinated Entry list regardless of any preconditions or classifying status. Participants are then matched with an appropriate housing program. The CoC checks that all program participants were taken from the Coordinated Entry list by pulling an annual compliance report. The CoC requires all housing providers to document attempts to contact and reasons for rejection in HMIS. Participants terminated from CoC funded programs that are selected for monitoring charts are reviewed for adherence to a Housing First discharge plan. The CoC staff also monitor client files and case notes for evidence of non-Housing First practices.

1D-3.	Street Outreach—Scope.	
	NOFO Section VII.B.1.j.	
	Describe in the field below:	
	1. your CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;	
	2. whether your CoC's Street Outreach covers 100 percent of the CoC's geographic area;	
	3. how often your CoC conducts street outreach; and	
	4. how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.	

(limit 2,500 characters)

1. The CoC conducts street outreach through mobile vans, food give aways, mental health crisis response teams, and acute medical care. Street outreach teams respond to calls received through 211 reporting people sleeping outside and visiting frequented sites to engage new people sleeping outside. Anyone engaged with street outreach is connected to Coordinated Entry. Outreach is provided even to those refusing housing or services. There is a monthly street outreach committee that includes substance abuse counselors, the Downtown Committee, local police, shelters and street outreach. The CoC is successful in housing people directly from the street into permanent housing. In 2021, People in street outreach projects exited to permanent housing destinations (31% of all exits) nearly as often as they exit to positive temporary destinations (35%).
2. 100% of the geographic area is covered with a strong presence in urban areas.
3. Outreach is conducted 7 days/week and street outreach teams share on call duties during code blue months.
4. Outreach is conducted on a continuous basis even to those who are least likely to receive assistance or who refuse assistance. Street outreach teams provide food, water, hygiene items, medical care and clothing to attempt engagement with people least likely to request assistance. The CoC uses street outreach to build relationships with those experiencing unsheltered homelessness to ultimately move street to shelter or street directly to housing. By forming relationships while outdoors, the CoC has increased the ability to move directly from the street into housing for the shelter resistant. Street outreach distributes housing information materials and use interpreters when needed.

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

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

		Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	Yes
2.	Engaged/educated law enforcement	Yes	Yes
3.	Engaged/educated local business leaders	Yes	Yes
4.	Implemented community wide plans	Yes	Yes
5.	Other:(limit 500 characters)		

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

		2021	2022
	Enter the total number of RRH beds available to serve all populations as reported in the HIC—only enter bed data for projects that have an inventory type of "Current."	486	530

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

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

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

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

Describe in the field below how your CoC:

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

(limit 2,500 characters)

1. Quarterly CoC membership meetings have standing agenda items for updates to available mainstream resources, including updates from all local departments of social services and local governments. Providers, agencies, or other coalitions are welcome to present latest information about programs at these meetings. These meetings have included updates on new substance use resources, expanded SNAP benefits, and changes to access for the Social Security Administration. Each county of the CoC also maintains a county-level committee that meet bi-monthly to update county-specific services and changes to mainstream benefits. These meetings also keep standing agenda items for county and city representatives to give updates.

2. The CoC has started a Health & Housing sub-committee of its Program, Planning, and Advocacy Committee. This committee is comprised of CoC program staff and representatives from healthcare organizations, including substance use and mental health treatment providers. This committee works to identify gaps in program participants receiving healthcare services and creates pathways for better service delivery. The committee has created a list of strategic goals to improve healthcare services. The CoC also uses planning dollars to provide training to front line staff in mental health first aid and harm reduction strategies in an effort to improve staff ability to assist with healthcare navigation.

3. The CoC has hosted a CoC-wide SOAR implementation meeting to improve the community's rate of SOAR applications. This implementation meeting was hosted by the SAMHSA SOAR Technical Assistance Center. The CoC brought together agency leadership as well as county department of health and human services representatives to create a plan to implement SOAR communitywide. CoC Agencies work to have all front-line staff trained in SOAR.

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

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

(limit 2,500 characters)

The CoC has added 115 non-congregate shelter beds since the start of the COVID-19 pandemic. The local departments of social services maintain contracts for non-congregate shelter in each county of the CoC. Additional non-congregate sheltering is funded through local county funding as well as state reimbursement and ESG-CV. FEMA funding was also used to increase non-congregate sheltering in response to COVID-19.

Non-congregate shelter beds were also added in the CoC to accommodate the increase in cases of people fleeing domestic violence.

Case management services are available to all individuals and families in non-congregate shelters. In each county of the CoC, a CoC membership organization is contracted to provide housing case management to non-congregate shelters, including assessment and referral to the Coordinated Entry System.

ID-8.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section VII.B.1.o.	
	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:	
1.	develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and	
2.	prevent infectious disease outbreaks among people experiencing homelessness.	

(limit 2,500 characters)

1.The CoC has created invaluable partnerships with health departments and county governments to improve readiness for future public health emergencies. Each county in the CoC has created plans to respond locally that includes input from CoC staff, stakeholders, and community service providers that follow national guidelines but also respect the unique needs of each community in the CoC. These plans have created a framework to be used for a coordinated response in future public health emergencies. to transport to offsite testing locations. Non-congregate sheltering is used to limit spread.

2.Plans are in place for public health emergencies, including non-congregate sheltering options and how to quickly adapt the homelessness response system to respond safely. This included communication strategies, transportation services, as well as protocols for operating congregate shelters as safely as possible. Many public benefits can be accessed remotely, and the framework now exists for continuing case management services during a public health emergency. Investment has been made to congregate shelters to assist in the preparedness for future health emergencies, like sanitization machines and upgrades to HVAC systems. The CoC has also set forth policies adapting to CoC program staff working from home, including HMIS and Coordinated Entry policies. CoC agencies, including shelters and permanent housing programs, have developed agency policies regarding staff safety, hazard pay, and adapting technology for clients and staff to provide services. Local shelters partnered with their health departments to facilitate testing and receive guidance on best practices, especially in congregate settings. The local federally qualified health department had staff on site at local shelters to assist in the mitigation of COVID-19 spread. Congregate shelters are able to test regularly for COVID-19, Tuberculous, HIV, and other communicable diseases on site or are able transport to locations offsite.

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

(limit 2,500 characters)

1.The CoC used its listserv, weekly newsletter, and various committees to communicate changing safety measures, changing local restrictions, and vaccine implementation. State and local guidance was communicated regularly throughout the pandemic as well as communication of waivers for CoC and ESG programs to continue operations as needed. The CoC worked with local county departments of social services and health departments to keep updated information on local restrictions.

2.The CoC worked with public health agencies, as well as local health providers to ensure providers are equipped to prevent or limit infectious disease outbreaks. These efforts have included creating a framework for pop-up clinics, using HMIS and Health Department data to triage and prioritize people experiencing homelessness for vaccines, and representation of the CoC on the Central New York Regional Healthcare Equity Taskforce- a taskforce made up of public health agencies, local and state governmental representatives, local healthcare providers and advocates working to ensure equity in healthcare provision among the most vulnerable in the community, including people experiencing homelessness.

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

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

(limit 2,500 characters)

1. The Coordinated Entry system covers the entire CoC geographic area which includes Onondaga, Cayuga, and Oswego counties. People entering homelessness for the first time are assessed by shelter or street outreach staff using the appropriate assessment tool within two weeks of entering homelessness which gives time for self-resolution. All CoC and ESG-funded providers use the Coordinated Entry system to fill beds. SSVF, VA’s HCHV, and HOPWA providers also use the Coordinated Entry system. Once referred to Coordinated Entry, households can move to the county of their preference within the CoC.

2. All referrals to the Coordinated Entry system are required to have an assessment completed upon entry by shelter or street outreach staff. The CoC currently utilizes the VI-SPDAT as a standardized tool to assess all incoming clients to ensure that all clients are assessed the same way. The CoC recently analyzed data on the disparity that exists in the VI-SPDAT questions and, along with community partners, created a new standardized assessment tool that will be implemented in October.

3. The CoC-funded agency workgroup meets quarterly to discuss issues or concerns with the Coordinated Entry process, CE data for the past quarter, and policy changes when they are open for feedback and adjustment. The CoC’s Lived Experience Boards provide feedback on the CE system and review proposed Coordinated Entry policy changes. As part of the overseeing CoC board, the representatives from the Lived Experience Boards also vote on the final approval of the CE policies. The CoC has a grievance process where clients currently in the Coordinated Entry system can submit any concerns regarding the system to the Coordinated Entry lead for review and response. Any concerns submitted to the Coordinated Entry lead are taken into consideration when updating the CES policies and procedures.

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

(limit 2,500 characters)

1. Street outreach and shelter providers engage in ongoing outreach to those least likely to apply for housing to offer services on a weekly basis, even to those refusing housing options. The CoC has been successful at building relationships with the hardest to serve and has housed several people experiencing chronic homelessness that previously refused housing assistance.
2. The Coordinated Entry system prioritizes the chronically homeless with the longest length of time homeless and the highest service needs as evidenced by VI-SPDAT score. Housing providers target the highest priority individuals and families to fill beds, ensuring that those most vulnerable are matched with appropriate housing opportunities. The Collaborative Applicant staff monitors the Coordinated Entry system to ensure that people experiencing homelessness are entering housing in a timely manner.
3. The Coordinated Entry assessment requires shelter and street outreach staff that are assessing clients to select the client's housing preferences in addition to screening for eligibility for chronically homeless status. Although the CoC utilizes the VI-SPDAT for assessment, the resulting scores do not determine what housing projects clients can or cannot be referred to. The CoC also has a monthly workgroup to case conference difficult to serve cases, persons refusing housing, persons who have been on the list for longer than 90 days, possible evictions from PH programs, and potential Permanent Supportive Housing transfers. Case conferencing these specific needs aids in keeping clients permanently housed and working towards permanent housing for those that are most vulnerable.
4. The Coordinated Entry system referral process is person-centered and meets clients where they are by coming to them through street outreach or completing the process at the shelter where they are staying. This makes Coordinated Entry accessible and greatly reduces barriers, such as transportation or technology, that many folks within the homeless population face. The burden of documentation collection falls on project staff rather than the client to limit burden.

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

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	04/15/2022

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

Describe in the field below:

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

(limit 2,500 characters)

1. Every three years, the CoC conducts a comprehensive racial disparity report, including statistical analysis of inflow and outflow of the homelessness service system. The report analyzes disparities of HMIS data in overall population, living situations prior to entering homelessness, length of time homeless, exits to permanent housing including exits with and without subsidies, exits to homeless situations, and returns to homelessness within 6 months of exit to permanent housing. The CoC also uses STELLA to disaggregate housing outcomes annually to track progress in limiting disparities.
2. The CoC identified key findings from the racial equity assessment. The first key finding is that upstream causes of homelessness disproportionately affect Black/African American households, specifically that Black/African American households are represented disproportionately in emergency shelter. The report also found that Black/African American households arrive at emergency shelter more often after staying with friends or family and that Black/African American households are more likely to exit to permanent housing with some form of subsidy and are less likely to exit to homelessness. Black/African American and Latinx households have substantially higher rates of returns to permanent housing than white households.

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

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

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	No
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		

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

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

(limit 2,500 characters)

The CoC reported the following recommendations in response to the findings in the report: ensure shelter providers hire staff that are representative of the communities and backgrounds that they serve, incentivize providers to offer peer services across the continuum of homelessness response to supplement case management, formalize the coordinated entry process and continue to improve its quality- work with Rapid Re-housing, Homelessness Prevention, and Permanent Supportive Housing to right-size housing interventions using standardized housing barrier assessments, and advocate for increased compliance to and enforcement of rental registries and housing code compliance in the geographic coverage area.

The CoC is currently assessing its homeless response system to assess staff representation of the homeless population. The CoC is surveying its Advisory Board and member organizations to have a baseline for improvement in the employment and representation of BIPOC in the homelessness response system, especially in leadership positions.

As of Fall 2022, the CoC will no longer be using the VI-SPDAT to assist in curbing disparities in the Coordinated Entry process. The CoC created its own assessment, isolating questions from the VI-SPDAT that had no evidence of racial disparity in the response. The CoC hopes to better right size housing opportunities to combat the disparity in Black/African American and Latinx households returning to homelessness.

The CoC also prioritized homelessness prevention services through ESG-CV to census tracts determined to be most at risk by the Urban Institute, including census tracts that were in the 99th percentile of risk in New York State. This effort was to ensure that services were directed to underserved populations, attempting to reduce the disparity of people of color entering homelessness.

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

Describe in the field below the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

The CoC uses STELLA to track housing outcomes and system flow disaggregated annually. The CoC also uses its three-year Racial Equity report to track progress on preventing and eliminating disparities. The CoC assess the full homeless population as well as sub-populations to assess pathways and outcomes.

The CoC maintains a Racial Equity, Diversity, and Inclusion Committee tasked with tracking progress on preventing and eliminating disparities in the homeless response system. This committee has created a concrete set of goals. The committee tracks progress, sets objectives, and oversees the community’s response to racial disparity. The Committee tracks progress on its overarching goals: building anti-racist organizations, elevating people with lived experience, equity-based assessment, and prioritization, focus on at-risk groups, using data with an equity lens, cross-sector collaboration, and long-term solutions. Each of these areas of practice have action steps, outputs, and outcomes. The long-term solutions outputs include tracking the number of available units of affordable housing, the percentage of people entering the homelessness system that are people of color, the diversity of agency leadership and boards including the CoC’s, and agencies having anti-racist policies and practices that address disparities.

The Committee sets workplans based on this set of goals and presents annually to the CoC Advisory Board on progress alongside the presentation of disaggregated HMIS data.

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

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

(limit 2,500 characters)

The CoC supports and maintains two Lived Experience Boards, the Client Advisory Board and Youth Action Board. Both have been actively involved in decision-making since February 2019. The CoC is always actively recruiting for lived experience individuals as the importance of the diverse viewpoints help the homelessness system meet the needs of the most marginalized populations. Outreach for lived experience individuals is done through referrals from current members, stakeholders, and direct service providers. Social media recruitment has been used in the past, however CoC staff have found that the personal human connection tends to be the most effective with targeted outreach.

The Lived Experience Boards are currently working with local emergency shelters to set up tabling opportunities to recruit new members as well as assist in peer support services.

The CoC places a large emphasis on lived experience board input. The Client Advisory Board and Youth Action Board are presented all procedures and policies for the homelessness system for the CoC prior to any advisory or governance input. The boards are given time and priority for feedback in order to ensure the lived expertise perspectives shape how those who are currently experiencing homelessness are engaged. The CoC recently increased the number of representatives of the Lived Experience Boards on the full CoC Advisory Board. The CoC compensates Lived Experience Board members for meetings attended, work completed outside of meetings, as well as implementing sign-on bonuses for new members and consistency bonuses for sustaining members.

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

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

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

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

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

(limit 2,500 characters)

The Lived Experience Boards of the CoC crafted questions based on lived expertise development and employment opportunities for the local competition applications to assess applicant’s ability to provide employment opportunities and promote people with lived experience in project design. Peer support and a mutual understanding of the lived experiences of all types of homelessness has been slated as one of the most effective ways of engagement. All participating agencies and programs of the CoC are highly encouraged to prioritize those with lived experience in their employment postings. CoC funded agencies are required to maintain policies and procedures of how people with lived experience will be employed and professionally developed.

The CoC provides professional development opportunities to its Lived Experience Boards which has included mock interviews, resume building, and training opportunities. The CoC Collaborative Applicant strongly encourages people with lived experience to apply for open employment positions.

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

Describe in the field below how your CoC:

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

(limit 2,500 characters)

1. The HHC requires all Coc and ESG funded projects to have policies in place describing how they gather feedback from people experiencing homelessness. The policies should include how the feedback obtained is applied to improve program practices and quality of services. Examples of client feedback includes surveys, grievances, and focus group discussions. HHC staff review all program feedback policies along with examples of actual client feedback during bi-annual monitoring visits. During these visits, HHC staff requires program staff to explain their processes and changes that were made to improve services based on client feedback that was received. The feedback that the CoC has received from our lived experience individuals shapes the types of trainings that the CoC offers to its direct service providers.

2. The CoC’s Client Advisory Board meets monthly, and the Youth Action Board meets biweekly to discuss challenges within the system. During these meetings, members of the board review policies and make recommendations for changes. Appointed members of both boards sit on the full CoC Advisory Board and hold voting power to approve changes to the policies. Members are also encouraged to join other CoC community-wide meetings to voice their opinions and concerns about the homelessness system. The CoC has also incorporated questions and requirements within the application process, monitoring process, and the CoC’s strategic plan to end homelessness to address challenges raised by people with lived experience.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section VII.B.1.t.	
	Describe in the field below at least 2 steps your CoC has taken in the past 12 months that engage city, county, or state governments that represent your CoC's geographic area regarding the following:	
	1. reforming zoning and land use policies to permit more housing development; and	
	2. reducing regulatory barriers to housing development.	

(limit 2,500 characters)

1. The CoC Director sits on a committee that works with City officials, including Neighborhood and Business Development officials, Code Enforcement officials, City Law Department, and community legal services organizations to address housing issues, including zoning issues, code enforcement, and various other topics for housing.
2. The CoC has created an affordable housing sub-committee in the past year that will oversee the CoC's advocacy efforts in housing development. This committee is working to frame the CoC's goals for local development. The committee will be working on a report outlining development priorities to be released to the public over the next year.

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

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

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

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

	Enter the date your CoC published the deadline for project applicants to submit their applications to your CoC’s local competition.	08/10/2022
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1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	

You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.
Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:

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

1E-2a.	<p>Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.</p> <p>NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.</p>	
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You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.

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

1.	What were the maximum number of points available for the renewal project form(s)?	100
2.	How many renewal projects did your CoC submit?	22
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	<p>Addressing Severe Barriers in the Local Project Review and Ranking Process.</p> <p>NOFO Section VII.B.2.d.</p>	
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- Describe in the field below:
1. how your CoC collected and analyzed data regarding each project that has successfully housed program participants in permanent housing;
 2. how your CoC analyzed data regarding how long it takes to house people in permanent housing;
 3. how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
 4. considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.

(limit 2,500 characters)

1. For renewal project applications, the CoC uses Annual Performance Reports (APR) to create the 'Competition Report' for the CoC Local Competition. The CoC used APR data to assess whether a project had successfully housed program participants in permanent housing. Using averages of CoC funded agencies permanent housing placement rates from HMIS or from a comparable database for DV projects, projects were scored based on whether they exceeded community averages to receive full points, met community averages to receive partial points, or fell below community averages to receive no points.

2. The CoC used APR data to assess how long it took projects to house people in permanent housing. Using averages of CoC funded agencies housing move-in dates from HMIS or comparable database for DV projects, projects were scored based on whether they exceeded community averages to receive full points, met community averages to receive partial points, or fell below community averages to receive no points.

3. The populations having more severe service needs identified by the CoC were youth, people experiencing chronic homelessness, survivors of domestic violence, and people entering projects with no income. Project data on outcomes, duration of services, and intensity of services were considered to identify these populations that could contribute to lower performance.

4. The CoC awarded points to projects that served people with severe service needs, which included projects serving 75% or more of the following populations- youth, people experiencing chronic homelessness, and people fleeing domestic violence. These points are designed to give consideration that performance may be affected by the severity of needs of the populations served.

1E-3.	Promoting Racial Equity in the Local Competition Review and Ranking Process. NOFO Section VII.B.2.e.	
Describe in the field below:		
1.	how your CoC obtained input and included persons of different races, particularly those over-represented in the local homelessness population;	
2.	how the input from persons of different races, particularly those over-represented in the local homelessness population, affected how your CoC determined the rating factors used to review project applications;	
3.	how your CoC included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process; and	
4.	how your CoC rated and ranked projects based on the degree to which their project has identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	

(limit 2,500 characters)

- 1.The CoC obtained input including those of different races by including those with lived experience, the NOFO workgroup, and the Performance Evaluation and Selection committee in the rating and review process. All boards include BIPOC members.
- 2.The Lived Experience Boards of the CoC which includes people of different races who have experienced homelessness, developed a set of questions for the local application narrative response that made up 25% of the possible points an applicant could receive. These questions included asking applicants to outline how the project would address racial disparities in homelessness and how the applicant would serve intersectional identities.
- 3.People of color are disproportionately represented in the local homelessness population. The CoC has included people of color who have lived experience of homelessness in the review, selection, and ranking process.
- 4.The CoC did not directly use the demographic makeup of program participants to rate and rank projects. However, all projects receiving CoC Funding are required to use the CES for 100% of referrals, which relies on objective criteria to make decisions about project referrals rather than administrator or case manager discretion. This process is assessed for disparities and projects' participation in CES was a factor in determining their rating and ranking.

1E-4.	Reallocation—Reviewing Performance of Existing Projects.	
	NOFO Section VII.B.2.f.	
	Describe in the field below:	
1.	your CoC's reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;	
2.	whether your CoC identified any projects through this process during your local competition this year;	
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and	
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.	

(limit 2,500 characters)

- 1.The CoC has four reasons a project may be a candidate for reallocation: the project has not expended 100% of grant funds for two or more consecutive years, the project is out of compliance has had the same significant finding two or more consecutive years, the project has been in the bottom 10% of CoC ranking due to low performance for two or more consecutive years, as evidenced by the project’s Annual Performance Report, performance measures, and CoC Ranking Process, the project no longer meets community or project is no longer operational. Projects falling into one of the above-mentioned categories are brought to the Performance Evaluation and Selection Committee for discussion and vote. Committee members must have a ¾ majority vote to reallocate a project.
- 2.The CoC identified two projects that met the above-mentioned categories. The two projects were candidates for reallocation due to being in the bottom 10% of projects in both the FY19 and FY21 competition years.
- 3.The CoC reallocated one of the projects that was a candidate for reallocation because of its ongoing low performance. The second project that was a candidate was not selected for reallocation because it was not in the bottom 10% of projects in the FY22 competition and it serves a high-need population.
- 4.N/A

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

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

1.	Did your CoC reject or reduce any project application(s)?	Yes
2.	Did your CoC inform applicants why their projects were rejected or reduced?	Yes
3.	If you selected Yes for element 1 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	08/12/2022

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

	<p>Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.</p>	<p>09/13/2022</p>
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<p>1E-5b.</p>	<p>Local Competition Selection Results—Scores for All Projects.</p>	
	<p>NOFO Section VII.B.2.g.</p>	
	<p>You must upload the Final Project Scores for All Projects attachment to the 4B. Attachments Screen.</p>	

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

	<p>Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website—which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.</p>	
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You must enter a date in question 1E-5c.

<p>1E-5d.</p>	<p>Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.</p>	
	<p>NOFO Section VII.B.2.g.</p>	
	<p>You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.</p>	

	<p>Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application has been posted on the CoC’s website or partner’s website.</p>	
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You must enter a date in question 1E-5d.

2A. Homeless Management Information System (HMIS) Implementation

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

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

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

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

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

	Enter the date your CoC submitted its 2022 HIC data into HDX.	05/26/2022
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2A-4.	Comparable Database for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section VII.B.3.b.	

	In the field below:	
1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in databases that meet HUD’s comparable database requirements; and	
2.	state whether your CoC is compliant with the 2022 HMIS Data Standards.	

(limit 2,500 characters)

1. Prior to the implementation of the CoC funded DV projects, the HMIS and CoC staff met with the DV providers to review the comparable data selected. The CoC staff held several meetings to review the abilities of the database, reporting capabilities, and compliance with the HUD data standards. At the time of project implementation, the EmPowerDB was HUD compliant, and the projects started data entry into the system.

2. EmPowerDB is not currently compliant with the 2022 HMIS Data Standards. The HMIS and CoC Lead have assisted in exploring the costs and benefits in moving to a different comparable database if the current database is unable to come into compliance.

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

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

Project Type	Total Beds 2022 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	589	60	529	100.00%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	139	15	124	100.00%
4. Rapid Re-Housing (RRH) beds	530	76	454	100.00%
5. Permanent Supportive Housing	895	0	895	100.00%
6. Other Permanent Housing (OPH)	430	6	281	66.27%

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

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

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

(limit 2,500 characters)

1. Prior to the 2022 PIT the CoC had 100% HMIS participation in the Other Permanent Housing project type. With the introduction of the Emergency Housing Voucher (EHV) beds it has now moved to a 66% HMIS participation rate for Other Permanent Housing beds. The CoC will work with PHAs to use HMIS to track EHV beds. The CoC will continue to have conversations regarding the benefits of adding this data to HMIS.

2. The CoC covers the cost of HMIS licenses for essential projects which would include PHAs operating EHV's. The HMIS lead will demonstrate the benefits of using HMIS to PHA partners and attempt to assist in the transition to tracking EHV's in HMIS.

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

Did your CoC submit LSA data to HUD in HDX 2.0 by February 15, 2022, 8 p.m. EST?	Yes
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2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

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

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

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

	Enter the date your CoC conducted its 2022 PIT count.	01/26/2022
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section VII.B.4.b	

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

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

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

(limit 2,500 characters)

1. In the 2022 PIT the CoC staff organized and conducted a separate youth PIT count to collect data on youth who are unaccompanied and living in a doubled-up situation, which are known to be a high percentage of youth experiencing homelessness in our CoC. With the help of a variety of stakeholders, such as RHY Coordinators, McKinney Vento Liaisons, the Youth Action Board, and the youth providers within the CoC, the CoC advertised the importance of completing these surveys to collect this data. CoC staff attended local McKinney Vento liaison meetings prior to the PIT date to engage the liaisons in Onondaga, Cayuga and Oswego counties to encourage participation in survey collection. CoC staff attended local RHY Committee meetings and county taskforce meetings to make contacts with school staff and providers that work with schools to educate the importance of collecting this data. Providers who sit on these workgroups include RHY providers, Youth Center staff, DV providers, McKinney Vento liaisons, youth probation, LGBTQ providers, mental health & substance use providers, job readiness providers, and providers who work with victims of sex trafficking.
2. The CoC's Youth Action Board was engaged into the process when the CoC was creating data points to collect for the youth survey and provided feedback that was valuable to the process. There was a questionnaire set to all liaisons across the CoC to submit aggregate data to the PIT count.
3. The CoC partnered with street outreach to do same day and next surveys of youth who may have been unsheltered on the night of the PIT to ensure that youth were captured in the PIT surveying.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section VII.B.5.a and VII.B.7.c.	
	In the field below:	
1.	describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022, if applicable;	
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022, if applicable; and	
3.	describe how the changes affected your CoC's PIT count results; or	
4.	state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2022.	

(limit 2,500 characters)

1. Not Applicable, the CoC made no changes to its 2022 sheltered or unsheltered PIT methodology.

2C. System Performance

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

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

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

(limit 2,500 characters)

1.The CoC’s Program Planning and Advocacy committee, along with the Lived Experienced Boards were consulted to create questions for the CoC’s Annual Gaps and Needs Survey, which collects information about antecedents to homelessness. The Data Administrator Committee approves locally collected data elements to examine upstream causes of homelessness from data collected in HMIS. The CoC used this data to create an assessment for use in ESG-CV homeless prevention projects. The assessment included risk factors identified by both the Gaps and Needs surveys and data reported in HMIS.

2.The CoC has three primary strategies for preventing first-time homelessness:
 A) Early intervention and prevention for people at imminent risk of homelessness: Using ESG Homelessness Prevention funds, legal services are provided to low-income households at eviction court. Input from our Lived Experience Boards has suggested that eviction leads to doubling up with friends or family, which then leads to homelessness if conflict occurs between family members. The CoC also assisted in raising awareness of the Emergency Rental Assistance funds to limit as many people as possible affected by COVID from entering emergency shelter. B) Diversion from shelter: Intake workers at local departments of social services and staff at the 2-1-1 human services referral hotline are trained to connect clients requesting emergency shelter with family and community resources and refer to emergency shelter only when appropriate networks have been exhausted. C) Advocacy for increased affordable housing resources as primary prevention: The CoC continues to advocate for prevention funding and services at all levels of government. The CoC also takes an active role in creating local governments’ Consolidated Plans to increase affordable housing. Even during the COVID-19 pandemic, the CoC saw steady decreases in the number of people experiencing homelessness for the first time (30% decrease in FY2020, and a 7% decrease in FY2021).

3.The CoC’s Program Planning and Advocacy Committee is responsible for overseeing strategies to reduce first-time homelessness.

2C-2.	Length of Time Homeless—CoC’s Strategy to Reduce.	
	NOFO Section VII.B.5.c.	
	In the field below:	
1.	describe your CoC’s strategy to reduce the length of time individuals and persons in families remain homeless;	
2.	describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the length of time individuals and families remain homeless.	

(limit 2,500 characters)

1.The CoC’s primary strategy for reducing the length of time individuals and persons in families remain homeless is to ensure that all emergency shelter residents and street outreach participants are rapidly assessed and referred to housing resources. Clients with the longest lengths of time homeless are prioritized for PSH and RRH programs, but housing case managers in emergency shelters and street outreach programs help clients seek housing resources from a variety of mainstream sources. A second strategy is to reduce barriers to housing programs by providing case management at emergency shelters who provide warm handoffs to housing programs and assist with housing search and placement. Local shelters review any cases of individuals and families residing in emergency shelters for over 30 days. Though lengths of stay in emergency shelter increased in FY2020 due to the COVID-19 pandemic, they have decreased by 6.8% in FY2021, suggesting that the strategies put in place by the CoC are effective and resilient to disruptions from events like COVID-19. Lastly, the CoC works to expand housing opportunities for people experiencing homelessness by coordinated landlord engagement, affordable housing development, and homeless priorities in existing housing projects.

2.The CoC uses HMIS data and client self-reported time homeless to identify individuals and families with the longest lengths of time homeless. CES assessors are trained at least once a year on the standards of evidence for self-report of homelessness. Once a month, inconsistencies between HMIS records and self-reported lengths of time homeless are examined and rectified during case conferencing in the Chronic Homelessness Taskforce meeting and through follow-ups with shelter and outreach staff. The Coordinated Entry workgroup and Chronic Homelessness Taskforce case-conference individuals and families with lengths of stay over 90 days to ensure prioritization for housing.

3.The CoC staff at the Collaborative Applicant and the Coordinated Entry Workgroup are responsible for the CoC’s strategy to reduce length of time homeless.

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

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

(limit 2,500 characters)

1.The CoC uses its Coordinated Entry System to ensure that all individuals and persons in families experiencing homelessness are assessed within 14 days of entering homelessness. Case managers at emergency shelters and street outreach programs ensure that people are connected to appropriate services and that people experiencing homelessness are able to choose a permanent housing placement that meets their needs. All emergency shelters, transitional housing, and street outreach programs are housing focused and low barrier, allowing for better opportunities for people experiencing homelessness to exit to permanent housing. For all individuals and families experiencing homelessness, assistance is provided to access mainstream housing subsidies and medical assistance. For housing subsidies, eligible applicants receive assistance applying to mainstream housing resources. For clients who need long-term medical care, the CoC advocates with hospitals and medical facilities not to discharge clients into homelessness and to coordinate access to appropriate long-term care facilities. All families and individuals are connected to community support services and benefits like state temporary assistance, SNAP, Medicaid, childcare subsidies, primary medical care, mental health and substance use services, and more to help them stabilize their housing situation after leaving transitional housing and rapid rehousing.

2.The CoC works closely with permanent housing providers to ensure that participants retain or exit to permanent housing. The CoC monitors discharges from permanent supportive housing programs during CoC Monitoring and case conferences potential exits from permanent housing programs. CoC projects link clients to resources that help them to maintain safe stable housing, including employment resources, health resources, and mainstream cash and non-cash benefits. The CoC provides regular trainings on how to access these resources for caseworkers. The CoC also facilitates transfers between PSH programs to allow project participants to work with another agency if there is a reason that another agency would be successful in assisting the client. The CoC has a 96% placement and retention rate in permanent supportive housing projects.

3.The CoC Collaborative Applicant staff and Coordinated Entry Committee are responsible for increasing the rate at which people are exited to permanent housing.

2C-4.	Returns to Homelessness—CoC's Strategy to Reduce Rate.	
	NOFO Section VII.B.5.e.	
	In the field below:	
1.	describe your CoC's strategy to identify individuals and families who return to homelessness;	
2.	describe your CoC's strategy to reduce the rate of additional returns to homelessness; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.	

(limit 2,500 characters)

1. The CoC uses system performance measure reports in HMIS to identify returns to homelessness. These reports are reviewed on a quarterly basis to identify data quality issues. The CoC also collects data on where individuals and families are coming from as they enter emergency shelter.

2. One strategy is to advocate for increased affordable housing resources across the CoC's geographic area. Given the limited quantity of rental assistance, the majority of clients who exit shelter services to permanent destinations do so with very little or no ongoing assistance. The CoC advocates for an increase in affordable housing options for people experiencing homelessness, including leveraging state investment into supportive housing as well as advocating for homelessness preferences in housing development. The CoC reviews both quantitative and qualitative data and reports on the trends in returns to homelessness across time to the CoC's Program Planning and Advocacy committee. The Chronic Homelessness Taskforce and Coordinated Entry Workgroups facilitate case conferencing and identify people who have returned to homelessness after being permanently housed in CoC projects. These discussions include common barriers to remaining housed and are an opportunity for providers to share best practices and strategies to address those barriers. The Coordinated Entry Workgroup also facilitates permanent supportive housing transfers for clients needing services. Lastly, homelessness prevention projects funded through ESG-CV prioritize clients who have previously experienced homelessness. The CoC's Racial Equity committee also create strategies to address the disparity in people of color having a higher rate of return to homelessness, including increasing cross-sector collaboration to bring services to people least likely to access healthcare services and creating affordable housing strategies and zoning recommendations with a racial justice lens.

3. The Program planning and advocacy committee is responsible for overseeing the CoC's strategy to reduce the rate individuals and persons in families return to homelessness.

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

(limit 2,500 characters)

1.The CoC attempts to connect all able persons to employment services to increase employment income. The CoC uses partnerships and trainings to keep CoC member organizations connected with employment services. The CoC projects are monitored and scored on the ability to increase cash income for projects.

2.CoC projects make direct referrals to CNY WORKS, New York State’s ACCES-VR program for supported employment, and agencies that work with Local Departments of Social Services (LDSS) provide job search assistance or vocational training. The CoC provides information to project directors and frontline staff about available employment resources through monthly trainings and announcements in a weekly newsletter transmitted to the entire CoC Membership. There are numerous training opportunities for residents of permanent housing including, connection with vocational rehab, job training programs, and employment specialists designed to connect those able to work to employment opportunities to further their recovery and well-being.

3.The Program Planning and Advocacy committee is responsible for overseeing the CoC’s strategy to increase jobs and income from employment.

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

(limit 2,500 characters)

1.Local Departments of Social Services (LDSS) in the three counties are actively involved in the CoC, participating in the CoC Advisory Board, General Membership Meetings, Coordinated Entry Workgroup meetings, and Planning and Advocacy Committee meetings. LDSS administer federal and state non-employment cash benefits. This allows for case managers and LDSS staff to ensure a continuation of benefits and planning for future income. Emergency shelters connect residents with no income to state and federal non-employment cash benefits. LDSS have designated staff members that clients, shelter or CoC housing program case managers can contact if special accommodations are needed in the application process. LDSS staff also communicate with CoC partners about changes to state, federal, and local regulations, and changes in their organizational structure through CoC Membership and Committee meetings. The CoC hosts trainings on best practices to connect clients to non-employment cash income, like the SOAR method. The CoC encourages agencies during Membership meetings to access trainings hosted by the regional SOAR TA provider and provides meeting space and access to SOAR TA trainers.

2.The Program Planning and Advocacy Committee is responsible for overseeing the CoC’s strategy to increase non-employment cash income.

3A. Coordination with Housing and Healthcare

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

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

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	No
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3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section VII.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

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

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

Project Name	Project Type	Rank Number	Leverage Type
CCA Freedom Commo...	Joint TH-RRH	24	Healthcare
CCHN Permanent Su...	PH-PSH	25	Healthcare

3A-3. List of Projects.

1. What is the name of the new project? CCA Freedom Commons TH-RRH 2022
2. Enter the Unique Entity Identifier (UEI): E381LZ99MFP1
3. Select the new project type: Joint TH-RRH
4. Enter the rank number of the project on your CoC's Priority Listing: 24
5. Select the type of leverage: Healthcare

3A-3. List of Projects.

1. What is the name of the new project? CCHN Permanent Supportive Housing
2. Enter the Unique Entity Identifier (UEI): LVF8CXM9XJR5
3. Select the new project type: PH-PSH
4. Enter the rank number of the project on your CoC's Priority Listing: 25
5. Select the type of leverage: Healthcare

3B. New Projects With Rehabilitation/New Construction Costs

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

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

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

Is your CoC requesting funding for any new project application requesting \$200,000 or more in funding for housing rehabilitation or new construction?	No
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3B-2.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section VII.B.1.s.	

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

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

(limit 2,500 characters)

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

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

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

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

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

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

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

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

(limit 2,500 characters)

4A. DV Bonus Project Applicants

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

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

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

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

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2022 Priority Listing.

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

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

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

1.	Enter the number of survivors that need housing or services:	770
2.	Enter the number of survivors your CoC is currently serving:	146
3.	Unmet Need:	624

4A-3a.	How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section II.B.11.e.(1)(c)		
Describe in the field below:		
1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-3 element 1 and element 2; and	
2.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects); or	
3.	if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.	

(limit 2,500 characters)

1. To calculate the number of DV survivors needing housing or services, the number of survivors who were served in PH projects during FY2021 was subtracted from the total number of survivors that applied for crisis housing assistance in FY2021. The number of clients in emergency shelter that reported they were currently fleeing from domestic violence during FY2021 (10/1/2020 – 9/30/2021), the number of clients served in emergency shelters by victim services providers, as recorded in their comparable database, and the number of people waitlisted for DV shelters or diverted to non-DV-specific emergency shelters were summed. While there may be some overlap between clients who were waitlisted for DV shelters and those who were served by non-DV emergency shelter, we included both groups because there is a chance that the survivors moved to a different geographic area, did not utilize emergency shelter, or had some other reason that they did not utilize non-DV emergency shelter.

2. The CoC used data from HMIS, comparable databases, and from other records kept by local victim service providers.

3. The number of individuals and families fleeing domestic violence has increased by 5%, according to the 2022 PIT Count. The CoC currently has increasing need for shelter services and permanent housing dedicated to survivors of domestic violence. Victim Services Providers across the CoC are seeing increases making cross-county emergency shelter transfer more challenging. A lack of services that specialize in Domestic Violence increases concerns with the safety of those individuals and families. Victim Service Providers have also seen a complexity of trauma for survivors they are serving, having experience DV, sex trafficking and other forms of trauma.

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section II.B.11.e.(1)(d)		
Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects—only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.		

Applicant Name
Cayuga/Seneca Com...
Young Women's Chr...

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

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

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2022 Priority Listing:

1.	Applicant Name	Cayuga/Seneca Community Action Agency DBA Community Action Programs Cayuga/Seneca
2.	Project Name	Domestic Violence Rapid Rehousing Program
3.	Project Rank on the Priority Listing	27
4.	Unique Entity Identifier (UEI)	LEXZG9T2LN78
5.	Amount Requested	\$184,332
6.	Rate of Housing Placement of DV Survivors–Percentage	27%
7.	Rate of Housing Retention of DV Survivors–Percentage	88%

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

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

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

(limit 1,500 characters)

1. The rates are calculated based on program reporting requirements and aggregating all households entering emergency temporary housing, which were able to access permanent housing.
2. The reporting accounts for exits to safe housing destinations.
3. CAP utilizes data from HMIS and Apricot as a comparable database for domestic violence survivors.

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

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

(limit 2,500 characters)

- 1.Domestic violence survivors experiencing homelessness are quickly moved into safe affordable housing within the first 30 days of entry into the Rapid Rehousing Program. CAP Advocates and Case Managers have cultivated relationships with area landlords to help facilitate timely placement (depending on housing availability within the local market. Emergency temporary shelter is available through CAP’s Domestic Violence intervention program if necessary).
- 2.CAP’s Domestic Violence Rapid Rehousing program will prioritize survivors by looking at the following criteria, through Coordinated Entry, to minimize the length of homelessness: Individuals and families who are fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking or other dangerous or life-threatening conditions that relate to violence against the individual or family member; chronically homeless individuals who are accepted into permanent housing or eligible for permanent supportive housing, but waiting for their housing placement; and homeless domestic violence families who currently reside in shelters (utilizing the VI-F-SPDAT tool). Referrals are accepted through HUD CoC via Coordinated Entry.
- 3.Case management includes screening, intake, assessment, service/goal planning, crisis intervention education, referrals and access to mainstream resources. Services are participant-directed, voluntary and respectful of individual rights to self-determination.
- 4.Participants receive individualized holistic service plans with access to wraparound supports including but not limited to CAP’s comprehensive portfolio of domestic violence services, TANF, SSI/SSD, SBAP, WIC, HEAP, health insurance, food, clothing, household and personal care items, workforce development, financial literacy, transportation, mental health and substance abuse services through CAP and partner agencies.
- 5.The Case Manager will provide supportive services which will stabilize participants in independent living and put them on a path to permanent housing. Service plans developed together with participants will be continuously updated as they work towards their goals. The Case Manager can continue to provide referrals and tools as needed after enrollment in the program ends to help ensure that individuals and families do not move back into homelessness.

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

	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;
2.	making determinations and placements into safe housing;

3.	keeping information and locations confidential;
4.	training staff on safety and confidentiality policies and practices; and
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.

(limit 2,500 characters)

1. All services are confidential and CAP has existing established confidentiality policies and release of information protocol in place. All staff receive training on and sign a confidentiality statement upon hire. Established procedures ensure that all client information is confidential and shared pursuant to an informed, written, time-limited release of information signed by the survivor. Staff and volunteers are advised that breaching a client's confidentiality can be grounds for termination and are trained on the Violence Against Women's Act protection for survivors of domestic violence. Staff will not discuss or share situational or personally identifying information including aggregate data that may identify an individual without informed, written and time-limited release. If coordinated case review is desired by clients, appropriate releases will be completed to allow for conferencing between third parties. The survivor has the right to revoke the consent at any time for any reason and will be informed of this right when signing the release.
2. Domestic violence survivors are housed in safe options with careful consideration given to location based on a variety of factors. Security devices are available through the Domestic Violence Intervention Program to enhance survivor safety.
3. Information is kept pursuant to Agency confidentiality policies and procedures. All files are housed in a locked room in locked filing cabinets.
4. All staff are trained in Agency established confidentiality policies and procedures (see above) and explicitly understand the importance and danger that can be placed on a survivor if information is not kept confidential and will be terminated if confidentiality is breached.
5. Safety is of paramount concern in placing survivors in housing. Once safely housed, safety devices for doors and windows are provided to participants through CAP's Domestic Violence Intervention Program. Locks are also changed as necessary. Case Managers and Advocates continually check in with survivors to assess their needs, including their safety needs and concerns.

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

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

(limit 2,500 characters)

CAP has adopted the Housing First model of service delivery to ensure that at least 90% of program participants exit into permanent housing. Participants will have full rights, responsibilities and legal protections as any other tenant would. The program is designed to prevent evictions and lease violations and program guidelines are written as to not encourage violations (i.e.: no drinking in the apartment). Instead of moving immediately towards eviction for those families who have failed to pay their portion of rent, families will be offered recourse such as payment arrangements and supportive services such as budgeting assistance to assist them with paying their rent moving forward. By allowing families in the program recourse prior to eviction, the expectation is that only in rare and extreme circumstances will a family exit the program to a destination other than permanent housing. In dealing with domestic violence survivors, safety is of utmost concern and comprehensive policies and procedures are in place to ensure every need and safety precaution is being met (see above and below).

Program staff will work closely with participants to help them transition into permanent housing and prevent subsequent episodes of homelessness. This outcome will be verified through HMIS.

CAP's DV-RRH Case Manager will provide intensive case management and supportive services to help participants increase income and subsequently reduce reliance on rental assistance. The resulting impact is increased financial independence, enhanced ability to sustain permanent housing and reduced recidivism of homeless episodes among participants.

CAP will offer wraparound services to assist all RRH program participants in transitioning from a point of crisis to stability and economic security. Upon entry into the RRH Program, a participant's immediate basic need for housing will be met.

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section II.B.11.e.(1)(d)		
Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:		
1.	prioritizing placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;	
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;	
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;	
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;	
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;	
6.	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and	
7.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.	

(limit 5,000 characters)

1.The Case Manager will work in consultation with the Domestic Violence Intervention Program to assess the needs and concerns of the survivor. Through assessment tools they gather information, watch the body language and ask trauma related questions and walk through the unit with participants to assess whether the survivor is safe and comfortable. Participants help drive the selection process whenever possible.

2.All customers, including domestic violence survivors are treated with respect and afforded the dignity that is deserved. CAP respectfully supports and empowers all clients seeking assistance. Staff utilize an empowerment-based process to interventions to connect, inspire and create a sustainable pathway for a safe, self- sufficient future. The goals created within the relationship of staff and survivor are worked on as a team. Comprehensive, holistic supports are provided to meet each individuals needs and help them attain their goals.

3.Participants are given access to information on trauma, the effects of domestic violence and on children, the response to violence and the way trauma forms in an environment of neglect. Staff uses aspects of conscious discipline in a structured way to provide education around trauma and its effects. Survivors and their children often need therapy to help integrate their life experiences, including intergenerational transmission of trauma. In-house supports are available and necessary referrals are made to partner agencies to provide comprehensive treatment.

4.The DV RRH Case Manager will provide supportive services that will stabilize the participants in independent living and put them on the path to permanent housing. Services are participant directed, voluntary and respectful of individual rights to self-determination. Individualized service plans are developed based on self-identified goals and assessment of needs in order to overcome barriers.

5.CAP utilizes an organizational approach for the prioritization of addressing inequity in housing outcomes through practices, systems and structures adopted in policy and ongoing examination to adjust course if necessary. The Agency provides consistent service delivery through interventions that aim to eliminate intersectional discrimination and structural barriers so that services can be accessed and downstream outcomes can be improved. Staff participate in regular trainings and prioritizes change based on research and evaluation tools. All individuals receiving services have equal access to resources without bias, all individuals have equal access to wraparound supports that address underlying inequities and work in partnership with communities, institutions and grassroots movements to achieve meaningful results.

6.Participants may immediately begin developing local support networks and investing in neighborhood and community activities necessary to maintain housing stability. The Agency’s Domestic Violence Intervention Program has a mentor/volunteer (trained psychologist) that is able to provide individual counseling, participants have access to a weekly support group and outside referrals are made to partner agencies or offer resources and help facilitate enrollment in groups or memberships that help survivors integrate into the community.

7.Participants have access to over 40 programs and services offered through CAP including outside referrals to established partner agencies in the community. There are resources available to provide financial subsidies for participants, support groups, advocacy, legal services and necessary referrals are made based on the individuals service plan and identified goals.

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

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

(limit 5,000 characters)

CAP is the only victim service provider of both residential and non-residential services for victims of Domestic violence in Cayuga County. Our Domestic Violence Intervention Program (DVIP) provides unique services to victims; there is no overlap services within the community. In addition, CAP administers a Supervised Visitation and Safe Exchange Program, the Transitional Housing Assistance Program (THAP) a Rapid Rehousing Program with four dedicated units for survivors and partners with the City of Auburn with the Improving Criminal Response Program (ICJR).

Survivors of domestic violence receive a variety of emergency and supportive services to help them through the complex process of fleeing an abusive partner and building safe, self-sufficient futures, including safety planning, 24-hour hotline, advocacy (law enforcement, medical, housing, employment, DSS and legal), crime survivor compensation assistance, information and referral, peer support groups, individual supportive counseling, financial empowerment, transportation, child care, relocation assistance, emergency food, clothing and furniture, and safety aid devices. DVIP also operates a 9-bed emergency safe house that offers safe housing for up to 90 days for survivors of domestic violence. Last year, the program provided 2,855 bed nights of shelter to victims of domestic violence.

In serving victims of domestic violence, DVIP uses a strength-based, empowerment approach in which advocates work in partnership with victims to assist and support them in choices they make. CAP recognizes that a holistic approach to services builds a solid foundation for clients to move from crisis to stability and self-sufficiency. By partnering with each survivor and working holistically with them, on their terms, our Agency ensures that each has the tools needed to remain safe while working towards self-sufficiency.

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

- Provide examples in the field below of how the new project will:
1. prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
 2. establish and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
 3. provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
 4. emphasize program participants' strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans works towards survivor-defined goals and aspirations;

	5. center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
	6. provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
	7. offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

1.The Case Manager will work in consultation with the Domestic Violence Intervention Program to assess the needs and concerns of the survivor. Through assessment tools they gather information, watch the body language and ask trauma related questions and walk through the unit with participants to assess whether the survivor is safe and comfortable. Participants help drive the selection process whenever possible.

2.All customers, including domestic violence survivors are treated with respect and afforded the dignity that is deserved. CAP respectfully supports and empowers all clients seeking assistance. Staff utilize an empowerment-based process to interventions to connect, inspire and create a sustainable pathway for a safe, self- sufficient future. The goals created within the relationship of staff and survivor are worked on as a team. Comprehensive, holistic supports are provided to meet each individuals needs and help them attain their goals.

3.Participants are given access to information on trauma, the effects of domestic violence and on children, the response to violence and the way trauma forms in an environment of neglect. Staff uses aspects of conscious discipline in a structured way to provide education around trauma and its effects. Survivors and their children often need therapy to help integrate their life experiences, including intergenerational transmission of trauma. In-house supports are available and necessary referrals are made to partner agencies to provide comprehensive treatment.

4.The DV RRH Case Manager will provide supportive services that will stabilize the participants in independent living and put them on the path to permanent housing. Services are participant directed, voluntary and respectful of individual rights to self-determination. Individualized service plans are developed based on self-identified goals and assessment of needs in order to overcome barriers.

5.CAP utilizes an organizational approach for the prioritization of addressing inequity in housing outcomes through practices, systems and structures adopted in policy and ongoing examination to adjust course if necessary. The Agency provides consistent service delivery through interventions that aim to eliminate intersectional discrimination and structural barriers so that services can be accessed and downstream outcomes can be improved. Staff participate in regular trainings and prioritizes change based on research and evaluation tools. All individuals receiving services have equal access to resources without bias, all individuals have equal access to wraparound supports that address underlying inequities and work in partnership with communities, institutions, and grassroots movements to achieve meaningful results.

6.Participants may immediately begin developing local support networks and investing in neighborhood and community activities necessary to maintain housing stability. The Agency’s Domestic Violence Intervention Program has a mentor/volunteer (trained psychologist) that is able to provide individual counseling, participants have access to a weekly support group and outside referrals are made to partner agencies or offer resources and help facilitate enrollment in groups or memberships that help survivors integrate into the community.

7.Participants have access to over 40 programs and services offered through CAP including outside referrals to established partner agencies in the community. There are resources available to provide financial subsidies for participants, support groups, advocacy, legal services and necessary referrals are made based on the individuals service plan and identified goals.

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

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

(limit 2,500 characters)

CAP involves survivors in policy and program development through a variety of ways including intake, assessment, interviews, regular meetings and surveys. Client feedback is one of the most valuable resources to the Agency and often clients are encouraged to participate in shaping and guiding programming through participation on boards and committees as appropriate.

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

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

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2022 Priority Listing:

1.	Applicant Name	Young Women's Christian Asso of Syracuse Onondaga Co.
2.	Project Name	Women's Residence
3.	Project Rank on the Priority Listing	28
4.	Unique Entity Identifier (UEI)	HAVLSLRMLMZM8
5.	Amount Requested	\$413,807
6.	Rate of Housing Placement of DV Survivors—Percentage	56%
7.	Rate of Housing Retention of DV Survivors—Percentage	100%

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

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

1.	how the project applicant calculated both rates;
2.	whether the rates accounts for exits to safe housing destinations; and

	3. the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).
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(limit 1,500 characters)

To report the rate of housing placement and rate of housing retention for DV survivors, the YWCA used 2021 data from the Women’s Residence (WR) administrative files. This information is collected and recorded by YWCA case managers for each resident.

As reported, 56% of DV Survivors at the YWCA WR were placed in permanent housing in 2021. There are 75 apartments available at the WR, and 56 residents in 2021 were DV Survivors. Of these 56 clients, 31 (or 56%) were placed in permanent housing. Additionally, all 31 of clients who were placed in permanent housing stayed there for at least 6 months, making the rate of housing retention of DV Survivors 100%.

Regarding exits to safe housing destinations, the WR staff help each client select permanent housing that meets their specific safety needs. The clients choose housing that is the best for them and their circumstance. Furthermore, some clients are placed in permanent housing provided through a partnership with Housing Visions. These residences are considering safe housing destinations, as each unit is equipped with a video camera.

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

Describe in the field below how the project applicant:

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

(limit 2,500 characters)

The YWCA WR ensures that DV survivors experiencing homelessness are quickly moved into safe, affordable housing. Clients are selected from the Coordinated Entry System, and a front desk supervisor conducts an initial phone screening. WR staff work together to determine who is a good fit for the program based on identified needs, and priority is always given to DV survivors. Once the initial phone screening is completed, a case manager is assigned and sets a housing move-in date. The case manager and the client then create an individual service plan (ISP) based on person-centered service in the next 48 hours. In this way, the YWCA quickly helps DV survivors determine the supportive services needed and connect them with the appropriate services. The ISP has an exit date for the participant to move into permanent housing.

Through our case managers, the YWCA quickly helps DV survivors determine the supportive services needed and connect them with the appropriate services. When clients enter the WR program, YWCA staff identify if they have income. If they do not, participants will work with case managers to begin the process to obtain employment, public assistance, food stamps, medical assistance, SSI, SSDI, and other services for a source of income. In the meantime, we provide rental assistance. The services offered to participants include our Life Skills Training (10 weeks), WOW (Women of Worth) domestic violence support group, case management, career counseling, house meetings and support groups, and NA meetings, along with referral services to community resources, and more. The services may include but are not limited to housing search and placement, deposit, rent, and utility assistance, along with intense case manager services.

Once participants move into permanent housing, case managers will contact them to track their progress and offer support and connections with the resources needed to maintain the permanent housing for at least 6 months. Our front desk supervisors provide 24/7 control, care, assistance, and intervention/mediation during crisis situations to ensure safety, unlike other housing providers in the area. These resources help clients sustain stable housing into the future. The YWCA has been successful in this area— based on our previous years of service, overall 91% of WR clients have stayed in permanent housing and out of our WR.

4A-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section II.B.11.e.(1)(d)		
Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:		
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;	
2.	making determinations and placements into safe housing;	
3.	keeping information and locations confidential;	
4.	training staff on safety and confidentiality policies and practices; and	
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.	

(limit 2,500 characters)

The safety and privacy of DV Survivors is a top priority at the WR, and steps are taken to protect privacy in all aspects of our program. During the intake process, women are interviewed by WR staff in a one-on-one setting, ensuring that DV Survivors determine and share the information provided for their application, without the input or coercion of others. WR staff use a trauma-informed approach during the interview. They ask clients to share their story, but do not press clients for details; the DV Survivors have the space to reveal details as they feel comfortable doing so.

DV Survivors who enter the main, 55-unit WR facility at 300 Burt Street, Syracuse, are guaranteed safe housing as program participants. The front desk at the WR has 24/7 coverage; staff are always present to monitor who is entering and leaving the facility, watch video surveillance, and be present to support residents as needed. Clients' information and location, including their name and address, is kept confidential at all times. Staff do not provide resident names or confirm their participation in the program. Furthermore, clients are required to greet potential guests at the front desk. All visitors to the Residence must stay at the front desk until the client chooses to meet them there.

In addition to these confidentiality and safety measures taken at the main WR facility, our scattered site, permanent housing specifically offered through Housing Visions includes a front door camera. This on-site surveillance supports survivors' physical safety. Clients are also able to call the WR front desk at any time to receive support and guidance should they feel unsafe at their location.

Finally, safety and confidentiality policies and practices for staff are critical to the ongoing success of our WR program. During interviews for WR staff positions, the hiring manager and YWCA leadership team emphasizes the importance of client safety and confidentiality, so that new team members understand the importance of maintaining client privacy. WR staff also regularly participate in DV training, which further emphasizes and facilitates the safety of clients.

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

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

(limit 2,500 characters)

The YWCA WR has a proven track record of ensuring the safety of DV Survivors. WR staff actively evaluate the program’s success in this area based on the number of safety incidents that occur for residents. Our team is proud to sustain a very low incident rate—there are few safety issues that occur, in large part to our 24/7 front desk supervision and the accessibility of WR staff to support clients when needed.

When safety incidents do occasionally occur, the WR staff responds to each situation with the support needed to address and neutralize it. Most importantly, they then take proactive measures to prevent similar situations in the future, ensuring that staff actively learn from each experience and incorporate the lessons learned to improve the safety of the program

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

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

1.	prioritizing placement and stabilization in permanent housing consistent with the program participants’ wishes and stated needs;
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasizing program participants’ strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

In 2014, the YWCA revamped all its WR Programs launching supportive transitional and permanent housing, with person centered and trauma informed care services to meet the challenges faced by homeless single women and women with children, with a focus on survivors of Domestic Violence. On a yearly basis, WR staff attend training specific for domestic violence counselors, case managers and advocates, allow them to provide the best services possible to our clients. Trainings include Emotional Intelligence, Trauma Informed, Person-Centered, and DEI in providing services, among others. Staff able to work individually with clients and provide them with training on domestic violence, stressing the importance of safety and the warning signs of potential abusers.

In 2019, YWCA was awarded a grant through ESSHI funding to provide supportive permanent housing services to 20 individual/families survivors of domestic. This project is in partnership with Housing Visions. In 2021, the NYS Office for the Prevention of Domestic Violence invited our Executive Director to be part of the NYS Domestic Violence Regional Councils. At the end of the same year our Executive Director was name one of the 3 co-chairs for the Central New York Region.

WR staff prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs by giving clients applications and providing individualized assistance needed to fill out the applications. WR staff also provide letters of recommendations if needed, to help client move into permanent housing quickly. Clients have the ability to choose housing that is the best fit for them, after working with staff to understand the expectations and details of each option.

The WR establishes and maintains an environment of agency and mutual respect, as well as emphasizes program participants' strengths, by empowering all women and treating them as individual. The WR welcomes diversity and does not tolerate racism. Our Life Skills Training encourages positivity and mutual understanding of women across all walks of life. In addition, the W.O.W. (Women of Worth domestic violence support group) encourages togetherness, positivity, and mutual understanding. WR staff also actively encourage and instill a positive environment to increase clients' self-esteem, so they can feel better about themselves. This helps them believe in themselves and in their ability to make a better life. WR staff give them individualized skills to provide clients with the tools they need for success in life. In addition, staff encourage clients to call the WR if they ever need someone to talk to or just some words of wisdom. WR staff believe in the women and help each of them achieve their goals by influencing to change them, because ultimately it is up to them to change themselves.

Additionally, clients have access to a variety of opportunities for connection with other program participants. They can participate in the W.O.W support group, Life Skills classes, and employment classes, learning together and building skills that will help each woman be successful at home and in the workplace.

Finally, for DV survivor parents, case managers work with clients to understand their specific childcare needs and connect them with the appropriate community-based childcare services available to meet those needs. Clients also have the opportunity to utilize YWCA youth development programs, such as the Girls Inc. at YWCA afterschool program for girls ages 5-18, and youth soccer

programs such as Soccer for Success and the Syracuse City Football Club.

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

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

(limit 5,000 characters)

The YWCA WR has been actively meeting the service needs of DV survivors since 2014. The WR elevates the voices of new and existing residents by continuing to offer the wrap around supportive services that increase their quality of life. Clients who come from a homeless shelter due to lived experiences of mental health, domestic violence or poverty-stricken neighborhoods, struggle to create a safe and stable home for themselves and their children. The WR case managers encourage supportive service opportunities.

The plan of action for our staff and case managers is to empower these individual women and women with their families to increase their household wealth to provide housing stability. When women come to the WR and receive assistance to strive towards furthering their education, job skill training, and proficiency in administrative skillsets, their self-esteem increases and leads to a better and stronger stability once they move into permanent housing. The WR services includes the Women to Work (W2W) program which hires clients to provide them the opportunity to apply the skills learned in our programs to become a successful employee in another workplace.

The YWCA WR staff also helps clients connect with health insurance, finding primary care physicians, specialists, and even giving them transportation or moral support when needed. In addition, WR instills the importance of self-care through educational material like life skills, which encourages them to engage in self-care and in the importance of taking care of oneself which also encourages positive self-esteem

WR staff also make sure they have the skills they need to be successful living in permanent housing. We also have a partnership with housing vision and SHA where we can continue services for them like case management, life skills, domestic violence counselor, and advocate which also gives them more help to be more successful with their housing.

The YWCA WR provides trainings and individualized attention with each of following topics: money management, budgeting, how to find a job, where to look for a job, how to create a resume, how to get ready for an interview, how to write a cover letter, how to be more professional, and work ethics which will give each individualized women the skills they need to be more independent. In addition, YWCA have a Women to Work (W2W) program which hires clients as a way to practice all the topics learned prior work in any other company.

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

Provide examples in the field below of how the new project will:

1.	prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2.	establish and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasize program participants' strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans works towards survivor-defined goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

The YWCA will build upon the existing, successful services and trauma-informed, victim-centered approaches utilized by WR staff since 2014 for this new project. The WR will provide supportive transitional services to the target population with the end goal of stabilizing their homeless situation, making sure that they continue to receive supportive services once they move into permanent housing.

Services to be provided will include case management, counseling, and life skills training, all focused on helping women enter into and maintain employment and stable housing for at least 1 year. Services will be offered both on-site and off-site; transportation will be available with the agency van for any services located off-site.

The Life Skills Training will empower clients by building their self-esteem and conflict resolution skills, and helping them develop healthy relationships, among other skills. Clients will also have access to domestic violence counseling for individuals and groups through the YWCA Women of Worth (W.O.W.) support group, and individual one-on-one counseling.

In addition, we will hire one Case Manager/Advocate that will dedicate their time to create an individual person-centered services plan, so clients can create their short- and long-term goals as well as follow up with their dreams, and one Job Coach/Advocate to help them to prepare for their next steps, including finding a job, making decisions for themselves, and being a productive member of our community. We have seen how this step raises clients' self-esteem. In addition, all services will be provided in Spanish-English if needed, as we have bilingual staff.

YWCA WR is proposing to provide services to 10 single women, 8 women with a child, and 2 women with 2 children, with a total of 32 beds. All these women are survivors of domestic violence and will come from the HMIS system. In order to make sure that our target population is successful we need funding to pay for their apartments and we are proposing the following staff: one (1) Job Coach/Advocate; one (1) Case Manager/Advocate; 10% Women's Residence Supervisor, 10% Life Skills Trainer, 10% Counselor and 10% of (4) front desk supervisor.

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

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

(limit 2,500 characters)

The YWCA WR program engages clients in planning for their services through our person-centers process. WR case managers meet with new clients 48 hours after new client moves into the WR. Case manager and client meet to create an Individual Service Plan (ISP). The ISP will have short and/or long-term goals as well as an exit date for the client to move into permanent housing. Clients are supported and offered all services provided at the WR as well as the ones outside the WR. Clients have opportunity to choose and create a road map. Along the way, the road map will provide incentives for achieving their own goals. The goal-oriented outcomes prove to be successful.

Additionally, every year we invite teams of students from Syracuse University's Maxwell School to survey our clients, then provide a report with findings and recommendations. The YWCA WR evaluates them with the entire team and makes changes to provide better support to our clients.

4B. Attachments Screen For All Application Questions

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

- | | |
|----|---|
| 1. | You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete. |
| 2. | You must upload an attachment for each document listed where 'Required?' is 'Yes'. |
| 3. | We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube. |
| 4. | Attachments must match the questions they are associated with. |
| 5. | Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. |
| 6. | If you cannot read the attachment, it is likely we cannot read it either. |
| | <ul style="list-style-type: none"> . We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time). . We must be able to read everything you want us to consider in any attachment. |
| 7. | After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include. |

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	09/23/2022
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	09/23/2022
1E-1. Local Competition Deadline	Yes	Local Competition...	09/23/2022
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/23/2022
1E-2a. Scored Renewal Project Application	Yes	Scored Renewal Pr...	09/23/2022
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/23/2022
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/23/2022
1E-5b. Final Project Scores for All Projects	Yes	Final Scores for ...	09/23/2022
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		
1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
3A-1a. Housing Leveraging Commitments	No		

3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	09/23/2022
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Renewal Project Application

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Final Scores for All Projects

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: Healthcare Formal Agreements

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/15/2022
1B. Inclusive Structure	09/23/2022
1C. Coordination and Engagement	09/23/2022
1D. Coordination and Engagement Cont'd	09/23/2022
1E. Project Review/Ranking	Please Complete
2A. HMIS Implementation	09/23/2022
2B. Point-in-Time (PIT) Count	09/23/2022
2C. System Performance	09/23/2022
3A. Coordination with Housing and Healthcare	09/23/2022
3B. Rehabilitation/New Construction Costs	09/23/2022
3C. Serving Homeless Under Other Federal Statutes	09/23/2022

4A. DV Bonus Project Applicants	09/23/2022
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

For all applicants who do not have a preference, to the extent that it is necessary to meet income targeting requirements, those who have household incomes above 30% of AMI may be bypassed.

First Preference, Special Programs

Families eligible for the following special programs will be maintained on special Waiting Lists for each program. The lists for each special program shall be organized based upon date and time of application. Persons in this preference category shall be eligible to apply for assistance even when the general Waiting List is closed. The special programs are as follows:

- Homeless Veterans with Severe Psychiatric or Substance Abuse Disorders, certified by the Syracuse Veterans Affairs Medical Center for participation in the HUD-VASH Program. SHA will accept eligible applicants for this program via a written referral form from the local Veterans Administration Medical Center Housing unit.
- Eligible applicants for the SRO Mod-Rehab Program. These participants will be referred via a memo from the Syracuse YMCA.
- Household to be admitted to the program via target funding, including, but not limited to, tenant protection vouchers, enhanced vouchers, or any special purchase voucher.

Second Preference:

All of the following shall have equal preference:

- Families with children whose blood lead level is equal or greater than 20 ug/dL (micrograms of lead per deciliter) for a single test or 15-19 ug/dL in two tests taken at least three (3) months apart in children age six and under, as identified by the Onondaga County Health Department, and the lead problem is attributed to the family's present housing.
- Domestic Violence: An applicant who vacated their unit because of domestic violence or lives in a unit with a person who engages in violence. Documented actual or threatened violence directed toward self or member(s) of household by spouse or other member of applicant's household must come from a third party source, i.e. shelter advocate, social worker, law enforcement agency, etc. The domestic violence should have occurred recently or be of a continuing nature.
- Families who are involuntarily displaced via a government or government sponsored action and through no fault of their own. Persons displaced due to a foreclosure shall not be eligible for this preference.

- Eligible families and Youths (18 or older) referred by written memo to SHA from the County Child Welfare Agency for the Family Unification Program (FUP).

All persons in this preference category shall be placed on the Waiting List in order of the date and time of application. Persons in this preference category shall be eligible to apply for assistance even when the general Waiting List is closed.

Third Preference:

- Applicants and Tenants in NON-profit neighborhood based housing programs.
- Families presently under the SHA Shelter Plus Care Program and/ or VASH program who, in the opinion of their sponsoring agency and the Authority, will no longer require involvement in the “care” aspects of the program will be given a first preference. Families that have progressed to a point where they are stable and no longer require the support and aid of the partnering agencies will be given a Housing Choice Voucher. This action will make slots available in the Shelter Plus care Program for *more* homeless families who are in need and require the aid of the other partnering Agencies involved.

8. Notice and Opportunity for a Meeting where Local Preference is Denied

If SHA determines that an applicant does not meet the criteria for receiving a local preference, the applicant has the right to meet with SHA to review the decision. If requested, the Supervisor of Section 8 or their designee will conduct the meeting. The procedures specified in this paragraph will be carried out in accordance with HUD’s requirements. The applicant may exercise other rights if the applicant believes that he or she has been discriminated against on the basis of race, color, religion, sex, national origin, age, or handicap.

VI. Leasing a Unit – Occupancy Policies

A. Issuance of a Voucher (24 CFR 982.302) & Information when Family is Selected (24 CFR 982.301)

Vouchers:

The number of unused Vouchers will be evaluated on at least a monthly basis. Once a determination has been made of available Vouchers, the next individuals/families on the waiting list will be contacted. The applicants will be mailed a letter advising them that their name has come to the top of the list for subsidy assistance and will be requested to schedule an interview/briefing for the formal application and verification of their preferences.

MEMORANDUM OF UNDERSTANDING

Syracuse Housing Authority Housing Choice Voucher Program & Mainstream Voucher Grant Service Partner Housing and Homeless Coalition of Central New York

I. Purpose of This MOU

This memorandum of understanding ("MOU") has been created and entered into on September 5, 2019 between the **Syracuse Housing Authority ("SHA")** and **The United Way of Central New York on behalf of the Housing and Homeless Coalition of Central New York ("The Coalition")**, (collectively, "the Parties") in connection with SHA's application ("the Application") in response to the U.S. Department of Housing and Urban Development (HUD) FY 2019 Mainstream Voucher Program Notice of Funding Availability ("the NOFA"). This MOU outlines the basic agreement between the Parties during operation of the **Mainstream Housing Choice Voucher Program**, a tenant-based supportive housing program that assists non-elderly persons with disabilities ("the Program").

II. Program Goal and Definitions

The goal of the Program is to pair housing subsidies with supportive services to provide sustained community-based integrated housing for non-elderly persons with disabilities, with a preference for disabled non-elderly persons who are transitioning out of institutional or other segregated settings, at serious risk of institutionalization, homeless, or at risk of becoming homeless ("the Preference"). SHA shall provide the housing subsidies and the Coalition shall provide appropriate referrals from housing programs funded by the Continuum of Care as a "Moving On" strategy from Continuum of Care beds. All relevant terms defined in the NOFA and Application are incorporated herein.

III. Term

This MOU is intended to facilitate the award of Mainstream Voucher Program funding to SHA and utilization of the vouchers by eligible families pursuant to HUD Notice of Funding Availability for FY2019, No. FR-6300-N-43 and shall remain in effect for the duration of such vouchers.

IV. Operational Roles and Responsibilities

A. SHA

1. Establish a preference for households that qualify for Mainstream vouchers, including those referred by the Coalition.

2. Canvas people on the SHA Housing Choice Voucher wait list to help SHA and the Agency identify any families currently on the wait list who would qualify for the Program and the Preference.
3. Commit a sufficient number of staff and other resources to ensure that the application, certification, and voucher issuance processes are completed in a timely manner.
4. Commit a sufficient number of staff and other resources to ensure that inspections of units are completed in a timely manner.
5. Hold an initial SHA application and work process meeting for all involved Coalition staff.
6. Hold semi-annual evaluation meetings with Agency staff to monitor and correct issues with such benchmarks as number of referrals received, vouchers issued, units leased/families housed, service coordination and tenancy support provided, lease infraction notices, average length of time in unit, and overall utilization.
7. Maintain releases of information for each participant in the Program to ensure open communication between SHA and the Coalition.
8. Designate a staff person to meet with the Coalition's representative in person or by phone on a regular basis to exchange updates about participants' housing stability.
9. Notify the Coalition's contact person when a participant's housing is at risk due to noncompliance with the Program or their landlord.
10. Provide training to applicable staff on an ongoing basis to support operations of the Program and facilitate training and coordination between SHA and Agency.
11. Generate a quarterly report that tracks Program performance metrics, including
 - a. Number of referrals received by Coalition
 - b. Number of vouchers issued by SHA
 - c. Number of vouchers leased-up
 - d. Program utilization rate

B. The Coalition

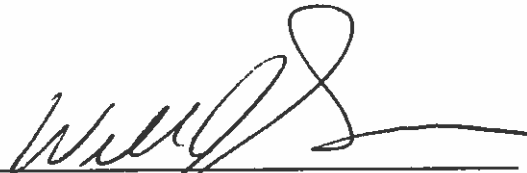
1. Identify and maintain a single point of contact for communication with SHA.
2. Identify households who are eligible for the Program and the preference using existing Coordinated Entry system.
3. Obtain releases of information for potential Program households to ensure open communication between the Coalition and SHA.
4. Assist applicants with application completion, paperwork and verifications, and ensure that the applications are complete prior to the Agency's submission of the application package to SHA.
5. Attend participant briefings when needed.
6. Provide training to applicable Coalition members on an ongoing basis to support operations of the Program and facilitate training and coordination between SHA and Coalition.
7. Commit to attending quarterly evaluation meetings with SHA staff.
8. Add relevant data on Program performance metrics to the monthly report generated by SHA and available to all parties.

V. Further Cooperation

The Parties hereby commit to cooperating with one another to address issues as they arise and to resolve them based on the agreements stated in this MOU.

VIII. Signatures

SHA

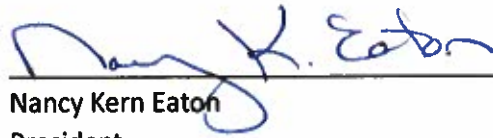


William J. Simmons,
Executive Director

8/26/19

Date

United Way of Central New York



Nancy Kern Eaton
President

8/29/19

Date

From: [Housing & Homeless Coalition](#)
Bcc: [tmartin@cnyfairhousing.org](#); [jijohnson@nycourts.gov](#); [latishaburke@ongov.net](#); [director@samcenter.org](#); [christopherwhite259@gmail.com](#); [scarmichael@oco.org](#); [cogibbons@nycourts.gov](#); [sarmstrong@communityalternatives.org](#); [erin.felix@use.salvationarmy.org](#); [jrodriguez@ywca-syracuse.org](#); [kherard@ccoc.us](#); [kpeterson@ccoc.us](#); [crodrigues@ccoc.us](#); [mary.rathbun@dfa.state.ny.us](#); [cherese.peck@ariseinc.org](#); [sgottbrecht@ccoc.us](#); [natalie.gallagher@dfa.state.ny.us](#); [dperkins@scsd.us](#); [aimeed@sbh.org](#); [rshoff@syracusepolice.org](#); [zoe.ricks@use.salvationarmy.org](#); [gary.mann@auburnrescuemission.org](#); [hneider@oco.org](#); [afears@acrhealth.org](#); [hilary.weyant@use.salvationarmy.org](#); [amstark@ccoc.us](#); [bsanderson@verahouse.org](#); [nfink@cir.care](#); [outreach@uumcsyracuse.org](#); [smcmahon@syr.gov.net](#); [pamela.alderman@use.salvationarmy.org](#); [david.carr2@va.gov](#); [mreed@liberty-resources.org](#); [cgeer@ccoc.us](#); [mhaskins@ccoc.us](#); [sgriffith@lscny.org](#); [dpasinski@verizon.net](#); [mthorley@communityalternatives.org](#); [cmmartynski@ccoc.us](#); [nputman@ywca-syracuse.org](#); [pdunn@cnycf.org](#); [mkelley@ccsi.org](#); [amber.vanderploeg@rmsyr.org](#); [ckarins@ccoc.us](#); [smcintyre@scsd.us](#); [jkarasek@ariseinc.org](#); [gidget.stevens@oswegocounty.com](#); [cfridmann@ccoc.us](#); [hillary.oddo@use.salvationarmy.org](#); [jmanuel@caphelps.org](#); [jbrooks@wesoldieron.org](#); [pprehn@ariseinc.org](#); [psullivan@snccsyr.org](#); [ssantangelo@cnyfairhousing.org](#); [tmyers@chapelhouseshelter.org](#); [teresa.lazarek@oswegocounty.com](#); [roxanna.gillen@yahoo.com](#); [ncook@ccoc.us](#); [monica.brown@dfa.state.ny.us](#); [HMIS](#); [sferguson@ccoc.us](#); [erin.reed@oswegocounty.com](#); [hbenson@ccoc.us](#); [suzanne.dianetti@warriorsalute.com](#); [kzettlemoyer@caphelps.org](#); [slclark@ccoc.us](#); [kdunn@chapelhouseshelter.org](#); [Miranda Eddy](#); [gdewan@hlalaw.org](#); 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[lolkowski@hslcny.org](#); [rreynolds@oco.org](#); [mikefps15@gmail.com](#); [cobrien@verahouse.org](#); [eric.boyce@accesscny.org](#); [m.murphy@ongov.net](#); [ewierbinski@housingvisions.org](#); [lrobinson@verahouse.org](#); [pam@ccoc.us](#); [sfrance@oco.org](#); [jennifer.l.bordonaro@omh.ny.gov](#); [kjones@caphelps.org](#); [andrea.nehda.org](#); [sweiss@cayugahealthnetwork.org](#); [jdaughton@scsd.us](#); [rschryver@acrhealth.org](#); [allison.brooks@use.salvationarmy.org](#); [cgill@oco.org](#); [nicolucci@caphelps.org](#); [liz@auburnha.org](#); [malobaidi@ifwcnny.org](#); [trodriquez@ccoc.us](#); [rclark@helio.health](#); [jblackwell@ccoc.us](#); [ladyhawk924@gmail.com](#); [mmcrobbietaru@scsd.us](#); [rdetor88@gmail.com](#); [bmorel@verahouse.org](#); [agerlorrie@yahoo.com](#); [bfarranto@ccoc.us](#); [Ray Manassa](#); [kbequer@acrhealth.org](#); [rjensen@auburnny.gov](#); [Nancy Eaton](#); [timmy5710@yahoo.com](#); [smeidenbauer@cnysservices.org](#); [denGLISH@acrhealth.org](#); [amy.sholes@ariseinc.org](#); [cgreen@liberty-resources.org](#); [holley.sharer@use.salvationarmy.org](#); [kwhite@contactsyracuse.org](#); [dlockhart@ccoc.us](#); [jacquelyn.robinson@oswegocounty.com](#); [crystalc@homehq.org](#); [tom.roschau@use.salvationarmy.org](#); [cgriffinharris@verahouse.org](#); [sfernandez@ccoc.us.onmicrosoft.com](#); [ntalev@hlalaw.org](#); [sfitzgerald2@scsd.us](#); [mdurkin@liberty-resources.org](#); [dcurrier@oco.org](#); [joeking@ongov.net](#); [katie.meyer@oswegocounty.com](#); [Megan Stuart](#); [mhernandez@ccoc.us](#); [cdoody@lscny.org](#); [wbrown@wesoldieron.org](#); [meisenstadt@syracuse.com](#); [swilson@acrhealth.org](#); [pmanirora@ifwcnny.org](#); [rkreis@scsd.us](#); [bkarpinska@ariseinc.org](#); [tpatton@liberty-resources.org](#); [dnevidomsky@caphelps.org](#); [maggie.hohm@use.salvationarmy.org](#); [andrew.osborne@rmsyr.org](#); [mcdonaldmaria71@gmail.com](#); [jmcnary@verahouse.org](#); [kweaver@atinyhomeforgood.org](#); [ajandrew@ariseinc.org](#); [hwise@ymcacny.org](#); [janmoag@ongov.net](#); [development@responsivecommunity.org](#); [ngee@cayugahealthnetwork.org](#); [aeversley@cnyfairhousing.org](#); [heatherrose.austin@gmail.com](#); [jgriffey@oco.org](#); [tbutts@ccoc.us](#); [oplangeland@ccoc.us](#); [igalan@wesoldieron.org](#); [casemanagement@samcenter.org](#); [ddaby@oco.org](#); [brumfib@gmail.com](#); [amy.cunningham@dfa.state.ny.us](#); [shordge@ccoc.us](#); [jmoran@verahouse.org](#); [Sherrain Clark](#); [klabarge@oco.org](#); [jenniferfeliciano@ongov.net](#); [rrubinstein@hlalaw.org](#); [scurran@onvlp.org](#); [jessica.horning@va.gov](#); [ccurry@ccoc.us](#); [khaskins@ariseinc.org](#); [edvel37@gmail.com](#); [lparrilla@ywca-syracuse.org](#); [jbutts@ccoc.us](#); [cgourley@ccoc.us](#); [nathan.emmons@oswegocounty.com](#); [heather.renda@use.salvationarmy.org](#); [lrolnick@onvlp.org](#); [jdyke@helio.health](#)
Subject: NY-505 CoC NOFO and SNOFO have been released!
Date: Wednesday, August 10, 2022 4:45:00 PM
Attachments: [image001.png](#)

Good afternoon,

The HHC has published its Request for Proposals for the Fiscal Year 2022 Continuum of Care NOFO Competition and the Fiscal Year 2022 Supplemental NOFO Competition.

The HHC encourages RFP submissions from both currently funded agencies as well as new agencies.

Copies of the RFPs, Application Instructions and Rating Protocols can be found on our website, at: <http://www.hhccny.org/coc/coc-funding-competition/>

Please do not hesitate to reach out with any questions.

All the best- the HHC Team





Housing and Homeless Coalition of Central New York



Published by Megan Stuart · 1m · 🌐

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CoC Funding Competition | The Housing and Homeless Coalition of Central New York

CoC Funding Competition The Housing and Homeless Coalition of Central New York (HHC), with United Way of Central New York as its Collaborative Applicant, as the...

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FY-2022 CoC Local Competition

[2022 NY-505 Local Competition Schedule](#)



2022 NOFO

Total Annual Renewal Demand (ARD): TBD
Bonus: TBD
DV Bonus: TBD
Planning Funds: TBD
Tier 1 (95% ARD): TBD
Tier 2 (5% + Bonus): TBD

- [2022 HHC Application for NEW, BONUS, and DV BONUS Funding](#)
- [Rubric for 2022 HHC Application for NEW, BONUS, and DV BONUS Funding](#)
- [2022 NEW, BONUS, and DV BONUS Application Instructions](#)
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- [2022 RENEWAL Funding Application Instructions](#)
- [NOFO Sample Budget](#)
- [2022 NOFO Ranking Protocol](#)
- [2022 NY-505 Consolidated Application – Coming Soon](#)
- [NY-505 Priority List – Coming Soon](#)
- [2022 Final Ranking and Rating – Coming Soon](#)



To learn more about the regular CoC NOFO: <https://www.hudexchange.info/programs/e-snaps/fy-2022-coc-program-nofa-coc-program-competition/>

2019 State of Homelessness
Event



2022 NOFO Schedule

Monday, August 1, 2022	HUD CoC NOFO Application Available
Monday, August 8, 2022, 2 pm	NOFO Workgroup meeting Purpose: Review renewal process and Ranking Protocol Zoom: https://us06web.zoom.us/j/86870923295
Tuesday, August 9, 2022, 2 pm	Performance Evaluation and Selection Committee Meeting to review Local Application (New and Renewal) and Instructions as well as reallocation and transfer discussions. Zoom: https://us06web.zoom.us/j/83180336854
Wednesday, August 10, 2022, 11 am	In-Person Informational NOFO/SNOFO meeting with instructions Salt City Market Community Room
Wednesday, August 10, 2022, 5 pm	NOFO and SNOFO Local applications and competition reports sent to listserv and funded agencies.
Thursday, August 11, 2022, 10 am	Virtual Informational NOFO/SNOFO meeting with instructions Zoom: https://us06web.zoom.us/meeting/register/tZMtc-GhrjssHtae0F9NnmAtveTGZhHguf42
Wednesday, August 17th, 2022 10 am	SNOFO Severe Service Needs Planning Meeting Zoom: https://us06web.zoom.us/j/88300731796
Friday, August 26, 2021, 5 pm	Local Applications Due (Renewals and New) to HHC Director for Ranking and Rating Committee to Review All Projects Submitted in E-SNAPS (to allow time to review and amend for any changes)
Wednesday, August 31, 2022 10 am	SNOFO Severe Service Needs Planning Meeting Zoom: https://us06web.zoom.us/j/88300731796
Wednesday, August 31, 5pm	E-SNAPS applications due



<p>Thursday, September 8, 2022, 1 pm</p>	<p>NOFO Workgroup Meeting Purpose: To review Consolidated Application as well as assign reviewers for New Applications</p> <p>Zoom: https://us06web.zoom.us/j/87551676257</p>
<p>Friday, September 16, 2022, 5 pm</p>	<p>SNOFO Applications & E-snaps applications are due</p>
<p>Monday, September 12, 2022, 2 pm</p>	<p>Performance Evaluation and Selection Committee Meeting (United Way) Program acceptance & ranking</p> <p>Zoom: https://us06web.zoom.us/j/83546152891</p>
<p>Wednesday, September 21, 2022, 10 am</p>	<p>SNOFO Severe Service Needs Planning Meeting</p> <p>Zoom: https://us06web.zoom.us/j/88300731796</p>
<p>Wednesday, September 21, 2022 2 pm</p>	<p>NOFO Workgroup Meeting – To review Consolidated Application and any last final edits</p> <p>Deadline to Appeal: See ranking protocol for Appeal Process</p> <p>Zoom: https://us06web.zoom.us/j/81837559348</p>
<p>Friday, September 23, 2022</p>	<p>All E-SNAPS finalized</p>
<p>Monday, September 26, 2022</p>	<p>Final application & priority list posted publicly on hhccny.org</p>
<p>Wednesday, September 28, 2022, 10 am</p>	<p>SNOFO Severe Service Needs Planning Meeting</p> <p>Zoom: https://us06web.zoom.us/j/88300731796</p>
<p>Wednesday, September 28, 2022</p>	<p>Target NOFO Submission Date</p>



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<p>Thursday, September 29, 2022, 2 pm</p>	<p>PES committee to review and rank SNOFO applications</p> <p>Zoom: https://us06web.zoom.us/j/87531568516</p>
<p>Friday, September 30, 2022</p>	<p>NOFO Application due to HUD – submitted on E-SNAPS</p>
<p>Wednesday, October 12, 2022 10 am</p>	<p>SNOFO Severe Service Needs Planning Meeting</p> <p>Zoom: https://us06web.zoom.us/j/88300731796</p>
<p>Friday, October 14, 2022</p>	<p>Post final SNOFO application on website</p>
<p>Tuesday, October 18, 2022</p>	<p>Target submission for SNOFO</p>
<p>Thursday, October 20, 2022</p>	<p>Final SNOFO Deadline</p>

RED denotes a deadline, **GREEN** denotes Performance Evaluation and Selection Committee meeting, **BLUE** denotes NOFA workgroup meeting, **ORANGE** denotes SNOFO meetings, **BLACK** denotes a deadline for the HHC staff



HHC LOCAL COMPETITION RENEWAL PROJECT APPLICATION INSTRUCTIONS

The Housing and Homeless Coalition of Central New York is opening its local competition for Continuum of Care funding.

Due: August 26, 2022 at 5pm

ALL APPLICATION MATERIALS MUST BE SUBMITTED TO HHC@UNITEDWAY-CNY.ORG BY THE APPLICATION DUE DATE. MISSING APPLICATION MATERIALS WILL NOT BE ACCEPTED AFTER THE DUE DATE.

Application Structure

- I. Narrative**
- II. Competition Report**

The renewal application is split into two sections- Narrative, worth 25 points and Competition Report, worth 75 points.

I. Narrative

Applicants must answer all narrative questions regarding serving intersectional identities, elevating people with Lived Experience of homelessness, person center planning, connection to healthcare, and racial equity. Each narrative question is worth 5 points. Narrative questions are designed by the Lived Experience Boards of the Housing & Homeless Coalition and are meant to establish project administration priorities by people with experience.

II. Competition Report

The Competition Report will come pre-filled by the HHC team based on metrics from HUD System Performance and the project's Annual Performance Report (APR).



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The competition is scored on a scale of 75 possible points for Rapid Rehousing projects and 73 possible points for Permanent Supportive Housing projects.

Projects will review to either accept or dispute the results of the competition report. If a project wishes to dispute the results, they must follow the appeals process outlined in the HHC's Ranking and Reallocation Protocol document.

Submission

Projects will submit Competition Report along with narrative responses for review by the due date of August 26th.



HHC LOCAL COMPETITION NEW PROJECT APPLICATION INSTRUCTIONS

The Housing and Homeless Coalition of Central New York is opening its local competition for Continuum of Care funding.

Due: August 26, 2022 at 5pm

ALL APPLICATION MATERIALS MUST BE SUBMITTED TO HHC@UNITEDWAY-CNY.ORG BY THE APPLICATION DUE DATE. MISSING APPLICATION MATERIALS WILL NOT BE ACCEPTED AFTER THE DUE DATE.

Funding Requests

Agencies will submit funding requests based on the number of people served or units the project will be supporting. Projects will submit applications for Bonus or DV Bonus pots.

New projects can apply for any percentage of the “Bonus” or “DV Bonus” pots but cannot use both pots to fund one project.

It is encouraged that projects submit budgets that can be scaled up or down, with the understanding that the number of people served would scale alongside the funding. If the project is selected for funding, the funding amount will be communicated immediately with the project making the decision of whether to accept the new funding amount.

Eligible Project Types

For the FY2022 funding competition, the HHC is accepting applications of the following component types for funding priority:

1. Rapid Rehousing (RRH)
2. Supportive Services Only (SSO)- Coordinated Entry
3. Permanent Supportive Housing (PSH)
4. Homeless Management Information System (HMIS)
5. Transitional to Rapid Rehousing (Th-RRH)



Application Structure

- I. Threshold Requirements**
- II. Narrative**
- III. Performance Measures**
- IV. Budget Questions**
- V. Special Project Questions**

I. Threshold Requirements

Applicants must meet all threshold requirements to be selected for funding. Applicants must be a non-profit organization with active 501C3 status. The applicant must agree to use HMIS, or a comparable database if serving survivors of domestic violence, to capture project data. The applicant organization must agree to become a voting member of the HHC as evidenced by an MOU. the agency must agree to filling 100% of projects beds through the Coordinated Entry System and agree to operate project under a Housing First model.

The agency must also provide the Management Letter from its most recent fiscal audit to prove the agency is in good financial standing.

II. Narrative

Applicants must answer all narrative questions regarding program design, implementation, capacity, and program delivery. Each narrative question is worth 5 points. Narrative questions are designed to use objective criteria to assess the agency's capacity to administer the project, as well as assess service delivery and the cultural competency of the agency.

III. Performance Measures

Performance Measure questions are narrative questions structured to assess how well agencies are at specific HUD System Performance Measures. Using data from projects the agency currently administer is strongly encouraged.

IV. Budget



The CoC budget and questions are designed to assess the fiscal responsibility of the agency, the feasibility of the project, as well as the cost effectiveness.

Budget line items must comply with the Continuum of Care Code of Federal Regulations (24 CFR 578) which can be found at: <https://www.govinfo.gov/content/pkg/CFR-2017-title24-vol3/xml/CFR-2017-title24-vol3-part578.xml#seqnum578.99>

Matching Requirements:

Cash or in-kind match must equal 25% of total program budget. Projects using the leasing line can exclude this line from the match calculation.

Letters of match commitment must be attached. If match is an in-kind service provided by another organization, agency must submit an MOU with a valuation of services.

V. Special Projects

The Special Projects questions are specific for agencies seeking Coordinated Entry projects or projects that are partnering with Healthcare or Housing programs.

MOU or Commitment for Healthcare or Housing investment must be attached.

Required Attachments

- Management Letter from the agency's most recent fiscal audit
- Match Documentation
- Program Budget
- MOUs for Healthcare or Housing investment, if applicable



With two separate meetings, please be sure to attend one and RSVP to the in-person meeting on Wednesday via email @ hhc@unitedway-cny.org or by registering for the Thursday virtual informational session here: <https://us06web.zoom.us/j/7ZMtc...>

The HHC is hosting two Informational Meetings on the Continuum of Care Local Funding Competition NOFO and Supplemental NOFO for Serving Unsheltered and



*Salt City Market's Community Room
Wednesday, August 10th
11:15 am - 12:30 pm*

S. Salina Street
Ithaca, NY 13202

Space is limited
Please RSVP by emailing
hhc@unitedway-cny.org



*Virtual Informational Meeting
Thursday, August 11th
@ 10 am*

Register for the Zoom here



Fiscal Year 2022 NOFO and
Supplemental NOFO Local
Funding Competition



HHC Opening Local Funding Competition

The HHC announces that it is opening its local funding competition for **TWO** funding opportunities:

- Regular CoC NOFO
- Special Unsheltered & Rural NOFO

Grant Opportunities

- Regular NOFO:
 - Continuum of Care: Renewal Grants
 - Continuum of Care: Bonus/New Grants
 - Continuum of Care: Domestic Violence Bonus Grants
- SNOFO:
 - Supplemental Grants: Rural Opportunities
 - Supplemental Grants: Unsheltered Opportunities

Local Competitions vs Consolidated Applications

- The HHC hosts its local competition for funding to be submitted to HUD in a priority listing for federal funding
- Simultaneously, the HHC is working on a communitywide application called the Consolidated Application to be submitted for a national competition
- Priority listing and Consolidated Applications are submitted together to HUD for both funding opportunities
- Federal awards are based on the score of the communitywide application

Local Process

- Agencies submit local application by email as well as project application in e-snaps
- Applications are reviewed and scored by the HHC's Performance Evaluation and Selection (PES) Committee
- The PES Committee accepts, rejects, or reduces project applications
- The PES Committee then makes a Priority List of all accepted projects and submits alongside the communitywide application

E-SNAPS Applications

- Allowing projects to immediately submit project applications in e-snaps to reduce timeframe burden
- Materials to navigate e-snaps will be sent out
- PLEASE double check that you are submitting new projects under the correct NOFO opportunity

Review Schedule

Regular NOFO

- CoC NY-505 (Onondaga, Oswego, Cayuga Counties) receives approximately \$11.38M annually for Permanent Supportive Housing, Rapid Rehousing, Transitional to Rapid Rehousing, and Homeless Management Information System (HMIS) funding
- Projects currently funded are put through the competition as renewal funding
- New applications are being accepted for bonus funding in single year grants
- **All Regular NOFO projects DUE: August 26th, 5pm**

NOFO Funding Overview

- Tier 1: 95% of Annual Renewal Demand
- Tier 2: 5% plus bonus and reallocation amounts
- Bonus Amounts are still unknown. We do know that there will be both regular bonus and DV bonus funding available

Renewals

- Renewal projects will receive competition reports August 10th
- Will return competition report and narrative responses by August 26th
- Reallocation decisions will be made Friday, the 12th
- Ranked will be based on the combination of two scores

Regular Bonus/New

- New projects will be accepted in the following components:
 - Rapid Rehousing
 - Permanent Supportive Housing
 - Transitional to Rapid Rehousing
 - Supportive Services Only- Coordinated Entry

DV Bonus Funding

- CoC may apply for the following types of projects to serve DV: RRH, Joint TH and RRH, SSO projects (for CE position)
- If the project **IS** selected, projects below will be moved up in ranking
- If the project **IS NOT** selected, projects will be funded as listed in the ranking

Healthcare Projects

- HUD is giving bonus points to CoCs who apply for projects that partners with healthcare institutions
- For substance use treatment providers: Project must provide access for all participants who qualify and choose those services
- For all other healthcare: must secure an amount that is equivalent to 25% of the funding will be covered by healthcare provider
- Must have written agreements that include:
 - Value of the commitment
 - Dates the healthcare resources will be provided

Housing Resource Projects

- Project combining funding other than CoC or ESG to create affordable housing
- Can be state, local, HOME, faith based or PHA funding
- Project needs to utilize housing subsidies
- PSH: Must be provided at least 25% of units in project
- RRH: Serve at least 25% of program participants

Coordinated Entry Project (SSO)

- Must demonstrate that the centralized or coordinated assessment system is available/reachable for all persons within the CoC's geographic area
- Must have a strategy for advertising that is designed to reach people with highest barriers
- Must have standardized assessment process
- Ensures program participants are directed to appropriate housing and services that fit their needs

Review of New NOFO Application

Supplemental Notice of Funding Opportunity

- \$322 million in re-captured HUD funds to create new grant opportunity from HUD to address unsheltered homelessness & people experiencing homelessness in rural areas
- Extremely competitive national competition

SNOFO Funding Overview

- Supports Three Year Grants
- DUE: September 9, 2022 at 5pm
- Unsheltered New: \$7,990,921
- Rural New: \$332,885
- Eligible Components:
 - Rapid Rehousing
 - Permanent Supportive Housing
 - Transitional to Rapid Rehousing
 - Homeless Management Information Systems
 - Supportive Services Only- Coordinated Entry
 - Supportive Services Only- Street Outreach

Review of SNOFO Applications



www.hhccny.org
 hhc@unitedway-cny.org
 facebook.com/hhccny
 @hhcofcny

**Onondaga/Oswego/Cayuga County Continuum of Care
 2022 Local Renewal Application Rubric**
Applications are due August 26th at 5 pm
Applications must be submitted in a single PDF to
The HHC via email: hhc@unitedway-cny.org

<u>Agency and Project Information</u>	
Agency Name:	
Program Name:	
Application Contact Person:	
Component Type:	<input type="checkbox"/> RRH <input type="checkbox"/> PSH <input type="checkbox"/> Th-RRH
County Serving:	<input type="checkbox"/> Cayuga <input type="checkbox"/> Onondaga <input type="checkbox"/> Oswego

<u>Narrative Response Questions</u>	
Serving Intersectional Identities: 5 points	Describe how your program will provide consistent help across intersectional identities. (e.g. LGBTQIA+, youth, BIPOC, etc.) (250 words)
<p>4-5 points: Agency has a strategy to provide consistent services for people with intersectional identities. Strategies could include staff training, hiring people who represent the people served, etc.</p> <p>2-3 points: Agency commits to providing consistent service but does not identify any clear strategies.</p> <p>0-1 points: Agency does not outline strategies to provide consistent service to people across intersectional identities.</p>	
Elevating Lived Experience: 5 points	Describe how your program plans to elevate the voices of and employ people with lived experience of homelessness to create better support for your clients. (250 words)
<p>4-5 points: Agency has actionable practices to employ and elevate people with lived experience, including employment and HR strategies, board representation, and/or intentional feedback.</p> <p>2-3 points: Agency incorporates feedback from participants in project design or conducts feedback surveys.</p>	



0-1 points: Agency does not have a clear strategy for elevating the voices of people with lived experience.

Examples of actionable practices:

- Policies to ensure that all clients are able to access services at the level of their need
- People with lived experience of homelessness, including people from BIPOC communities, are represented on the board of the organization
- Client feedback on the project is requested and a process is in place to examine and improve client satisfaction
- Outcome data is collected, disaggregated for race and ethnicity, and used to inform policy decisions
- Training for frontline staff to provide high-quality services
- Recruiting staff with lived experience of homelessness
- Services include peer support positions
- Mentorship and training for frontline staff interested in management positions)

Person-Centered Supportive Services: 5 points	Describe how your program supports and engages the individuals served throughout their participation in the project. (250 words)
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4-5 points: Agency has actionable practices to provide ongoing supportive services throughout the duration of the project. Examples of practices include centering the participant in goal planning, creative engagement strategies, and case management training.

2-3 points: Agency provides supportive services but has limited examples of specific practices.

0-1 points: Agency does not have a clear strategy for providing ongoing services or services described are not person-centered.

Connection to Healthcare Services: 5 points	Describe your strategy to ensure participants are connected with and have ongoing access to appropriate healthcare services. (250 words)
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4-5 points: Agency has actionable practices to connect participants to healthcare services. Examples of actionable practices can include partnerships with healthcare organizations through MOU, providing navigation services, addressing transportation barriers to healthcare services, etc.

2-3 points: Agency provides connections to healthcare services, but connection is limited.

0-1 points: Agency does not have a clear strategy for connecting participants with healthcare services.

Racial Disparities: 5 points	How does your project work to eliminate racial disparities in housing outcomes? (250 words)
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4-5 points: Agency has promising goals for promoting racial equity. The answer clearly demonstrates how this project will ensure equity and address racial disparities. This could include practices to assess data and outcomes disaggregately, training program staff in anti-racism and other relevant trainings, agency identifies other practices that eliminate disparities.

2-3 points: Agency is committed to equity but has no clear actionable practices.

0-1 points: Agency does not have clear commitment to racial equity.



<u>Project Competition Report:</u>	
All performance data is for FY2021 (10/1/2020 to 9/30/2021). Financial data is for the most recent completed Fiscal Year. Monitoring score is for the most recent monitoring visit.	
Utilization: 5 points	Projected households served during average PIT: ____ Actual Number households served during PITs (APR Q8): October 2020 Households: January 2021 Households: April 2021 Households: July 2021 Households: Households Average Actual ____ / Projected ____ = Utilization ____ %
5 points: 95%-100% Utilization Rate 3 points: 90%-94% 0 points: <90%	
Vulnerable Populations: 5 points	What percentage of clients served in FY2021 were in the following categories? Chronically Homeless (Q5a #11 / Q5a # 14): (>75%) Youth [Q27a Youth Ages 18-24 / Q5a #1]: (>75%) Domestic Violence[Q14b Yes / Q5a#1]: (>75%)
Score 5 points if any were above 75%	
Data Quality: 5 points	Were all of the following error rates below 5% for Q6 of your FY2021 APR? Personally-Identifying information (6a), Universal Data Elements (6b), Income and Housing Data Quality (6c), Chronic Homelessness (6d)
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Score 5 points for Yes.	
Coordinated Entry Participation: 5 points	What percentage of new entries to the project during FY2021 were matched to your project through the coordinated entry system?
5 points: 100% 0 points: Less than 100%	



<p>Permanent Housing Placement & Retention: 10 points</p>	<p>For PSH, what percentage of clients served in FY2021 either stayed in the project or exited to a permanent housing destination (APR Q5a#8 Stayers, Q23c Exiting to housing destinations) (Positive housing destinations + Stayers) / (Total Participants – Persons excluded)</p> <p>For RRH, of the clients who exited your project, what percentage of clients served in FY2020 exited to a permanent housing destination (APR Q23c)?</p>
<p>The CoC-wide percentage of PSH clients retained or exited to permanent housing is 97%</p> <p>10 points: 98-100% 5 points: 90-97% 0 points: Less than 90%</p> <p>The CoC-wide percentage of RRH clients exited to a permanent housing destination is 86%</p> <p>10 points: 91-100% 5 points: 80-90% 0 points: Less than 80%</p>	
<p>Employment Growth: 5 points</p>	<p>What percentage of clients enrolled in your program within the FY2021 year increased their employment income (APR Q19a1 and Q19a2)?</p> <p>{Within the “Number of Adults with Earned Income” Rows in Q19a1 & 19a2} Adults who Gained or Increased Income from Start to Annual Assessment, Average Gain+ Adults who Gained or Increased Income from Start to Exit, Average Gain)/(Total Adults in Q19a1 + Total Adults in Q19a2)</p>
<p>PSH: CoC-wide Average is 6%</p> <p>5 points: More than 6% 3 points: Between 4 to 6% 0 points: Less than 4%</p> <p>RRH: CoC-Wide Average is 15%</p> <p>5 points: More than 15% 3 points: 10-15% 0 points: Less 10%</p>	
<p>Income Growth: 5 points</p>	<p>What percentage of clients enrolled in your program at the end of FY2021 had increased their total cash income since entering the program (Q19a1 & APR Q19a2)?</p> <p>{Within the “Number of Adults with Any Income” Rows in Q19a1 & 19a2} Adults who Gained or Increased Income from Start to Annual Assessment, Average Gain+ Adults who Gained or Increased Income from Start to Exit, Average Gain)/(Total Adults in Q19a1 + Total Adults in Q19a2)</p>
<p>PSH: The CoC-wide percentage for PSH programs was 48%</p>	



<p>5 points: More than 50% 3 points: 40-50% 0 points: Less than 40%</p> <p>RRH: The CoC-wide percentage for RRH programs was 38% 5 points: More than 40% 3 points: 30-40% 0 points: Less than 30%</p>	
<p>Health Insurance: 4 points</p>	<p>What percentage of leavers in your project had health insurance upon exit from the project (APR Q21 + APR Q5a#5)?</p> <p>(Number of “1 Source of Health Insurance + Number of “More than 1 Source of Health Insurance) / (Number of Leavers)</p>
<p>The CoC-Wide Percentage was 87% for PSH The CoC-Wide Percentage was 92% for RRH</p> <p>4 points: More than 90% 2 points: 85-90% 0 points: Less than 85%</p>	
<p>Non-Cash Benefits: 4 point</p>	<p>What percentage of leavers enrolled in your project had other non-cash benefits upon exit from the project (Q20b, Q5a#7)?</p> <p>Number of “1 + Sources” / “Number of Adult and Head of Household Leavers”</p>
<p>The CoC-Wide Percentage for PSH was 72% [1-(62/254)] The CoC-Wide Percentage for RRH was 67% [1-(102/670)]</p> <p>4 points: More than 70% 2 points: 65-70% 0 points: Less than 65%</p>	
<p>Time to Move-in: 2 point</p>	<p>For RRH, what was the average time for households to move into housing after enrolling in the project? (Q22c, “Average length of time to housing”) The CoC-Wide Average Length of time is 58 days</p>
<p>2 points: Less than 30 days 1 points: Between 30-50 days 0 points: Over 50 days</p>	
<p>Fund expenditure: 5 points</p>	<p>Were all funds expended in the last completed program year?</p>
<p>5 points: 100% spent</p>	



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3 points: 95-99% 0 points: Less than 94%	
APR Submission: 5 points	Was the project's most recent APR submitted on time?
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Score 5 points for Yes.	
Monitoring: 15 points	Were there significant findings for your project during CoC monitoring?
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Score 15 points for No	

	Total
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**Onondaga/Oswego/Cayuga County Continuum of Care
 2022 Local New Application Rubric**

**Applications are due August 26, 2022, at 5pm.
 Applications and all attachments must be submitted in a single PDF to
 the HHC via email: hhc@unitedway-cny.org**

<u>Agency and Project Information</u>			
Agency Name:			
Program Name:			
Application Contact Person:			
Agency Contact Email:			
Amount Requesting:		Projected Number Served:	
Component Type:	<input type="checkbox"/> RRH <input type="checkbox"/> PSH <input type="checkbox"/> SSO (Coordinated Entry) <input type="checkbox"/> Th-RRH		
County Serving*: <i>* Projects serving Cayuga County will receive 2 additional bonus points</i>	<input type="checkbox"/> Cayuga <input type="checkbox"/> Onondaga <input type="checkbox"/> Oswego <input type="checkbox"/> Multi-County		
Is this project partnering with a healthcare service?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is this project a subsidy partnership project?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is this project serving survivors of domestic violence and applying for DV Bonus funds?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is this project an expansion of an existing CoC project?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Threshold Requirements

Applicant is a Non-Profit organization with active 501(c)3 status, public housing authority, or local government organization	<input type="checkbox"/> Yes <input type="checkbox"/> No
Agree to use HMIS (or comparable database if DV)	<input type="checkbox"/> Yes <input type="checkbox"/> No
HHC Membership- has a current MOU or agrees to enter MOU with HHC	<input type="checkbox"/> Yes <input type="checkbox"/> No
Applicant agrees to using the Coordinated Entry System to fill 100% of beds	<input type="checkbox"/> Yes <input type="checkbox"/> No
Applicants agrees to adopt Housing First model	<input type="checkbox"/> Yes <input type="checkbox"/> No
Management letter from agency's most recent fiscal audit demonstrating that agency is in good standing is attached.	<input type="checkbox"/> Yes <input type="checkbox"/> No

If the answer is no to any of the above questions, please explain below.

If agency does not meet threshold requirements, stop scoring. Agency is not eligible for CoC funding.

Narrative Questions

Program Design:	Please provide a general description of the program including the population served, bed/unit configuration. Please indicate whether project will serve any specialized populations. (500 words)
Community Need: 5 points	Using local data on homelessness, how does this project support the HHC's goals of ending chronic, youth, family or homelessness for all persons? Please include agency's unique ability to serve the population. (250 words)
<p>4-5 points: Narrative uses local HMIS data from CoC data sheet or from HHC-CNY Fact Sheet Dashboard to support project goals. Rationale for project is clearly related to HMIS data. Agency has demonstrated leadership in serving this population</p> <p>2-3 points: Either narrative does not use HMIS/ HHC dashboard data OR Agency does not demonstrate evidence of leadership in serving population</p> <p>0-1 points: Narrative does not use HMIS/HHC Dashboard data AND agency does not demonstrate evidence of leadership in serving proposed population</p>	
Capacity: 5 points	Please describe housing programs the agency currently administers and describe success of the programs. If agency currently or has received CoC funding in the past, address, if any, programs fell into Tier 2 or been reallocated. (250 words)

4-5 points: Agency demonstrates experience operating housing programs, addresses any issues with past performance issues with plan to improve in the future. Application uses currently funded housing project data to demonstrate capacity.

2-3 points: Has some experience operating housing programs

0-1 points: Agency has little or no experience operating housing programs	
Project Implementation: 5 points	Describe your detailed plan for rapid implementation of the program, documenting how the program will be ready to begin housing the first program participant. Please discuss agency timelines for staffing the project and otherwise complying with CoC Program deadline. (250 words)
<p>4-5 points: Agency has resources in place to immediately begin program including staffing structures, concrete timeline for hiring, and a plan to fill beds within 90 days of program start.</p> <p>2-3 points: Agency has a limited plan without concrete details for project implementation.</p> <p>0-1 points: Agency does not have a clear strategy for project implementation.</p>	
Person-Centered Planning: 5 points	Describe how your program supports and engages the individuals served throughout their participation in the project. (250 words)
<p>4-5 points: Agency has actionable practices to provide ongoing supportive services throughout the duration of the project. Examples of practices include centering the participant in goal planning, creative engagement strategies, and case management training.</p> <p>2-3 points: Agency provides supportive services but has limited examples of specific practices.</p> <p>0-1 points: Agency does not have a clear strategy for providing ongoing services or services described are not person-centered.</p>	
Racial Equity: 5 points	How does your project work to eliminate racial disparities in housing outcomes? (250 words)
<p>4-5 points: Agency has promising goals for promoting racial equity. The answer clearly demonstrates how this project will ensure equity and address racial disparities. This could include practices to assess data and outcomes disaggregately, training program staff in anti-racism and other relevant trainings, agency identifies other practices that eliminate disparities.</p> <p>2-3 points: Agency is committed to equity but has no clear actionable practices.</p> <p>0-1 points: Agency does not have clear commitment to racial equity.</p>	
Elevating Lived Experience: 5 points	Describe how your program plans to elevate the voices of and employ people with lived experience of homelessness to create better support for your clients. (250 words)
<p>4-5 points: Agency has actionable practices to employ and elevate people with lived experience, including employment and HR strategies, board representation, and/or intentional feedback.</p> <p>2-3 points: Agency incorporates feedback from participants in project design or conducts feedback surveys.</p> <p>0-1 points: Agency does not have a clear strategy for elevating the voices of people with lived experience.</p> <p>Examples of actionable practices:</p> <ul style="list-style-type: none"> - Policies to ensure that all clients are able to access services at the level of their need - People with lived experience of homelessness, including people from BIPOC communities, are represented on the board of the organization - Client feedback on the project is requested and a process is in place to examine and improve client satisfaction - Outcome data is collected, disaggregated for race and ethnicity, and used to inform policy decisions 	

- Training for frontline staff to provide high-quality services
- Recruiting staff with lived experience of homelessness
- Services include peer support positions
- Mentorship and training for frontline staff interested in management positions)

Serving Intersectional Identities: 5 points	Describe how your program will provide consistent help across intersectional identities. (e.g. LGBTQIA+, youth, BIPOC, etc.) (250 words)
<p>4-5 points: Agency has a strategy to provide consistent services for people with intersectional identities. Strategies could include staff training, hiring people who represent the people served, etc.</p> <p>2-3 points: Agency commits to providing consistent service but does not identify any clear strategies.</p> <p>0-1 points: Agency does not outline strategies to provide consistent service to people across intersectional identities.</p>	
Connection to Healthcare Services: 5 points	Describe your strategy to ensure clients are connected with and have ongoing access to appropriate healthcare services. (250 words)
<p>4-5 points: Agency has actionable practices to connect participants to healthcare services. Examples of actionable practices can include partnerships with healthcare organizations through MOU, providing navigation services, addressing transportation barriers to healthcare services, etc.</p> <p>2-3 points: Agency provides connections to healthcare services, but connection is limited.</p> <p>0-1 points: Agency does not have a clear strategy for connecting participants with healthcare services.</p>	

Performance Measures

Employment & Income Growth: 10 points	Describe how clients will be assisted in obtaining employment, income, and mainstream health resources to maximize their ability to live independently. (250 words)
<p>8-10 points: Agency describes their ability and commitment to helping clients in each of the three areas described. Specific strategies include: Job coaching, Connections with specifically named workforce development agencies or programs (e.g., JobCorps, CNYWorks), SOAR training for staff members, Medicaid enrollment, Connections with specific named Health homes agencies, Connections with specific named primary care providers, Connections with specifically named substance abuse treatment providers, Motivational Interviewing.</p> <p>5-7 points: Specific strategies are named, but do not include all three resource areas.</p> <p>2-4 points: All three resource areas are described, but specific strategies are not described. Strategies are vague.</p> <p>0-1 points: Answer is not applicable to the question or does not give any detail</p>	
Housing Placement & Retention: 10 Points	How will project assist participants in obtaining safe, affordable housing quickly? How will the program ensure that participants will exit to or remain in permanent housing? (250 words)
<p>8-10 points: Describes commitment to moving or transferring clients with complex challenges along with specific strategies to serve these clients. Agency describes experience negotiating with landlords</p>	

and advocating for clients, and doing appropriate discharge planning. Agency also describes supportive services provided to ensure housing stability.
5-7 points: Agency describes commitment to ensuring participants remain in or exit to permanent housing but strategies are unclear or limited. Agency has limited experience retaining clients in permanent housing
2-4 points: Agency commits to ensuring participants will exit or remain in permanent housing but does not include strategies for achieving the goal.
0-1 points: Answer is not applicable to the question or does not give details.

Returns to Homelessness: 10 points	How will projects ensure that clients will not return to homelessness after project exit?
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8-10 points: Describes agency practices relating to supportive services and stability plans. Agency has 'moving on' strategies to ensure participants are stable at program exit. Agency addresses how it will ensure participants have long-term stability including access to ongoing supportive services, affordable housing/subsidies, etc.
5-7 points: Agency describes commitment to ensuring participants do not return to homelessness but strategies are unclear or limited. Agency has limited experience in stabilizing clients.
2-4 points: Agency commits to ensuring participants will not return to homelessness but does not give any concrete details.
0-1 points: Answer is not applicable to the question or does not give details.

Budget Questions

Please attach a project budget to prove that expenses are reasonable, allocable, and allowable as well as 25% match documentation: 10 points Budget Attached Match Documentation Attached

Budget must include: no line items outside of the categories of Leasing, Rental Assistance, Supportive Services, Operations, and Administration.

Admin cannot be over 10% unless agency has an approved cost rate.

Match must be 25% of total grant amount*, indicate whether it is cash or in-kind, and have attached match letter. Agencies can only receive a maximum score of 5 if match documentation is not attached.

*If a project has a LEASING budget line, this does not require match. In this case, you would subtract the leasing line amount from the total grant amount to determine the 25% match requirement.

Cost Effectiveness: 10 points	Annual budget will be divided by number of beds. Community averages are as follows: Rapid Rehousing: \$7,391/bed Permanent Supportive Housing: \$13,341/bed Transitional-Rapid Rehousing: \$31,734/bed SSO (Coordinated Entry): N/A
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10 points: Project is under community averages by 10%
5 points: Project is within 10% of community averages
0 points: Project cost is 10% or more over averages

Special Project Questions

Only fill out these questions if you are applying for these specific project types

ONLY For Domestic Violence Bonus Applicants: 10 points

Please answer these two questions in the section below: (250 words)

- Describe agency's experience working with victims/survivors of Domestic Violence.
- Indicate whether your organization is a Victim Service Provider

8-10 points: Agency applying is a Victim Service Provider with demonstrated experience working with survivors of DV, including receiving federal and state funding to operate DV programs.

5-7 points: Agency has experience working with the DV population but is not a Victim Service provider.

2-4 points: Agency has some experience working with the DV population.

0-1 points: Agency has no experience working with the DV population.

ONLY For Coordinated Entry Applicants: 10 points

Please answer the following questions in the section below (500 words)

- Describe how you will ensure that the coordinated assessment system will be easily available/reachable for all persons within the CoC's geographic area who are seeking homelessness assistance including those with disabilities.
- Describe how your advertising strategy will be designed to specifically reach homeless persons with the highest barriers within the CoC's geographic area.
- Describe how your standardized assessment process will ensure program participants are directed to appropriate housing and services that fit their needs.

8-10 points: Agency has a strategy to ensure all points of CE project are met including demonstrating experience working in or with the Coordinated Entry system.

5-7 points: Agency has experience working with Coordinated Entry system but does not address each element of CES implementation.

2-4 points: Agency has little experience working in Coordinated Entry system.

0-1 points: Agency does not address any components of CES.

ONLY For Healthcare Project Applicants: 10 points

Please describe how the project will structure program to provide healthcare services to participants. (250 words)

8-10 points: Agency has created a partnership with a healthcare provider and describes 25% funding commitment or access to SUD services for all participants. Commitment of healthcare provider must be attached. Program design is clear.

5-7 points: Program design is somewhat clear but some questions remain.

2-4 points: Program design is not clear and/or does not have healthcare provider secured.

0-1 points: Agency does not provide explanation of program design, healthcare provider and/or does not have letter attached.

Please attach a commitment letter from a healthcare organization demonstrating commitment of either: Attached

- i. For recovery or substance use treatment, services that are available for all program participants and chose those services; or
- ii. An amount that is equivalent to 25% of the funding being requested for the project to be covered by the healthcare organization.

ONLY For Subsidized Partnership Project Applicants: 10 points

Please describe how the project will structure the program to ensure at least 25% of project serves unit/participants in PSH or RRH. Please include partners and additional funding source. (250 words)

8-10 points: Agency has created a partnership with an affordable housing funding source and explains how at least 25% of units or persons will be served by the project. Commitment of separate funding source must be attached. Program design is clear.

5-7 points: Program design is somewhat clear but some questions remain.

2-4 points: Program design is not clear and/or does not have additional funding source defined or secured.

0-1 points: Agency does not provide explanation of program design, additional funding source and/or does not have letter attached.

Please attach a funding letter from a housing organization demonstrating commitment of either:

Attached

- i. 25% of units will be dedicated to PSH participants; or
- ii. 25% of persons served will be dedicated to RRH participants



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 hhc@unitedway-cny.org
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 @hhcofcny

**Onondaga/Oswego/Cayuga County Continuum of Care
 2022 Local Renewal Application**

**Applications are due August 26th at 5 pm
 Applications must be submitted in a single PDF to
 The HHC via email: hhc@unitedway-cny.org**

Agency and Project Information

Agency Name:	Catholic Charities of the Roman Catholic Diocese of Syracuse, NY
Program Name:	CC Permanent Housing for the Chronically Homeless 1
Application Contact Person:	Kristian Peterson & Danchell Hicks
Component Type:	<input type="checkbox"/> RRH <input checked="" type="checkbox"/> PSH <input type="checkbox"/> Th-RRH
County Serving:	<input type="checkbox"/> Cayuga <input checked="" type="checkbox"/> Onondaga <input type="checkbox"/> Oswego <input type="checkbox"/> Multi-County

Narrative Response Questions

<p>Consistent Service Delivery: 5 points</p>	<p>Catholic Charities of Onondaga County (CCOC) is committed to providing consistent help across intersectional identities in the community. This is done by identifying areas for staff to be trained appropriately such as Cultural Competency, Motivational Interviewing, and Person Centered Care trainings. CCOC also has established an Equity Work Group that meets with leadership in order to reflect and give recognition to the unique needs of individuals with intersectional identities. This is done by revisiting agency policies and training materials in order to identify needed expansions, modifications, or deletions to increase inclusivity in service provisions and agency functioning.</p> <p>CCOC ensures that program policy outlines intake and service delivery procedures in order to ensure consistency regarding accessing services, service delivery, and client exits. From the time assigned, project staff is trained to reach out and establish contact with the client or referral source of the assigned client within 48 hours of being assigned the case and are required to meet with the client within five business days. Staff is trained on all documentation required to assist the client with reaching stabilization in housing. A goal plan is developed with each client at</p>
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	<p>intake. Staff also meets with program administration daily as needed to address questions and concerns, and weekly formal supervision is required for all staff, including staff development discussions.</p>
<p>Lived Experience: 5 points</p>	<p>CCOC collaborates with Project Joseph, the agency’s social venture (business), to provide skills training and employment to people with lived experience. Residents of CCOC programs are often employed with the agency as plant operations staff. CCOC is an equal opportunity employer, does not discriminate, and takes steps to ensure against discrimination in employment, recruitment, and other like activities. CCOC provides on-the-job training for homeless and housing-vulnerable youth and adults through CNY Works, the Women’s Opportunity Center, and through the JobsPlus program. The agency also participates in a Pathways to Employment program for Onondaga Community College students. The CCOC Corporate Compliance department has an open door policy for concerns as well as a confidential hotline for anonymous messages. Programs have a grievance policy, provided to clients, with multiple ways for their opinions, criticism, reflections, and concerns to be heard. Satisfaction surveys are sent to seek client feedback. The agency’s Quality Improvement department conducts randomized check-ins with clients. Examples of actionable practices undertaken by CCOC housing programs include recruiting staff with lived experience, training for frontline staff to provide high-quality services, and training for frontline staff interested in management positions. Evidence of these practices is reflected in the agency’s internal hiring numbers. Specifically, in HUD-funded programs, all Program Managers and Program Directors were promoted from within, with over 70% of them being promoted from the Housing Case Worker position. According to a spring 2022 survey of the CCOC Board of Directors, three of the eighteen members have lived experience.</p>
<p>Person Centered Planning: 5 points</p>	<p>CCOC is committed to providing the necessary supports for the individuals served throughout their participation in the project, including creative engagement strategies such as meeting in places that are less anxiety provoking for the client and utilizing after hours for those who do not like to be home throughout the day. CCOC ensures all direct support staff are trained upon hire with Person Centered Care, Motivational Interviewing, and Mental Health First Aide among others to assist with supporting program participants throughout their program tenure. CCOC has worked successfully to build community stakeholder relationships with other agencies such as the Department of Social Services, ARISE, Helio Health, and others to ensure the agency is providing well rounded care and referrals to other services that the agency does not provide in house. During the first 30 days of service, case management engages the participant in person-centered goal planning which can include a plethora of life skills, inter-personal, and income-related achievements. In addition, CCOC provides person-centered support services through other agency funds for parent education, providing in-house therapy to meet</p>



	<p>participants where they are, and provide employment services and job-readiness skills to participants who are interested. CCOC focuses on a Housing First Model that allows staff to meet clients where they are at all times while working on small successes to achieve overall stability throughout their program tenure.</p>
<p>Connection to Healthcare Services: 5 points</p>	<p>CCOC is committed to improving access and connection to health care services for clients served. All project staff are trained to discuss health care and current insurance enrollment upon intake into the program. Through the utilization of Person Centered planning and psychosocial assessment, project staff assess and discuss health care needs with the person being served. CCOC project staff assist clients in obtaining access to health care insurance if needed, specifically Medicaid services. CCOC also operates Adult and Children’s Health Home Care Management programs that provides health care case management services. Case Workers of each program, if the client is enrolled in both, maintain communication to ensure client needs are being communicated and met. Project staff have access to and are informed of how to complete a referral for the Adult and Children’s Health Home medical case management. Clients also receive case management services within their housing project based on their individualized goal plans which can include health care related items. To address transportation barriers, all CCOC housing programs offer access to bus passes, case work transportation, setting up Medicaid cabs, ride share retrieval, and assist participants in utilizing their resources and life skills. In addition, Syracuse Community Health Center provides limited services on site at CCOC’s Men’s Shelter. These services are not exclusive to just the Men’s Shelter, but are available for all CCOC housing clients to access, if needed.</p>
<p>Racial Equity: 5 points</p>	<p>CCOC is committed to addressing and eliminating racial disparities in housing. This is done by identifying implicit bias and its origins, innovations in hiring practices/service provisions that can improve program outcomes for groups most affected by homelessness, and by applying tools that can help communities analyze their data to identify and address any disparities in outreach, inflow, assessment, services, housing, and recidivism. CCOC provides services in a culturally competent manner that recognizes, values, affirms, and respects the worth of individuals, as well as protects and preserves the dignity of each person. All staff receives initial and ongoing training in cultural competency and harassment prevention. The agency does not and shall not discriminate on the basis of race, color, religion (creed), socioeconomic status, gender, gender expression, age, national origin, disability, marital status, sexual orientation, or military status in any of its activities or operations. These activities include, but are not limited to, hiring and firing of staff, selection of volunteers and vendors, and the provision of services. The agency is committed to providing an inclusive and harassment-free environment for all members of the staff (including volunteers, interns,</p>



and subcontractors) and clients. Every individual who receives services from CCOC has a right to file grievances and recommendations related to service. A grievance is a formal complaint that can be about an employee or the agency, a violation of participants' rights, or unhappiness with services or supports. The agency's Equity Work Group is co-chaired by the Permanent Supportive Housing Program Director.

Project Competition Report	Percentage	Points
Utilization: Did your project meet its projected number or either households or persons served during the year (100% utilization?)	95%	5
Vulnerable Populations: What percentage of clients served in FY2021 were in the following categories:		
Chronically Homeless	100%	5
Youth	3%	
Domestic Violence	5%	
Data Quality: Were all of the following error rates below 5% for Q6 for your FY2020 APR? <ul style="list-style-type: none"> • Personally-Identifying Information • Universal Data Elements • Income and Housing Data Quality • Chronic Homelessness 	0%	5
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Coordinated Entry Participation: What percentage of new entries to the project during FY2021 were matched to your project through the coordinated entry system?	100%	5
Permanent Housing Placement and Retention: For PSH , what percentage of clients served in FY2021 either stayed in the project or exited to a permanent housing destination? For RRH , of the clients who exited your project, what percentage of clients served in FY2021 exited to a permanent housing destination?	99%	10
Employment growth – All Clients: What percentage of clients enrolled in your program within the FY2021 year increased their employment income?	5%	3
Income Growth – All Clients:	41%	3



What percentage of clients enrolled in your program at the end of FY2021 had increased their total cash income since entering the program?		
Health Insurance: What percentage of leavers in your project had health insurance upon exit from the project?	100%	4
Non-Cash Benefits: What percentage of leavers enrolled in your project had other non-cash benefits upon exit from the project?	75%	4
Time to Move-in: For RRH, what was the average time for households to move into housing after enrolling in the project?	N/A	0
Fund expenditure: Were all funds expended in the last completed program year?	100%	5
APR Submission: Was the project's most recent APR submitted on time?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	5
Monitoring: Were there significant findings for your project during CoC monitoring?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	15
Total Competition Score (out of 75)		69
Total Narrative Score (out of 25)		
Total Renewal Score (out of 100)		

<u>Agency Certification</u>	
Project Certification of objective criteria:	<input checked="" type="checkbox"/> Accept <input type="checkbox"/> Dispute <input type="checkbox"/> Dispute and Request Meeting with Committee
If the agency disputes the report, please describe which of the objective criteria are incorrect.	
Signature:	
Printed Name:	Kristian L. Peterson, Program Officer, Homeless and Emergency Services

2022 NOFO & SNOFO Review Form

Reviewer Name *

Liz Vuillemot

Agency Applicant Name *

Catholic Charities of Roman Catholic Diocese of Syracuse

Project Applicant Name *

CC Permanent Housing of Chronically Homeless I

This application is applying for: *



The Regular CoC NOFO



The Supplemental Unsheltered or Rural NOFO

Regular NOFO

What type of application is this? *

- New, Bonus or DV Bonus Project Application
- Renewal Application

Renewal Application

What is the Component Type? *

- RRH
- PSH
- Th-RRH

Which county is this project serving? *

- Onondaga
- Cayuga
- Oswego

Serving Intersections Identities: Worth 5 points

4-5 points: Agency has a strategy to provide consistent services for people with intersectional identities. Strategies could include staff training, hiring people who represent the people served, etc.

2-3 points: Agency commits to providing consistent service but does not identify any clear strategies.

0-1 points: Agency does not outline strategies to provide consistent service to people across intersectional identities.

5

4

3

2

1

0

Elevating Lived Experience: Worth 5 points

*

4-5 points: Agency has actionable practices to employ and elevate people with lived experience, including employment and HR strategies, board representation, and/or intentional feedback.

2-3 points: Agency incorporates feedback from participants in project design or conducts feedback surveys.

0-1 points: Agency does not have a clear strategy for elevating the voices of people with lived experience.

Examples of actionable practices:

- Policies to ensure that all clients are able to access services at the level of their need
- People with lived experience of homelessness, including people from BIPOC communities, are represented on the board of the organization
- Client feedback on the project is requested and a process is in place to examine and improve client satisfaction
- Outcome data is collected, disaggregated for race and ethnicity, and used to inform policy decisions
- Training for frontline staff to provide high-quality services
- Recruiting staff with lived experience of homelessness
- Services include peer support positions
- Mentorship and training for frontline staff interested in management positions)

 5 4 3 2 1 0

Person-Centered Supportive Services: Worth 5 points

*

4-5 points: Agency has actionable practices to provide ongoing supportive services throughout the duration of the project. Examples of practices include centering the participant in goal planning, creative engagement strategies, and case management training.

2-3 points: Agency provides supportive services but has limited examples of specific practices.

0-1 points: Agency does not have a clear strategy for providing ongoing services or services described are not person-centered.

 5 4 3 2 1 0

Connection to Health Care Services: Worth 5 points

*

4-5 points: Agency has actionable practices to connect participants to healthcare services. Examples of actionable practices can include partnerships with healthcare organizations through MOU, providing navigation services, addressing transportation barriers to healthcare services, etc.

2-3 points: Agency provides connections to healthcare services, but connection is limited.

0-1 points: Agency does not have a clear strategy for connecting participants with healthcare services.

5

4

3

2

1

0

Racial Disparities: Worth 5 points

*

4-5 points: Agency has promising goals for promoting racial equity. The answer clearly demonstrates how this project will ensure equity and address racial disparities. This could include practices to assess data and outcomes disaggregately, training program staff in anti-racism and other relevant trainings, agency identifies other practices that eliminate disparities.

2-3 points: Agency is committed to equity but has no clear actionable practices.

0-1 points: Agency does not have clear commitment to racial equity.

- 5
- 4
- 3
- 2
- 1
- 0

Additional Comments:

Please provide an explanation for low scoring answers.

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Please enter the project's competition report score.

*

The competition report score is located at the bottom of the application.

69

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New, Bonus or DV Bonus Application

From: [Megan Stuart](#)
To: [Diane Cooper-Currier \(dcurrier@oco.org\)](mailto:dcurrier@oco.org)
Cc: [Sherrain Clark](#)
Subject: OCO HOPE PSH Reallocation
Date: Friday, August 12, 2022 11:50:00 AM
Attachments: [Ranking Protocol - FY22 FINAL.pdf](#)

Good morning Diane,

I am writing to let you know that the Housing & Homeless Coalition's Performance Evaluation and Selection Committee met today, Friday August 12th, and has decided to reallocate the entirety of your renewal application for the following Oswego County Opportunities Project:

OCO HOPE PSH, in the full amount of \$124,892

This reallocation was a result of the project's continued low performance, meeting the following category for reallocation in the Reallocation Protocol:

Projects have been in the bottom 10% of CoC Ranking due to low performance for two or more consecutive years, as evidenced by the project's Annual Performance Report, performance measures, and CoC Ranking Process

Your grant will expire at the end of its FY2021 project year on **December 31, 2023**.

If you would like to appeal this decision, please follow the protocol in the attached Reallocation Protocol outlining the process.
Please let me know if you have any questions or want to set up a meeting to discuss the decision.

Megan Stuart

(she/her)

Director, Housing & Homeless Coalition of Central New York

Office: 315-428-2224 | Cell: 315-481-6633

Visit our website: www.hhccny.org

From: [Megan Stuart](#)
To: [Katie Weaver](#)
Cc: [Sherrain Clark](#); [Housing & Homeless Coalition](#)
Subject: A Tiny Home for Good- FY2022 CoC Application
Date: Tuesday, September 13, 2022 3:55:03 PM

Good afternoon,

The Performance Evaluation and Selection Committee met Monday, September 12th, to determine what grant applications will be moved forward to the overall HUD competition. The application submitted by a Tiny Home for Good PSH project was not selected for funding at this time. This decision was made based on the final application score. The application scored low in the following categories:

Connection to Healthcare
Project Implementation
Racial Equity
System Performance Measures

The committee would like to propose that your application be submitted in the Special Notice of Funding Opportunity competition. You would not need to resubmit your application to the HHC. If you would like for your application to be submitted for this competition, please let me know. You would need to submit an e-snaps application under the Special NOFO opportunity.

Please feel free to reach out with any questions.

Thank you,
Megan

Megan Stuart

(she/her)

Director, Housing & Homeless Coalition of Central New York

Office: 315-428-2224 | Cell: 315-481-6633

Visit our website: www.hhccny.org

From: [Megan Stuart](#)
To: caylward@ymcacny.org
Cc: [Sherrain Clark](#); [Housing & Homeless Coalition](#)
Subject: YMCA FY2022 CoC Funding Application
Date: Tuesday, September 13, 2022 3:55:11 PM

Good afternoon,

The Performance Evaluation and Selection Committee met Monday, September 12th, to determine what grant applications will be moved forward to the overall HUD competition. The application submitted by YMCA of Central New York was not selected to move forward at this time. This decision was made based on the final application score. This project scored low on the following categories:

- System Performance Measures
- Connection to Healthcare
- Person Centered Planning
- Racial Equity
- Serving Intersectional Identities

The Committee and I would encourage future applications from YMCA of Central New York for CoC funding with a focus on providing subsidies and supportive services using a traditional CoC model. The HHC is happy to provide technical support prior to the next funding round.

Please let me know if you have any questions.

Thank you,
Megan

Megan Stuart

(she/her)

Director, Housing & Homeless Coalition of Central New York

Office: 315-428-2224 | Cell: 315-481-6633

Visit our website: www.hhccny.org

From: [Megan Stuart](#)
To: [Michelle McElroy](#); ssimone@acrhealth.org
Cc: [Sherrain Clark](#); [Housing & Homeless Coalition](#)
Subject: ACR Health FY2022 Renewal Application
Date: Tuesday, September 13, 2022 4:08:35 PM
Attachments: [NY-505 FY2022 Priority List .pdf](#)

Good afternoon,

I am writing to let you know that the Performance Evaluation and Selection Committee met Monday and has decided to approve your renewal applications for the following AIDS Community Resources, Inc. project(s):

RRH for LGBT Youth \$140,043

The committee has also completed the ranking process, please reference the attached ranking tool. Feel free to reach out with any questions.

Thank you,
Megan

Megan Stuart

(she/her)

Director, Housing & Homeless Coalition of Central New York

Office: 315-428-2224 | Cell: 315-481-6633

Visit our website: www.hccny.org

From: [Megan Stuart](#)
To: [Laurie Piccolo](#); jrossi@caphelps.org
Cc: [Sherrain Clark](#); [Housing & Homeless Coalition](#)
Subject: CAP FY2022 DV BONUS and Renewal CoC Applications
Date: Tuesday, September 13, 2022 4:22:17 PM
Attachments: [NY-505 FY2022 Priority List .pdf](#)

Good afternoon,

I am writing to let you know that the Performance Evaluation and Selection Committee met Monday and has decided to approve your renewal applications for the following Cayuga/Seneca Community Action Agency DBA Community Action Programs Cayuga/Seneca project(s):

CSCAA HUD Rapid Rehousing for Families \$160,991

The committee has also decided to approve your new DV Bonus application for the following Cayuga/Seneca Community Action Agency DBA Community Action Programs Cayuga/Seneca at an adjusted amount:

Domestic Violence Rapid Rehousing Program \$184,332

You will need to update the e-snaps application for the adjusted amount for the new project.

The committee has also completed the ranking process, please reference the attached ranking tool. Feel free to reach out with any questions.

Thank you,
Megan

Megan Stuart
(she/her)
Director, Housing & Homeless Coalition of Central New York
Office: 315-428-2224 | Cell: 315-481-6633
Visit our website: www.hhccny.org

From: [Megan Stuart](#)
To: kgonzalez@communityalternatives.org
Cc: [Sherrain Clark](#); [Housing & Homeless Coalition](#)
Subject: CCA FY2022 CoC Funding Application
Date: Tuesday, September 13, 2022 3:53:35 PM
Attachments: [NY-505 FY2022 Priority List .pdf](#)

Good afternoon,

I am writing to let you know that the Performance Evaluation and Selection Committee met Monday, September 12th, and has decided to approve and rank your new application for the following Center for Community Alternatives at an adjusted amount:

Freedom Commons Academy Serving Reentry Homeless Th-RRH **\$116,190**

Amount requested breakdown:

Reallocated dollars	\$8,702
New funding	\$103,952

You will need to update your e-snaps application to the adjusted amount. Please feel free to adjust the number of households served as a result of the reduced amount, if needed. The committee has also completed the ranking process, please reference the attached ranking tool. Feel free to reach out with any questions.

Thank you,
Megan

Megan Stuart

(she/her)

Director, Housing & Homeless Coalition of Central New York

Office: 315-428-2224 | Cell: 315-481-6633

Visit our website: www.hccny.org

From: [Megan Stuart](#)
To: sweiss@cayugahealthnetwork.org
Cc: [Sherrain Clark](#); [Housing & Homeless Coalition](#)
Subject: CCHN FY2022 CoC Funding Application
Date: Tuesday, September 13, 2022 3:53:47 PM
Attachments: [NY-505 FY2022 Priority List .pdf](#)

Good afternoon,

I am writing to let you know that the Performance Evaluation and Selection Committee met Monday, September 12th, and has decided to approve and rank your new application for the following Cayuga County Community Health Network at an adjusted amount:

CCHN Community Housing (PSH) \$226,986

You will need to update your e-snaps application with the adjusted amount. Please feel free to adjust the number of households served as a result of the reduced amount, if needed. The committee has also completed the ranking process, please reference the attached ranking tool. Feel free to reach out with any questions.

Thank you,
Megan

Megan Stuart

(she/her)

Director, Housing & Homeless Coalition of Central New York

Office: 315-428-2224 | Cell: 315-481-6633

Visit our website: www.hhccny.org

From: [Megan Stuart](#)
To: kpeterston@ccoc.us; dlockhart@ccoc.us; hbenson@ccoc.us
Cc: [Sherrain Clark](#); [Housing & Homeless Coalition](#)
Subject: CCOC FY2022 CoC Renewal Applications
Date: Tuesday, September 13, 2022 4:13:33 PM
Attachments: [NY-505 FY2022 Priority List .pdf](#)

Good afternoon,

I am writing to let you know that the Performance Evaluation and Selection Committee met Monday and has decided to approve your renewal applications for the following Catholic Charities of the Roman Catholic Diocese of Syracuse, NY project(s):

Housing First for Individuals and Families	\$929,282
CC HUD Rental Assistance Program	\$812,226
CC Permanent Housing for the Chronically Homeless 1	\$769,235
CC Permanent Housing for the Chronically Homeless 2	\$1,762,510
CC Rapid Rehousing	\$285,826

The committee has also completed the ranking process, please reference the attached ranking tool. Feel free to reach out with any questions.

Thank you,
Megan

Megan Stuart

(she/her)

Director, Housing & Homeless Coalition of Central New York

Office: 315-428-2224 | Cell: 315-481-6633

Visit our website: www.hhccny.org

From: [Megan Stuart](#)
To: [christinem](#)
Cc: [Sherrain Clark](#); [Housing & Homeless Coalition](#)
Subject: Chadwick FY2022 Renewal Application
Date: Tuesday, September 13, 2022 4:10:23 PM
Attachments: [NY-505 FY2022 Priority List .pdf](#)

Good afternoon,

I am writing to let you know that the Performance Evaluation and Selection Committee met Monday and has decided to approve your renewal applications for the following Chadwick Residence, Inc project(s):

Chadwick Supportive Housing \$293,650

The committee has also completed the ranking process, please reference the attached ranking tool. Feel free to reach out with any questions.

Thank you,
Megan

Megan Stuart

(she/her)

Director, Housing & Homeless Coalition of Central New York

Office: 315-428-2224 | Cell: 315-481-6633

Visit our website: www.hccny.org

From: [Megan Stuart](#)
To: [Christina Thornton](#)
Cc: [Sherrain Clark](#); [Housing & Homeless Coalition](#)
Subject: HALE FY2022 CoC Funding Application
Date: Tuesday, September 13, 2022 3:53:46 PM
Attachments: [NY-505 FY2022 Priority List .pdf](#)

Good afternoon,

I am writing to let you know that the Performance Evaluation and Selection Committee met Monday and has decided to approve and rank your renewal applications for the following Salvation Army project(s):

TSA Housing and Life Skills Education \$398,992

The Committee has also decided to award and rank your HALE RRH Cayuga Expansion project but could only approve the expansion in the amount of **\$223,661**. You will need to update your e-snaps application to the new amount. Please feel free to adjust the number of households served as a result of the reduced amount, if needed. The committee has also completed the ranking process, please reference the attached ranking tool. Feel free to reach out with any questions.

Thank you,
Megan

Megan Stuart

(she/her)

Director, Housing & Homeless Coalition of Central New York

Office: 315-428-2224 | Cell: 315-481-6633

Visit our website: www.hhccny.org

From: [Megan Stuart](#)
To: dcruz@cnysservices.org; [Renee Clark](#)
Cc: [Sherrain Clark](#); [Housing & Homeless Coalition](#)
Subject: Helio Health FY2022 CoC Renewal Application
Date: Tuesday, September 13, 2022 4:15:43 PM
Attachments: [NY-505 FY2022 Priority List .pdf](#)

Good afternoon,

I am writing to let you know that the Performance Evaluation and Selection Committee met Monday and has decided to approve your renewal applications for the following Helio Health, Inc project(s):

HH Syracuse Brickhouse FAST RRH Program	\$213,589
Helio Housing First	\$1,019,602
Recovery Permanent Supportive Housing Program Combined	\$451,291
Susan's Place PSH	\$141,903
KEES II	\$737,792

The committee has also completed the ranking process, please reference the attached ranking tool. Feel free to reach out with any questions.

Thank you,
Megan

Megan Stuart

(she/her)

Director, Housing & Homeless Coalition of Central New York

Office: 315-428-2224 | Cell: 315-481-6633

Visit our website: www.hhccny.org

From: [Megan Stuart](#)
To: tnscott@liberty-resources.org; cgreen@liberty-resources.org
Cc: [Sherrain Clark](#); [Housing & Homeless Coalition](#)
Subject: Liberty Resources FY2022 CoC Renewal Application
Date: Tuesday, September 13, 2022 4:17:11 PM
Attachments: [NY-505 FY2022 Priority List .pdf](#)

Good afternoon,

I am writing to let you know that the Performance Evaluation and Selection Committee met Monday and has decided to approve your renewal applications for the following Liberty Resources, Inc project(s):

Renewal Project Application FY2022	\$418,839
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The committee has also completed the ranking process, please reference the attached ranking tool. Feel free to reach out with any questions.

Thank you,
Megan

Megan Stuart

(she/her)

Director, Housing & Homeless Coalition of Central New York

Office: 315-428-2224 | Cell: 315-481-6633

Visit our website: www.hhccny.org

From: [Megan Stuart](#)
To: bcoleman@oco.org
Cc: [Sherrain Clark](#); [Housing & Homeless Coalition](#)
Subject: OCO FY2022 CoC Renewal Application
Date: Tuesday, September 13, 2022 4:18:33 PM
Attachments: [NY-505 FY2022 Priority List .pdf](#)

Good afternoon,

I am writing to let you know that the Performance Evaluation and Selection Committee met Monday and has decided to approve your renewal applications for the following Oswego County Opportunities project(s):

OCO HUD RRH	\$277,792
OCO-VH-DV-RRH	\$365,189
OCO Victim Services Joint TH and PH-RRH	\$856,825

The committee has also completed the ranking process, please reference the attached ranking tool. Feel free to reach out with any questions.

Thank you,
Megan

Megan Stuart

(she/her)

Director, Housing & Homeless Coalition of Central New York

Office: 315-428-2224 | Cell: 315-481-6633

Visit our website: www.hhccny.org

From: [Megan Stuart](#)
To: tom.roshau@use.salvationarmy.org
Cc: [Sherrain Clark](#); [Housing & Homeless Coalition](#)
Subject: TSA Youth FY2022 CoC Renewal Applications
Date: Tuesday, September 13, 2022 4:19:36 PM
Attachments: [NY-505 FY2022 Priority List .pdf](#)

Good afternoon,

I am writing to let you know that the Performance Evaluation and Selection Committee met Monday and has decided to approve your renewal applications for the following The Salvation Army project(s):

TSA Barnabas Youth RRH	\$246,288
State Street Apartments	\$260,920

The committee has also completed the ranking process, please reference the attached ranking tool. Feel free to reach out with any questions.

Thank you,
Megan

Megan Stuart

(she/her)

Director, Housing & Homeless Coalition of Central New York

Office: 315-428-2224 | Cell: 315-481-6633

Visit our website: www.hhccny.org

From: [Sherrain Clark](#)
To: [Megan Stuart](#)
Subject: UW CE
Date: Tuesday, September 13, 2022 4:01:28 PM

Good afternoon,

I am writing to let you know that the Performance Evaluation and Selection Committee met Monday and has decided to approve your new application for the following United Way of Central New York at the requested amount:

HHC Coordinated Entry \$116,190

The committee has also completed the ranking process, please reference the attached ranking tool. Feel free to reach out with any questions.

Thanks

Sherrain Clark
Deputy Director; Housing & Homeless Coalition of Central New York
United Way of Central New York
980 James Street
Syracuse, NY 13203

P: (315) 428-2216
F: (315) 428-2227

Agency	Project	Average Total Score	Funding Request	County	Component	Households	Awarding
Bonus	Bonus						
Cayuga County Community Health Network	CCHN Community Housing (PSH)	85.4	\$ 283,733.00	Cayuga	PSH	15	\$226,986.40
Center for Community Alternatives	CCA Freedom Commons Academy TH-RRH Serving ReEntry Homeless	88.75	\$ 125,549.00	Onondaga	Th-RRH	8	\$112,654.00
Salvation Army	TSA HALE RRRH Cayuga	83.25	\$ 279,576.00	Cayuga	RRH	28	\$223,660.80
							\$563,301.20
DV Bonus	DV Bonus						
CAP	CAP Domestic Violence Rapid Rehousing Program	88	\$ 115,000.00	Cayuga	RRH	16	\$184,332.00
YWCA	YWCA Women's Residence	77.61	\$ 413,807.00	Onondaga	Th-RRH	32	\$413,807.00
Reallocation Pot	Awarded Reallocation						
United Way of CNY	HHC Coordinated Entry	94	\$ 116,190.00	All	SSO		\$116,190.00
Rejected	Rejected						
YMCA of Central New York	YMCA Men's Residential Program	75.75	\$ 186,798.00	Onondaga	RRH		\$ -
A Tiny Home for Good	A THG Supportive Housing Case Management & Tenant Rent Support	78.6	\$ 223,232.00	Onondaga	PSH		\$ -

Bonus	\$ 554,599.00
Total Requested	\$ 563,301.20
Remaining	\$ (8,702.20)

0.8

DV Bonus	\$ 799,092.00
Total Requested	\$ 528,807.00
Remaining	\$ 270,285.00

DV Bonus	\$ 799,092.00
Total Awarded	\$ 598,139.00
Remaining	\$ 200,953.00

Reallocation	
Total	#####
United Way	#####
CCA	\$ 8,702.00

Cayuga County Community Mental Health Center

146 North Street, Auburn, NY 13021-1831

Phone: (315) 253-0341 Fax: (315) 253-1687

8/24/2022

Dr. Shari Weiss, Executive Director
Cayuga Community Health Network
2119 West Genesee St. Rd.
Auburn, New York 13021

Dear Dr. Weiss,

I am writing on behalf of Cayuga County Community Mental Health Center (CCCMHC) in support of your application for HUD funding to establish a supportive housing and rapid rehousing program at Cayuga Community Health Network.

The mission of Cayuga County Community Mental Health Center is to provide quality mental health services to Cayuga County residents. Our professionals treat, monitor, and support individuals with mental health needs toward the goal of improving quality of life while serving the needs of the community. We provide individual counseling, group therapy, family therapy, case management, and psychiatric services to our county residents.

As the community's safety-net provider- accepting Medicaid, Medicare, and offering a sliding scale discount program for uninsured and underinsured individuals, we have a capacity to provide any of the above services to each of your participants annually. Our total average cost per therapy visit is \$171.00 and our average psychiatric medication management visit cost is \$136.00.

Conservatively, we would see each of your participants at least once per month receiving a combination of therapy and medication management services. As such, the estimated value of our services would be approximately \$2,000 annually per participant. Based on estimates you provided, we will deliver services that value \$36,000 for up to 18 participants respectively.

Sincerely,



Lauren J. Walsh, LCSW-R
Director of Community Services
Cayuga County



**EAST HILL
MEDICAL CENTER**

144 Genesee Street, Suite 500
Auburn, New York 13021

Telephone: 315.253.8477
Fax: 315.515.3191
www.easthillmedical.com

An Exceptional Patient Experience

Dr. Shari Weiss, Executive Director
Cayuga Community Health Network
2119 West Genesee Street Rd.
Auburn, NY 13021

Dear Dr. Weiss,

I am writing on behalf of East Hill Medical Center in support of your application for HUD funding to establish a supportive housing and rapid rehousing program at Cayuga Community Health Network.

As you know, East Hill Medical Center is a Federally Qualified Health Center with a mission of building local community partnerships to improve the health of individuals and families in our community. We provide Adult and Family Medicine, Behavioral Health, Dental, Pediatrics, and Substance Use Disorder Services at two locations in the city of Auburn.

In our most recent 2021 Uniform Data Systems (UDS) report that we submitted to Health Resources and Services Administration (HRSA) in February of 2022, our total medical care cost per visit is \$216.43. As the community's safety-net provider - accepting Medicaid, Medicare, and offering a sliding-scale discount program for uninsured and underinsured individuals, we have the capacity to provide any of our above listed services to each of your participants throughout the 12-month project period.

Conservatively, we would see each of your participants at least 6 times annually to ensure proper health care (at a cost of \$216.43/visit). As such, the total estimated value of our services would be approximately \$1,300 annually per participant. Based on estimates you provided, we will provide services that value \$23,400 for up to 18 participants respectively.

Sincerely,

April Miles

April Miles, MHA, RN
President & CEO



August 18, 2022

Ms. Kelly Gonzalez
Deputy Director - Syracuse and Rochester
Center for Community Alternatives, Inc. 115
E. Jefferson St., Suite 300
Syracuse, NY 13202

RE: Syracuse Community Health Center, Inc. Letter of Commitment: Freedom Commons

Dear Ms. Gonzalez:

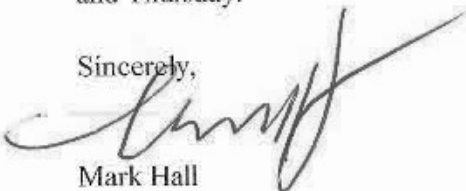
This correspondence is to confirm Syracuse Community Health's (SCH) Letter of Commitment and intent to collaborate with the Center for Community Alternatives, Inc. (CCA) to implement a referral process whereby SCH delivers screening, testing and clinical services required for residency and/or program participation at Freedom Commons.

SCH also will offer substance use disorder (SUD) treatment services to all participants of CCA's HUD Freedom Commons Transitional to Rapid Rehousing (TH-RRH) Program (8 participants annually) who are seeking and consent to SUD treatment services.

SCH is prepared to offer these services on a walk-in or same day appointment basis as required by your program regulations. In addition, SCH and the Center intend to explore additional collaborative opportunities to serve the ongoing healthcare needs of residents at Freedom Commons.

SCH provides substance use disorder treatment, primary care, OB/GYN, dental and behavioral health services patients with Medicaid, Medicaid Managed Care, Medicare and commercial health insurance plans. As a Federally Qualified Health Center, we offer an income-based sliding fee scale for any uninsured and/or under-insured patients. We also offer podiatry and eye care services, including optical dispensing. Our business hours are Monday through Friday from 8 am to 5:15 pm and we offer extended hours until 8 pm on Monday, Wednesday and Thursday.

Sincerely,



Mark Hall
President & CEO

syracusecommunityhealth.org
819 South Salina Street
Syracuse, NY 13202
p (315) 476-7921
f (315) 475-4713