

## Before Starting the CoC Application

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

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

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

1. The FY 2021 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2021 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It  
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2021 CoC Program Competition on behalf of your CoC.

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

### Answering Multi-Part Narrative Questions

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

### Attachments

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

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

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

## 1A. Continuum of Care (CoC) Identification

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

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

**1A-1. CoC Name and Number:** FL-507 - Orlando/Orange, Osceola, Seminole Counties CoC

**1A-2. Collaborative Applicant Name:** Homeless Services Network of Central Florida, Inc.

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

**1A-4. HMIS Lead:** Homeless Services Network of Central Florida, Inc.

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

To help you complete the CoC Application, HUD published resources at [https://www.hud.gov/program\\_offices/comm\\_planning/coc/competition](https://www.hud.gov/program_offices/comm_planning/coc/competition), including:  
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<b>1B-1.</b>	<b>Inclusive Structure and Participation–Participation in Coordinated Entry.</b>	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.n., and VII.B.1.p.	

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

1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC’s geographic area:

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

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

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

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

**(limit 2,000 characters)**

1 New members may join CoC at any time via standing/open process announced at CoC mtgs and explained in weekly email notices to 1600+ interested parties. CoC website contains the membership information and form. CoC charges no membership fee. CoC continuously solicits members from across the region and from the broadest set of potential stakeholders. CoC also sponsors an annual campaign during which active members invite colleagues & partners to join. Members are also solicited at CoC-related activities, at trainings & at partner-hosted planning mtgs. CoC also virtual meetings to ensure safe participation during pandemic. Also host virtual workgroups for broader initiatives such as PIT Count planning & disaster preparedness also reach additional potential members.

2 CoC meetings are accessible via web conference, invitations are sent to all persons signed up for updates. CoC publishes membership materials in accessible electronic PDF format, holds all in person mtgs in ADA compliant locations, invitations & flyers include invitation to request reasonable accommodations to facilitate participation in CoC-sponsored mtgs & activities.

3 CoC Lived Experience Council (~8 members) meets monthly. Members also participate on all CoC cmtes & working groups. As a result of efforts to raise the voice of persons with lived experience, CoC is noticing an increased willingness for members to reference their experience. Youth Action Board (YAB) members (~12) are also invited to participate in other governance activities. CoC Board includes a designated slot for a person with lived experience & YAB. Current & former youth RRH participants are invited to participate in the YAB.

4 CoC assertively uses culturally specific trainers to improve quality of training & encourage other culturally specific agencies to participate & join as members. CoC reaches out to minority led agencies to notify of funding opportunities & to encourage membership.

1B-3.	CoC’s Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.	
	NOFO Section VII.B.1.a.(3)	

Describe in the field below how your CoC:

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

**(limit 2,000 characters)**

1 CoC solicits and incorporates opinions through an extensive range of ongoing activities, particularly committees & workgroups in which ALL stakeholders are invited –in addition through Youth Action Board and CoC Lived Experience Council. CoC representatives also seek out venues spanning multiple platforms, including local media, business association meetings, Faith Based organizations, etc., to promote dialogue and gather input to inform system planning. This tandem of in-reach and outreach maximizes engagement, which bolsters public awareness, collective impact and private sector partnership. Monthly general membership mtgs, fueled by active year-round committees, anchor this effort & provide for multi-sector participation (providers, advocates, public system partners, etc.) in the development & implementation of the regional CoC plan. CoC also works in alignment with related system-level entities, e.g., local jurisdictions (delivering affordable hsg).

2 CoC uses all of the above general and topic specific gatherings to collect information related to CoC plans and initiatives from stakeholders. For example, meeting with apartment association leaders to gather input on strategies for attracting new landlords and units. During COVID19 pandemic, CoC transitioned to virtual meetings via Zoom, providing post-meeting information via website. The CoC also shares this same information – including notice of all CoC events - through email (1800+list), social media, press releases & CoC/lead agency websites.

3 CoC continuously incorporates feedback from the above sources into its strategies for improving system access, responsiveness & performance. For ex, the CoC used input from its Youth Action Board & persons with lived experience

to improve PIT Count methods, YHDP application, hiring of CoC Youth Homelessness Community Organizer, shelter inclusivity for LGBTQ individuals, hotel conversion projects, disaster preparedness & institutional discharge practices.

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

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

**(limit 2,000 characters)**

1 9/10 CoC email to 1600+stakeholders announcing competition and announcing workshops for new and renewal applicants with a link to RFA and application. 9/10 posting on website (screenshot not taken til 9/16). Announced at July, Aug and Sept membership meetings.

2 Posted RFA included timeline announcing information session for any interested applicants held 9/7. 5 non-funded agencies participated and 4 submitted applications.

3 RFA notified that applications would be accepted via free portal, and paper application accepted for persons who could not use portal. Paper version and instructions made available on website as part of RFA. 1600+ stakeholder CC sent to notify of active portal (9/12). Lead Agency consistently supported applicants through phone calls, written responses to emails and support with online portal.

4 Regional funding priorities & application scoring methodology approved by CoC Board and posted on website (RFA Attachment D)+ administrative data to be used in scoring (Attach A-1) in addition to submitted application responses. RFA Attachment B described review/ranking/selection process and showed specific points on scorecard by application type.

5 CoC published application materials in accessible electronic PDF format on website with links sent via email, held and recorded all meetings virtually, & offered reasonable accommodations to facilitate participation in process.

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

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

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

In the chart below:

1.	select yes or no for entities listed that are included in your CoC’s coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or
2.	select Nonexistent if the organization does not exist within your CoC’s geographic area.

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with Planning or Operations of Projects
1.	Funding Collaboratives	Nonexistent
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 LGBT persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

18.	Emergency Management and Department of Health	Yes
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section VII.B.1.b.	

Describe in the field below how your CoC:

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

**(limit 2,000 characters)**

1. Consulted in planning and allocation: The CoC Lead Agency:  
 a) oversees the allocation of & administers Balance of State ESG funding for Seminole & Osceola Counties, and ESG CV for all three counties  
 b) regularly consults with all 4 ESG jurisdictions, resulting in development of regional ESG standards;  
 c) participates in scoring of local applications and  
 d) added extensive HMIS & Coordinated Entry System participation requirements to all ESG CoC contracts, including ESG-CV. All ESG jurisdictions & all ESG-funded sub-recipients across the CoC participate in the CES Registry Management prioritization and matching processes. The CoC also works extensively with ESG jurisdictions to regionally integrate and leverage ESG funding to implement a seamless system-wide Rapid Rehousing (RRH) strategy. ESG jurisdictional & grantee reps participate actively in CoC committees and workgroups, which furthers integration of ESG-funded initiatives into system development efforts facilitated by the CoC.

2. Evaluation and Reporting performance: CoC developed extensive reporting tools for use in evaluating ESG-funded project performance, including comprehensive system-level "dashboard" & project type-specific "report cards" grounded in key performance indicators. These tools promote a shared system-wide understanding of ESG-applicable standards for accountability purposes and equip grantees with data necessary for continuous improvement. HMIS produces CAPER reports for ESG grantees. Finally, Lead Agency also conducts ongoing monitoring of RRH projects using ESG and other CoC funds, providing feedback to ESG grantees as needed.

3. CoC provided PIT and HIC data to Conplan partners through direct email and presentation at CoC Board meetings.

4. CoC participates in ESG jurisdictions' Consolidated Plan and application review processes and provides information for homeless related questions; provides HMIS/PIT data for planning preparation; 6 of 7 ConPlan partners serve on CoC Board.

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



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

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

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

Describe in the field below:

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

**(limit 2,000 characters)**

1 CoC's primary youth education contacts are Homeless Education Liaisons (ELs). The CoC keeps ELs & other school officials informed about CE Community Access HUBs where families can be assessed for access to housing and services. School district reps actively participated in YDHP application process & continue involvement in CoC Youth Committee. ELs train CoC providers re: educational rights & resources under Mck/ESSA at least annually. CoC members representing youth service agencies, corrections, local jurisdictions, 211/United Way, social services, mental health providers, shelter operators & family RRH program managers participate in LEA meetings/planning events. Liaisons participate regularly in CoC member meetings, advisory committees & family case conferencing.

2 MOUs have been executed between CoC Lead Agency & preschool programs in all 3 counties. CoC has voting membership & CoC Board representation from private school serving homeless & low income children.

3 & 4 Area School Districts are LEA. CoC actively engages w/Florida Coalition to End Homelessness, who represents collaborative interests with State Dept. of Education.

5 Presentations are conducted by Mck-V district leaders, at least annually, to

CoC members on how to ensure access to DOE entitlement resources for students & families. CoC collaborated w/ Orange Co Public Schools & other surrounding School districts in an Homelessness Symposium in Spring 2021. School homelessness liaisons & safe coordinators attended workshops designed to better equip educators in assisting students & families experiencing homelessness. CoC Lead Agency hosted several workshops at this event.

6 CoC executed MOUS w/ school districts across region to ensure collaboration through CES w. CoC providers & to support students experiencing homelessness who encounter barriers to access to educational services/supports. School districts work to assess and address needs using both McK-V and Title I resources.

1C-4a.	CoC Collaboration Related to Children and Youth—Educational Services—Informing Individuals and Families Experiencing Homelessness about Eligibility.	
NOFO Section VII.B.1.d.		

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

**(limit 2,000 characters)**

The CoC has adopted policies & procedures intended to ensure all children & youth experiencing homelessness have the right to access a free, appropriate public education, and the right to receive educational services comparable to those provided to other students, according to each student’s need. All policies are written to ensure participants are helped to understand their rights under Subtitle VII-B of the McKinney-Vento Homelessness Assistance Act, as most recently reauthorized by Every Student Succeeds Act (ESSA).

These policies & procedures uphold the rights of homeless children & youth to, among others:

- i) Immediately enroll in school;
- ii) Remain enrolled in their school of origin, if determined to be in the student’s best interest;
- iii) Access transportation to and from their school of origin; and
- iv) Receive supports necessary for academic success.

These policies & procedures have been implemented through the CoC’s application & contracting processes, case management standards & education of members.

More specifically, the CoC requires or encourages key CoC participants to take active steps to affirm the educational rights of homeless children & youth, including but not limited to:

- i) Clear identification of the staff member responsible for informing individuals & families of their eligibility for education services & for serving as the point person for each school district’s McK-V Homeless Education Liaison including contractual obligation for funded partners;
- ii) Promotion of the educational rights of children and youth and their families as stated in the McKinney Vento legislation;
- iii) Ensuring that ALL case managers take reasonable steps to affirm educational rights and access educational resources with program participants (as outlined in case mgmt standards); and

iv) Requiring that the Lead Agency trains members on the educational service rights of homeless program participants at least annually (including Sept 2021).

<b>1C-4b.</b>	<b>CoC Collaboration Related to Children and Youth–Educational Services–Written/Formal Agreements or Partnerships with Early Childhood Services Providers.</b>	
	<b>NOFO Section VII.B.1.d.</b>	

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

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

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

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

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

**(limit 2,000 characters)**

1 CoC collaborate with project staff at SafeHouse, Harbor House, Help Now (all DV) & Lifeboat (HT) & national advocates to offer a comprehensive & diverse array of training opportunities addressing best practices to assist survivors. Some trainings are intensely DV-focused & led by trainers w. lengthy experience in DV settings & others present more general yet applicable best practices.

The CoC provides 1x/yr+ DV-specific training on safety planning & DV-related best practices system-wide and investment far exceeds that minimum standard. Opportunities delivered system-wide within the past year included: Trauma-Informed Care (TIC), Motivational Interviewing (MI), Harm Reduction, LGBTQ

Cultural Competency, Complex Trauma, Mind of a Perpetrator & Housing First for DV Survivors. In addition to DV providers, others who interact with survivors, such as outreach & non-DV shelter staff, also participated. Addl. trainings on related topics (e.g., LGBTQ & Vulnerability to Victimization) are offered. In total, 200+ unduplicated front-line & supervisory staff bolstered their knowledge and skills through this curriculum.

2 All Coordinated Entry (CE) staff & volunteers, including those working in street outreach with 211, or at Access Points, must receive DV- specific training at least annually. However, most participate in many of the CoC trainings listed above, such as TIC, safety planning & protocols for persons actively fleeing DV. Also, MOUs between CE and CE-involved agencies assisting survivors call for participation in CoC-sponsored training.

CE staff have expertise in determining eligibility under Category 4 (DV) of the HUD homelessness definition. The CES Volunteer & HUB Coordinator is available at community Access Point locations to support volunteers & host staff w. ongoing training needs re: activation & application of safety protocols in response to expressed & unexpressed DV-related needs of presenting clients.

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

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

**(limit 2,000 characters)**

DV database meets HMIS technical standards & has APR export capacity. APR data is used in the local application competition. Data currently tracked includes basic unidentifying client demographics: persons served with SSO & ES; age demo., household makeup, race & ethnicity, LOT. The CoC’s HMIS team works w. DV providers to promote knowledge around System-Wide & Project performance goals & benchmarks to build data decision making competence & apply parallel SPM understanding within the DV context. The regional DV/HT projects start with the assumption that any data in their database could be subpoenaed in a child custody hearing. Thus, the DV/HT comparable database captures no details on many barriers/needs including substance use, mental illness, criminal history, evictions & credit issues. Thus, the CoC uses aggregate information about people served by those providers, but supplements with additional data from HMIS & other public databases to determine special needs of the population, for comparison and trend analysis. CoC also receives aggregate data from DV client surveys and listening projects. The CoC utilizes data from Federal/State data sources & other agencies (ex. 211, US Census, Justice Dept. Entities & Florida Coalition Against Domestic Violence, DCF Human Trafficking Hotline) to extrapolate service needs (e.g. health care, child custody, mental health & substance abuse services, budgeting, job training, child care, pet care, child welfare, parenting, transportation, credit counseling, building new natural supports network, etc). Unique needs of survivors are incorporated into training for DV and non-DV providers, case conferencing,

housing plans, etc.)

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

Describe in the field below how your CoC’s coordinated entry system protocols incorporate trauma-informed, victim-centered approaches while maximizing client choice for housing and services that:

1.	prioritize safety;
2.	use emergency transfer plan; and
3.	ensure confidentiality.

**(limit 2,000 characters)**

1 Prioritize Safety: CoC protocols for addressing safety needs of those fleeing DV are grounded in victim-centered & trauma-informed approaches, prioritize safety, mitigate impact of violence, & maximize self-determination. The CE hsg. search process is guided by Housing Needs Form (NHF) used to match survivors w. units responsive to DV-related barriers and circumstances & client choice. NHF requires no PII. Service providers are required & trained to safeguard confidentiality of survivors w. ETPs. CE coordinated with DV agencies to protect victim PII w. de-identified information & emphasize safety while maximizing access to hsg. & services. DV agencies use comparable HMIS system, do not share client level data.

2 Use Emergency Transfer Plan: This is done through use of safety planning & emergency transfer plans (ETPs). As those fleeing DV present at Access Points, HUBs or through 211, staff assist in safety assessment & planning w. DV specialists. If survivor’s stay in ES/PH is no longer tenable, a safety plan is created & survivor is relocated to bridge housing & new PH. CoC hsg team (HLT) works w. landlords to secure lease bifurcations & voluntary terminations & assist participant & landlord in understanding rights under VAWA. ETP relocating survivors receive top priority for re-housing & waived waiting periods, relocation costs. CoC ensures other HUD-required protections & rights for survivors & Hsg. First principles of client choice are affirmed & balanced.

3 Ensure Confidentiality: DV provider staff link to key legal supports (e.g., confidential addresses, protective injunctions) & non-HUD resources (VAWA, VOCA, etc.), & use separate HMIS system to protect confidentiality. Survivors also access support through non-DV-specific agencies. Staff review consent forms & allow survivors to w/hold information w/o delaying service, confidentiality is of the utmost importance. ETPs are formulated regardless of gender, gender identity, sexual orientation. etc.

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

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

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

Enter information in the chart below for the two largest PHAs highlighted in gray on the CoC-PHA Crosswalk Report at <https://files.hudexchange.info/resources/documents/FY-2020-CoC-PHA-Crosswalk-Report.pdf> or the two PHAs your CoC has a working relationship with--if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2020 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Orlando Housing Authority	20%	Yes-Both	Yes
Orange Co Housing & Community Development	0%	Yes-HCV	No

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

Describe in the field below:

- 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
- state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

**(limit 2,000 characters)**

CoC has 150 voucher limited preference with Orlando Housing Authority (OHA) established for CH individuals. Not all are yet used. CoC has met 3x with PHAs to educate PHA on the opportunity to fully utilize these vouchers using Move-On strategy. Pre-pandemic, CoC was working with HUD TA to address a long standing concern that vouchers could be utilized within a MTW framework. When HUD released EHV allocations, CoC shifted its strategy to fully utilize the new vouchers. CoC lead agency signed an MOU with three local PHAs and is referring RRH participants directly to PHAs.

During previous PHA mainstream voucher NOFAs, CoC lead agency staff published a memorandum providing application guidance to PHAs--highlighting the opportunities for partnership with the CoC--successfully engaging Seminole Housing Authority into a Move-On agreement.

Orange County Housing Authority is the only PHA with CoC's tri-county region without an existing homeless preference. However, the CoC has an MOU to refer persons to EHV's. Although the CoC's goal is adoption of a preference by

all PHAs to ensure access to housing choice vouchers and public housing units region-wide, it should be noted that OCHA is an arm of Orange Co. Government. Orange County’s investment in the homelessness assistance system as a jurisdiction has been substantial and diverse. CoC is actively meeting with county officials to enhance partnership and encourage adoption of a preference policy (including a recent \$2.3mil investment in PSH). Lead Agency working directly with OCHA staff is sharing HUD PHA/CoC partnership resources to educate & promote understanding towards mutually beneficial outcomes. This resulted in a commitment to utilize a portion of the PHAs most recent application for mainstream vouchers for a Move-On strategy and ongoing conversations to insert a homeless preference in the administrative plan in the coming months.

<b>1C-7b.</b>	<b>Moving On Strategy with Affordable Housing Providers.</b>	
	Not Scored–For Information Only	

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

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

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

Does your CoC include PHA-funded units in the CoC’s coordinated entry process?	Yes
--	-----

<b>1C-7c.1.</b>	<b>Method for Including PHA-Funded Units in Your CoC’s Coordinated Entry System.</b>	
	NOFO Section VII.B.1.g.	

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

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

**(limit 2,000 characters)**

1 CoC works with three different PHAs in the region. With the new addition of Emergency Housing Vouchers, CE has embedded a process to help case managers identify those who are at the highest need of a housing voucher to obtain stability or retain housing stability. CoC is currently prioritizing families,

elderly, and youth with larger households, with disabilities, fixed income, and multiple entries into homeless programs. CoC utilizes data in HMIS and first-hand context from the case management team to determine the best approach for each participant

2 CoC currently has active formal MOUs with each participating PHA for the EHVs. As well, we have active formal MOUs with two of the PHAs for NED and mainstream vouchers and with one for FUP vouchers. These MOUs outline the groups prioritized for vouchers and the process in which we will make referrals.

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

Did your CoC coordinate with a PHA(s) to submit a joint application(s) for funding of projects serving families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other non-federal programs)?	Yes
---	-----

1C-7d.1.	CoC and PHA Joint Application–Experience–Benefits.	
	NOFO Section VII.B.1.g.	

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

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

**(limit 2,000 characters)**

1 Family Unification Program to serve FUP eligible families for whom they lack adequate housing is a primary factor in the imminent placement of the family’s child, or children, or in out-of-home care; or youth age 18-24 exiting foster care.

2 The application was approved

3 The partnership between the Seminole County Housing Authority, Florida Department of Children and Families (PCWA), Embrace Families (PCWA), and CoC lead agency, Homeless Services Network of Central Florida, leveraged coordination in identifying eligible families and youth through CoC Coordinated Entry; provide housing search assistance; access to transportation; flexible financial assistance; furnishing and household goods. Families and youth received rental assistance, case management, and access to life skills: money management, credit repair, housekeeping, nutrition, meal preparation, and navigation to health care.

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including American Rescue Plan Vouchers.	
	NOFO Section VII.B.1.g.	



Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
--	-----

1C-7e.1.	Coordinating with PHA(s) to Administer Emergency Housing Voucher (EHV) Program–List of PHAs with MOUs.	
	Not Scored–For Information Only	

Did your CoC enter into a Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
---	-----

If you select yes, you must use the list feature below to enter the name of every PHA your CoC has entered into a MOU with to administer the Emergency Housing Voucher Program.

PHA
Orlando Housing A...
Orange County Hou...
Osceola County Ho...

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

**Name of PHA:** Orlando Housing Authority

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

**Name of PHA:** Orange County Housing and Community Development

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

**Name of PHA:** Osceola County Housing Office

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

1C-8.	Discharge Planning Coordination.	
	NOFO Section VII.B.1.h.	

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

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

1C-9.	Housing First–Lowering Barriers to Entry.	
	NOFO Section VII.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition.	18
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition that have adopted the Housing First approach.	18
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-coordinated entry projects the CoC has ranked in its CoC Priority Listing in the FY 2021 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

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

**(limit 2,000 characters)**

CoC evaluates projects to ensure subrecipients faithfully use a Housing First (HF) approach on an ongoing basis. CE staff evaluates all subrecipients' intake procedures to ensure no barriers to program entry.. Ensuring rapid placement into housing, CE works closely with Lead Agency's housing location team to

ensure all participants who exceed 90 days in housing search are staffed and redouble efforts to understand the participants barriers presenting to housing. LA's supportive housing team reviews cases with each subrecipient to ensure ongoing fidelity to HF while the participant is housed in a program. This takes place through internal staffings to ensure best practices are being used. This process ensures the provider agency is engaging creatively, even when a participant seems to have stopped engaging. CoC also evaluates data annually to evaluate system performance measures. This data is especially helpful when looking at retention in PSH programs. As an ongoing effort to ensure HF fidelity, casenotes are reviewed during the billing/reimbursement process. This added layer of review assists in identifying cases that may need more intensive engagement--troubleshooting CM staff that may not be operating within HF fidelity.

Our community values ongoing training to ensure the best practices are embedded as soon as providers start in this work. Most recently, CoC has partnered with Valencia Community College to offer ongoing training that relates to equity and housing stability. CoC hired Supportive Housing Advisor to work with project managers and CMs to strengthen HF implementation after initial training.

During subrecipient and CoC local competition applicants are scored on a variety of qualitative and quantitative data to assess fidelity to HF principles. This includes but is not limited to, referrals rejected from CE, program exits without a positive housing destination, housing retention, time to housing and returns to homelessness.

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

Does your CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?	Yes
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1C-10.	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 2,000 characters)**

1 CoC has more than 20 FT trained, multi-lingual street outreach workers (SOWs) and navigators to engage persons in places not intended for human habitation across all 3 counties into the housing match process. Diverse teams include many w. lived experience (LE), reach all subpopulations incl. veterans, unaccompanied youth, CH, & families w/children. SOWs are trained in

evidence-based practices (for ex, Trauma-Informed Care, MI) SOWs utilize HMIS, complete CES intake, incl. use of vulnerability assessment to populate by-name registry. SOWs refer DV survivors to appropriate intake. SOWs with LE offer peer support. LA facilitates coordination between SO agencies and collective adherence to best practices--including attention to issues of equity and need for LE to orient SO practice.

2 SO activities cover 100% of the habitable & accessible portion of CoC's coverage area, concentration based on geographic clustering incl. but not limited to urban centers, street locations & parks. SOWs also cover rural area, visiting difficult-to-reach campsites & other remote locations. SOWs use mapping software to track known locations which is linked to the annual PIT count. When alerted to need for outreach outside clearly accessible areas, SOWs seek to assist in a safe & lawful manner. Texting & email are also used to update/communicate w/engaged persons. Weekly meetings take place for the community to coordinate efforts with SO agencies to ensure all identified as experiencing a housing crisis are known.

3 SOW teams work 5+ days per week, incl. wkends, a wide span of hours, year round- regardless of inclement weather.

4 To serve those least likely to request help SOW are trained in mental and behavioral health and partner w/ law enforcement. We have a MOU with the Public Defender's Office to ensure high utilizers\service resistant individuals receive critical time interventions. Staff are Multilingual and predominance have lived experience.

<b>1C-11.</b>	<b>Criminalization of Homelessness.</b>	
	NOFO Section VII.B.1.k.	

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

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

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

	2020	2021
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."	833	1,218

1C-13.	<b>Mainstream Benefits and Other Assistance—Healthcare—Enrollment/Effective Utilization.</b>	
	NOFO Section VII.B.1.m.	

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

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

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

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

1.	systemically providing up to date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC's geographic area;
2.	communicating information about available mainstream resources and other assistance and how often your CoC communicates this information;
3.	working with projects to collaborate with healthcare organizations to assist program participants with enrolling in health insurance; and
4.	providing assistance with the effective use of Medicaid and other benefits.

**(limit 2,000 characters)**

1 Monthly CoC membership meeting agendas include mainstream benefit updates, often with detailed presentations (ex., McKinney-Vento Homeless Education Liaisons, Primary Care Access Network (PCAN), DCF ACCESS-public benefits system portal), State and federal disaster response.

2 CMs & Outreach workers receive weekly updates on mainstream benefits at project-specific registry mgmt mtgs. Representatives from DCF, Medicaid, VA participate in monthly member meetings and provide updates & annual training. CoC-wide provider listserv delivers mainstream program updates weekly as needed. Bi-annually, CoC offers SOAR refresher trainings

3 & 4 All CoC-funded providers ensure enrollment & retention in SNAP, Medicaid, TANF, etc., area FQHCs are active in CoC; Annual presentations by PCAN ensure CoC understands nuance of Healthcare.gov enrollment; Medicaid-ineligible individuals are evaluated for CHIP through Florida KidCare as well as for premium tax credits through Healthcare.gov. CoC is partnering with Florida Agency for Healthcare Administration and supporting Medical Managed Care Organization in implementation of 1115 Waiver Pilot program to serve Medicaid enrollees experiencing homelessness who also live with severe

and persistent mental illness. MCOs have HMIS access and ability to track movements of enrollees that interact with homelessness response system. CoC facilitates monthly check-ins with MCO for continuous process improvement.

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

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

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

**(limit 2,000 characters)**

1 CES is marketed/provides full 3 county geographic coverage w/ 7 centralized Access HUBs, intake at ES, drop-in centers, w/ Street Outreach teams (SOT) & 211 providing diversion, assessment & referrals. Bilingual SOT engage w/ youth, individual, families & Veteran. Registry Mgmt process (SSVF, RRH, PSH, youth) operates regionally, prioritizes & assigns persons to hsg & services using one by-name list (BNL). Utilizing both no-wrong door & centralized access approach maximizes geographic access.

2 CE serves a full spectrum of hmls persons. SOT find/engage clients, focus on least likely to engage including w. disabilities, unaccompanied youth, persons of color & veterans. Centrally located HUBs near public transit, w. separate access points for Vets & youth. Community-setting Advocates engage DV survivors. 211 initiates intake for those seeking help by phone, including those w/ Limited English Proficiency & mobility barriers, etc. CE maintains bilingual staff & engages agencies serving persons for whom English is a second language. CE information available electronically on website.

3 SOT & Access Point help clients complete intake process & enter HMIS data for fast placement on sub-pop BNL. Length of hmlsness & vulnerability determine prioritization. Vulnerability assessed w/ sup-pop specific standardized common assessment tool (CAT), the VI-SPDAT. CAT can be done in HMIS, is accessible by DV programs for comparable system. Eligible prioritized persons are first to be matched to programs & linked to hsg services.

4 CoC quickly navigates those w/ a hsg crisis to available resources based on need. We start w/ diversion to end person’s hsg crisis w/o entering into hmls response system. Then explore shorter term assistance to place in safe hsg w/ 1x assistance. If neither are viable, we assess for supportive hsg. Assigned navigation ensures eligible persons placed into supportive hsg. Participants complete a Hsg Needs Form w/ CM to ensure hsg is identified quickly.

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

Did your CoC conduct an assessment of whether disparities in the provision or outcome of homeless assistance exists within the last 3 years?	Yes
--	-----

1C-15a. <b>Racial Disparities Assessment Results.</b>	
NOFO Section VII.B.1.o.	

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

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

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

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

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



	Other:(limit 500 characters)	
12.		

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

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

**(limit 2,000 characters)**

CoC core values call for eradication of discrimination across hmls response system. CoC reviews data w/ all committees, CoC Board & Leadership Council.

Non-discrimination policy requires providers 2 have policy prohibiting discrimination against persons seeking/receiving CoC assistance based on race, ethnicity, color, gender, religion, national origin, ancestry, disability, marital status, age, source of income, family status, sexual orientation, gender identity & victim status, w/ goal of equal access (EA) to hsg & services. CoC continues work begun in 2018 to ensure that members of these protected classes have equal access.

CoC-driven analysis of race equity in housing & service delivery set in motion ongoing efforts to identify/address sources of race-and ethnicity-based discrimination & bias across system. LA is engaged w/ HUD TA utilizing targeted universalism approach to address disparities in outcomes.

CoC hosted ongoing training series in partnership with Valencia College's Peace and Justice Institute to raise race equity awareness are among best attended and create fertile base for ongoing race equity dialogue & work. Workshops have included: Conversations in Inclusiveness; Understanding Bias;Your Power to Empower; Waking Up to Our Shared Humanity.

RFA competition application scores applicant review of participant outcome data by race, ethnicity, gender identity, and/or age. & identifying barriers to participation by persons of different race/ethnicity, and steps taken to eliminate barriers and/or disparities observed; identify whether they work w/ HMIS to review data w/ an equity lens; & whether applicant has BIPOC individuals in managerial & leadership positions.

CoC provided Fair Housing Act (FHA) training specifically for provider/advocate community, CoC also provided training targeted to property owners/managers working w/ CoC. Most of the leases tied to rental subsidy through the CoC are reviewed centrally by CoC Hsg Team for FHA compliance.

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

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

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included and provide input that is incorporated in the local planning process.	192	190
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	7	35
3.	Participate on CoC committees, subcommittees, or workgroups.	15	43
4.	Included in the decisionmaking processes related to addressing homelessness.	15	43
5.	Included in the development or revision of your CoC's local competition rating factors.	2	2

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

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

1.	The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.	Yes
2.	The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery, data entry).	No
3.	The CoC works with organizations to create volunteer opportunities for program participants.	No
4.	The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	Yes
5.	Provider organizations within the CoC have incentives for employment and/or volunteerism.	Yes
6.	Other:(limit 500 characters)	
	Other, CoC member agency First Step Staffing partners with supportive housing providers to create pathways to employment opportunities that are tailored to participant capacity and needs. CoC has MOU with Valencia College to provide supportive housing participants with free skill development training opportunities, including: Advanced Manufacturing, Construction and Maintenance, Health Care, Information Technology, and Transportation Logistics	Yes

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

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

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

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

**(limit 2,000 characters)**

PPE Provided: 169,220 masks, 21,638 hand sanitizer, 35,500 gloves, 232 face shields, 33 thermometers and 40 plexiglass barriers were collected & distributed by Lead Agency to CoC/ESG partners.

1 Unsheltered: Following CDC guidance jurisdictions did not dismantle encampments for majority of pandemic. Street Outreach Teams (SOT) provided all forms of DOH/Emerg Mngmnt (EM) donated PPE for themselves & hand sanitizer, masks and rapid tests for unsheltered persons. PPE also provided at feeding programs serving unsheltered. Unsheltered persons identified as COVID+ or exposed & not needing hospital care were placed in non-congregate shelter w/daily well-care visits by physicians, & hsg planning ensured appropriate, timely & positive discharge. Identified 20 high medical needs persons at greatest risk of COVID complications for non-congregate (noncon) shelter. CoC organized campaign to educate and distribute vaccine info to unsheltered. FQHC and DOH partnered to offer vaccines as state protocol allowed.

2 Congregate Shelters: DOH/EM provided shelters w/ PPE & 6K rapid tests. Extensive retrofit of space to place plastic barriers strategically through facilities, space beds 6 feet apart. Erected heated tent to facilitate social distancing at large shelter. Opened temp noncon to reduce census in congregate settings. Persons identified as COVID+ or exposed & not needing hospitalization were placed in noncon w/daily well-care visits by physicians, & hsg planning ensured appropriate, timely & positive discharge. FQHC & DOH partnered to offer vaccines as state protocol allowed.

3 Transitional Housing: Partnering w/ DOH shelters were provided w/ PPE & rapid tests. Eliminated shared rooms in some TH projects. Persons identified as COVID+ or exposed & not needing hospitalization were placed in noncon w/daily well-care visits by physicians, & hsg planning ensured appropriate, timely & positive discharge. FQHC & DOH partnered to offer vaccines as state protocol allowed.

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

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

**(limit 2,000 characters)**

COVID response built on & improved protocols established for hurricane response. Improved partnership w/ Dept. of Health (DOH); Emergency Management (EM); public, private and VA hospitals; law enforcement; school systems; con-plan partners; Lynx (local bus system) All participated in regular (initially 3x/week) virtual meetings ensuring all had access to information simultaneously. Shared best practices, educated on constantly updating guidance & research, & facilitated sharing of resources when supplies were limited. Hospital referrals of COVID+ persons into quarantine shelters forged relationships between hospital care coordination & CE staff. The collaboration became ingrained & habitual..

CoC funded new position at LA, a CoC Emergency Response Coord. (ERC)-- providing leadership, coordination & rapid response capacity w/out compromising important CoC functions. ERC also leads on weather emergencies--most of which interact w/ public health concerns-- ie. Cold Nights; hurricane sheltering.

CoC leveraged knowledge within FQHC with expertise in serving homeless persons. Improved partnerships w/ for-profit organizations including hotels. Improved collaboration with food service providers. Built relationships with foundations that would fund gaps in public funds during health emergency. Partnering to develop strategies to address significantly changed workforce associated with health emergency and impact of staffing shortages and & increased wages required to staff projects. CoC is learning many lessons related to providing shelter with lower barriers than previously available in the community. CoC offered RRH to singles for the first time, gathering great experience for future emergencies. May 2021 survey of 190 unsheltered homeless persons improved experience in participant feedback during emergency. CoC also learned about effectiveness of virtual options & code text words for DV survivors stuck in homes with abusers as a way to engage & start safety process.

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

	Describe in the field below how your CoC coordinated with ESG-CV recipients to distribute funds to address:
1.	safety measures;
2.	housing assistance;
3.	eviction prevention;
4.	healthcare supplies; and
5.	sanitary supplies.

**(limit 2,000 characters)**

1 CoC utilized ESG funds to assist services to institute safety protocols, including facility retrofit & acquire PPE. ESG funded hotels providing isolation & recovery care for COVID+ persons who did not need hospital care to keep from returning to congregate (noncon) ESG projects. All RRH & PSH participants who remained unsheltered awaiting PH placement offered placement in noncon to reduce virus spread. CoC offered noncon to medically vulnerable persons deemed high risk for transmission. Fast noncon deployment staved off an outbreak in ESG funded shelters. Utilized flexibilities made available to ensure safety of CM, Hsg inspectors, and participants.

2 CoC ESG Recipients & subrecipients quickly increased CE & Housing Stability Case Management (CM) capacity and increased RRH across region to respond to increased hsg needs. Partners utilized ESG waivers to speed time to hsg & creatively assist households-that lowered barriers to hsg entry including immediate noncon support during navigation & hsg search phase, Landlord incentives & increased hsg search staff enabled recipients to access a tight hsg marketplace. FMR waivers provided enough flexibility to respond to rapid housing inflation. RRH extended to 24 months assisted families. CoC successfully offered RRH program to singles for first time with ESG.

3 Utility arrears & preventative rental assistance were coordinated through several regionally based providers. Both diversion (non-ESG) and prevention (ESG) assistance offered in all three counties.

4 ESG funds used for PPE including masks, gloves, gowns, and masks. ESG also coordinated distribution of COVID19 vaccinations.

5 CoC quickly took advantage of opportunities to fund hand washing stations, portable restrooms, and shower facilities, with appropriate sanitary protocols. 169,220 masks, 21,638 hand sanitizer, 35,500 gloves, 232 face shields, 33 thermometers and 40 plexiglass barriers were collected and distributed by Lead Agency to CoC/ESG partners.

1D-4.	CoC Coordination with Mainstream Health.	
	NOFO Section VII.B.1.q.	

	Describe in the field below how your CoC coordinated with mainstream health (e.g., local and state health agencies, hospitals) during the COVID-19 pandemic to:
1.	decrease the spread of COVID-19; and
2.	ensure safety measures were implemented (e.g., social distancing, hand washing/sanitizing, masks).

**(limit 2,000 characters)**

1 Beginning early in the pandemic CoC participated in daily calls w/ Dept of Health (DoH) and local hospitals for more than a year, facilitating consultation and collaboration. State public health agencies worked in coordination with CoC to acquire and distribute enough PPE for street outreach, day service centers, ES, TH and supportive housing programs. CoC coordinated with ES, outreach providers, DOH and local hospital care coordination teams to ensure hmls persons who were COVID+, or exposed, have stable and safe spaces to convalesce without increasing community spread. Assessment and enrollment process created utilizing existing CE taking referral from hospitals and community partners. Referrals approved based on advice of a physician rather than CE staff.

2 Local DOH and FQHC assisted CoC in devising workflows for screening, isolation and quarantine measures. DOH conducted site visits upon request to any congregate facility seeking guidance on protocols and physical design to reduce transmission of virus.

EM and DOH donated 169,220 masks, 21,638 hand sanitizers, 35,500 gloves, 232 face shields. Lead agency ensured CoC partners were informed of all new and emerging guidance from CDC, HUD, NAEH, and DOH. Regular coordination calls (including hospitals, EM, DOH), emails, webinars, and personal outreach by CoC staff were utilized to effectively communicate to all partners. Targeted cohort calls with local emergency shelters ensured best practices in disease prevention were being communicated and followed. Safety retrofits were funded.

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

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

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

**(limit 2,000 characters)**

1 CoC communicated safety measures, changing local restrictions and up to date vaccine implementation strategies to homeless service providers through ongoing CoC virtual meetings (meeting initially multiple days per week, then weekly until rhythm of work and confidence in operations were established), monthly CoC member meetings, weekly and periodic emails referencing guidance by CDC/HUD and local/state department of health. LA participated in daily calls with mayor of largest jurisdiction, Dept of Health & Emergency Management to ensure awareness of all recommendations to share with providers. CoC hired Emergency Preparedness Coordinator in Fall 2020 to act as point person for distribution of information and safety supplies. Coordinator provides updates and briefings at all CoC member meetings. Information flow to providers and from providers back to community leaders assisted in planning and rapid response.

2 CoC communicated information on changing restrictions for shelter in place, masking and vaccine eligibility through weekly calls with providers and monthly member meetings. CoC also consulted with local jurisdictions concerning best

practices related to urban and rural encampments and their relationship to shelter in place order and limiting community spread.

3 Emails, member meetings and monthly provider calls facilitated communication about who was eligible for vaccines over time, how to get vaccines to service locations for on-site vaccination, and other locations vaccines were available. Health Care Center for the Homeless and DoH were assertive in their collaboration with CoC partners in relationship to vaccination. 190 unsheltered persons surveyed May 2021 provided information about how many are vaccinated, how many weren't but were willing, and how many needed support in trusting vaccines.

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

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

**(limit 2,000 characters)**

CoC worked with the local Departments of Health (DOH) and Healthcare Center for the Homeless (HCCH) to target individuals and families experiencing homelessness for vaccines. Weekly calls with providers reviewed statewide vaccine protocols and identification of numbers of persons at service locations who would be eligible for vaccines at that time.

DOH and HCCH coordinated mobile vaccine clinics at day service centers, meal programs, TH and emergency shelters. HCCH worked to identify eligible and willing unsheltered individuals through street outreach (coordinating weekly surges in both urban and rural encampments), as well as amongst CoC Supportive Housing participants.

Vaccine cash/gift card incentives were used to encourage vaccinations. CoC devised a campaign to utilize ESG funded incentives, however the State of Florida Department of Children and Families did not authorize use of cash or gift cards, limiting CoC's effort.

CoC outreach surge (May 2021) to educate and combat vaccine resistance connected with 190 unsheltered persons. Survey conducted also provided information about how many are vaccinated, how many weren't but were willing, and how many needed support in trusting vaccines, and GPS coordinates for follow-up vaccination campaigns.

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

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

**(limit 2,000 characters)**

DV agencies participated in regional provider calls that started 3x/week and reported lower than usual demand for shelter until more recent months. ESG funds used to assist with retrofit and PPE so that victims would feel safe in shelters. Daily calls with largest jurisdiction’s leadership team included regular updates from law enforcement on known DV, which showed a pattern of being reported less often, but reported cases being more violent and more likely to involve substance abuse. Certified DV Centers met virtually with Dept of Children/Families and each other 1x/week to learn about innovative ways to reach survivors during shelter in place mandates including text messaging code words. DV assisted more people than usual by using virtual connections from home during shelter in place. DV specific outreach continued serving survivors, reaching out from police reports. Attorneys experienced an increase in callers, conducting legal consultation via phone and virtual meetings. CoC’s RRH census is more than 50% survivors of DV. CoC used waivers to expand RRH support to 24 months giving survivors more time to comply with shelter in place ordinances and to find employment.

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

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

**(limit 2,000 characters)**

CoC quickly increased capacity on the front end of the homelessness response system; switching from in-person access (to limit community spread) to phone access, and hiring more staff (+3) to accommodate an increase in volume in incoming calls. New mobile CE access points were established utilizing new mobile outreach vehicle to facilitate engagement into the system by persons unable to safely access existing access points (esp. Unsheltered persons in rural encampments).

Outreach Teams were supplied with PPE to facilitate safe engagement with persons entering CE. CoC also reevaluated the forms in use to better identify those who are/were affected by or were at-high risk for COVID19 complications.

CoC replaced the use of VI-SPDAT and length of time homeless as primary prioritization factors with factors associated with high risk of contracting and experiencing complications from COVID19. Changes in the coordinated assessment system assisted in the development of non-congregate shelter operations to better serve those who were medically needy or covid+ and needing isolation and convalescence.

CoC staff stay updated on all changes and evolutions of waivers for current fundings in efforts to serve more persons experiencing homelessness.



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

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

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

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

1.	Enter the date your CoC published the 30-day submission deadline for project applications for your CoC's local competition.	09/16/2021
2.	Enter the date your CoC publicly posted its local scoring and rating criteria, including point values, in advance of the local review and ranking process.	09/10/2021

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

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

1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Used data from a comparable database to score projects submitted by victim service providers.	Yes
5.	Used objective criteria to evaluate how projects submitted by victim service providers improved safety for the population they serve.	Yes
6.	Used a specific method for evaluating projects based on the CoC's analysis of rapid returns to permanent housing.	Yes

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

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

- |    |  |
|----|--|
| 1. | the specific severity of needs and vulnerabilities your CoC considered when ranking and selecting projects; and  |
| 2. | considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area. |

**(limit 2,000 characters)**

prioritize those most vulnerable. Threshold requirements ensure all projects are in compliance with CoC Interim Rule; will accept 100% of referrals through CE prioritization based on vulnerability; agrees to practice and be monitored on fidelity to HF principles; and will not separate or deny assistance due to family composition. Competition scoring is weighted towards projects that serve persons are unsheltered (<100% get 0 pts); projects that exit the fewest participants to homeless situations (<5% get 15 pts; >20% get 0 pts); conversely PSH projects that retain or exit to positive destinations are rewarded (>90% positive get 15 pts, <70% get 0), reference CoC Scorecard.

Other policies embedded in the application process include: a priority for PSH projects; a policy requiring that PSH units be filled using HUD's Orders of Priority (highest needs/longest homelessness histories); & other policies requiring funded agencies to adhere to Housing First, gender inclusion & non-discrimination and CoC-wide case management standards.

2 Due to all projects taking referrals from CE, there is little variance in the need profile when comparing like projects. However, some history and stable and successful projects with few exits may have had for ex. 50% negative exits, scoring low in the competition (exiting 2 participants, 1 of which returned to homelessness), with 2 exits out of 50 participants in a given year. The Review & Ranking Cmte (RRC) took such nuanced consideration into account and did not penalize a highly successful project due to an inadvertently crude nuance in the competition performance scoring. While not present in our current application, the CoC can conceive of a situation where a targeted project serving highly vulnerable persons might not perform at the same level as a project serving lower acuity participants. In such a case, the RRC would make necessary, transparent and open adjustments.

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

Describe in the field below how your CoC:

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

**(limit 2,000 characters)**

1 Review, selection and ranking process for project applications incorporated

input from persons of different races in several phases of the process. Black persons are the second most over-represented race in our homeless population. LA staff research and develop initial ideas about rating factors to present to CoC members/Board. LA staff is 31% Black, 27% Hispanic, 12% with disability and 21% formerly homeless. Lived Experience Council (33% B, 17% H, 17% M) Youth Action Board (63% B, 13% H, 13% A), and Technical Expertise Cmtes discuss rating factors. Other committees are open to all members so exact racial breakdown is not captured, however in a recent CoC survey (41% persons with lived experience). CoC Board approves review, selection and ranking process and is 31% Black and has Hispanic representation.

2 Cmtes determined scoring weight of specific factors and reviewed all scored measurements. Persons of color were involved in this review, selection and ranking process. 21% of the volunteer scorers were Black, and 8% were Asian. The Asian homeless population, while small in number, makes up the group with the largest overrepresentation in the homeless population. The Community Ranking Committee members were 40% Black and 20% Hispanic. The CoC Board approves the final recommendations and is 31% Black.

3 The scoring and ranking process considered how applicants promote race equity through several scored elements, including board representation; written policies and procedures; degree to which the project reviewed outcomes with a racial equity lens, and has identified barriers to participation by persons of different races and ethnicities; and what steps taken to eliminate the identified barriers; and policies & processes to address racial disparities.

1E-4.	Reallocation—Reviewing Performance of Existing Projects. We use the response to this question as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criterion below.	
	NOFO Section VII.B.2.f.	

Describe in the field below:	
1.	your CoC’s reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;
2.	whether your CoC identified any projects through this process during your local competition this year;
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year;
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable; and
5.	how your CoC communicated the reallocation process to project applicants.

**(limit 2,000 characters)**

1 CoC’s process for reallocation was included in local application RFA.

Policies sustained current capacity so region maintained or increased existing number of PSH and RRH beds & all 3 counties have reasonable coverage. Projects underspending their full award, underutilizing beds, not in alignment w/ Hsg 1st principles and/or underperforming in other areas critical to meeting goal of ending homelessness were encouraged to self-select for full or partial reallocation. If not self-selecting, the same projects were subject to involuntary reallocation. Appeals are considered by the CoC Board or Exec. Cmte.

Reallocation process encourages shifts from lower-performing projects to higher-performing ones. CoC will give highest consideration to project requesting reallocated funds based on project performance measures that impact overall system performance including, but not limited to, alignment with hsg 1st principles, hsg stability, exits to homelessness, spending rates, race equity, and barriers/acuity level of project participants. Projects requesting reallocated funds must commit to work with CE to minimize risk that persons housed in the project losing funds will become homeless as a result of the reallocation.

CoC Board reviewed & approved reallocation process.

The CoC also uses separate sub-recipient (SR) competition to reallocate funding from poor performing SRs within renewed projects.

2 A project with low spending rates was identified as subject to reallocation & self-selected to request less funding.

3. One PSH project serving all 3 counties was identified as subject to reallocation & voluntarily requested less funding. Those funds were reallocated to a new PSH project serving all three counties w/ TBRA so that no PSH capacity was lost to system.

4 NA

5 The CoC directly communicated reallocation process via RFA website & email), at CoC member mtg, & at each of 3 applicant training sessions.

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

Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2016 and FY 2021?	No
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1E-5.	Projects Rejected/Reduced–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen if You Select Yes.	
NOFO Section VII.B.2.g.		

1.	Did your CoC reject or reduce any project application(s)?	Yes
2.	If you selected yes, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps.	10/14/2021

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

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.	10/14/2021
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1E-6. Web Posting of CoC-Approved Consolidated Application. You Must Upload an Attachment to the 4B. Attachments Screen.	
NOFO Section VII.B.2.g.	

Enter the date your CoC's Consolidated Application was posted on the CoC's website or affiliate's website—which included: 1. the CoC Application; 2. Priority Listings; and 3. all projects accepted, ranked where required, or rejected.	11/14/2021
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## 2A. Homeless Management Information System (HMIS) Implementation

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

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

Enter the name of the HMIS Vendor your CoC is currently using.	Service Point - 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.	Single CoC
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section VII.B.3.a.	

Enter the date your CoC submitted its 2021 HIC data into HDX.	05/13/2021
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2A-4.	HMIS Implementation—Comparable Database for DV.	
	NOFO Section VII.B.3.b.	

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

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

**(limit 2,000 characters)**

1 Regional DV providers use Osnium Software, Inc that gathers all HMIS standard data points and produces comparable HUD CoC APR and ESG CAPER reports. CoC lead agency provides technical assistance to DV providers as requested to ensure compliance of comparable database and reports with HUD requirements. Lead agency's HMIS Partner Support Specialists are available to DV providers for consultation to improve data quality, analyze system performance, and provide CoC with reports needed to understand the intersection of DV survivors and homelessness response system. CoC is aware that reporting gaps exist by design and are not related to software. State of Florida statutory requirements preclude DV providers from collecting some personal information, such as disability or income, so that the information is not available for a court subpoena should the survivor be taken to court by the abuser.

2 DV agencies annually submit de-identified aggregate system performance measure data in the form of PIT/HIC associated with regional count to the CoC lead agency, the HMIS lead. APRs for CoC local NOFO competition and project application submissions provided via CSV files and analysed by lead agency HMIS team members.

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

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

Project Type	Total Beds 2021 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	1,271	147	1,095	97.42%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	693	24	350	52.32%
4. Rapid Re-Housing (RRH) beds	1,218	0	1,218	100.00%
5. Permanent Supportive Housing	1,578	0	1,477	93.60%
6. Other Permanent Housing (OPH)	402	0	402	100.00%

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

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

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

**(limit 2,000 characters)**

1 TH: Almost all of the formerly funded TH inventory was eliminated /converted in alignment with HUD priorities, increasing the relative impact of remaining TH providers on bed coverage. 72% of the TH beds not covered in HMIS the remaining 28% are HOPWA, DV or Orlando Union Rescue Mission (OURM), a

privately-funded, faith-based provider historically unwilling to participate in HMIS. With help of key stakeholders, CoC redoubled efforts to persuade OURM to participate. Steps to be pursued:

- Demo new HMIS vendor software to TH providers not currently in HMIS
- Develop package of incentives for participation by OURM
- Continue delivery of excellent customer service to existing vendors

2.CoC will include OURM in all communications about adoption of new HMIS vendor, including personalized demonstrations of the software's capabilities. CoC will explore a package of incentives designed to make use of HMIS attractive financially. Additionally, CoC will design a training and customer support plan to ease a software transition by OURM.

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

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

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

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

**(limit 2,000 characters)**

NA

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

Did your CoC submit LSA data to HUD in HDX 2.0 by January 15, 2021, 8 p.m. EST?	Yes
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## 2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

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

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- 24 CFR part 578

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

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

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

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

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

Describe in the field below:	
1.	how your CoC determined which risk factors your CoC uses to identify persons becoming homeless for the first time;
2.	how your CoC addresses individuals and families at risk of becoming homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the number of individuals and families experiencing homelessness for the first time or to end homelessness for individuals and families.

**(limit 2,000 characters)**

1 CoC uses HMIS & community data to analyze FTH, esp 211, a first call for most persons experiencing FTH. Analysis shows low-wage jobs dominating service-drive economy & acute affordable hsg shortage create FTH threat for those w/limited support systems. HMIS shows ES are largest entry point for FTH. CoC is working w/ jurisdictional partners to determine how to utilize data from ERA program as a future predictor of FTH.

2 CoC has implemented robust diversion & housing mediation initiative that grew w/ CARES and ARP resources, along with braiding of local resources. Persons experiencing a hsg crisis are encouraged to utilize 211 call center, visit a local service provider or CE access HUB location. 211 Intake specialists triage persons between those at-risk of hmlsns vs. those who are literally hmls. Those at-risk are referred to County/State eviction prevention assistance (including CARES/ARP Emergency Rental Assistance). Those who are literally hmls are referred to hsg specialists trained to engage, F2F or via phone/virtual, in problem-solving conversations about their hsg crisis. All willing providers in the CoC’s HMIS are trained on a workflow (414 users trained) to provide housing mediation (57 users trained) prior to assessment/referral to ES or Supportive Hsg Resources. One-time flexible financial assistance is available for family reunification, groceries, transportation, security deposit & short-term rental assistance to divert newly homeless persons from utilizing the CoC’s limited shelter & supportive hsg resources. CoC is also utilizing a gift from Day 1 Fndtn to hire three regional diversion specialists to provide targeted follow-up services to ensure connection w/ additional resources and mainstream services for housing stabilization.

3 Homeless Services Network of Central Florida is the Lead Agency for the CoC and is responsible for overseeing and facilitating development of a strategy to reduce first-time homelessness for individuals and families.

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

**(limit 2,000 characters)**

1 Key elements of strategy to reduce LOTH include: i) introducing diversion and rapid exit strategy implemented system-wide that diverted 17% of those identified as homeless at community access points w/o financial assistance--flexible financial assistance is provided when necessary to aid in rapid resolution of homelessness. CE implemented a phased assessment process & equips front-line staff, CES staff/volunteers & 211 Intake Specialists with mediation skills to facilitate rapid resolution of homelessness; ii) aggressive housing placement efforts with broad landlord (LL) engagement increasing flow in & out of the housing “pipeline.” The CoC’s team of housing location specialists recruit private LL across the region, market aggressively to real estate professionals, and use master leasing to reduce access barriers for hardest-to- house clients; and iii) outreach to/extended engagement of those w. longest LOTHs.

2 CoC uses HMIS as primary tool to identify those with longest LOTH and invests significantly in Street Outreach (SO) to identify most vulnerable individuals with longest LOTHs, many of whom are in HMIS and un- sheltered & not accessing ES beds (the resulting impact of persons housed directly from the streets is not captured in this SPM). Prioritization process used by the CoC includes a combination of the current vulnerability index, COVID risk factors & LOTH (based on HMIS) rather than Length of Stay (LOS) in shelter. Strategies for housing these persons include identifying LL to accept high-barrier persons, case conferencing with specific persons with long LOTH, prioritizing LOTH even if persons are unsheltered and, thus their housing is not captured in this SPM. Leasing project targets persons with high barriers and longest LOTH.

3 Homeless Services Network of Central Florida is the Lead Agency for the CoC and responsible for the strategies related to reducing LOTH.

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

2. permanent housing projects retain their permanent housing or exit to permanent housing destinations.

**(limit 2,000 characters)**

1 ES/TH/RRH Exits to PH: CoC increases exits to PH (EPH) w/ hsg-focused CM, recruit & support private landlords (LLs), increase client income, link clients to move on units, & monitor system/project performance. CoC expanded RRH w/ ESG CV funds & EHV Program.

CoC uses data literacy w/ ES agencies to analyze EPH data, understand patterns of success & roadblocks to PH exits. Influx of ESG enabled CoC to start singles RRH. State funds used to serve more ES singles in RRH. CoC hired Shared Housing Coord to develop strategy to remove share housing barriers for ES/TH. CoC will also evaluate chronically homeless utilization of TH and institutional discharges impact on hsg permanency.

CoC coordinates hsg focused CM system-wide, provides skill training (MI., TIC, etc.) Case conferencing extends hsg focused approach. CoC funds Coaching position supporting CM best practice service delivery. Housing Team (HT) recruits private sector (LL) & developed 500+ portfolio supporting choice & need-based hsg placement. To improve RRH success CoC researches service approach outcomes for RRH as part of Notre Dame Lab for Economic Opportunity. HT supports LLs w. tenant/payment concerns, provides incentive & damage funds. Analysis of non-PH exits by race & geography informs system planning. Low performing agencies receive performance improvement plans & funding is re-allocated to agencies w. higher ETPH/Retention.

2 Exit/retention of PH: Most elements of prior strategy apply to PH . LA coordinates & equips 40+ PSH CM w/ training in best practices (MI, TIC, etc). HT's LL supports resolve tenancy concerns vs. eviction & quickly rehouse when necessary. PSH emphasizes SOAR access, linkage to mainstream & employment services to increase income/benefits, along w. peer support & housing specialists. Service plans modified in response to changes in circumstances which may include access to homelessness prevention resources.

2C-4. Returns to Homelessness--CoC's Strategy to Reduce Rate.

NOFO Section VII.B.5.e.

Describe in the field below:

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

**(limit 2,000 characters)**

1 CoC identifies individuals by providing thorough & easy to follow workflows for agencies at the front door of the system effectively using shared data available in HMIS, CoC maintains a substantial investment in street outreach (20+ street outreach workers). CoC operated a hybrid approach to CE to ensure expansive coverage throughout the region, w. centralized access points with face-to-face interaction, 211 call center, & "no-wrong-door" partnerships w. geographically dispersed providers to quickly identify RTH--to divert households to safe

housing opportunities &/or provide access to appropriate services.

2 CoC strategy to reduce RTH makes use of analytics, targeted interventions & structural linkages w. broader system. CoC identifies factors correlated w. RTH (ex. exits to family, CM caseload, etc) through continuous examination of program data, system- & project-level performance measures at macro level; & case conferencing & feedback loops at provider/client level. RRH/PSH workgroups refined exit policies & procedures to address emerging RTH issues. Housing Team identifies units to re-house clients who lose PH before they return to the system. DV Transfer Plans move victims to new housing rather than abandon unsafe PH. Leveraging affordable PH units (e.g., tax credit units) for move-on opportunities increases long-term sustainability. Fully utilize EHV's in partnership with PHA. Responding to unauthorized capture of units by visitors of vulnerable clients, CoC developed protocols to regain unit possession & restore tenancy. Case planning emphasizes job supports & training, SOAR & mainstream services to increase income & benefits. Case mgmt includes hsg stability budgeting, adapts to changes in client circumstances, engages targeted homelessness prevention as needed, community integration & includes follow-up after rent subsidy ends.

3 Homeless Services Network of Central Florida is the Lead Agency for the CoC and responsible for strategies related to RTH.

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

Describe in the field below:

<b>1.</b>	<b>your CoC's strategy to increase employment income;</b>
<b>2.</b>	<b>how your CoC works with mainstream employment organizations to help individuals and families increase their cash income; and</b>
<b>3.</b>	<b>provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.</b>

**(limit 2,000 characters)**

1 Strategy re: increase employment income, i) reduce barriers to & integration with mainstream/community resources (ex. Careersource MOU) ii) maximize partnerships with training programs connected to higher paying jobs (ex. Valencia College Accelerated Skills Training Programs, free tuition for those with lived experience) iii) increase emphasis by & improve effectiveness of CoC agencies re: jobs/income; iv) emphasize employment at all client case conferencing; v) establish partnerships to add youth-specific job training svcs; connect RRH/PSH participants to newly launched First Step supportive employment program.

2 CoC works with employment agencies: Linking case mgmt. with mainstream employment programs; strengthening partnerships w. emerging supportive employment prog. utilizing social entrepreneurship & micro-enterprises to provide individualized employment opportunities for persons w. Employment barriers (ex. disabilities, criminal history, low educational attainment, substance use disorder, lack of childcare); ii) CoC is cultivating linkage between CES &

Goodwill Job Connections Centers; iii) RRH & PSH workflow & Cm scope of work include direct referrals to CareerSource of Central Florida & Goodwill staffing agency; iv) CoC is bolstering system-wide supports such as flexible funding for employment-related costs (e.g., transportation, uniforms); v) CoC's newest initiative involves entrepreneurship mentoring in partnership with CoC Youth Action Board

3 Homeless Services Network of Central Florida is the Lead Agency for the CoC and responsible for strategies associated with increasing employment income

<b>2C-5a.</b>	<b>Increasing Employment Cash Income–Workforce Development–Education–Training.</b>	
	NOFO Section VII.B.5.f.	

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

**(limit 2,000 characters)**

1 CoC has MOU with CareerSource (Local Workforce Development Board), Goodwill & Valencia College who serve as liaisons to mainstream employers & develop specific training programs to meet needs of those businesses. Lead agency's supportive housing team periodically invites representatives to present opportunities available to CMs, with training on how to enroll participants. CoC also uses email and monthly member meetings to promote access to these employment services. CM work with program participants to participate in virtual opportunities that replaced many standard job fairs, etc., during pandemic. The above mentioned organizations also serve on a number of CoC committees and working groups to inform strategies and analyze outcomes.

2 CoC works with educational institutions--specifically Valencia College provides tuition free accelerated skills training programs in Advanced Manufacturing, Constructions and Maintenance, Health Care, Information Technology and Transportation Logistics. These are intensive hands-on learning programs based on employer specific needs in Central Florida. Job placements services are included as part of the program. CoC partners with the local Circles USA chapter that provides community-based mentorship to supportive housing participants. Individuals are provided access to a circle of mentors and advocates that support families exiting homelessness. Other nonprofits including United Against Poverty and ToolBox4Life provide supportive employment opportunities/job training.

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

Describe in the field below:	
1.	your CoC's strategy to increase non-employment cash income;
2.	your CoC's strategy to increase access to non-employment cash sources; and

3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.
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**(limit 2,000 characters)**

1 Strategy re: non-employment cash income, i) reduce barriers to & integration with mainstream / community resources; ii) continue access to SSI application assistance including recertifications; iii) annual training for CM on mainstream benefits eligibility and processes, incl. income tax and premium tax credits. iv) emphasize non-employment case benefits at case conferencing.

2 Strategy re: increased access to non-employment cash sources, i) require funded projects to include a partner in the project who is certified to remotely facilitate web-based enrollment & retention in SNAP, Medicaid, Children's Health & cash assistance; ii) facilitate presentations & distribution of information to CoC members to ensure that providers are aware of benefits, eligibility & application processes; CoC distributes information at least quarterly via CoC member meetings or email blasts; iii) Maintain & strengthen MOUs with "4C" agencies to facilitate access to subsidized childcare so HH can seek & maintain employment. The CoC currently partners with childcare agencies to prioritize and expedite application for childcare for homeless families; iv) dedicate access to and support for SOAR workers to remove barriers & expedite applications for SSI/SSDI benefits; CoC offers annual SOAR refresher training; v) monitor project performance re: increasing income; & use project type-specific workgroups/Technical Expertise Committee to refine & evaluate strategies including strengthening MOUs with child care/education partners, improve presentations & distribution to CoC members, etc. vi) leverage pandemic related unemployment benefits.

3 Homeless Services Network of Central Florida is the Lead Agency for the CoC and is responsible for implementing strategies to increase non-employment cash income.

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

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

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

Is your CoC applying for a new PSH or RRH project(s) that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	Yes
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<b>3A-1a.</b>	<b>New PH-PSH/PH-RRH Project—Leveraging Housing Commitment. You Must Upload an Attachment to the 4B. Attachments Screen.</b>	
	NOFO Section VII.B.6.a.	

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

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

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

Is your CoC applying for a new PSH or RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
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<b>3A-2a.</b>	<b>Formal Written Agreements–Value of Commitment–Project Restrictions. You Must Upload an Attachment to the 4B. Attachments Screen.</b>	
	NOFO Section VII.B.6.b.	

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

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

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

Project Name	Project Type	Rank Number	Leverage Type
2021 Medical Serv...	PSH	15	Both

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

**1. What is the name of the new project?** 2021 Medical Services

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

**3. Enter the rank number of the project on your CoC's Priority Listing:** 15

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

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

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

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

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

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

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

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

**(limit 2,000 characters)**

NA

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

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

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

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. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.C.	

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

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

**(limit 2,000 characters)**

NA

## 4A. DV Bonus Application

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

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

<b>4A-1.</b>	<b>New DV Bonus Project Applications.</b>	
	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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<b>4A-1a.</b>	<b>DV Bonus Project Types.</b>	
	NOFO Section II.B.11.	

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2021 Priority Listing.

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

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

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

1.	Enter the number of survivors that need housing or services:	16,547
2.	Enter the number of survivors your CoC is currently serving:	1,221
3.	Unmet Need:	15,326

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

Describe in the field below:

1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and
2.	the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects); or
3.	if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.

**(limit 2,000 characters)**

1. Formula for DV survivors needing housing and services: Total DV enrollments currently in RRH & PSH + total HoHs served by DV providers (APRS from HMIS comparable database and administrative data) who are or are not housed, + minimum of one victim for every DV arrest in FI Department of Law Enforcement Uniform Crime Report + numbers requesting assistance through Florida Abolitionist Hotline (HT) + numbers reported to Department of Children and Families re: human trafficking of children. Currently served based on numbers receiving RRH or PSH housing as reported in HMIS as well as DV providers comparable data base. Due to confidentiality the numbers cannot be deduplicated and may contain duplicates.

2. Data sources: HMIS APR and CAPER; APR data from HMIS comparable DV providers; administrative data from Florida Abolitionists Hotline; Uniform Crime Report of Florida Law Enforcement, FL Department of Children and Families Human Trafficking of Children Annual Report.

3. Barriers to meeting the need include lack of dedicated DV/HT RRH, high number of international human traffickers who operate in this high tourist industry region; intensive needs faced by victims including mental health, substance use, criminal backgrounds, low employment rates, high needs for job training, lack of rental history and high eviction rates. Although victims may not need permanent services, many need services for longer period of time than other RRH households.

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

Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects—only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.

<b>Applicant Name</b>
Homeless Services...

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

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

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC’s FY 2021 Priority Listing:

1.	Applicant Name	Homeless Services Network of Central Florida, Inc.
2.	Rate of Housing Placement of DV Survivors–Percentage	79.00%
3.	Rate of Housing Retention of DV Survivors–Percentage	95.70%

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

Describe in the field below:

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

**(limit 1,000 characters)**

1 Calculated rate of housing based on HH’s with a move-in date or had a positive exit destination without prior move-in date. Retention based on number who exited to permanent housing or are still housed. Calculation based on HH’s participating in CoC RRH projects administered by the applicant. Includes survivors receiving housing and/or case management.

2 Date source is HMIS for DV survivors served in non-DV RRH project and receiving CM from agencies that are not certified DV agencies. Calculation based on HH’s participating in CoC RRH projects administered by the applicant.

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

Describe in the field below how the project applicant:

1.	ensured DV survivors experiencing homelessness were assisted to quickly move into safe affordable housing;
2.	prioritized survivors–you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC’s emergency transfer plan, etc.;
3.	connected survivors to supportive services; and

4.	moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.
----	---

**(limit 2,000 characters)**

1 Applicant has extensive experience assisting survivors to quickly move into safe, affordable, permanent hsg. Housing Locators identify units based on de-identified client choice & work w. Landlords (LL) to reduce unique DV based barriers including credit, evictions & criminal history. Region-wide available units provide choice & promote safe hsg. options. Once safe housing is identified & inspected, the survivor/family can quickly move in. Applicant has assisted more than 2000 HH to move into perm hsg.

2 Survivors identified by non-DV or DV providers prioritized by Applicant for supportive hsg. services due to safety concerns & efforts to reduce trauma. Specialized intake/outreach targets families actively fleeing DV through hubs/access points & 24-7 access w. 211 & DV hotlines. Certified DV subrecipients High Lethality Outreach specialists prioritized victims in which crime report noted strangulation or use of weapons. CES facilitated assignment to hsg. & services prioritized on by-name list based on vulnerability, including DV & LOTH. Minimal docs (ID & social security card) gathered for eligibility & if required by LL. Emergency Transfers prioritized for rehousing.

3 Sub-recipient's (SafeHouse, Harbor House, Help Now, Catholic Charities) experienced trauma informed CM link survivors w/ individualized services including child care, legal, health, MH, SA, education, access to mainstream benefits, job training & employment. Due to specific target population served additional supports are available: health/MH/Addiction services provided through partnerships with regional hospitals/health center and treatment/counseling agencies.

4 Contracted trauma informed CM have extensive experience work w/ survivors to access low income tax credit (LIHTC) units that remain affordable after RRH subsidy ends. Applicant has MOUs with 6 LIHTC properties. Households are identified for move on. 3 PHA MOUs prioritize for EHV to provide permanent rent subsidy even after RRH CM services end.

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

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

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

**(limit 5,000 characters)**

1) All contracted DV staff are trained in 30 hours of core competency before allowed to work with DV survivors. DV and non-DV staff who interact with



survivors are also trained in safety planning. Trauma-informed safety planning training emphasizes: the survivor determines the speed of discussions, staff present information slowly w/ simple choices, offer realistic options with clear explanations, offer flexible programs & small step plans, pace schedules, & identify ways to celebrate accomplishments. Safety planning takes place at initial contact as the first step in services and engagement and is updated at each step of participant’s journey, especially when survivor has change in circumstances (housing, job, school) or perpetrator’s behavior changes.

2) Intake is conducted in multiple settings. In many cases, including at Certified DV Centers, private rooms are used. HUBS use spaced cubicles with sound barriers and white noise machines. Intake can also occur via phone or virtual/video to allow the survivor maximum ability to engage the system when they feel safe.

3) CE protocol requires separate intake & interviews with each member of a couple. Couples are told this is the standard process. Participants are also encouraged to reach back out again in person or by phone if they have additional information to provide after the current conversation, leaving the door open for survivors to update on their status at any time they feel safe. Private space is also available for child interviewing with parental consent.

4) DV survivors participate in identifying best crisis & permanent hsg options as it pertains to their individual cases, needs, safety & w. emphasis on client choice including location & housing type. Survivors work with trauma informed sub-recipient CM to complete housing needs form that specifies preferred community/neighborhoods (or areas to avoid), school districts, price range, physical design of apartment complexes (elevators, first floor), safety features, pet friendly, etc. CoC has substantial scattered site rental assistance capacity. 500+ scattered site units providing a large landlord, neighborhood and unit size/type pool. Annual privacy training is required of staff that have access to any information about addresses to ensure locations are not shared. Copies of documents required for funder are in locked locations. All survivors are able to opt to not have their information stored in any database. All DV survivors are provided a safety plan while in shelter and when they are moved into hsg. If needed, staff attorneys are able to further protect survivors with court orders and alternative mailing addresses.

5) Sub-recipients operate congregate facilities w/ fenced/gated entry, bulletproof windows, external bright lighting, maintained hallway lights, secure entries. VAWA funds used to purchase door bars, cameras for rental units.

6) Florida statutes mandate confidentiality of all DV survivors personal information as well as the confidentiality of locations of living spaces. Congregate locations are designated exclusively for survivors. PO boxes used for mailing addresses. Professional visitors complete information forms and sign confidentiality agreements. State Association of DV providers perform annual inspections & audits on processes and the safety of congregate facilities and programs to ensure objective evaluation.

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

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

**(limit 2,000 characters)**

Sub-recipients include 3 certified, experienced DV agencies and 1 experienced Human Trafficking provider with history of successful assistance to victims and track records of maximizing safety. State Association of DV providers perform annual inspections & audits on processes and the safety of congregate facilities and programs to ensure objective evaluation. Department of Health and Dept of Children and Family also conduct annual inspections to ensure safety of all survivors. High Lethality Outreach has specialists who prioritize victims in which a crime report notes strangulation or use of weapons. All participants have control over confidentiality of data through opt out options - no one is denied services if they opt out of having their information put into confidential database. Project participants are told by CoC Lead Agency of opportunity to complete anonymous client satisfaction survey to report any concerns about safety. Results of surveys are used to improve safety, project experience and trauma informed service delivery. Project partners required to have non-discrimination policies, to provide translation services including sign language for persons who are deaf or hard of hearing to ensure all seeking help are provided quality services regardless of verbal English skills, race, ethnicity, gender, family composition, etc. Safety plans are conducted upon first engagement and whenever circumstances change, especially new housing, jobs, schools or changes in abuser's behavior. Safety plans are done at the pace the survivor dictates. Sub-recipients provide CM for at least 3 months post exit from financial assistance. Sub-recipients also provide mechanism for participant to re-engage if circumstances change after project exit - for example, if found by abuser. Local competition scored multiple questions related to safety practices.

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

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

1.	prioritizing program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma;
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;
6.	providing opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for parenting, e.g., parenting classes, childcare.

**(limit 5,000 characters)**

1 Applicant administers CoC, ESG, VA and locally funded RRH projects in which more than 30% of participants are DV/HT survivors. Participants are supported by CM who are trained in trauma informed care, unintentional bias, motivational interviewing, and DV safety practices and apply that training to supporting the participant to develop housing plans that are grounded in need for safety. A Housing Need Forms that specifies preferred

community/neighborhoods (or areas to avoid), school districts, price range, physical design of apartment complexes (elevators, first floor), safety features, pet friendly, etc. is completed with participants and guides the work of the Housing Team (HT) to identify viable housing options. Participants are given choice over housing units - type and location and are allowed to move out of county if they choose.

2 Sub recipients (SR) adopt trauma informed approach to all services including case management and advocacy. All staff, and especially CM, trained and attend to survivor's emotional needs as well as physical safety. CM assist survivors in strengthening their own psychological capacities to deal with complex issues they face when trying to rebuild their lives, access safety and recover from traumatic effects of DV/HT. All services are provided in welcoming, inclusive and non-re-traumatizing environment. Trauma informed approach negates potential for punitive approach. Staff are trained and practice in empowerment based advocacy which encourage each survivor to make their own decisions about their life without directing participants in what to do. Many staff are former victims which also minimizes power differentials and increases equality.

3. Participants are provided information on trauma including the dynamics of domestic violence, self care, mindset of the abuser and the cycle of violence. Trauma is discussed in individual and group counseling, peer support groups, and with mentors.

4. Participants participate in strength based assessments, case management, and coaching. Motivational interviewing and trauma informed care strengthen staff skills in strengths based focus. Strengths based work includes encouraging participants to identify recent and older successes - including find the strength to leave an abuser or start the process of leaving an abusers. In other cases, participant may have completed most of highschool, or gone to college for a year - and strengths based coaching helps the participant identify if furthering their education is a goal - and encourages the participant to see the goal as viable because of previous success. Coaching encourages participant to think about short and long term goals, the small and large steps they have already taken towards those goals, and what they have in themselves and their support network to finish reaching those goals. Financial support for education and employment (uniforms, fees, etc) support the participant to maximize their strengths.

5. Training on equal access, cultural competence and nondiscrimination is provided to staff through human resources, the FI Department of Children and Families, and the state DV association. Training includes cultural differences within the domestic violence/HT experience which is particularly important as our region is a popular international tourist destination. CoC system coach is available to all sub-recipients to support efforts to operationalize knowledge gained in training into practice.

6. Program participants have multiple opportunities for connection through peer support, group counseling, Mommy and Me parenting groups, and mentoring from previous participants. Participants are encouraged to include spiritual support and spiritual development in their plans/goals, though no specific religion is promoted.

7. Parenting is supported in multiple ways including parenting classes. Parents will share child care responsibilities to support each other. Child care subsidies are also provided before and after employment is obtained. After school care

and tutoring are provided to children. Children’s emotional health is supported through child only or family counseling.

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

Describe in the field below:

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

**(limit 5,000 characters)**

1 Support services include advocacy, case management, reunification with natural support systems, transportation assistance and vehicle repair, child care, legal services, credit counseling/repair/financial literacy, education, pet care, employment, peer support, and counseling for adults and children, primary care, mental health and substance use services,

2. During previous year contracted sub-recipients provided the following support services to DV/HT survivors -

MI/SA: Mental Health and substance use care provided by Aspire Health Partners assist survivors facing acute behavioral health crises from trauma of abuse. Services include transportation.

Primary Health: Health Care Center for the Homeless (HCCH) assists survivors with primary health care needs that are exacerbated by abuse and trauma. HCCH specializes in services for all persons experiencing homelessness, including those fleeing DV or HT.

Legal Services: Staff attorneys and paralegals file petitions, injunctions for protection and support child custody claims. Refer to Community Legal Services of Mid Florida and Legal Aid Society of Orange County for additional legal services, including credit repair and eviction services.

Housing Search and Counseling: Applicant employs licensed real estate agent to lead Housing Team of 6 to identify local landlords and apartments, conduct inspections, negotiate with landlords, educate landlords on Emergency Transfer/VAWA requirements. The team’s work has resulted in more than 500 scattered site units available for CoC portfolio at any given time.

Job Training: Community Vision Project Open provides grants for customized skills certification courses designed to meet the needs of participants. These courses provide attendees with the tools necessary to advance a positive career and end the cycle of poverty. The program provides functional life skills training, technical certification, and job placement.

Financial Services: Certified credit counselor/Economic Justice Special Advocate work with survivors who need credit history documentation, credit repair, financial planning including career planning for survivors with credit

challenges associated with controlling abuser. United Way also provides credit counseling.

Education: Community Colleges (Valencia, Seminole Community College) offer free tuition for survivors seeking certification in high-wage industries including construction and health care. They also waive fees for GED classes.

Employment: Synchrony Financial and FedEx prioritize hiring of referrals from sub-recipients.

Trauma support for children: With parental consent Special Advocates for Children assess children for physical signs of abuse and conduct age appropriate assessments for emotional trauma. Sub-recipients refer to Kidz House and other therapists who specialize in children and abuse.

Pet Care: On-site kennel allows survivors to flee without worrying that abuser will take revenge on beloved pets. Pets on site also provide emotional support to survivors of all ages. Emotional support animals allowed on site.

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

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

1.	prioritize program participant choice and rapid placement and stabilization in permanent housing consistent with participants’ preferences;
2.	establish and maintain an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma;
4.	place emphasis on program participants’ strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;
6.	provide opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for parenting, e.g., parenting classes, childcare.

**(limit 5,000 characters)**

New project will build on the success of previous services provided to the DV/HT survivors.

1 Participants will be supported by CM who are trained in trauma informed care, unintentional bias, motivational interviewing, and DV safety practices and apply that training to supporting the participant to develop housing plans that are grounded in self empowerment, consumer choice and desire for safety. A Housing Need Forms that specifies preferred community/neighborhoods (or areas to avoid), school districts, price range, physical design of apartment complexes (elevators, first floor), safety features, pet friendly, etc. is completed with participants and guides the work of the Housing Team to identify viable

housing options. Hsg team conducts inspections to facilitate rapid access to units. CE requires minimal documentation, and CM will assist with any documents required by landlords (LL). Scattered site housing portfolio currently has more than 500 units which will give participants choice related to type and location. Participants will be able to move out of county if they choose.

2 Sub recipients (SR) adopt trauma informed approach to all services including case management and advocacy. All staff, and especially CM, will be trained and implement practice to attend to survivor's emotional needs as well as physical safety. CM will assist survivors in strengthening their own psychological capacities to deal with complex issues they face when trying to rebuild their lives, access safety and recover from traumatic effects of DV/HT through coaching, access to individualized services, peer support and mentoring. All services to be provided in welcoming, inclusive and non-re-traumatizing environment, with majority provided in the field/home. Trauma informed approach will negate potential for punitive approach. Staff are trained and practice in empowerment based advocacy which encourage each survivor to make their own decisions about their life without directing participants in what to do. SR will employ persons with lived experience to minimize power differentials and increases equality.

3 Participants will be provided information on trauma including the dynamics of domestic violence, self care, mindset of the abuser and the cycle of violence from case managers. Participants will also be encouraged to attend classes, presentations, conferences and other opportunities to learn from peers and experts about trauma and how trauma has influenced their lives to date as well as how they can move forward in a healthy, empowered manner.

4. Project will use strength based assessments tools and require strength based housing planning. Case management and coaching will be provided in strength based model. Motivational interviewing and trauma informed care training will strengthen staff skills in strengths based focus. Strengths based work will include encouraging participants to identify recent and older successes - including find the strength to leave an abuser or start the process of leaving an abusers. Coaching will encourages participant to think about short and long term goals, the small and large steps they have already taken towards those goals, and what they have in themselves and their support network to finish reaching those goals. Case management will assist participants to identify natural support systems to increase housing stability. Financial support for education, child care and employment (uniforms, fees, etc) support the participant to maximize their strengths.

5. Subrecipients will participate in annual cultural competency training offered through the CoC - including but not limited to race equity, unintentional bias, and cultural awareness, as well as meet requirements of DV Association and Department of Children and Families. Training will include emphasis on internal cultural differences the weave through the experience of DV and HT. Training will also include training of work with persons who are deaf and hard of hearing. These trainings will build on current training and knowledge of project staff who have received extensive training on cultural competency/awareness, race equity and unintentional bias.

6. Participants will have multiple opportunities for connection through peer support, peer counseling, group counseling, parenting support groups, and mentoring. Participants will be encouraged to engage in spiritual development to the degree they are comfortable and will be assisted in identifying a faith home if they desire.

7. Parenting will be supported through parenting classes; support for living wage jobs that will allow parents to financially support their children; child care before and after employment; after school care; tutoring of children; family counseling and youth counseling with parental approval. Support will include transportation when needed.

## 4B. Attachments Screen For All Application Questions

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

Attachments must match the questions they are associated with.

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

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

Document Type	Required?	Document Description	Date Attached
1C-14. CE Assessment Tool	Yes	CE Assessment Tools	11/12/2021
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	11/12/2021
1C-7. PHA Moving On Preference	No	PHA Move On Pref...	11/12/2021
1E-1. Local Competition Announcement	Yes	Local Competition...	11/13/2021
1E-2. Project Review and Selection Process	Yes	Project Review & ...	11/13/2021
1E-5. Public Posting–Projects Rejected-Reduced	Yes	Public Posting - ...	11/12/2021
1E-5a. Public Posting–Projects Accepted	Yes	Public Posting - ...	11/13/2021
1E-6. Web Posting–CoC-Approved Consolidated Application	Yes	Web Posting CoC A...	11/16/2021
3A-1a. Housing Leveraging Commitments	No	Housing Leverage ...	11/15/2021
3A-2a. Healthcare Formal Agreements	No	Health Care Agree...	11/15/2021
3C-2. Project List for Other Federal Statutes	No		



## **Attachment Details**

**Document Description:** CE Assessment Tools

## **Attachment Details**

**Document Description:** PHA Homeless Preference

## **Attachment Details**

**Document Description:** PHA Move On Preference

## **Attachment Details**

**Document Description:** Local Competition Announcement

## **Attachment Details**

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

## **Attachment Details**

**Document Description:** Public Posting - Projects Rejected-Reduced

## **Attachment Details**

**Document Description:** Public Posting - Projects Accepted

## **Attachment Details**

**Document Description:** Web Posting CoC Approved Consolidated Application

## **Attachment Details**

**Document Description:** Housing Leverage Commitments

## **Attachment Details**

**Document Description:** Health Care Agreements

## **Attachment Details**

**Document Description:**

## Submission Summary

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

Page	Last Updated
1A. CoC Identification	11/05/2021
1B. Inclusive Structure	11/13/2021
1C. Coordination	11/13/2021
1C. Coordination continued	11/13/2021
1D. Addressing COVID-19	11/13/2021
1E. Project Review/Ranking	11/13/2021
2A. HMIS Implementation	11/13/2021
2B. Point-in-Time (PIT) Count	11/09/2021
2C. System Performance	11/13/2021
3A. Housing/Healthcare Bonus Points	11/09/2021
3B. Rehabilitation/New Construction Costs	11/09/2021

  

FY2021 CoC Application	Page 67	11/16/2021
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<b>3C. Serving Homeless Under Other Federal Statutes</b>	11/09/2021
<b>4A. DV Bonus Application</b>	11/15/2021
<b>4B. Attachments Screen</b>	11/16/2021
<b>Submission Summary</b>	No Input Required

**FY 2021**

**FL-507 – Orlando/Orange, Osceola, Seminole  
Counties Continuum of Care  
Continuum of Care**

**Attachment 01**

**1C-14 CE Assessment Tool**

- p. 1 Program Entry Intake Form (Adult)**
- P. 4 Program Entry Intake Form (Minor)**
- p. 5 Consent and Release of Authorization**
- p. 6 Prevention, Diversion and Rapid Exist Assessment**
- p. 8 Shelter Matching Tool**
- p. 11 VI-SPDAT (families)**
- p. 15 VI-SPDAT (individuals)**
- p. 18 VI-SPDAT (youth)**
- P. 21 COVID-19 Risk Factor Screening**
- p. 22 Self Verification of COVID related Hardship**

Date \_\_\_\_\_

PSH and RRH Programs

HMIS ID# \_\_\_\_\_

### CoC Program Entry-Intake Form

To be completed on all **ADULTS** over the age of 18 in the household.

#### Personal Information

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Veteran? \_\_\_\_\_

SSN: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Emergency Contact Info: \_\_\_\_\_

What is your Primary Race?

- American Indian/Alaska Native
- Black/African American
- White
- Asian
- Native Hawaiian/ Pacific Islander

Which Ethnicity do you most identify with?

- Non-Hispanic/Non-Latino
- Hispanic/Latino
- DK/Refused

Which Gender do you identify as?

- Female
- Trans Female (MTF)
- I don't know
- Male
- Trans Male (FTM)
- Refused
- Gender Non-Conforming

Relationship to the Head of Household

- Self (HOH)
- HOH's spouse or partner
- Other non-related
- HOH's Child
- HOH's other relation member

CoC Location

- Orange, Seminole, Osceola (FL-507)
- Citrus, Hernando, Lake, Sumter (FL-520)

#### Disability Information

Do you have a disabling condition like a physical, mental, emotional, developmental, HIV/AIDS, or substance use disorder that significantly impairs your ability to perform daily activities?

- Yes
- No

If yes, what kind of Disability Condition do you have? (Select All that apply)

- Alcohol Use Disorder
- Developmental
- Mental Health Problem
- Alcohol & Drug Use Disorder
- Drug Use Disorder
- Physical
- Chronic Health Condition
- HIV/AIDS
- Physical \ Medical

Has a medical provider ever diagnosed the disability? (Disability Determination)

- Yes
- No

Does the condition significantly impair your daily living and ability to keep a steady job or housing (Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently?)

- Yes
- I don't know
- No
- Refused

#### Health Insurance

Do you currently have Health Insurance?

- Yes
- I don't know
- No
- Refused

If yes, what type(s) of Health Insurance (select all that apply):

- Medicaid
- Indian Health Services Program
- State Health Ins for Adults
- Medicare
- State Children's Health Ins
- Other
- Employer Provided Health Ins
- (VA) Medical Services
- Medicaid plan, if applicable:**
- Health Ins Obtained via Cobra
- Private Pay Health Ins

## Prior Living Situation

Where did you sleep last night? (Prior Living Situation)

- Streets / Place not meant for habitation
- Emergency Shelter (ES), including hotel or motel paid for with emergency voucher
- Safe Haven (Emergency Shelter for persons with severe mental illness)

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- Foster care home or foster care group home
- Hospital or other residential non-psychiatric medical facility
- Jail, prison or juvenile detention facility
- Long-term care facility or nursing home
- Psychiatric hospital or other psychiatric facility
- Substance abuse treatment facility or detox center

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- Residential project or halfway house with no homeless criteria
- Hotel or motel paid for without emergency shelter voucher
- Transitional housing for homeless persons (including homeless youth)
- Host Home (non Crisis)
- Staying or living in a family member's room, apartment or house
- Staying or living in a friend's room, apartment or house
- Rental by client, with GPD TIP subsidy
- Rental by client, with VASH subsidy
- Permanent housing (Other than RRH) for formerly homeless persons
- Rental by client, with RRH or equivalent subsidy
- Rental by client, with HCV (tenant or project based)
- Rental by client in a public housing unit
- Rental by client, no ongoing housing subsidy
- Rental by client, with other ongoing housing subsidy
- Owned by client, with ongoing housing subsidy
- Owned by client, no ongoing housing subsidy

How long have you been in the above living situation? (Length of stay in previous place)

- 1 night or less
- 2 – 6 nights
- 7+ night-less than a month
- 1 month – 89 days
- 90+ days-less than a year
- 1 year or longer

What's the approximate date your current homeless episode began: \_\_\_\_/\_\_\_\_/\_\_\_\_

Regardless of where you stayed last night, how many times have you been homeless on streets or ES in the last 3 years?

- 1 time (use for 1 long consecutive episode)
- 2 times
- 3 times
- 4 of more times

What's the total number of months you've been homeless on the streets/ES in the past 3 years: \_\_\_\_\_

## CoC Questions

What county were you in when this episode of homelessness began?

- Orange
- Seminole
- Osceola
- Other \_\_\_\_\_

What is the last known address where you have stayed? (Residence or Last Permanent Address)

- o Street Address: \_\_\_\_\_ Unit Number: \_\_\_\_\_
- o City: \_\_\_\_\_
- o State: \_\_\_\_\_
- o Zip: \_\_\_\_\_
- o Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ End Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Prior Living Situation**

If you feel safe sharing, have you ever experienced intimate partner violence or domestic violence?

- Yes
- No
- I don't know
- Refused

If yes, when did the last experience occur?

- Within the past three months
- Three to six months ago
- Six to twelve months ago
- More than a year ago
- I don't know
- Refused

Are you currently trying to get out of a dangerous situation?

- Yes
- No
- Client Doesn't Know
- Client Refused

**Income Information**

Do you have income from any source in the last 30 days?

- Yes
- No
- I don't know

If yes to any of the following income, specify gross amount:

- |   |       |  |       |
|---|-------|--|-------|
| <input type="checkbox"/> Alimony/Spousal Support        | _____ | <input type="checkbox"/> SSDI                            | _____ |
| <input type="checkbox"/> Child Support                  | _____ | <input type="checkbox"/> SSI                             | _____ |
| <input type="checkbox"/> Earned Income                  | _____ | <input type="checkbox"/> TANF                            | _____ |
| <input type="checkbox"/> General Assistance             | _____ | <input type="checkbox"/> Unemployment                    | _____ |
| <input type="checkbox"/> Other                          | _____ | <input type="checkbox"/> VA Non Service Connected Disb.  | _____ |
| <input type="checkbox"/> Pension or retirement from job | _____ | <input type="checkbox"/> VA Service Connected Disability | _____ |
| <input type="checkbox"/> Private Disability             | _____ | <input type="checkbox"/> Worker's Comp                   | _____ |
| <input type="checkbox"/> Retirement from SSA            | _____ |  |       |

Total Monthly Income: \$ \_\_\_\_\_

**Non-Cash Benefit Information**

2. Do you have any Non-Cash benefit from any source?

- Yes
- No
- I don't know

If yes to Non-Cash benefits, specify amount:

- |  |       |   |       |
|--|-------|---|-------|
| <input type="checkbox"/> SNAP            | _____ | <input type="checkbox"/> TANF Transportation        | _____ |
| <input type="checkbox"/> WIC             | _____ | <input type="checkbox"/> Other TANF-funded Services | _____ |
| <input type="checkbox"/> TANF Child Care | _____ | <input type="checkbox"/> Other Source               | _____ |

**Employment Information**

Are you currently employed?  Yes  No

If yes, Type of Employment:  Full Time  Part Time  Seasonal/Sporadic (including day labor)

If No, Reason:  Looking for work  Unable to work  Not looking for work

If you have severe and persistent disability, do you need help applying for SSI (SOAR)?  Yes  No

Case Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



### CoC Program Entry-Intake Form

To be completed on all **MINORS** under the age of 18 in the household

#### Personal Information

Client Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

SSN: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Emergency Contact Info: \_\_\_\_\_

#### Primary Race

- American Indian/Alaska Native
- Black/African American
- White
- Asian
- Native Hawaiian/ Pacific Islander

#### Ethnicity

- Non-Hispanic/Non-Latino
- Hispanic/Latino
- DK/Refused

#### Gender

- Female
- Trans Male (FTM)
- Client refused
- Male
- Gender Non-Conforming
- Trans Female (MTF)
- Client doesn't know

#### Relationship to the Head of Household

- Self (HOH)
- HOH's spouse or partner
- Other non-related
- HOH's Child
- HOH's other relation member

#### Client's CoC Location

- Orange, Seminole, Osceola (FL-507)
- Citrus, Hernando, Lake, Sumter (FL-520)

#### Disability Information

Does the child have a disabling condition like a physical, mental, emotional, developmental, HIV/AIDS, or diagnosable substance use disorder that significantly impairs your ability to perform daily activities?

- Yes
- No

If yes, what kind of Disability Condition (Select All that apply)

- Alcohol Use Disorder
- Developmental
- Mental Health Problem
- Alcohol & Drug Use Disorder
- Drug Use Disorder
- Physical
- Chronic Health Condition
- HIV/AIDS
- Physical \ Medical

Has a medical provider ever diagnosed the disability? (Disability Determination)

- Yes
- No

Does the condition significantly impair their activities of daily living (Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently?)

- Yes
- Client Doesn't Know
- No
- Client Refused

#### Health Insurance

Does the child currently have Health Insurance?

- Yes
- Client Doesn't Know
- No
- Client Refused

If yes, what type(s) of Health Insurance (select all that apply):

- Medicaid
- (VA) Medical Services
- Other
- Medicare
- Employer Provided Health Ins
- What Medicaid plan, if applicable
- State Children's Health Ins
- Health Ins Obtained via Cobra
- Indian Health Services Program
- Private Pay Health Ins
- State Health Ins for Adults



**Continuum of Care FL-507 | Homeless Services Network of Central Florida**  
**Client Informed Consent & Authorization for Release of Information in HMIS**

**This notice describes how information about you may be used and disclosed and how you can get access to this information. Please review it carefully. If you have any questions or desire any further information regarding this form, please contact the system administrator via the HSN HMIS Help Desk by phone (407-893-0133 x640) or by submitting a ticket on our website (<https://hmisfl.org>).**

1. In order to best serve your needs at \_\_\_\_\_, to develop meaningful treatment plans, to determine your continuing eligibility for services, and to monitor your progress in complying with the terms of your shelter, housing or other services, \_\_\_\_\_ and the Continuum of Care need to exchange, share, and/or release data, information or records they may collect about you.
2. The information contained in your case records with any Agency is considered confidential and privileged and cannot be exchanged, shared and/or released without your express and informed written consent, except where otherwise authorized by law. Please understand that access to shelter, housing and services is available without your consent for the release of the information. However, your consent to share information with other service agencies is a critical component of our community's ability to provide the most effective services and housing possible.
3. I understand that:
  - a) This Agency may not refuse to serve me simply because I do not want my information shared with other service agencies.
  - b) This form specifically authorizes the use of information about me in research conducted using information maintained in the HSN HMIS. I will not be personally identified by name, social security number, or any other unique characteristic in published research reports. The type of research that will be conducted using this information includes reports on the number and characteristics of people using different types of services, the effectiveness of services, and changes in patterns over time.
  - c) If I give permission, the HSN HMIS will allow information about me, including records previously entered into the HSN HMIS, to be shared among HSN HMIS Partner Agencies. This may include, but is not limited to, my photograph, information regarding my education history and employment background, income, program eligibility and participation, and personal history. The purpose of sharing information is to help the agencies from which I seek services to obtain information about me faster, to assist with my case management, and to connect me more quickly with the services I need.
  - d) Agencies that join the HSN HMIS after I sign this consent/authorization also will have access to the personal information that I authorize for data sharing. This Agency must make reasonable accommodations to allow me to view the updated list of HSN HMIS Partner Agencies.
  - e) I understand that I have the right to inspect, copy, and request all records maintained by an Agency relating to the provision of services provided by an Agency to me and to receive a copy of this form unless specifically denied under federal or state law. I understand that my records are protected by federal, state, and local regulations governing confidentiality of client records and cannot be disclosed without my written consent unless otherwise authorized by law. I understand that this release is valid for three years from the date I sign this document. I may revoke this authorization at any time verbally or by written request, but the cancellation will not be retroactive.

I give my consent to the exchange of information via the HSN HMIS: Yes  No

I have read this document or it was read and/or explained to me and I fully understand and agree with the terms of this document.

<p><b>Name and Signature of Client</b></p> <p>_____</p> <p>(Print)</p> <p>_____</p> <p>(Signature) <span style="float: right;">(Date)</span></p>	<p><b>Name and Signature of Witness</b></p> <p>_____</p> <p>(Print)</p> <p>_____</p> <p>(Signature) <span style="float: right;">(Date)</span></p>
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## Prevention, Diversion, and Rapid Exit Assessment

### Personal Information

Name: \_\_\_\_\_ HMIS # \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Date: \_\_\_\_\_ HUB Location \_\_\_\_\_ # of Adults in HH \_\_\_\_\_ # of Minors in HH \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Do you have any children that are not in your custody?  No  Yes

Do you have an open Dependency or Diversion Case?  No  Yes

**What brought you in today?**

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### Current Living Situation

#### HOMELESS PREVENTION

*TRANSITIONAL OR PERMANENT HOUSING SITUATIONS (7+ nights in any of these are a break in homelessness)*

- Hotel or motel paid for without emergency shelter voucher
- Owned by client/ Rental by client
- Residential project or halfway house with no homeless criteria
- Staying or living in a friend/ family member's room, apartment or house
- Transitional housing for homeless persons (including homeless youth)

#### HOMELESS SITUATIONS (Diversion Eligible)

- Streets / Place not meant for habitation
- Emergency Shelter (ES), including hotel or motel paid for with emergency shelter voucher
- Safe Haven (Emergency Shelter for persons with severe mental illness)

*INSTITUTIONAL SITUATIONS (89 days or less when entering from the streets counts as homelessness)*

- Foster care home or foster care group home
- Hospital or other residential non-psychiatric medical facility
- Jail, prison or juvenile detention facility
- Long-term care facility or nursing home
- Psychiatric hospital or other psychiatric facility
- Substance abuse treatment facility or detox center

**How long have you been there?** \_\_\_\_\_

### General Questions

1. What county are you currently staying in?  Orange  Osceola  Seminole  Other: \_\_\_\_\_
2. Are you (or someone in your household) fleeing a situation that is dangerous to you (DV)?  Yes  No
3. Have you (or someone in your household) served on active duty in the US Military?  Yes  No
4. Do you (or any other **adult** in your household) have a disability?  Yes  No
  - a) Who?  Self  Other \_\_\_\_\_
  - b) What type of disability \_\_\_\_\_
5. How did you hear about us? \_\_\_\_\_
6. If there was space available in an emergency shelter would you be interested in being contacted?  Yes  No  
(Families Only) If yes, please fill out Shelter Matching Tool.

Date \_\_\_\_\_

ES,SO, TH Projects

HMIS ID# \_\_\_\_\_

**Primary Race**

- American Indian/Alaska Native
- Black/African American
- White
- Asian
- Native Hawaiian/ Pacific Islander

**Ethnicity**

- Non-Hispanic/Non-Latino
- Hispanic/Latino
- DK/Refused

**Gender**

- Female
- Trans Female (MTF)
- Gender Non-Conforming
- Male
- Trans Male (FTM)
- Client doesn't know/refused

**Prevention, Diversion, and Rapid Exit Entry**

Client came to \_\_\_\_\_ HUB seeking housing assistance. Client has been \_\_\_\_\_

for \_\_\_\_\_, Client is/ is not interested in shelter. Client became homeless after \_\_\_\_\_

How long?

Current living situation

Cause

\_\_\_\_\_, Client is living with/without \_\_\_\_\_ disabilities. Client receives \_\_\_\_\_

Type

\$ \_\_\_\_\_/mo through \_\_\_\_\_, Client was/ was not assessed and provided with a list of resources.

Income

Type

**Main Resolution Discussed:**

- Community Resources
- Family Mediation
- Other
- Friend Mediation
- Housing Information
- Landlord Mediation

**Length of Conversation:**

- 15-30 minutes
- 16-30 minutes
- 31-60 minutes
- 61-90 minutes
- Over 90 minutes

**If placed into housing, where?**

- Staying in current unit
- Moving to new unit
- Staying with family (local)
- Staying with family (relocation)
- Staying with friends (local)
- Staying with friends (relocation)
- N/A

**If placed into housing, how long?**

- 1 night
- 2-6 days
- 7-29 days
- 31-60 days
- 61-90 days
- More than 90 days

**Outcome:**

- Assessed for Services (Big 3 and/or Shelter Tool)
- Diversion Not Successful
- Diverted
- N/A- Not Attempted
- Other Community Resources
- Prevention
- Rapid Exit/ Resolution
- Not Eligible/Not in Homeless Situation

**Referrals**

- Coalition
- Salvation Army
- Rescue Outreach Mission (Seminole)
- DV Shelter
- Jewish Family Services
- Catholic Charities
- St. Vincent de Paul
- UAP (STEP)
- SDA Elderly Care
- Senior Resource Alliance
- HANDS of CFL
- Anew Foundation
- Other \_\_\_\_\_

# Coordinated Entry System: Shelter Matching Tool

CES STAFF/VOLUNTEER/CASE MANAGER/NAVIGATOR/ACCESS SITE TO COMPELTE:

Client Name: \_\_\_\_\_ HMIS# \_\_\_\_\_ Date: \_\_\_\_\_  
DOB? \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_  
Expecting\Pregnant: Y N (circle one)  
Contact # \_\_\_\_\_ Email \_\_\_\_\_  
HUB Location: \_\_\_Northland \_\_\_HCCH \_\_\_UAP \_\_\_Community Hope \_\_\_\_\_Other:

*"You've previously mentioned that you were interested in shelter. Please understand that completing this shelter tool does not guarantee shelter. I need to get some basic information from you to help provide a potential path into shelter. Just so you know; there are many diverse people staying and working in the shelters of many different ages, genders and religious background. Before we begin, is this something that will work for you and your family? For the purposes of this screening, we only work with shelters in Orange County and Seminole County. Are you okay with staying in Orange or Seminole County?" (If yes- proceed, If no- Explain other non- CES participating shelters- provide resource sheet)*

1. What is your current living situation? (Where you slept last night)
  - Place not meant for human habitation Unshielded (park, woods, tent, bus station, car, abandon building)
  - At Risk of (losing home, unable to pay in self-pay hotel, being kicked out or exiting shelter) within 3 days
  - Attempting to flee a dangerous situation (Domestic Violence, Human Trafficking, etc.)
  
2. In which county did you sleep last night?
  - Orange County
  - Seminole County
  - Osceola County
  - Other \_\_\_\_\_
  
3. How long have been in the above homeless situation?
  - 1 night or less
  - 2-6 nights
  - 1 week or more but less than a month
  - 1 month- 90 days
  - 91+ days but less than a year
  - 1 year or longer
  
4. We work with three shelters, do any of them create health or safety concerns?  No  Yes  
*(If yes, which one)*
  - Coalition  Salvation Army  Family Promise  Rescue Outreach Mission
  
5. How many children and adults will enter shelter with you? (Please indicate who is the head of house)

Name	Date of Birth	Age	Gender
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

6. Have you been in a situation that is unsafe and you do not wish to return within the past 5 days?

*If yes: Is it due to?*

Domestic Violence     Yes     No

Human Trafficking     Yes     No

Other: (explain)

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7. Do you or your children have a medical condition in which your current living situation is impacting your ability to maintain a treatment plan?     Yes     No

8. Do you or children have any disabilities that makes you vulnerable to harm or danger?

Yes     No

9. Do you or your child/children have a service need animal that you want to enter shelter with?

Yes     No

*(If yes)*

9b. does the animal help someone with a disability?     Yes     No

*(If yes)*

9c. what task has the animal been trained to do? \_\_\_\_\_

10. Do you or your children have any access needs that might limit you when getting around stairs, hallways or shared spaces?     Yes     No

*If yes, please specify*

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11. Are you willing to rotate on a weekly basis from one shelter to another?

Yes     No

12. If we are unable to get ahold of you and with your permission, who can we contact to get an immediate hold of you?

Name

Relationship

Phone #

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## Thanks for visiting us!

You have completed the Coordinated Entry System (CES) Shelter Assessment Tool for you and your family. This assessment is for families who are interested in emergency shelter, if space becomes available.



### Our goal is...

- To connect you and your family with emergency shelter



### From the CES Shelter Assessment...

- We have a better understanding of your needs
- We can determine what shelters can best accommodate your needs



### What's next?

- Keep contact info up to date, if still in need of shelter, by contacting our CES Hotline (407) 917-1377
- If and when you are contacted for a shelter bed, treat that contact with urgency as their will only be a 1 hour maximum timeframe to respond and a 24 hour period to enter shelter



### Please keep in mind...

- ***Shelter beds are very limited and not guaranteed***
- Completing the Shelter Assessment ***does not*** guarantee shelter, and you should continue to explore other options. We encourage you to reach out to your supports and different resources available in our community, if you'd like to explore those options, a CES Volunteer can discuss with you further

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

*VI-SPDAT – Families*

**Personal Information**

Client Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Veteran? \_\_\_\_\_

**Opening Script**

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

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

**Children**

1. How many children under the age of 18 are currently with you? \_\_\_\_\_
2. How many children under the age of 18 are not currently with your family, but you have reason to believe they will be joining you when you get housed? \_\_\_\_\_
3. IF HOUSEHOLD INCLUDES A FEMALE: Is any member of the family currently pregnant? \_\_\_\_\_

4. Please provide a list of children's names and ages:

First Name	Last Name	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**A. History of Housing and Homelessness**

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



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

**B. Risks**

8. In the past six months, how many times have you or anyone in your family...
- a) Received health care at an emergency department/room? \_\_\_\_\_  Refused
  - b) Taken an ambulance to the hospital? \_\_\_\_\_  Refused
  - c) Been hospitalized as an inpatient? \_\_\_\_\_  Refused
  - d) Used a crisis service, including sexual assault crisis, mental health centers crisis, family/intimate violence, distress and suicide prevention hotlines? \_\_\_\_\_  Refused
  - e) Talked to police because they witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told them that they must move along? \_\_\_\_\_  Refused
  - f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? \_\_\_\_\_  Refused
9. Have you or anyone in your family been attacked or beaten up since they've become homeless?  Yes  No  Refused
10. Have you or anyone in your family threatened to or tried to harm themselves or anyone else in the last year?  Yes  No  Refused
11. Do you or anyone in your family have any legal stuff going on right now that may result in them being locked up, having to pay fines, or that make it more difficult to rent a place to live?  Yes  No  Refused
12. Does anybody force or trick you or anyone in your family to do things that you do not want to do?  Yes  No  Refused
13. Do you or anyone in your family ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone they don't know, share a needle, or anything like that?  Yes  No  Refused

**C. Socialization & Daily Functioning**

14. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you or anyone in your family owe them money?  Yes  No  Refused
15. Do you or anyone in your family get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?  Yes  No  Refused

16. Does everyone in your family have planned activities, other than just surviving, that make them feel happy and fulfilled?  Yes  No  Refused
17. Is everyone in your family currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?.  Yes  No  Refused
18. Is your family's current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because other family or friends caused your family to become evicted?  Yes  No  Refused

#### D. Wellness

19. Has your family ever had to leave an apartment, shelter program, or other place you were staying because of the physical health of you or anyone in your family?  Yes  No  Refused
20. Do you or anyone in your family have any chronic health issues with your liver, kidneys, stomach, lungs or heart?  Yes  No  Refused
21. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you or anyone in your family?  Yes  No  Refused
22. Does anyone in your family have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?  Yes  No  Refused
23. When someone in your family is sick or not feeling well, does your family avoid getting medical help?  Yes  No  Refused
24. Has drinking or drug use by you or anyone in your family led your family to being kicked out of an apartment or program where you were staying in the past?  Yes  No  Refused
25. Will drinking or drug use make it difficult for your family to stay housed or afford your housing?  Yes  No  Refused
26. Has your family ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:
- a) A mental health issue or concern?  Yes  No  Refused
  - b) A past head injury?  Yes  No  Refused
  - c) A learning disability, developmental disability, or other impairment?  Yes  No  Refused
27. Do you or anyone in your family have any mental health or brain issues that would make it hard for your family to live independently because help would be needed?  Yes  No  Refused
28. IF THE FAMILY ANSWERED YES TO 19-23, AND YES TO 24-25, AND YES TO ANY 26-27:  
Does any single member of your household have a, medical condition, mental health concerns, and experience with problematic substance use?  Yes  No  Refused
29. Are there any medications that a doctor said you or anyone in your family should be taking that, for whatever reason, they are not taking?  Yes  No  Refused

30. Are there any medications like painkillers that you or anyone in your family don't take the way the doctor prescribed or where they sell the medication?  Yes  No  Refused
31. Has your family's current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you or anyone in your family have experienced?  Yes  No  Refused

### E. Family Unit

32. Are there any children that have been removed from the family by a child protection service within the last 180 days?  Yes  No  Refused
33. Do you have any family legal issues that are being resolved in court or need to be resolved in court that would impact your housing or who may live within your housing?  Yes  No  Refused
34. In the last 180 days have any children lived with family or friends because of your homelessness or housing situation?  Yes  No  Refused
35. Has any child in the family experienced abuse or trauma in the last 180 days?  Yes  No  Refused
36. IF THERE ARE SCHOOL-AGED CHILDREN: Do your children attend school more often than not each week?  Yes  No  Refused
37. Have the members of your family changed in the last 180 days, due to things like divorce, your kids coming back to live with you, someone leaving for military service or incarceration, a relative moving in, or anything like that?  Yes  No  Refused
38. Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed?  Yes  No  Refused
39. Do you have two or more planned activities each week as a family such as outings to the park, going to the library, visiting other family, watching a family movie, or anything like that?  Yes  No  Refused
40. After school, or on weekends or days when there isn't school, is the total time children spend each day where there is no interaction with you or another responsible adult...
- a) 3 or more hours per day for children aged 13 or older?  Yes  No  Refused
- b) 2 or more hours per day for children aged 12 or younger?  Yes  No  Refused
41. IF THERE ARE CHILDREN BOTH 12 AND UNDER & 13 AND OVER: Do your older kids spend 2 or more hours on a typical day helping their younger sibling(s) with things like getting ready for school, helping with homework, making them dinner, bathing them, or anything like that?  Yes  No  Refused

*Thanks for taking time to go through this assessment. What happens now is IF and WHEN services become available, someone will reach out to you. Remember that I said we can't promise any services because I can't tell exactly if or when programs will have availability. If you do not hear from anyone that means services are not available, so the best thing you can do for yourself is to utilize your support system and other community resources. Don't rely on just one program. Keep doing what you're doing: engaging with service providers like myself, and looking for housing services that make sense for you. This assessment is good for up to 3 months. If you are still in the same situation after the 3 months, you should return to complete a new assessment. If your contact information changes, you should return to update that information.*

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

VI-SPDAT 2.0 – Individuals

## Personal Information

Client Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Veteran? \_\_\_\_\_

## Opening Script

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

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

## A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)
  - Shelters
  - Transitional Housing
  - Safe Haven
  - Outdoors
  - Other \_\_\_\_\_
  - Refused
2. How long has it been since you lived in permanent stable housing?
  - Less than a year
  - One year or more
  - Refused
3. In the last three years, how many times have you been homeless?  
\_\_\_\_\_

## B. Risks

4. In the past six months, how many times have you...
  - a) Received health care at an emergency department/room? \_\_\_\_\_  Refused
  - b) Taken an ambulance to the hospital? \_\_\_\_\_  Refused
  - c) Been hospitalized as an inpatient? \_\_\_\_\_  Refused
  - d) Used a crisis service, including sexual assault crisis, mental health crisis centers, family/intimate violence, distress and suicide prevention hotlines? \_\_\_\_\_  Refused

e) Talked to police because they witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told them that they must move along? \_\_\_\_\_  Refused

f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? \_\_\_\_\_  Refused

5. Have you been attacked or beaten up since you've become homeless?  Yes  No  Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year?  Yes  No  Refused

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live?  Yes  No  Refused

8. Does anybody force or trick you to do things that you do not want to do?  Yes  No  Refused

9. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone they don't know, share a needle, or anything like that?  Yes  No  Refused

### C. Socialization & Daily Functioning

10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?  Yes  No  Refused

11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?  Yes  No  Refused

12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?  Yes  No  Refused

13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?  Yes  No  Refused

14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because other family or friends caused you to become evicted?  Yes  No  Refused

### D. Wellness

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?  Yes  No  Refused

16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?  Yes  No  Refused

17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?  Yes  No  Refused

18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?  Yes  No  Refused

19. When you are sick or not feeling well, do you avoid getting medical help?  Yes  No  Refused
20. FOR FEMALE RESPONDENTS ONLY: Are you currently pregnant?  Yes  No  Refused
21. Has drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past?  Yes  No  Refused
22. Will drinking or drug use make it difficult for you to stay housed or afford your housing?  Yes  No  Refused
23. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:
- a) A mental health issue or concern?  Yes  No  Refused
- b) A past head injury?  Yes  No  Refused
- c) A learning disability, developmental disability, or other impairment?  Yes  No  Refused
24. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?  Yes  No  Refused
25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?  Yes  No  Refused
26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication?  Yes  No  Refused
27. Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced?  Yes  No  Refused

*Thanks for taking time to go through this assessment. What happens now is IF and WHEN services become available, someone will reach out to you. Remember that I said we can't promise any services because I can't tell exactly if or when programs will have availability. If you do not hear from anyone that means services are not available so the best thing you can do for yourself is to utilize your support system and other community resources. Don't rely on just one program. Keep doing what you're doing: engaging with service providers like myself, and looking for housing services that make sense for you. This assessment is good for up to 6 months. If you are still in the same situation after the 6 months, you should return to complete a new assessment to update any outdated information about your situation. If your contact information changes, you should return to update that with us.(Provide list of resources)*

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

VI-SPDAT – Youth

## Personal Information

Client Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Veteran? \_\_\_\_\_

## Opening Script

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

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

## A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)
  - Shelters
  - Transitional Housing
  - Safe Haven
  - Outdoors
  - Other \_\_\_\_\_
  - Refused
2. How long has it been since you lived in permanent stable housing?
  - Less than a year
  - One year or more
  - Refused
3. In the last three years, how many times have you been homeless?  
\_\_\_\_\_

## B. Risks

4. In the past six months, how many times have you...
  - a) Received health care at an emergency department/room? \_\_\_\_\_  Refused
  - b) Taken an ambulance to the hospital? \_\_\_\_\_  Refused
  - c) Been hospitalized as an inpatient? \_\_\_\_\_  Refused
  - d) Used a crisis service, including sexual assault crisis, mental health centers crisis, family/intimate violence, distress and suicide prevention hotlines? \_\_\_\_\_  Refused

- e) Talked to police because they witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told them that they must move along? \_\_\_\_\_  Refused
- f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? \_\_\_\_\_  Refused
5. Have you been attacked or beaten up since you've become homeless?  Yes  No  Refused
6. Have you threatened to or tried to harm yourself or anyone else in the last year?  Yes  No  Refused
7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live?  Yes  No  Refused
8. Were you ever incarcerated when younger than age 18?  Yes  No  Refused
9. Does anybody force or trick you to do things that you do not want to do?  Yes  No  Refused
10. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone they don't know, share a needle, or anything like that?  Yes  No  Refused

### C. Socialization & Daily Functioning

11. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?  Yes  No  Refused
12. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?  Yes  No  Refused
13. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?  Yes  No  Refused
14. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?  Yes  No  Refused
15. Is your current lack of stable housing...
- a. Because you ran away from your family home, a group home or a foster home?  Yes  No  Refused
  - b. Because of a difference in religious or cultural beliefs from your parents, guardians, or caregivers?  Yes  No  Refused
  - c. Because your family or friends caused you to become homeless?  Yes  No  Refused
  - d. Because of conflicts around gender identity or sexual orientation?  Yes  No  Refused
  - e. Because of violence at home between family members?  Yes  No  Refused
  - f. Because of unhealthy or abusive relationship, either at home or Elsewhere?  Yes  No  Refused

### D. Wellness

16. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?  Yes  No  Refused



17. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?  Yes  No  Refused
18. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?  Yes  No  Refused
19. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?  Yes  No  Refused
20. When you are sick or not feeling well, do you avoid getting medical help?  Yes  No  Refused
21. Are you currently pregnant, have you ever been pregnant, or have you ever gotten someone pregnant?  Yes  No  Refused
22. Has drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past?  Yes  No  Refused
23. Will drinking or drug use make it difficult for you to stay housed or afford your housing?  Yes  No  Refused
24. If you've ever used marijuana, did you try it at age 12 or younger?  Yes  No  Refused
25. Has you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:
- a) A mental health issue or concern?  Yes  No  Refused
- b) A past head injury?  Yes  No  Refused
- c) A learning disability, developmental disability, or other impairment?  Yes  No  Refused
26. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?  Yes  No  Refused
27. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?  Yes  No  Refused
28. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication?  Yes  No  Refused

*Thanks for taking time to go through this assessment. What happens now is IF and WHEN services become available, someone will reach out to you. Remember that I said we can't promise any services because I can't tell exactly if or when programs will have availability. If you do not hear from anyone that means services are not available so the best thing you can do for yourself is to utilize your support system and other community resources. Don't rely on just one program. Keep doing what you're doing: engaging with service providers like myself, and looking for housing services that make sense for you. This assessment is good for up to 6 months. If you are still in the same situation after the 6 months, you should return to complete a new assessment to update any outdated information about your situation. If your contact information changes, you should return to update that with us.(Provide list of resources)*



### COVID-19 Risk Factors Screening for Supportive Services

To be completed by the Navigator or Street Outreach completing a supportive housing referral

OR

By the Supportive Housing Case Manager completing a bridge housing referral

HMIS ID: \_\_\_\_\_

Are you 60 years of age or older?

Yes      No

Have you smoked tobacco in the last month?

Yes      No

Are you or someone in your household currently pregnant?

Yes      No

Are you and your family currently living outdoors, like in a tent, park bench, or a highway overpass (unsheltered)?

Yes      No

Are you and your family currently living somewhere where you are together in close quarters, like an emergency shelter or a car?

Yes      No

\_\_\_ # of total yes answers

-----

Has a medical provider ever said that you or someone in your household have any of the following medical conditions?

Select all that applies:

Chronic Kidney Disease

Dementia

COPD (Chronic obstructive pulmonary disease)

Liver disease

Severe Heart Disease conditions

Pulmonary fibrosis

Sickle cell disease

Type 1 Diabetes

Type 2 Diabetes

Hypertension or high blood pressure

Moderate to Severe Asthma

Immunocompromised or Immunodeficient

Cystic Fibrosis

(from conditions including cancer treatment, bone marrow or organ transplantation, poorly controlled HIV/AIDS, and prolonged use immune weakening medications, like corticosteroids.)

Severe Obesity {observation only}

\_\_\_ # of total medical conditions

-----

\_\_\_ Overall total

*Navigators & Outreach: To be prioritized for Supportive Housing, Participant must have an overall score of 2 or higher*

*Housing Case Mangers: To be referred to Bridge Housing, Participant must score 1 or higher within Medical Conditions section*

*Staff sign to verify this information is true and accurate to the best of your knowledge.*

\_\_\_\_\_  
(First and Last Name)

\_\_\_\_\_  
(Date completed form)



**SELF-VERIFICATION OF COVID-19 RELATED HARDSHIP**  
FOR SUPPORTIVE HOUSING PARTICIPANTS

I, \_\_\_\_\_, certify that my household have been impacted by the COVID-19 public health emergency and one or more of the following barriers have been created and/or sustained as a result of this hardship:

- Medical/mental health needs
  - Loss or reduction of income; including state and/or government benefits (SNAP, SSI/DI, etc.)
  - Loss or reduction of employment; including the inability to obtain employment
  - Loss of child care or lack of available child care resources
  - Threat or risk of eviction or homelessness
  - Other COVID-19 related hardship: \_\_\_\_\_
- 

I certify that the above information is true and correct to the best of my knowledge. I also certify that I am not currently receiving other benefits, such as rental assistance, through other community sources.

Participant Signature: \_\_\_\_\_

Participant Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Case Manager obtained verbal consent due to inability to have face to face contact due to COVID 19

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

Case Manager Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

---

**\*HSN Staff Use Only\***

Date Received: \_\_\_\_\_

HSN Staff Signature: \_\_\_\_\_

Other Notes: \_\_\_\_\_

**FY 2021**

**FL-507 – Orlando/Orange, Osceola, Seminole  
Counties**

**Continuum of Care**

**Attachment #02:**

**1C-7. PHA Homeless Preference**

**Attachment #02 documents include the following:**

- p. 1      Orlando Housing Authority Preference**
  
- p. 4      Orange Co Housing & Community Development  
Preference**

Orlando Housing Authority

**FY2020**

**The  
Orlando  
Housing  
Authority**



**[MOVING TO WORK (MTW)  
ANNUAL PLAN]**

Submitted January 16, 2019  
OHA Executive Office  
April 1, 2019 through March 31, 2020

## FY2019 Moving to Work (MTW) Annual Plan

April 1, 2019 – March 31, 2020

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**Activity 10: Tenant-Based Voucher Homelessness Prevention Program****Approval & Implementation Year:**

**Description:** OHA and the City of Orlando are partnering to administer a voucher program to address chronic homelessness as a part of the 25 Cities Initiative. The Orlando Veteran's Affairs Medical Center is also a participant. Chronic homelessness is defined as adults with a disabling condition who have been continuously homeless for at least one year or have had four episodes of homelessness in the past three years. The disabling condition(s) limits an individual's ability to work or perform one or more activities of daily living and is defined as a diagnosable substance use disorder, serious mental illness, developmental disability or chronic physical illness.

In this activity, OHA will provide vouchers and the City of Orlando will provide services for approximately 150 chronically homeless persons identified by the City of Orlando. Depending on funding availability, the City of Orlando will provide approximately \$4,000 in services annually per household served. The City of Orlando funding will be used to provide an estimated 10 case managers to handle an average of 15 clients per case manager. The City of Orlando will refer the chronically homeless persons under case management to OHA. Once confirmed eligible, these referrals will bypass the section 8 wait list and other eligibility criteria.

OHA will also partner with other agencies that can provide supportive services to increase OHA's ability to house the chronically homeless.

**Status:** Implemented. At the end of FY2018, 12 participants received vouchers and 14 participants cumulatively over the life of this activity.

**Planned Non-Significant Changes:** None.

**Planned Changes to Metrics/Data Collection:** OHA does not anticipate changes to the metrics, baselines or benchmarks during the Plan year.

**Planned Significant Changes:** None.

## PUBLIC NOTICE PRE-APPLICATIONS FOR MAINSTREAM HOUSING CHOICE VOUCHERS PROGRAM

The Orange County Housing and Community Development Division (OCHCD) is opening its waiting list for the Housing Choice Voucher (HCV) Program, specifically for target populations eligible for the Mainstream Program. The Mainstream Program is a subsidized rental assistance program exclusively for non-elderly adults with disabilities age 18-61.

Due to the limited number of approved Mainstream Program vouchers, this opening is for individuals and families who meet Mainstream Program eligibility and preference requirements. **The pre-application portal will be available on June 23, 2021 from 8:00 a.m. until 5:00 p.m.** or until the award completion is fulfilled. OCHCD will select a maximum of 100 successfully submitted pre-applications using a computerized lottery system.

To qualify for the Mainstream Program, a household member must meet the eligibility criteria below:

- 1. Non-elderly disabled household:** A household with one or more non-elderly adults with disabilities, which may include additional members who are not non-elderly persons with disabilities. A family where the sole member is an emancipated minor is not an eligible family.

A non-elderly person with disabilities (for purpose of determining eligibility) is a person 18 to 61 years of age at the time of admission.

An individual is considered disabled if:

- ✓ Has a disability, as defined in 42 U.S.C. 423;
- ✓ Is determined, pursuant to HUD regulations, to have a physical, mental, or emotional impairment that:
  - Is expected to be of long-continued and indefinite duration;
  - Substantially impedes his or her ability to live independently, and
  - Is of such nature that the ability to live independently could be improved by more suitable housing conditions; or
  - Has a developmental disability as defined in 42 U.S.C. 6001.

- 2. Waiting List Preference:** Preference will be given to non-elderly disabled families who are Orange County residents, residents currently experiencing homelessness and clients in a rapid rehousing program, or at risk of experiencing homelessness.
- 3. Maximum Annual Income:** If your gross household income (before deductions) is less than or equal to the amount indicated below for your household size, you are eligible to apply for assistance under this program.



Household Size	1	2	3	4	5	6	7	8
Maximum Annual Income	\$26,750	\$30,550	\$34,350	\$38,150	\$41,250	\$44,300	\$47,350	\$50,400

**HOW DO I APPLY?**

Please complete an on-line pre-application at [www.waitlistcheck.com/FL1280](http://www.waitlistcheck.com/FL1280) . **On-line pre-applications will be accepted from 8:00 a.m. to 5:00 p.m. on June 23, 2021.**

**Hand delivered or mailed pre-applications will not be accepted; Applicants submitting more than one pre-application will be disqualified.**

**HOW ARE PRE-APPLICATIONS SELECTED?**

A computerized random lottery system will be used to select 100 pre-applications. Pre-applications will be processed based on time and date, eligibility and preference score. Once the pre-applications have been screened, OCHCD staff will only contact the selected applicants to inform them of the status of their pre-application.

**FOR MORE INFORMATION:**

If you need further assistance or have additional questions, you may call 407-836-5150.

**PARA MÁS INFORMACION:**

Si usted necesita más asistencia o tiene preguntas adicionales, llame al 407-836-5150.

In accordance with the Americans with Disabilities Act (ADA), If any person with a disability as defined by the ADA needs special accommodations to participate in this proceeding, then no later than two business days prior to the opening he or she should contact Olivette Carter at (407) 836-5151 or e-mail at [Olivette.Carter@ocfl.net](mailto:Olivette.Carter@ocfl.net)

**FY 2021**

**FL-507 – Orlando/Orange, Osceola, Seminole  
Counties**

**Continuum of Care**

**Attachment #03:**

**1C-7. PHA Moving On Preference**

**Attachment #03 documents include the following:**

- **Orlando Housing Authority – Move On Strategy**



September 23, 2019

Ms. Martha Are  
Homeless Services Network of Central Florida  
4065-D L.B. McLeod Road  
Orlando, FL 32811

**RE: Partnership to Address Homelessness/Move-On Strategy**

Dear Ms. Are:

The letter confirms the partnership between the Orlando Housing Authority (OHA) and the Central Florida Continuum of Care (CoC FL-507) formed to address the mutually identified need for a region-wide response to chronic and family homelessness. OHA recognizes that public housing authorities play an important role in the development of the comprehensive homelessness response system.

The Orlando Housing Authority remains committed to working with CoC FL-507 through the Homeless Services Network to identify and implement strategies that reduce chronic homelessness. Specifically, OHA is making available approximately 30 Non-Elderly Disabled (NED) vouchers for homeless families. This strategy supports the implementation of the CoC's Move-On (or Move-Up) strategy for eligible households. The Orlando Housing Authority (OHA) recognizes that these strategies, promoted by the United States Department of Housing and Urban Development (HUD), have emerged from Central Florida and nationally as an effective approach to investing Housing Choice Vouchers to address chronic and family homelessness.

The Orlando Housing Authority looks forward to continued collaboration with the CoC FL-507 in FY 2019-20, including further discussion of and planning for opportunities to participate as part of a region-wide Move-On strategy.

Sincerely

*(Handwritten signature)* / vjyZ-''''--

Vivian Bryant, Esq.  
President/CEO

VB/vb

cc: Thelma Mungen



**FY 2021**  
**FL-507 - Orlando/Orange, Osceola,  
Seminole Counties Continuum of Care**  
**1E-1. Local Competition Announcement**

*Attachment #04*

**P.1 RFA Released to Community (website)**

**P.2 RFA Local Application Deadline clarified (website)**

**P.4 RFA Local Application (Email to Community)**

**P. 7 Project Review and Ranking (Attachment B)**

**P. 10 Selected Policies and Priorities (Attachment D)**

## Funding Opportunities.

Page 1

### REQUEST FOR APPLICATIONS: FY 2021 CoC Local Application Process

The Department of Housing and Urban Development (HUD) opened the FY 2021 CoC program competition on August 18, 2021 and will close on November 16, 2021. Homeless Services Network of Central Florida is the collaborative applicant for Continuum of Care FL-507 (incorporating the counties of Orange, Osceola, and Seminole). You may return to this page as a later date to view the completed regional application along with project acceptance and ranking. More information on the HUD CoC Program Competition can be found on the HUD Exchange [website](#).

HSN will open CoC FL-507's Local Application Process for the HUD CoC Program Competition on September 10, 2021. Below you will find the approved timelines for this year's application process followed by the Local Request for Funding Application (RFA) and supporting documentation. If you have any questions, you can email [application@hsncfl.org](mailto:application@hsncfl.org)

Attention all newly prospective applicants: you must attend one of three prospective applicant workshops.

#### ONLINE APPLICATION Portal (pending)

[Attachment A](#) Interim 2021 CoC Regional Paper Application Form (this is published for convenience only. All applications must be completed online). Detailed Application Instructions are available [HERE](#).

[Attachment A-1](#) Administrative Performance Data

[Attachment A-3](#) Jurisdictional Representative Certification Form

5:29 PM  
9/10/2021



# Funding Opportunities.

## REQUEST FOR APPLICATIONS: FY 2021 CoC Local Application Process

**Local Application Deadline: September 27, 2021 at 5 pm**

Page 2

The Department of Housing and Urban Development (HUD) opened the FY 2021 CoC program competition on August 18, 2021 and will close on November 16, 2021. Homeless Services Network of Central Florida is the collaborative applicant for Continuum of Care FL-507 (incorporating the counties of Orange, Osceola, and Seminole). You may return to this page as a later date to view the completed regional application along with project acceptance and ranking. More information on the HUD CoC Program Competition can be found on the HUD Exchange [website](#).

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ONLINE APPLICATION PORTAL

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[Attachment A-1](#) Administrative Performance Data

[Attachment A-3](#) Jurisdictional Representative Certification Form

[Attachment B](#) Project Review Ranking Selection Description

[Attachment C](#) Activities Eligible or Prioritized for Funding

[Attachment D](#) Selected CoC FL-507 Policies and Priorities

2:50 PM  
9/16/2021

prospective applicant workshops.

**ONLINE APPLICATION Portal** (*pending*)

Attachment A Interim 2021 CoC Regional Paper Application Form (this is published for convenience only. All applications must be completed online). Detailed Application Instructions are available **HERE**.

Attachment A-1 Administrative Performance Data

Attachment A-3 Jurisdictional Representative Certification Form

Attachment B Project Review Ranking Selection Description

Attachment C Activities Eligible or Prioritized for Funding

Attachment D Selected CoC FL-507 Policies and Priorities

Attachment E Requirements Related to Housing First Approach

Attachment F Housing Navigation and Housing Stability Case Management

Attachment G HMIS-related requirements

Attachment H 2021 CoCo HUD NOFO Process Timeline



## 2021 HUD NOFO REQUEST FOR APPLICATIONS

Eligible non-profits, jurisdictions and agencies are invited to respond to this RFA for the 2021 HUD Continuum of Care Program. Information regarding this RFA can be found at [www.hsncl.org/funding](http://www.hsncl.org/funding) or by clicking on the button below.

*The CoC Program is designed to promote a community-wide commitment to the goal of ending homelessness; to provide funding for efforts by nonprofit providers, States, and local governments to quickly re-house homeless individuals, families, persons fleeing domestic violence, and youth while minimizing the trauma and dislocation caused by homelessness; to promote access to and effective utilization of mainstream programs by homeless individuals and families; and to optimize self-sufficiency among those experiencing homelessness.*

[Click Here](#)

**An alert will go out when the Application Portal is active**

We will be repeating the  
**New Applicant Workshop on "How to Complete An Application"**  
on Monday, September 13, 2021 at 2:00 pm via [zoom](#)

**All new applicants are required to attend this workshop;**

Renewal applicants are strongly encouraged.

The content for this session is the same as last Wednesday's (9/8), but feel free to attend again if you did already.

Join Zoom Meeting

[https://us06web.zoom.us/j/83169749992?](https://us06web.zoom.us/j/83169749992?pwd=MTZBbC0wQUhUZW5kdjRlZzZpdTEyZz09)

[pwd=MTZBbC0wQUhUZW5kdjRlZzZpdTEyZz09](https://us06web.zoom.us/j/83169749992?pwd=MTZBbC0wQUhUZW5kdjRlZzZpdTEyZz09)

or Dial in: +1 929 205 6099 US (New York)

Meeting ID: 831 6974 9992

Passcode: 407003



**APPLICATION PORTAL IS OPEN NOW!****Submission Deadline is September 27, 2021 at 5:00 p.m.**

Eligible non-profits, jurisdictions and agencies are invited to respond to this Request For Applications (RFA) for the 2021 HUD Continuum of Care Program. Information regarding this RFA can be found at [www.hsncfl.org/funding](http://www.hsncfl.org/funding) or by clicking on the button below.

*The CoC Program is designed to promote a community-wide commitment to the goal of ending homelessness; to provide funding for efforts by nonprofit providers, States, and local governments to quickly re-house homeless individuals, families, persons fleeing domestic violence, and youth while minimizing the trauma and dislocation caused by homelessness; to promote access to and effective utilization of mainstream programs by homeless individuals and families; and to optimize self-sufficiency among those experiencing homelessness.*

**RFA Information****Application Portal**

Please send all questions or requests for clarification to  
[application@hsncfl.org](mailto:application@hsncfl.org)

For the 2021 HUD NOFO Competition Timeline & Process, [Click Here](#)

Last Updated 9/10/2021

(Items and dates subject to change)

Sent HUD NOFO 2021 - Local Application Portal is OPEN

Copy

Share on Social



Details

Reporting

Heat Map



Preview

**Subject** 2021 HUD NOFO | CoC FL-507 Application Portal is OPEN

---

**From name** Homeless Services Network of Central Florida

---

**Sent** September 16th 2021 at 2:43 pm EDT

---

**From Address** cfch@hsncfl.org

---

**Reply to address** cfch@hsncfl.org

---

**Lists** Active HMIS Agency Liaisons, Active HMIS Agency Li... [Show more](#)

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**Email link** <https://conta.cc/3lAeWEX>

Page 6

**Central Florida Continuum of Care (CoC FL-507)****Steps in the Review, Ranking and Selection of Projects for Inclusion in the 2021 Submission to HUD****1. Development of the Application Scoring by the CoC Resource Allocation and Coordination Committee, with the Input of CoC Stakeholders**

All eligible applications will be reviewed using a Scoring Categories approved by the CoC Board (September 2021). The Scoring Categories lists and defines all of the scoring categories that reviewers will use in evaluating applications, as well as specifies the maximum number of points that an application can earn in each category. The elements of the Application and Scoring were developed with input from CoC FL-507 stakeholders across the region, the CoC FL-507 Technical Expertise Committee, and the CoC FL-507 Lived Experience Council.

The categories, point assignments and weights included in the Scoring process incorporate the input received the broad CoC FL-507 membership. It is important to note, however, that a number of the factors considered and the weights they are assigned are a function of the priorities and policies of HUD and the U.S Interagency Council on Homelessness. Specific steps were taken to address factors uniquely or disproportionately impacting CoC participation by victim service providers and to hold them harmless with respect to those factors.

**2. Scoring of Each Application Based on Multiple Independent Reviews as well as Evaluation of Performance and Administrative Data**

Each of the sub-scores in the major scoring categories will be based on a combination of scoring by trained and qualified reviewers (including key CoC FL-507 stakeholders such as victim service providers, jurisdictional representatives, individuals who have experienced homelessness, etc.) as well as administrative and external data, as described in the Application Scorecard. Each reviewer will evaluate the application independently. Reviewers will be randomly assigned applications, except that steps will be taken to minimize the potential for reviewer bias on the basis of population served, service provided, or geography represented. Performance and administrative data will be generated using HMIS reporting tools and other CoC records (meeting attendance, PIT participation, etc.). All scores will be compiled and submitted to the CoC FL-507 Community Ranking and Selection Committee, together with additional information about the proposed projects, HUD's priorities and other relevant factors.

**3. Development of Recommendations by the Community Ranking and Selection Committee**

The Community Ranking and Selection Committee, a group of independent community representatives from across the region, will review the compiled scores for all of the applications, along with other relevant information, such as geographic coverage as well as the priorities and goals identified by CoC FL-507 and HUD. The Community Ranking and Selection Committee process will collectively develop a recommended slate of funded projects and amounts for consideration by the CoC FL-507 Board.

## 4. Scoring Categories

Category	Measurement/Data	Renewal Points	New/Expansion Points	DV Bonus
Financial	Audit	10	10	10
	Unspent HUD funds	10		
	Returned funds for any federal program	5	5	5
	Unresolved findings from HUD monitoring	5	5	5
Project Performance	Housing Stability	10	15	15
	Exits to Homelessness (for non DV bonus projects, DV/HT will not be scored and held harmless due to potential impacts of abusers on project exits)	10	15	15
	Increase in income	10	10	12
	Utilization Rate	10	13	10
Priority Populations	Prioritization based on need, including accepting families		5	10
	% of placements from unsheltered persons	10		
	Serve all eligible prioritized subpopulations		5	5
	Promote Race Equity – reviewing program outcomes with equity lens, identified barriers and taken steps to eliminate barriers	10	10	10
HMIS (Comparable system) Data Quality	Data quality report from HMIS, agree to data quality policies and procedures	30	30	30
CoC Priorities	Alignment with Housing First including screening out prior to entry and reasons for termination from a project	15	15	15
	Type and total number of units	10	10	10
	Filing of APRs	5		
	Coordinated Entry – CES MOU, procedures		10	10
	PIT/HIC participation	5	3	3
	General membership participation	5	3	3
	Committee participation	5	3	3
	CoC Sponsored Training participation	10	6	3
	Geographic Coverage	Number of jurisdictions served	6	6
Project Design	Is budget reasonable, does it match narrative and staffing charts, is it accurate		5	5
	Does housing design match program participant needs, accessibility, demonstrate housing lease up process		5	5
	Comprehensive supportive services plan		5	5
	Approach for access to mainstream benefits, including serving as DCF Access community partner	5	3	6
	Transportation services	5	2	2

	SOAR specialist on staff or enter into MOU with SOAR provider	5	5	2
	Project has a liaison to local school district Homeless Liaison	5	2	5
	Cost effectiveness per person served	5	5	5
	Uses Client satisfaction survey	5	2	2
	Experience with Housing First & Housing First Training		5	5
	COLVID 19 safety protocols	5	5	5
	Case Management with Housing First principles		5	5
	Experience with Trauma Informed Care		3	3
	Encouragement of Volunteerism and Employment		2	2
	Gender Inclusion/Non Discrimination	5	3	3
	Participation by population served with design and policy making, more than one person with lived experience on board of directors,	5	3	3
DV Experience	Demonstrates previous performance, emergency transfer plans, victim centered approach, rapidly move into permanent housing after ensuring safety			10
	Demonstrate improved safety planning, reports objective improvement in safety, use of HMIS comparable data system to assess special needs of the DV population, safety plan			10
Leveraged Housing & HealthCare	Documents commitment of nonCoC/ESG housing assistance for PSH and commitment of leveraged healthcare resources to support project participants		20	

The variance in total points available for Renewal and New/Bonus projects will be normalized for the purposes of ranking.

**\*For DV Bonus:** Projects seeking DV Bonus funding must first score a base score based on the scoring categories above for selection as a new project. Should more than one DV Bonus project be submitted and selected as a new project based on base score, additional points based on answers related to questions specific to DV services (not answered by non-DV projects) will be incorporated into the final scoring for ranking purposes within the DV Bonus prioritization.

### 5. Approval of Final Slate of Projects and Funding Amounts

The CoC FL-507 Board, the governing body for the Central Florida Continuum of Care, will approve a final slate of projects and funding amounts for inclusion in the Central Florida CoC's application to HUD.

## Attachment D

### CFCH Continuum of Care (CoC FL-507)

#### Selected Policies and Priorities Re: the 2021 Application for HUD CoC Program Funding

In developing its overall strategy to address and end homelessness, and in particular with respect to ranking of renewal projects and solicitation of new project applications, the CoC is committed to upholding and applying the following values:

1. Obtain and maintain HUD Continuum of Care Program funding sufficient to meet the needs of the FL 507 geographic area.
2. Promote our goal to make homelessness rare, brief, and one time in FL-507.
3. Prioritize projects that:
  - a. Actively participate in the Continuum of Care and help advance collective goals
  - b. Have movement to permanent housing and subsequent stability as the primary focus
  - c. Focus on those who are literally homeless (streets, shelter, transitional housing for homeless)
  - d. Participate in the HMIS with complete, high quality data
  - e. Demonstrate low barriers to program entry
  - f. Perform well against HUD McKinney Continuum of Care goals and positively impact system performance
  - g. Consistently meet and exceed operational standards for spending, match, occupancy and reporting.

#### A. Projects and Applications

##### 1. Types of Projects Eligible for Consideration through the Community Process

The HUD regional application review and selection process should score and rank submitted applications for funding to form projects within the following six (6) categories:

- a. Permanent Supportive Housing (PSH)
- b. Rapid Rehousing (RRH)
- c. Youth-Specific Transitional Housing (TH) or Supportive Services Only (SSO) Renewals
- d. Transitional Housing- Rapid Rehousing (TH-RRH)
- e. Essential System Supports Coordinated Entry System (CES)
- f. Essential System Supports Homeless Management Information System (HMIS)

CoC FL-507 should include at least one project in each of the above categories on its list of highest-priority (Tier 1) projects in the Submission to HUD (assuming at least one eligible project is submitted in each category), with the exception of TH-RRH.

##### 2. Types of Projects Ineligible for Consideration through the Regional Application Process

The following types of projects should be ineligible for consideration through the CoC FL-507 regional application process:

- a. All other TH projects
- b. All other SSO projects, unless they are or can be directly bundled with a PSH, RRH or are linked to a youth TH project
- c. Safe Haven projects
- d. New or Expansion CES or HMIS projects

### 3. Types of Projects Eligible for Consideration through the Regional Application Process, but Unlikely to be Included in the Submission to HUD

The following types of projects should be eligible for review through the regional application process, but ineligible for inclusion in the Application to HUD without the express approval of the CoC FL-507 Board:

- a. Projects that propose to use HUD funding for acquisition, new construction or rehabilitation activity.
- b. Projects that propose to use HUD funding to provide project- or sponsor-based rental assistance, but are unable to document that the units will be online throughout calendar year 2023.
- c. Projects proposed in applications that do not meet threshold criteria (i.e., do not meet the basic criteria to be eligible for consideration by HUD, such as Projects that do not accept clients through the Coordinated Entry process, do not participate in HMIS or comparable data system (DV providers), do not adhere to Housing First principals, or other eligibility criteria as defined in the Scoring Matrix for each type of project).

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## B. Jurisdictional Issues

### 1. Option for Jurisdictions to Express Preference for Jurisdiction-Specific Projects

- a. The regional application process should include a mechanism whereby each participating jurisdiction has the option to indicate a preference among all Applicants dedicated to serving a particular county, in the event that the CoC receives an application for a single-jurisdiction application.
- b. As a secondary option, a jurisdiction should have the opportunity to verify and quantify its history of investing or leveraging funds for Projects administered by the Applicant in the past. This information may be helpful in determining if a jurisdiction is choosing to develop capacity for a specific agency and/or if the HUD funds will be leveraged in a way that reduces the service per HUD dollar ratio.

### 2. Option to Corroborate Applicant Claims that a Project Will Serve the Jurisdiction

- a. Each jurisdiction should be afforded the opportunity to confirm (or deny) jurisdiction-specific activities that an Applicant claims in its proposal. Specifically, if in its application, the Applicant asserts that it has “served” households in/from a particular jurisdiction, that jurisdiction should have the opportunity to confirm the assertion. If the jurisdiction is not aware of any activity, the Applicant would have to provide verification to the jurisdiction.
- b. The definition of “served” will vary based on the nature of the Project. In many cases, however, the determination of whether the jurisdiction will be served will be immediate.
- c. An Applicant that expresses the intent to serve a jurisdiction without a documented history of doing so would not receive points that another applicant with an established history would receive.

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## \* C. Specific Project Factors Relevant to the Application Process 1.

### 1. Project Bundling

- a. Given the flexibility afforded by an approach that "bundles" housing with supportive services - both with regard to budgeting and programming - application bundling should continue to be the preferred approach to building housing-services linkages within PSH and RRH projects.
- b. If existing bundled Projects are selected for renewal, the baseline assumption should be that the distribution of awards to sub-recipient agencies to provide components of the renewal project will be proportionate to the allocation of funding to sub-recipients for FY 2020. However, HSN should conduct a separate competitive process by which sub-

recipient funding will be formally awarded for FY 2021. During this process, based on performance or sub-recipient preferences, funds may be reallocated between sub-recipients. The process should be completed more than 60 days prior to the start of the HUD grant term for the project. This competitive process will include scoring based on key project performance measures that support overall system performance measures. Examples of these objective criteria include length of time homeless, returns to homelessness, HMIS data quality, adherence to CoC written standards, participation in Coordinated Entry System, provision of services to hardest to serve populations, and promotion of race equity. Should the sub-recipient portfolio and/or funding allocations associated with any Project change based on the results of that competition, HUD will be notified of the changes.

## 2. Administration of Scattered-Site Rental Assistance

In light of the fact that the administration of scattered-site rental assistance/leasing funds across the CoC is such a specialized and complex function, HSN should continue to administer these resources CoC-wide. Because of the increased efficiency and reduced regional confusion associated with having a single point of contact, these funds should continue to be administered on a consolidated basis across the region. This recommendation was also based on the recognition that rental assistance funds are pass-through dollars to landlords, stretch an agency's cash flow capacity, and do not tend to build organizational capacity. This policy increases the ability of service providers with limited administrative capacity to apply for CoC funding.

## 3. Domestic Violence (DV) Bonus Project

The CoC should include at least one and conceivably all of the following types of project types, where the project is exclusively dedicated to serving survivors of domestic violence (including sexual assault, dating violence and stalking) and/or human trafficking under the DV Bonus in the Submission to HUD: 1) a RRH project, or 2) a Joint Transitional Housing/Rapid ReHousing (TH-RRH) project.

## 4. CoC Bonus Project

CoC FL-507 should include at least one of the following as a CoC Bonus Project in the Submission to HUD, all other things being equal: 1) a TH-RRH Project serving youth, 2) a RRH project serving families with children and/or youth, or 3) a project-based, site-specific Permanent Supportive Housing (PSH) project that demonstrates written commitment from a health care organization to provide services or a project that includes a commitment of non-CoC or ESG housing vouchers or 4) a tenant-based, scattered-site PSH project.

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# D. Application Ranking and Project Selection Process

## 1. Reallocation Policy

Any funds reallocated as part of recapturing unspent funds, voluntary or involuntary reallocation will be made available for reallocation to create new projects during the local solicitation process. As part of the FL 507 solicitation for projects included in the HUD CoC collaborative application, providers are encouraged to reallocate projects that are underspending their full award, underutilizing beds, not in alignment with Housing First principles and/or underperforming in other areas critical to meeting the goal of ending homelessness in the FL-507 geographic region. Projects with poor performance, not spending their full award, underutilizing beds, not in alignment with Housing First principles and practices, not serving the intended population or with significant, unresolved findings are subject to involuntary reallocation. Projects who score below a threshold as established by the local COC during each application period will be subject to either voluntarily or



involuntarily giving up award money to be reallocated to a New Project. Applicants may appeal the decision and the appeal must be considered by the CoC's Management Board or its Executive Committee.

- a. The CoC has determined that its current portfolio of HUD-funded projects provides the region with the configuration and distribution of housing and services capacity to best address the current regional need, and that retention of that capacity is of paramount importance.
  1. Consequently, Applicants requesting funding through reallocation should not be considered for reallocation unless they maintain existing capacity (by project type, geography and modality) without increasing costs and assure the sustained tenancy of persons served by the Project from which funding is re-allocated. Such Applicants could, however, be considered for funding as part of a Bonus Project.
  2. When comparing project type, geography and modality reallocation, the CoC will give highest consideration to project scores related specifically to project performance measures that impact overall system performance including, but not limited to, alignment with housing first principles, housing stability, exits to homelessness, spending rates, race equity, and barriers/acuity level of project participants.
- b. CoC FL-507 will also allow voluntary reallocation from renewal projects to new projects that will further the overall system performance goals of HUD and the CoC FL-507 region.

## 2. Grouping of Applications for Initial Scoring

Each Application should be scored so that it competes only with other projects within the same Project and activity type, at least for purposes of generating the initial ranked project list. For example, all Applicants proposing to provide supportive services to RRH Projects should be scored and ranked as a separate and distinct group, and none would be evaluated in comparison with Applicants proposing to provide services to PSH projects.

## 3. Baseline Assumptions for Use in the Community Ranking and Project Selection Process

Therefore, the baseline assumption for the FY 2021 scoring and selection process should be that:

- a. The distribution of FY 2021 awards should favor the current mix, location (county) and distribution of current funds of PSH and RRH projects funding (approximately 75%-25%). This distribution will be reflected in the publication of baseline renewal amounts by Project and activity type.
- b. Notwithstanding D.3.a., the need for some adjustments could emerge through the Community Ranking and Project Selection process in the form of documented system and project performance concerns.

## 4. Baseline Tier 1 Assumptions

Because of the expectation that a PSH unit be made available to a resident for as long as it may be needed, the cost to the region of losing a PSH unit is significantly greater than the cost of losing a RRH unit. Furthermore, CoC FL-507 has prioritized the use of PSH to serve individuals and families experiencing chronic homelessness. All other things being equal, PSH renewals or new projects funded through re-allocations, Youth Projects, CES and HMIS Projects should be funded in Tier 1 and in front of RRH projects in order to reduce the likelihood that these resources are imperiled.

## 5. Baseline Bonus Project(s) Assumptions.

Given the manner in which HUD has structured the CoC Bonus Project(s) opportunity, funding requests by all Applicants associated with a particular proposed CoC Bonus Project(s) are encouraged to not exceed a total of \$150,000. Similarly, a DV Bonus Project is encouraged to not exceed a total of \$800,000.

## 6. Scoring Tool Description.

The Scoring Tool evaluates projects along multiple performance dimensions including project financials; project performance that contributes to improved overall system performance; priority populations services; HMIS data quality (comparable data systems for Domestic Violence/Human Trafficking providers); commitment to CoC priorities including race equity and housing first; and project design. Each of these dimensions has multiple component measures. Each performance measure is in turned based on one or more defined data elements drawn from a specific data source, including individual project applications, annual progress reports (APRS), HMIS and HUD reports. For each individual measure, the Scoring Tool also identifies a range of points awarded for specific component measures.

The intent is for each individual measure within the tool to be an objective metric with a defined method of calculation and correspond to one or more data elements from specific reports. This approach reduces variability in assessment between reviewers, as independent reviewers (including the self-assessment completed by the renewal project applicant or sub-recipient) using the same, defined data sources should thus be able to reliably arrive at the same value, and the same point score, for a project on any given measure.

The total possible points vary for renewal, new/bonus and domestic violence bonus project applications. Final project scores will be normalized to a standard range before being presented for ranking consideration.

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## E. CoC FL-507 Project Participant Prioritization

### 1. Homeless Definition Prioritization

In accordance with the CoC’s written standards for assistance, in order to be eligible to receive housing assistance and/or supportive services through a HUD CoC Program, a Program Participant must meet the definition of homelessness found in either Category 1 (i.e., is literally homeless) or Category 4 (i.e., fleeing or attempting to flee domestic violence) of the HUD definition of homelessness (24 CFR §578.3).

Category 1: Any individual or family who lacks, regular and adequate nighttime residence, meaning:

- Has a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
- Is living in a public or privately operated shelter (congregate shelters, transitional housing and hotels and motels are paid for by charitable organizations or federal, state and local government); or
- Is exiting an institution where (s) he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

Category 4: Any individual or family who:

If fleeing, or is attempting to flee domestic violence, human trafficking, dating violence, stalking, or sexual assault, has no other residence and lack resources of support networks to obtain other permanent housing.

### 2. Income

Any individual or family with household income exceeding 50 percent of the Area Median Income (AMI) most recently published by HUD for the Orlando-Kissimmee-Sanford MSA is assumed to have sufficient resources to obtain other permanent housing and is not eligible for enrollment into HUD CoC Program funded PSH, RRH or TH assistance.

### 3. Chronicity

PSH housing assistance and supportive services are prioritized for individuals and families experiencing the longest histories of homelessness histories and most severe needs. In particular, the CoC has adopted and expanded upon the orders of priority as set forth in HUD Notice CPD-16-11. The CoC does allow for PSH projects that accept participants as identified in HUD's definition of a DedicatedPLUS project. Specifically, DedicatedPLUS projects may serve persons who meet one of the following criteria at project entry:

1. Experiencing chronic homelessness as defined in 24 CFR 578.3;
2. Residing in transitional housing project that will be eliminated and meets the definition of chronically homeless in effect at the time in which the individual or family entered the transitional housing project;
3. Residing in a place not meant for human habitation, emergency shelter or safe haven; but the individuals or families experiencing chronic homelessness as defined at 24 CFR 578.3 had been admitted and enrolled in a permanent housing project within the last year and were unable to maintain a housing placement;
4. Residing in transitional housing funded by a Joint transitional housing (TH and rapid rehousing (PH-RRH) component project and who were experiencing chronic homeless as defined at 24 CFH 578.3 prior to entering the project;
5. Residing and has resided in a place not meant for human habitation, a safe having, or emergency shelter for at least 12 months in the last three years, but has not done so on four separate occasions; or
6. Receiving assistance through a Department of Veteran Affairs (VA)-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.

### F. CoC FL-507 Project Prioritization

All other things being equal, FL CoC-507 prioritizes project applications in the following order:

Priority 1: Renewal Coordinated Entry System (CES) and Homeless Management Information (HMIS) System Projects

Priority 2: Renewal Permanent Housing (PH) Projects and Youth Projects

Priority 3: Reallocation Permanent Housing Projects

Priority 4: New Permanent Housing Projects

Priority 5: New Joint Youth or DV TH-PH Housing Projects

### G. Applicants Not Selected for Inclusion in the Submission to HUD

#### 1. Other Funding Opportunities

Applicants not selected for inclusion in the Submission to HUD may, through the ranking and review process, be identified as qualified for future funding including incorporation in an existing HUD funded project as a competitive sub-recipient or inclusion in a non-HUD funded project whose funding is administered by HSN.

#### 2. Appeals

Applicants notified that they have not been selected for inclusion in the Submission to HUD and that perceive that their non-selection is the result of reversible error may submit an appeal to be considered by the Ranking Committee, CoC Board or CoC Executive Committee. Appeals must be submitted in the same manner as the application and be received by the deadline noted in the Request for Applications. In order to be eligible for consideration, an appeal should include

a tailed explanation of the perceived error and any other information the applicant considers relevant. HUS has emphasized that appeals should focus on how the applicant was denied the opportunity to participate in the planning process. Each Applicant submitting an appeal will be notified of its final status upon disposition by the CoC Management Board or its Executive Committee.

**FY 2021**  
**FL-507 - Orlando/Orange, Osceola,  
Seminole Counties Continuum of Care**  
**1E2. Project Review and Selection Process**  
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**P. 39 Project Scoring Final**

**Scoring Overview - Renewal**

As determined by the CoC Governance Board, community priority will be given to eligible projects in the following order: Permanent Supportive Housing (PSH), Rapid Rehousing (RRH), Youth-Specific Transitional Housing (TH) or Supportive Services Only (SSO) Renewals, Transitional Housing- Rapid Rehousing (TH-RRH), Essential System Supports Coordinated Entry System (CES) and Essential System Supports Homeless Management Information System (HMIS). All projects will be scored utilizing the following materials: Project application; HUD CoC APR; 2021 HIC; and HMIS System. APR information will be pulled for the following date range: **7/1/20- 6/30/21**

**Section A: Project Renewal Threshold Criteria (Section I of the Application)**

Eligibility Criteria	Yes	No
1. Projects must be in compliance with CoC Interim Rule and subsequent notices, including threshold requirements outlined in the 2021 Notice of Funding Opportunity		
2. Agreed to Participate in HMIS or if project is Domestic Violence or Human Trafficking project, must adhere with HMIS data and technical standards within a comparable database.		
3. Applicant has Active SAM registration with current information.		
4. Applicant has Valid DUNS number in application.		
5. Applicant has no Outstanding Delinquent Federal Debts- unless: (a) A negotiated repayment schedule is established and the repayment schedule is not delinquent, or (b) Other arrangements satisfactory to HUD are made before the award of funds by HUD.		
6. Applicant has no Debarments and/or Suspensions -or is proposed to be debarred or suspended from doing business with the Federal Government.		
7. Applicant has disclosed any violations of Federal criminal law - Applicants must disclose in a timely manner, in writing to HUD, all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award.		
8. Applicant has demonstrated the population to be served meets program eligibility requirements.		
9. Applicant complies with headquarter and field office directives. Applicant met HUD Expectations - When considering renewal projects for award, HUD will review information in eLOCCS; Annual Performance Reports (APRs); and information provided from the local HUD CPD Field Office, including monitoring reports and A-133 audit reports as applicable, and performance standards on prior grants.		
10. Applicant demonstrates fiscal and administrative capacity to expend, track and report on grant awards.		2

11. Applicant participates in and accepts 100% of participant referrals from CoC Coordinated Entry process.		
12. Applicant agrees to practice and monitor fidelity to Housing First principles and be low barrier, and score equals or greater than ten (10) on Housing First question Section 7 of Application.		
13. Project has documented the required matching funds		
14. Project is financially feasible.		
15. Applicant is active CoC participant.		
16. Commit to prioritizing eligible families with children and/or unaccompanied youth assigned through CES, prioritizing clients for assistance based on CoC-wide established criteria and will not deny any family assistance to the Project, or separate the members of the family, as a condition of entry.		
17. Documented organizational financial stability, audit shows agency has no major findings. Financial audit completed within previous 24 months of submission date.		
18. Applicant has a Code of Conduct which complies with 2 CFR part 200		

**Section B: Project Financial- 30 Points**

<b>Measurement</b>	<b>Source</b>	<b>Data Calculations</b>	<b>Scoring Values</b>
<b>Financials</b>	Audited Financials and 990 submitted as attachment	Review of Auditor's Report	Total Points Possible: 10 No Findings ADD 10pts. If there were minor findings or findings resolved ADD 5 pts. If findings are deemed "significant" then 0 pts.
<b>Unspent HUD Funds</b> <b>Objective</b>	Project Application Section 12	Project's last full grant year shows unspent HUD COC funds	Total Points Possible: 10 spending at 97-100% = 10 points; 91-96% = 8 points; 85-90%=5 points; less than 85% = 0 points
<b>Repay/Return Grant Funds</b> <b>Objective</b>	Project Application Section 12	Applicant Returned funds to HUD or other federal or state agency within 2 years.	Total Points Possible: 5 No funds returned – ADD 5 pts. If Yes, Explanation addresses all concerns = 3 Explanation addresses some concerns = 1 Explanation fails to address concerns = 0

Total Points Possible: 5  
 No outstanding debt – ADD 5 pts.  
 If Yes, documented payment schedule = 2  
 If Yes and no documented payment schedule then project is ineligible for funding

**HUD Unresolved Findings**

Project Application  
 Section 12

Has no outstanding obligation/debt to HUD in arrears

**Objective**

**Section C: Project Performance- 50 Points**

Measurement	Source	Data Calculations	Scoring Values
<p><b>PSH Housing Stability:</b>                      % of persons who remained in the PH project at the end of the operating year or exited to a permanent housing destination</p> <p><b>Objective</b></p>	<p>HUD CoC APR or Section 14. Verified by HMIS Lead</p> <p><b>System Performance</b></p>	<p>Percentage of the Total number of Retained Clients + Clients with Positive Exits out of the Total Non-Deceased Clients Served</p>	<p>Total Points Possible: 10                      90% + = 10 pts                      85% -89% = 5 pts                      80% - 84% = 3 pts                      &lt; 80% = 0 pts</p>
<p><b>RRH and TH Housing Stability:</b>                      % of persons who exited to a positive housing destination</p> <p><b>Objective</b></p>	<p>HUD CoC APR or Section 14. Verified by HMIS Lead</p> <p><b>System Performance</b></p>	<p>Total persons exiting to positive housing destinations. Numerator is the number exited to stable housing and the demonitor is total exits.</p>	<p>Total Points Possible: 10                      90% + = 10 pts                      80% -89% = 5 pts                      70% - 79% = 3 pts                      &lt; 70% = 0 pts</p>
<p><b>Exits to Homelessness:</b>                      % of program exits to another homeless destination</p> <p><b>Objective</b></p>	<p>HUD CoC APR or Section 14. Verified by HMIS Lead</p> <p><b>System Performance</b></p>	<p>Percentage of exits to place not meant for human habitation, emergency shelter, including hotel or motel paid for with emergency shelter voucher, safe haven or transitional housing</p>	<p>Total Points Possible: 10                      5% or less = 10 pts                      6% - 10% = 8 pts                      11% - 15% = 6 pts                      16% - 20% = 4 pts                      &gt; 20% = 0 pts</p>
			Total Points Possible: 10



<p><b>Earned Income Total:</b> % of program participants who increased their earned income as shown on the last APR</p> <p><b>Objective</b></p>	<p>HUD CoC APR or Section 14. Verified by HMIS Lead</p> <p><b>System Performance</b></p>	<p>The percentage of stayers/leavers that increase cash earned income from entry to latest annual assessment/exit, excluding all stayers without annual assessments</p>	<p>IF PSH Project 20% + = 10 pts 25% - 19% =7 pts 10% - 18% =4 pts 5% - 9% =4 pts &lt; 05% = 0 pts IF RRH or TH Project 40% + =10 pts 39% -30% = 8 pts 29% - 20% =6 pts 19% - 10% =4 pts &lt; 10% = 0 pts</p>
<p><b>Unearned Income Total:</b> % of program participants who increased their non-employment income (including non-cash benefits) as shown on the last APR</p>	<p>HUD CoC APR or Section 14. Verified by HMIS Lead</p> <p><b>Objective</b></p>	<p>The percentage of stayers/leavers with noncash benefit sources, excluding all stayers without annual assessments.</p> <p><b>System Performance</b></p>	<p>Total Points Possible: 10 40% + = 10 pts 30% - 39% =7 pts 20% - 29% =4 pts &lt; 19% = 0 pts</p>
<p><b>Utilization Rate:</b> % of utilization reported on APR</p>	<p>HUD CoC APR or Section 14. Verified by HMIS Lead</p> <p><b>Objective</b></p>	<p>The utilization rate (% of units occupied) for applicant program.</p> <p><b>System Performance</b></p>	<p>Total Points Possible: 10 95%+ = 10 pts &lt;95%-90% = 8 pts &lt;90%-85% = 5 pts &lt;85%-80% = 2 pts &lt; 80% = 0 pt</p>
<p><b>Section D Serving Priority Populations - 20 pts</b></p>			
<p><b>Measurement</b></p>	<p><b>Source</b></p>	<p><b>Data Calculations</b></p>	<p><b>Scoring Values</b></p>
<p><b>Street Homeless Placements:</b> % of program participants entering from a place not meant for human habitation</p>	<p>HUD CoC APR Verified by HMIS Lead</p>	<p>The percentage of participants entering the project for the grant year that are from a place not meant for human habitation</p>	<p>Total Points Possible: 10 IF PSH or RRH Project 100% + = 10 pts &lt; 100% = 0 pts IF TH Project 100% + = 10 pts &lt; 100% = 0 pts</p>

**Considered specific severity of needs & vulnerabilities when ranking and selecting projects**



<p><b>Type of Unit and Total Units</b></p> <p><b>Objective</b></p>	<p>Project Application Section 3</p>	<p>PSH: Add 1 pt. for first 10 units and .25 for each additional unit (COC and Match funded) RRH: Add 1 pt. for first 10 units and .25 for each additional unit (COC and Match funded) YTH: Add 1 pt. for first 10 units and .25 for each additional unit (COC and Match funded)</p>	<p align="center"><b>Page 6</b></p> <p align="center">Total Points Possible: 10</p>
<p><b>Filing of APR</b></p> <p><b>Objective</b></p>	<p>APR will be verified by HSN</p>	<p>Applicant timely and successfully filed APR</p>	<p align="center">Total Points Possible: 5 If filed on time receive full pts. If filed or late receive zero pts.</p>
<p><b>COC Participation</b></p> <p><b>Objective</b></p>	<p>PIT and HIC Involvement Section 9 verified by HSN</p>	<p>Will commit to participation in 2022 PIT Count (No PIT in 2021) Application</p>	<p align="center">Total Points Possible: 5 PIT Participation = 5 pts</p>
<p><b>COC Participation</b></p> <p><b>Objective</b></p>	<p>COC membership participation Section 9 verified by HSN</p>	<p>Sign Up Sheets (Virtual meeting logs) for CoC General Membership Participation</p>	<p align="center">Total Points Possible: 5 If attended = 2-3, Add 2 pts. If attended = 4-7, Add 4 pts. If attended = 8 or more, Add 5 pts.</p>
<p><b>COC Participation</b></p> <p><b>Objective</b></p>	<p>COC committee participation Section 9 verified by HSN</p>	<p>Sign Up Sheets (Virtual meeting logs) for CoC Committees Participation</p>	<p align="center">Total Points Possible: 5 If attended = 2-3, Add 2 pts. If attended = 4-7, Add 4 pts. If attended = 8 or more, Add 5 pts.</p>
<p><b>Direct Practice Skills Training (e.g., Motivational Interviewing, Trauma-Informed Care, DV &amp; Human Trafficking)</b></p> <p><b>Objective</b></p>	<p>Participation in Training Section 4 verified by HSN</p>	<p>Sign Up Sheets (Virtual meeting logs) for CoC Sponsored Training</p>	<p align="center">Total Points Possible: 10 If 100% of direct practice &amp; program supervisory staff having served more 6 months attended at least 1 training; If 75% to get 5 points.</p>
<p align="center"><b>Section G - Geographic Coverage and Responsiveness to Jurisdictional Priorities - 6 Points</b></p>			
<p><b>Measurement</b></p>	<p><b>Report</b></p>	<p><b>Data Calculations</b></p>	<p><b>Scoring Values</b></p>
<p><b>Service Coverage of Jurisdiction</b></p> <p><b>Objective</b></p>	<p>Application must specify any and all Jurisdictions covered Section 5</p>	<p>For each Jurisdiction Applicant Commits to Serve Clients from : ADD 1 point</p>	<p align="center">Total Points Possible: 6</p>
<p align="center"><b>Section H - Project Design - 45 Possible Points</b></p>			
<p><b>Measurement</b></p>	<p><b>Report</b></p>	<p><b>Data Calculations</b></p>	<p><b>Scoring Values</b></p>

<p><b>Access to Mainstream Benefits</b></p> <p><b>Objective</b></p>	<p><b>Page 7</b></p> <p>Project Application Section 10</p>	<p>Applicant or project partner serves as DCF ACCESS or community partner agrees to ensure enrollment in mainstream benefits</p>	<p>If YES, ADD 5 pts. If NO, but will perform same function, ADD 2 pts.</p>
<p><b>Access to Mainstream Benefits</b></p> <p><b>Objective</b></p>	<p>Project Application Section 10</p>	<p>Applicant or project partner has on staff a SOAR Specialist or will enter MOU with SOAR Provider</p>	<p>If YES, ADD 5 pts.</p>
<p><b>Access to Transportation</b></p> <p><b>Objective</b></p>	<p>Project Application Section 10</p>	<p>Applicant or project partner has committed to provide transportation and has described the approach and level of transportation.</p>	<p>If YES, ADD 5 pts.</p>
<p><b>School Liaison</b></p> <p><b>Objective</b></p>	<p>Project Application Section 10</p>	<p>Project partner has committed to have a designated staff person whose responsibilities include ensuring children are enrolled in school and receive appropriate services as required</p>	<p>If YES, ADD 5 pts.</p>
<p><b>Cost Effectiveness</b></p> <p><b>Objective</b></p>	<p>Project Application Section 3 (total beds) and Section 13 Total Income Budget</p>	<p>Project is cost effective Considered Elements: Cost per person served is comparable to COC average within project type. Divide Total Budget Income by Total Beds.</p>	<p>If YES, ADD 5 pts.</p>
<p><b>Client Satisfaction Surveys</b></p> <p><b>Objective</b></p>	<p>Project Application Section 7</p>	<p>Award 5 points for a "Yes" response. If response is "No" then the project will score zero</p>	<p>If YES, ADD 5 pts.</p>

<p align="center"><b>COVID-19</b></p>	<p align="center"><b>Page 8</b></p> <p align="center">Section 15</p>	<p>The Project has implemented safety protocols to address the safety needs of individuals and families participating in current projects and has identified project eligible individuals and families experiencing homelessness for COVID-19 vaccination based on local protocol.</p>	<p>If YES to both safety protocols and vaccinations and fully described each ADD 5 pts. If YES to 1 with a full description ADD 2pts. If NO = 0 pts</p>
<p align="center"><b>Gender Inclusion/Non-Discrimination Policy</b></p> <p align="center"><b>Objective</b></p>	<p align="center">Section 15</p>	<p>Applicant ensures inclusion and non-discrimination based on equal access criteria</p>	<p>If YES to both question j and k and fully described each ADD 5 pts. If YES to 1 with a full description ADD 2pts. If NO = 0 pts</p>
<p align="center"><b>Participation by population served</b></p> <p align="center"><b>Objective</b></p>	<p align="center">Project Application Section 7</p>	<p>Does the agency have a board of directors that includes representation from more than one person with lived experience? Written policies and procedures submitted by the project and narrative response demonstrating participation by persons with lived experience in program design and policy-making?</p>	<p>If YES to both question g, h and I and fully described each ADD 5 pts. If YES to 2 with a full description ADD 3pts. If YES to 1 with a full description ADD 1pt. If NO = 0 pts</p>

**231 possible points**

Scoring Overview - New and Bonus			
As determined by the CoC Governance Board, community priority will be given to eligible projects in the following order: Permanent Supportive Housing (PSH), Rapid Rehousing (RRH), Youth-Specific Transitional Housing (TH) or Supportive Services Only (SSO) Renewals, Transitional Housing- Rapid Rehousing (TH-RRH), Essential System Supports Coordinated Entry System (CES) and Essential System Supports Homeless Management Information System (HMIS). All projects will be scored utilizing the following materials included below under the headings of: Project Application Threshold, Financial Data, Project Performance, Serving Priority Populations, Commitment to COC priorities, COC Participation, Geographic Coverage, Project Design, and Bonus points.			
Section A: Project Application Threshold			
Eligibility Criteria	Yes	No	Scoring Values
1. Projects applicant and subrecipient are eligible entities and project is in compliance with CoC Interim Rule and subsequent notices, including threshold requirements outlined in the 2021 Notice of Funding Opportunity			If any response is 'No' project is not eligible for review unless the criteria is not applicable to project type.
2. Agreed to Participate in HMIS or if project is Domestic Violence or Human Trafficking project, must adhere with HMIS data and technical standards in a comparable database.			
3. Applicant has Active SAM registration with current information.			
4. Applicant has Valid DUNS number in application.			
5. Applicant has no Outstanding Delinquent Federal Debts- unless: (a) A negotiated repayment schedule is established and the repayment schedule is not delinquent, or (b) Other arrangements satisfactory to HUD are made before the award of funds by HUD.			
6. Applicant has no Debarments and/or Suspensions -or is proposed to be debarred or suspended from doing business with the Federal Government.			
7. Applicant has disclosed any violations of Federal criminal law - Applicants must disclose in a timely manner, in writing to HUD, all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award.			
8. Applicant has demonstrated the population to be served meets program eligibility requirements.			
9. Applicant complies with headquarter and field office directives. Applicant met HUD Expectations - When considering renewal projects for award, HUD will review information in eLOCCS; Annual Performance Reports (APRs); and information provided from the local HUD CPD Field Office, including monitoring reports and A-133 audit reports as applicable, and performance standards on prior grants.			
10. Applicant demonstrates fiscal and administrative capacity to expend, track and report on grant awards. Financial audit within previous 24 months of submission date.			
11. Projects will participate in and accept 100% of referrals from Coordinated Entry, when it is available for the project type.			
12. Applicant agrees to practice and monitor fidelity to Housing First principles and be low barrier, and scored = or > than 10 on Housing First question Section 7 of Application.			
13. Project has documented the required matching funds			
14. Project is financially feasible.			
15. Applicant is active CoC participant.			
16. Commit to prioritizing eligible families with children and/or unaccompanied youth assigned through CES, prioritizing clients for assistance based on CoC-wide established criteria and will not deny any family assistance to the Project, or separate the members of the family, as a condition of entry.			

17. Documented organizational financial stability, audit shows agency has no major findings. Financial audit completed within previous 24 months of submission date.		
18. Applicant has a Code of Conduct which complies with 2 CFR part 200		
19. Representation at Mandatory RFP Workshop		

**Section B: Project Financial (20 Points)**

Measurement	Source	Data Calculations	Scoring Values
<b>Financials</b>	Audited Financials and 990 submitted as attachment	Review of Auditor's Report	Total Points Possible: 10 Findings ADD 10pts. If there were minor findings or findings resolved ADD 5 pts. If findings are deemed "significant" then 0 pts. No
<b>Repay/Return Grant Funds</b>	Project Application Section 12, question 12.5	Applicant Returned funds to HUD or other federal or state agency within 2 years.	Total Points Possible: 5 funds returned – ADD 5 pts. No If Yes, Explanation addresses all concerns = 3 Explanation addresses some concerns = 1 Explanation fails to address concerns = 0
<b>HUD Unresolved Findings</b>	Project Application Section 12, question 12.11	Has outstanding obligation/debt to HUD in arrears or with payment schedule pending	Total Points Possible: 5 outstanding debt – ADD 5 pts. No If Yes, documented payment schedule = 2 If Yes and no documented payment schedule then project is ineligible for funding

Objective

Objective

**Section C: Project Performance (55 Points)**

Measurement	Source	Data Calculations	Scoring Values
<b>PSH Housing Stability:</b> % of persons who remain in any current PSH project or exited to a permanent housing destination managed by the applicant at the end of the last 12 month period	HUD CoC APR or Agency Data from Section 14	Percentage of the Total number of Retained Clients + Clients with Positive Exits out of the Total Non-Deceased Clients Served	Total Points Possible: 15 90% + = 15 pts 85% -89% = 11 pts 80% - 84% = 7pts 79%-75% = 3 pts 70% or no data= 0 pts
<b>RRH and TH Housing Stability:</b> % of persons who exited any current RRH or TH project managed by the applicant to a positive housing destination over the last 12 month period	HUD CoC APR or Agency Data from Section 14	Total persons exiting to positive housing destinations. Numerator is the number exited to stable housing and the demonitor is total exits.	Total Points Possible: 15 90% + = 15 pts 85% -89% = 11 pts 80% - 84% = 7pts 79%-75% = 3 pts 70%or no data = 0 pts

< Objective, System Performance

**Objective,  
System  
Performance**

<b>Exits to Homelessness:</b> % of program exits to another homeless destination for any housing project managed by the applicant to a positive housing destination over the last 12 month period	HUD CoC APR or Agency Data from Section 14	Percentage of exits to place not meant for human habitation, emergency shelter, including hotel or motel paid for with emergency shelter voucher, safe haven or transitional housing (DV/HT agency will not be scored and will be held harmless due to potential impacts of abusers on project exits).	Total Points Possible: 15 5% or less = 15 pts 6% - 10% = 11 pts 11% - 15% = 7 pts 20% = 3 pts > 20% or no data= 0 pts
<b>Increase Income and Ability to Live Independently</b>	HUD CoC APR or Agency Data from Section 14	Project has increased income for projet leavers and stayers as reported in HMIS over the last year and project provides employment services and/or SOAR case management to assist clients to increase income.	Total Points Possible: 10 Yes to both 10 pts.: If Yes to one 5 Pts 0 pts.
<b>Utilization Rate:</b> % of utilization reported on APR or other housing operated by the applicant	HUD CoC APR or Agency Data from Section 14	The utilization rate (% of units occupied) for applicant program.	Total Points Possible: 15 95%+ = 15 pts <95%-90% = 11 pts <90%-85% = 7 pts 80% = 3 pts < 80% or no data= 0 pt.

**Section D Serving Priority Populations (20 pts)**

Measurement	Source	Data Calculations	Scoring Values
<b>Prioritization Based on Need</b>	Project Application Section 8 - first 3 questions "Families with children/unaccompanied youth" "prioritization" and "Family Unit"	Commit to only accepting families with children and/or unaccompanied youth eligible for project type assigned through CES, prioritizing clients for assistance based on CoC-wide established criteria and will not deny any family assistance to the Project, or separate the members of the family, as a condition of entry.	Total Points Possible: 5 IF YES to all three then scores 5 pts. No to any will result in 0 pts.
<b>Priority Population-Applicable Sub-Populations</b>	Project Application Section 6, Target Population Chart	PSH: Either Chronically Homeless or DedicatedPLUS Families with Children and/or Chronically Homeless Veterans in addition to at least one of the following: Persons with Substance Abuse Disorders, Persons with Severe Mental Illnesses, Survivors of Domestic Violence. NOTE all Beds must be dedicated to chronically homeless persons or DedicatedPLUS RRRH: Unaccompanied LGBTQ Youth, Youth Families with Children, Survivors of Domestic Violence/Victims of Human Trafficking TH or TH-RRH: DV or youth	Total Points Possible = 5 pts. If all selected populations have "yes" for all inclusive - 5 points For any "no" in all inclusive - 0 points unless explanation matches Housing First principles
<b>Promotion of Racial Equity</b>	Section 15	The degree to which the project reviewed program participant outcomes with an equity lens, has identified barriers to participation by persons of different races and ethnicities and has taken steps to eliminate the identified barriers including policies and processes to address racial disparities	Total Points Possible: 10 2 pts. For each question a, b, c, d and e in Section 15 answered yes and has fully described their answers.

**Objective**

**Section E: HMIS Data Quality - 30 Points**

Measurement	Report	Data Calculations	Scoring Values
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<b>Project's Data Quality:</b>	HUD CoC APR Verified by HMIS Lead	Includes data on entry of PII, disabling condition, timeliness of data entry, income data, and exit data	Total Points Possible: 25 95% + = 25 pts 89% to 94 % = 20 pts. 83% to 88 % = 15 pts 77% to 82 % = 10 pts 76% to 71% = 5 pts. Under 71% = 0 pts
<b>HMIS Policies and Procedures</b>	Project Application Section 9	Answers Yes to Commitment to Future HMIS Continuity, Current Inclusion in HMIS Bed/Services Inventory, Commitment to Future HMIS Bed/Services Inventory Continuity, Compliance with HMIS License and Training Requirements, Commitment to Ensure Participation in HMIS Annual Refresher Training and Commitment to Enter Universal Data Elements & Personal Identifying Information Into HMIS. DV providers commit to these standards using a comparable data base.	If YES to all Add 5 pts. NO to any application receives 0 pts.
<b>Section F: Agency Commitment to COC Priorities - (35 points)</b>			
<b>Measurement</b>	<b>Source</b>	<b>Data Calculations</b>	<b>Scoring Values</b>
<b>Alignment with Housing First Principles</b>	Project Application Section 7-" Eligibility Chart and Termination Chart"	<b>To what extent do the project's written policies and procedures ensure that participants are not screened out based on the following criteria?</b> <ul style="list-style-type: none"> <li>• Having too little or no income</li> <li>• Failure to participate in supportive services (with exception for HUD-mandated monthly case management meeting for RRH program participants or after stably housed).</li> <li>• Active, or history of, substance use or a substance use disorder</li> <li>• Having a criminal record (with exceptions for state-mandated restrictions)</li> <li>• History or survivor of domestic violence</li> </ul>	Total Points Possible: 15 Receive 1 pt. for each NO answer in either column for numbers 1-15. Subtract 1 pts for each Yes answer in the Termination Table for EITHER column for answers 1-6 UNLESS, in the reviewers opinion, a justifiable reason was given for the termination
<b>Type of Unit and Total Units</b>	Project Application Section 3 - "Number of Homeless Housing Units"	PSH: Add 1 pt. for first 10 units and .25 for each additional unit RRH: Add 1 pt. for first 10 units and .25 for each additional unit YTH: Add 1 pt. for first 10 units and .25 for each additional unit	Total Points Possible: 10
<b>Coordinated Entry Process</b>	Project Application Section 8 and Section 18	Answered YES to CES MOU and CES Continuity in Section 8. In answered question in Section 18 "Project Scope" Proposal describes how the project will comply with the COC's Coordinated Entry procedures and applicant demonstrates a understanding of the COC Coordinated Entry process.	Total Points Possible: 10 Yes to both CES MOU and CES Continuity = 5 pts Section 18: Project Narrative demonstrates knowledge of CES & that project will accept referrals from CES = 5 pts Project narrative includes CES as referral for housing but not for services - 3 pts Project narrative suggests that some/all referrals will come from sources other than CES - Threshold
<b>Section G - COC Participation (CoC Priority Part 2) (15 Points)</b>			
<b>Measurement</b>	<b>Report</b>	<b>Data Calculations</b>	<b>Scoring Values</b>

**Objective**

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**Objective**

**Objective**

**Objective**

Objective

<b>COC Participation</b>	PIT and HIC Involvement Section 9 verified by HSN	Will commit to participation in 2022 PIT Count (No PIT in 2021)	Total Points Possible: 3 PIT Participation = 3 pts
<b>COC Participation</b>	COC membership participation Section 9 verified by HSN	<b>Sign Up Sheets (Virtual meeting logs) for CoC General Membership Participation</b>	Total Points Possible: 3 If attended = 2-3, Add 1 pts. If attended = 4-7, Add 2 pts. If attended = 8 or more, Add 3 pts.
<b>COC Participation</b>	COC committee participation Section 9 verified by HSN	<b>Sign Up Sheets (Virtual meeting logs) for CoC Committees Participation</b>	Total Points Possible: 3 If attended = 2-3, Add 1 pts. If attended = 4-7, Add 2 pts. If attended = 8 or more, Add 3 pts.
<b>Direct Practice Skills Training (e.g., Motivational Interviewing, Trauma-Informed Care, DV &amp; Human Trafficking)</b>	Participation in Training Section 9 verified by HSN	<b>Sign Up Sheets (Virtual meeting logs) for CoC Sponsored Training</b>	Total Points Possible: 6 If 100% of direct practice & program supervisory staff having served more 6 months attended at least 1 training; get 6 pts If 75% to get 3 points.
<b>Section H - Geographic Coverage and Responsiveness to Jurisdictional Priorities (6 Points)</b>			
<b>Measurement</b>	<b>Report</b>	<b>Data Calculations</b>	<b>Scoring Values</b>
<b>Service Coverage of Jurisdiction</b>	Application must specify any and all Jurisdictions covered Section 5	<b>For each Jurisdiction Applicant Commits to Serve Clients from : ADD 1 points</b>	Total Points Possible: 6
<b>Section I - Project Design - (68 Points)</b>			
<b>Measurement</b>	<b>Report</b>	<b>Data Calculations</b>	<b>Scoring Values</b>
<b>Project Budget</b>	Project Application Section 13 budget charts; For housing projects - Section 3 - Number of HUD CoC Funded Units (qst 3.3) For Services Projects - "proposed New Staffing FTE", or items identified as HUD funded in "Other support services chart"	Does budget request match the number of housing units identified? Is the Budget reasonable? Does budget request match the number of FTEs identified? (Contracts are currently capped at \$65,000 per FTE including salary, benefits, mileage, and Supervision). Is the budget request supported by the responses to "Funding for Other Supportive Services" for which the applicant noted HUD funds would be sought?	Total Points Possible: 5 Awarded by scoring review scaled from 0 to 5

Objective

<b>Design of Housing</b>	Project Application Section 19 and Section 11 for All Housing	Housing where participants will reside is fully described and appropriate to the program design proposed. Sample factors for consideration: Does the type and time of subsidy make sense for the housing project (ex. RRH is time limited, maximum of 24 months)?; Is the housing accessible to community amenities such as grocery stores, pharmacy, schools, jobs and healthcare? (Section 11 for Project based); Do scattered site projects show how projects will be identified, that landlords will sign HAP agreements, and that tenants will sign leases?; If serving chronically homeless persons, does the design require more than a small minority of chronically homeless people (singles, not families) to share units?	Total Points Possible: 5 Design is strong and demonstrates strong ability to operate a successful housing project - 5 pts Design is reasonable and demonstrates moderate ability to operate a successful housing project - 3 pts Design does not fit with eligible activities and/or demonstrates poor ability to operate a successful housing project - 0pts
<b>Supportive Services Plan</b>	Project Application Section 18 and Section 4, (Other Support Services Chart) and Section 4, (Current and New Staffing for Housing Stability Case Management)	Supportive Services plan includes provision of comprehensive case management and appropriate supportive services of the type, scale and location to meet the needs of program participants (as well as transportation if necessary), using a Housing First model. Sample criteria include: Is the project staffed appropriately and are staff trained to provide the services?; Is the program design to be accessible to all eligible clients?; Will the project use evidence-based practices including motivational interviewing, trauma informed care, etc?	Total Points Possible: 5 5 Points for strong soundness of design, experience and feasibility 3 points for reasonable design, experience and feasibility 0 points for poor design, experience, reasibility
<b>Supportive Services Plan</b>	Project Application Section 16	Percent of services delivered in the field	Total Points Possible: 5 If 80% or more award 5 pts. If 50% to 79% award 3 pts.
<b>Project Implementation Timeline</b>	Project Application Section 16, project timeline -	Proposed timeline for project implementation and occupancy is reasonable. Activities are described for 60 days, 90 days, 120 and 180 days after award. First client will be housed within 90 days of award and all clients will be housed within 180 days of award.	Total Points Possible: 3 Implementation, occupancy is reasonable; oversight is sufficient (ex. at least quarterly after implementation) - 3 points Implementation, occupancy is reasonable; oversight is insufficient (less than quarterly after implementation) - 1 pts Implementation & oversight are insufficient - 0
<b>Access to Mainstream Benefits</b>	Project Application Section 10	Applicant answered YES and described their approach to increasing access to mainstream benefits	If YES, ADD 3 pts
<b>Access to Mainstream Benefits</b>	Project Application Section 10	Applicant or project partner serves as DCF ACCESS community partner to ensure enrollment in mainstream benefits	If YES, ADD 2 pts. If NO, but will perform same function, ADD 1 pts. If NO, will provide the service, 0 pts.
<b>Access to Transportation</b>	Project Application Section 10	Applicant or project partner has committed to provide transportation and has described the approach and level of transportation.	If YES, ADD 2 pts

**Objective**

<b>Access to Mainstream Benefits</b>	Project Application Section 10	Applicant or project partner has on staff a SOAR Specialist or will enter MOU with SOAR Provider	If YES, ADD 3 pts.
<b>School Liaison</b>	Project Application Section 10	Project partner has committed to have a designated staff person whose responsibilities include ensuring children are enrolled in school and receive appropriate services as required	If YES, ADD 2 pts
<b>Cost Effectiveness</b>	Project Application Section 3 (total beds) and Section 13 Total Income Budget	Project is cost effective Considered Elements: Cost per person served is comparable to COC average within project type. Divide Total Income by Total Beds. Compare with renewal rates	If YES, ADD 5 pts.
<b>Client Satisfaction Surveys</b>	Project Application Section 7	Award 5 points for a "Yes" response. If response is "No" then the project will score zero	If YES, ADD 2 pts
<b>Experience with Housing First and Housing First Training</b>	Project Application Section 18 (experience with housing first, housing first training)	Award up to 5 points if applicant adequately described their experience with HF and their commitment to HF training.	Total Points Possible: 5 Strong experience with housing first implementation and training - 5 pts; Reasonable experience with housing first implementation and training - 3 pts; poor experience - 0 points Sample factors for consideration can include how many years involved with a housing first project, types of trainings attended/conducted, completion of housing first self-assessment tools, etc.
<b>COVID-19</b>	Section 15	The Project has implemented safety protocols to address the safety needs of individuals and families participating in current projects and has identified project eligible individuals and families experiencing homelessness for COVID-19 vaccination based on local protocol.	Total Points Possible: 5 If YES to both safety protocols and vaccinations and fully described each ADD 5 pts. If YES to 1 with a full description ADD 2pts. If NO = 0 pts
<b>Housing Navigation and/or Housing Stability Case Management</b>	Project Application Section 18,	Applicant adequately described their experience with similar or different populations to be served by the applicant and how project will implement Housing First philosophy.	Total Points Possible: 5 Agency already serving the same population in other projects - 5 pts Agency is not serving the same population but has clearly identified how it will assist staff to become competent in housing first implementation - 3 pts Agency's plan is vague and poorly defined - 0 pts
<b>Trauma Informed Care</b>	Project Application Section 18	Applicant adequately described their experience with Trauma Informed Care., question 17.8 Sample criteria for consideration include use of training, feedback from clients, integration into policies and procedures	Total Points Possible: 3 Agency plan is strong - 3 pts Agency plan is reasonable - 2 pts Agency plan is limited - 0 pts
<b>Encouragement of Volunteerism and Employment by Program Participants</b>	Project Application Section 18	Applicant adequately describes how project works to encourage volunteerism and or employment (including, supportive and micro employment) among participants.	Agency plan is strong - 2 pts Agency plan is reasonable - 1 pts Agency plan is limited - 0 pts

Objective

Objective

<b>Gender Inclusion/Non-Discrimination Policy</b>	Section 15	Applicant ensures inclusion and non-discrimination based on equal access criteria	Total Pts = 3 If YES to both question j and k and fully described each ADD 5 pts. If YES to 1 with a full description ADD 2pts. If NO = 0 pts
<b>Participation by population served</b>	Project Application Section 7	Does the agency have a board of directors that includes representation from more than one person with lived experience? Written policies and procedures submitted by the project and narrative response demonstrating participation by persons with lived experience in program design and policy-making?	Total Pts = 3 If YES to both question g, h and I and fully described each ADD 5 pts. If YES to 2 with a full description ADD 3pts. If YES to 1 with a full description ADD 1pt. If NO = 0 pts
<b>Bonus Point Section (20 Points)</b>			
<b>Measurement</b>	<b>Report</b>	<b>Data Calculations</b>	<b>Scoring Values</b>
New PSH or RRH project	TBD	New project applications created through reallocation or the CoC Bonus that	Total Points Possible: 20
<b>266</b>			

**Scoring Overview - DV Bonus**

As determined by the CoC Governance Board, community priority will be given to eligible projects in the following order: Rapid Rehousing (RRH) and Transitional Housing- Rapid Rehousing (TH-RRH). All projects will be scored utilizing the following materials included below under the headings of: Project Application Threshold, Financial Data, project Performance, Serving Priority Populations, Commitment to COC priorities, COC Participation, Geographic Coverage, Project Design, and Bonus.

**Section A: Project Application Threshold**

Eligibility Criteria	Yes	No	Scoring Values
1. Projects applicant and subrecipient are eligible entities and project is in compliance with CoC Interim Rule and subsequent notices, including threshold requirements outlined in the 2021 Notice of Funding Opportunity			<p><b>If any response is 'No' project is not eligible for review unless the criteria is not applicable to project type.</b></p>
2. Agreed to Participate in HMIS or if project is Domestic Violence or Human Trafficking project, must adhere with HMIS data and technical standards in a comparable database.			
3. Applicant has Active SAM registration with current information.			
4. Applicant has Valid DUNS number in application.			
5. Applicant has no Outstanding Delinquent Federal Debts- unless: (a) A negotiated repayment schedule is established and the repayment schedule is not delinquent, or (b) Other arrangements satisfactory to HUD are made before the award of funds by HUD.			
6. Applicant has no Debarments and/or Suspensions -or is proposed to be debarred or suspended from doing business with the Federal Government.			
7. Applicant has disclosed any violations of Federal criminal law - Applicants must disclose in a timely manner, in writing to HUD, all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award.			
8. Applicant has demonstrated the population to be served meets program eligibility requirements.			
9. Applicant complies with HUD headquarter and field office directives. Applicant met HUD Expectations - When considering renewal projects for award.			

10. Applicant demonstrates fiscal and administrative capacity to expend, track and report on grant awards. Financial audit within previous 24 months of submission date.		
11. Projects will participate in and accept 100% of referrals from Coordinated Entry, when it is available for the project type.		
12. Applicant agrees to practice and monitor fidelity to Housing First principles and be low barrier, and scored = or > than 10 on Housing First question Section 7 of Application.		
13. Project has documented the required matching funds		
14. Project is financially feasible		
15. Applicant is active CoC participant.		
16. Project has reasonable costs per program participant.		
17. Documented organizational financial stability, audit shows agency has no major findings. Financial audit completed within previous 24 months of submission date.		
18. Applicant has a Code of Conduct which complies with 2 CFR part 200		
19. Representation at Mandatory RFP Workshop		

**Section B: Project Financial (20 Points)**

Measurement	Source	Data Calculations	Scoring Values
<b>Financials</b>	Audited Financials and 990 submitted as attachment	Review of Auditor's Report	Total Points Possible: 10 No Findings ADD 10pts. If there were minor findings or findings resolved ADD 5 pts. If findings are deemed "significant" then 0 pts.
<b>Repay/Return Grant Funds</b>	Project Application Section 12, question 12.5	Applicant Returned funds to HUD or other federal or state agency within 2 years.	Total Points Possible: 5 No funds returned – ADD 5 pts. If Yes, Explanation addresses all concerns = 3 Explanation addresses some concerns = 1 Explanation fails to address concerns = 0

<p><b>HUD Unresolved Findings</b></p>	<p>Project Application Section 12, question 12.11</p>	<p>Has outstanding obligation/debt to HUD in arrears or with payment schedule pending</p>	<p>Total Points Possible: 5                  No outstanding debt – ADD 5 pts.                  If Yes, documented payment schedule = 2                  If Yes and no documented paymnet schedule then project is ineligible for funding</p>
<p><b>Section C: Project Performance (55 Points)</b></p>			
<p><b>Measurement</b></p>	<p><b>Source</b></p>	<p><b>Data Calculations</b></p>	<p><b>Scoring Values</b></p>
<p><b>RRH and TH Housing Stability:</b>                  % of persons who exited any current RRH or TH project managed by the applicant to a positive housing destination over the last 12 month period</p>	<p>HUD CoC APR or Agency Data</p>	<p>Total persons exiting to positive housing destinations. Numerator is the number exited to stable housing and the demonitor is total exits.</p>	<p>Total Points Possible: 15                  90% + = 15 pts                  85% -89% = 11 pts                  80% - 84% = 7pts                  79%-75% = 3 pts                  &lt; 70%or no data = 0 pts</p>
<p><b>Exits to Homelessness:</b>                  % of program exits to another homeless destination for any housing project managed by the applicant to a positive housing destination over the last 12 month period</p>	<p>HUD CoC APR or Agency Data</p>	<p>Percentage of exits to place not meant for human habitation, emergency shelter, including hotel or motel paid for with emergency shelter voucher, safe haven or transitional housing</p>	<p>Total Points Possible: 15                  5% or less = 15 pts                  6% - 10% = 11 pts                  11% - 15% = 7 pts                  16% - 20% = 3 pts                  &gt; 20% or no data= 0 pts</p>
<p><b>Increase Income and Ability to Live Independently</b></p>	<p>Project Application Section 4 - "Other supportive services chart", 5th row</p>	<p>Project has increased income for projet leavers and stayers as reported in HMIS over the last year and project provides employment services and/or SOAR case management to assist clients to increase income.</p>	<p>Total Points Possible: 13                  If Yes to both 10 pts.: If Yes to one 5 Pts                  If No 0 pts.</p>

**DV Comparable System**



<p><b>Utilization Rate:</b> % of utilization reported on APR or other housing operated by the applicant</p>	<p>HUD CoC APR (Section ?) Verified by HMIS Lead</p>	<p>Enter the utilization rate for applicant program as reported in HUD CoC APR</p>	<p>Total Points Possible: 15 95%+ = 15 pts &lt;95%-90% = 11 pts &lt;90%-85% = 7 pts &lt;85%-80% = 3 pts &lt; 80% or no data= 0 pt.</p>
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**Section D Serving Priority Populations (20 pts)**

Measurement	Source	Data Calculations	Scoring Values
<p><b>Prioritization Based on Need</b></p>	<p>Project Application Section 8 - first 3 questions "Families with children/unaccompanied youth" "prioritization" and "Family Unit"</p>	<p>Commit to accepting 100 percent of the participants that are or will be survivors of domestic violence, dating violence, sexual assault, or stalking, and will not deny any eligible family assistance to the Project, or separate the members of the family, as a condition of entry.</p>	<p>Total Points Possible: 5 IF YES to all three then scores 5 pts. No to any will result in 0 pts.</p>
<p><b>Priority Population-Applicable Sub-Populations</b></p>	<p>Project Application Section 6, Target Population Chart</p>	<p>Will serve all of the following eligible participants: Persons that 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 a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; (ii) Has no other residence; and (iii) Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing.</p>	<p>Total Points Possible = 5 pts. If all selected populations have "yes" for all inclusive - 5 points For any "no" in all inclusive - 0 points unless explanation matches Housing First principles</p>
<p><b>Promotion of Racial Equity</b></p>	<p>Section 15</p>	<p>The degree to which the project reviewed program participant outcomes with an equity lens, has identified barriers to participation by persons of different races and ethnicities and has taken steps to eliminate the identified barriers including policies and processes to address racial disparities</p>	<p>Total Points Possible: 10 ADD 2 pts. For each question a, b, c, d and e in Section 15 answered yes and has fully described their answers.</p>

**Section E: HMIS Data Quality - 30 Points**

**DV Comparable System**

Measurement	Report	Data Calculations	Scoring Values
<b>Project's Data Quality:</b>	HUD CoC APR Verified by HMIS Lead or APR <b>Comparable system</b>	Includes data on entry of PII, disabling condition, timeliness of data entry, income data, and exit data	Total Points Possible: 25 95% + = 25 pts 89% to 94 % = 20 pts. 83% to 88 % = 15 pts
<b>Data Quality Policies and Procedures</b>	Project Application Section 9	Answers Yes to Commitment to Future Data Quality using a comparable data system for Inclusion in Bed/Services Inventory, Commitment to Enter Universal Data Elements & Personal Identifying Information Into Comparable Database that adheres to HMIS data standards.	If YES to all Add 5 pts. NO to any application receives 0 pts.
<b>Section F: Agency Commitment to COC Priorities - (CoC Priority Part 1) (35 points)</b>			
Measurement	Source	Data Calculations	Scoring Values
<b>Alignment with Housing First Principles</b>	Project Application Section 7-" Eligibility Chart and Termination Chart"	<b>To what extent do the project's written policies and procedures ensure that participants are not screened out based on the following criteria?</b> <ul style="list-style-type: none"> <li>• Having too little or no income</li> <li>• Failure to participate in supportive services (with exception for HUD-mandated monthly case management meeting for RRH program participants or after stably housed).</li> <li>• Active, or history of, substance use or a substance use disorder</li> <li>• Having a criminal record (with exceptions for state-mandated restrictions)</li> <li>• History or survivor of domestic violence</li> </ul>	Total Points Possible: 15 Receive 1 pt. for each NO answer in either column for numbers 1-15. Subtract 1 pts for each Yes answer in the Termination Table for EITHER column for answers 1-6 UNLESS, in the reviewers opinion, a justifiable reason was given for the termination
<b>Type of Unit and Total Units</b>	Project Application Section 3 - "Number of Homeless Housing Units"	PSH: Add 1 pt. for first 10 units and .25 for each additional unit RRH and Joint TH and PH-RRH: Add 1 pt. for first 10 units and .25 for each additional unit	Total Points Possible: 10

<b>Coordinated Entry Process</b>	Project Application Section 8 and Section 18	<p>Answered YES to CES MOU and CES Continuity in Section 8. In answered question in Section 18 "Project Scope"</p> <p>Proposal describes how the project will comply with the COC's Coordinated Entry procedures and applicant demonstrates a understanding of the COC Coordinated Entry process.</p>	<p>Total Points Possible: 10</p> <p>Yes to both CES MOU and CES Continuity = 5 points</p> <p>Section 18: Project Narrative demonstrates knowledge of CES and that project will accept referrals from CES - 5 pts</p> <p>Project narrative includes CES as referral for housing but not for services - 3 pts</p> <p>Project narrative suggests that some/all referrals will come from sources other than CES - 0 points</p>
<b>Section G - COC Participation (CoC Priority Part 2) (15 Points)</b>			
<b>Measurement</b>	<b>Report</b>	<b>Data Calculations</b>	<b>Scoring Values</b>
<b>COC Participation</b>	PIT and HIC Involvement Section 9 verified by HSN	Will commit to participation in 2022 PIT Count	<p>Total Points Possible: 3</p> <p>PIT Participation = 3 pts</p>
<b>COC Participation</b>	COC membership participation Section 9 verified by HSN	<b>Sign Up Sheets (Virtual meeting logs) for CoC General Membership Participation</b>	<p>Total Points Possible: 3</p> <p>If attended = 2-3, Add 1 pts.</p> <p>If attended = 4-7, Add 2 pts.</p> <p>If attended = 8 or more, Add 3 pts.</p>
<b>COC Participation</b>	COC committee participation Section 9 verified by HSN	<b>Sign Up Sheets (Virtual meeting logs) for CoC Committees Participation</b>	<p>Total Points Possible: 3</p> <p>If attended = 2-3, Add 1 pts.</p> <p>If attended = 4-7, Add 2 pts.</p> <p>If attended = 8 or more, Add 3 pts.</p>

<p><b>Direct Practice Skills Training</b> (e.g., Motivational Interviewing, Trauma-Informed Care, DV &amp; Human Trafficking)</p>	<p>Participation in Training Section 9 verified by HSN</p>	<p><b>Sign Up Sheets (Virtual meeting logs) for CoC Sponsored Training</b></p>	<p>Total Points Possible: 6 If 100% of direct practice &amp; program supervisory staff having served more 6 months attended at least 1 training get 6 pts. If 75% to get 3 points.</p>
<p><b>Section H - Geographic Coverage and Responsiveness to Jurisdictional Priorities (6 Points)</b></p>			
<p><b>Measurement</b></p>	<p><b>Report</b></p>	<p><b>Data Calculations</b></p>	<p><b>Scoring Values</b></p>
<p><b>Service Coverage of Jurisdiction</b></p>	<p>Application must specify any and all Jurisdictions covered Section 5</p>	<p><b>For each Jurisdiction Applicant Commits to Serve Clients from : ADD 1 points</b></p>	<p>Total Points Possible: 6</p>
<p><b>Section I - Project Design - (68 Points)</b></p>			
<p><b>Measurement</b></p>	<p><b>Report</b></p>	<p><b>Data Calculations</b></p>	<p><b>Scoring Values</b></p>
<p><b>Project Budget</b></p>	<p>Project Application Section 13 budget charts; For housing projects - Section 3 - Number of HUD CoC Funded Units (qst 3.3) For Services Projects - "proposed New Staffing FTE", or items identified as HUD funded in "Other support services chart"</p>	<p>Does budget request match the number of housing units identified? Is the Budget reasonable? Does budget request match the number of FTEs identified ? (Contracts are currently capped at \$65,000 per FTE including salary, benefits, mileage, and Supervision) Is the budget request supported by the responses to "Funding for Other Supportive Services" for which the applicant noted HUD funds would be sought?</p>	<p>Total Points Possible: 5 Awarded by scoring review scaled from 0 to 5</p>

<p><b>Design of Housing</b></p>	<p>Project Application Section 19</p>	<p>Housing where participants will reside is fully described and appropriate to the program design proposed. Does the narrative identify how safety factors will be built into housing election; Is the housing accessible to community amenities such as grocery stores, pharmacy, schools, jobs and healthcare?; Does the narrative describe how units will be identified, how landlords will sign HAP agreements, and that tenants will sign leases?</p>	<p>Total Points Possible: 5                  Design is strong and demonstrates strong ability to operate a successful housing project - 5 pts                  Design is reasonable and demonstrates moderate ability to operate a successful housing project - 3 pts                  Design does not fit with eligible activities and/or demonstrates poor ability to operate a successful housing project - 0pts</p>
<p><b>Supportive Services Plan</b></p>	<p>Project Application Section 18 and Section 4, (Other Support Services Chart) and Section 4, (Current and New Staffing for Housing Stability Case Management)</p>	<p>Supportive Services plan includes provision of comprehensive case management and appropriate supportive services of the type, scale and location to meet the needs of program participants (as well as transportation if necessary), using a Housing First model.                  Sample criteria include: Is the project staffed appropriately and are staff trained to provide the services?; Is the program design to be accessible to all eligible clients?; Will the project use evidence-based practices including motivational interviewing, trauma informed care, etc? Does the program describe a safety plan fro participants?</p>	<p>Total Points Possible: 5                  5 Points for strong soundness of design, experience and feasibility                  3 points for reasonable design, experience and feasibility                  0 points for poor design, experience, reasibility</p>
<p><b>Supportive Services Plan</b></p>	<p>Project Application Section 16</p>	<p>Percent of services delivered in the field</p>	<p>Total Points Possible: 5                  If 80% or more award 5 pts. : If 50% to 79% award 3 pts.</p>

<p><b>Project Implementation Timeline</b></p>	<p>Project Application Section 16, project timeline -</p>	<p>Proposed timeline for project implementation and occupancy is reasonable. Activities are described for 60 days, 90 days, 120 and 180 days after award. First client will be housed within 90 days of award and all clients will be housed within 180 days of award.</p>	<p>Total Points Possible: 3                  Implementation, occupancy is reasonable; oversight is sufficient (ex. at least quarterly after implementation) - 3 points                  Implementation, occupancy is reasonable; oversight is insufficient (less than quarterly after implementation) - 1 pts                  Implementation &amp; oversight are insufficient - 0</p>
<p><b>Access to Mainstream Benefits</b></p>	<p>Project Application Section 10</p>	<p>Applicant answered YES and described their approach to increasing access to mainstream benefits</p>	<p>Total Points Possible: 3                  Implementation, occupancy is reasonable; oversight is sufficient (ex. at least quarterly after implementation) - 3 points                  Implementation, occupancy is reasonable;</p>
<p><b>Access to Mainstream Benefits</b></p>	<p>Project Application Section 10</p>	<p>Applicant or project partner serves as DCF ACCESS community partner to ensure enrollment in mainstream benefits</p>	<p>If YES, ADD 2 pts.                  If NO, but will perform same function, ADD 1 pts. If NO, will provide the service, 0 pts.</p>
<p><b>Access to Transportation</b></p>	<p>Project Application Section 10</p>	<p>Applicant or project partner has committed to provide transportation and has described the approach and level of transportation.</p>	<p>If YES, ADD 2 pts.                  If NO, but will perform same function, ADD 1 pts. If NO, will provide the service, 0 pts.</p>
<p><b>Access to Mainstream Benefits</b></p>	<p>Project Application Section 10</p>	<p>Applicant or project partner has on staff a SOAR Specialist or will enter MOU with SOAR Provider</p>	<p>If YES, ADD 3 pts.</p>

<p><b>School Liaison</b></p>	<p>Project Application Section 10</p>	<p>Project partner has committed to have a designated staff person whose responsibilities include ensuring children are enrolled in school and receive appropriate services as required</p>	<p>If YES, ADD 2 pts</p>
<p><b>Cost Effectiveness</b></p>	<p>Project Application Section 3 (total beds) and Section 13 Total Income Budget</p>	<p>Project is cost effective Considered Elements: Cost per person served is comparable to COC average within project type. Divide Total Income by Total Beds. Compare with renewal rates</p>	<p>If YES, ADD 5 pts.</p>
<p><b>Client Satisfaction Surveys</b></p>	<p>Project Application Section 7</p>	<p>Award 5 points for a “Yes” response. If response is "No" then the project will score zero</p>	<p>If YES, ADD 2 pts</p>
<p><b>Experience with Housing First and Housing First Training</b></p>	<p>Project Application Section 18 (experience with housing first, housing first training)</p>	<p>Award up to 5 points if applicant adequately described their experience with HF and their commitment to HF training.</p>	<p>Total Points Possible: 5                  Strong experience with housing first implementation and training - 5 pts;                  Reasonable experience with housing first implementation and training - 3 pts;                  poor experience - 0 points                  Sample factors for consideration can include how many years involved with a housing first project, types of trainings attended/conducted, completion of housing first self-assessment tools, etc.</p>

<p><b>COVID-19</b></p>	<p>Section 15</p>	<p>The Project has implemented safety protocols to address the safety needs of individuals and families participating in current projects and has identified project eligible individuals and families experiencing homelessness for COVID-19 vaccination based on local protocol.</p>	<p>Total Points Possible: 5 If YES to both safety protocols and vaccinations and fully described each ADD 5 pts. If YES to 1 with a full description ADD 2pts. If NO = 0 pts</p>
<p><b>Housing Navigation and/or Housing Stability Case Management</b></p>	<p>Project Application Section 18,</p>	<p>Award up to 5 points if applicant adequately described their experience with similar or different populations to be served by the applicant and how project will implement Housing First philosophy.</p>	<p>Total Points Possible: 5 Agency already serving the same population in other projects - 5 pts Agency is not serving the same population but has clearly identified how it will assist staff to become competent in housing first implementation - 3 pts Agency's plan is vague and poorly defined - 0 pts</p>
<p><b>Trauma Informed Care</b></p>	<p>Project Application Section 18</p>	<p>Award up to 5 points if applicant adequately described their experience with Trauma Informed Care., question 17.8 Sample criteria for consideration include use of training, feedback from clients, integration into policies and procedures</p>	<p>Total Points Possible: 3 Agency plan is strong - 3 pts Agency plan is reasonable - 2 pts Agency plan is limited - 0 pts</p>
<p><b>Encouragement of Volunteerism and Employment by Program Participants</b></p>	<p>Project Application Section 18</p>	<p>Award up to 5 points in applicant adequately describes how project works to encourage volunteerism and or employment (including, supportive and mirco employment) among participants.</p>	<p>Agency plan is strong - 2 pts Agency plan is reasonable - 1 pts Agency plan is limited - 0 pts</p>



## Scoring Criteria - Renewal

Project Name: 2021 RRH 1      Project Number: FL0562L4H072005      Final Score: 160  
 Project Type: RRH

### Section A: Project Renewal Threshold Criteria (Section I of the Application)

Eligibility Criteria	Yes	No
1. Projects must be in compliance with CoC Interim Rule and subsequent notices, including threshold requirements outlined in the 2021 Notice of Funding Opportunity	Yes	
2. Agreed to Participate in HMIS or if project is Domestic Violence or Human Trafficking project, must adhere with HMIS data and technical standards within a comparable database.	Yes	
3. Applicant has Active SAM registration with current information.	Yes	
4. Applicant has Valid DUNS number in application.	Yes	
5. Applicant has no Outstanding Delinquent Federal Debts- unless: (a) A negotiated repayment schedule is established and the repayment schedule is not delinquent, or (b) Other arrangements satisfactory to HUD are made before the award of funds by HUD.	Yes	
6. Applicant has no Debarments and/or Suspensions -or is proposed to be debarred or suspended from doing business with the Federal Government.	Yes	
7. Applicant has disclosed any violations of Federal criminal law - Applicants must disclose in a timely manner, in writing to HUD, all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award.	NA	
8. Applicant has demonstrated the population to be served meets program eligibility requirements.	Yes	
9. Applicant complies with headquarter and field office directives. Applicant met HUD Expectations - When considering renewal projects for award, HUD will review information in eLOCCS; Annual Performance Reports (APRs); and information provided from the local HUD CPD Field Office, including monitoring reports and A-133 audit reports as applicable, and performance standards on prior grants.	Yes	

10. Applicant demonstrates fiscal and administrative capacity to expend, track and report on grant awards.	Yes	
11. Applicant participates in and accepts 100% of participant referrals from CoC Coordinated Entry process.	Yes	
12. Applicant agrees to practice and monitor fidelity to Housing First principles and be low barrier, and score equals or greater than ten (10) on Housing First question Section 7 of Application.	Yes	
13. Project has documented the required matching funds	Yes	
14. Project is financially feasible.	Yes	
15. Applicant is active CoC participant.	Yes	
16. Commit to prioritizing eligible families with children and/or unaccompanied youth assigned through CES, prioritizing clients for assistance based on CoC-wide established criteria and will not deny any family assistance to the Project, or separate the members of the family, as a condition of entry.	Yes	
17. Documented organizational financial stability, audit shows agency has no major findings. Financial audit completed within previous 24 months of submission date.	Yes	
18. Applicant has a Code of Conduct which complies with 2 CFR part 200	Yes	

**Section B: Project Financial- 30 Points**

Measurement	Source	Data Calculations	Scoring Values	Score
<b>Financials</b>	Audited Financials and 990 submitted as attachment	Review of Auditor's Report	Total Points Possible: 10 No Findings ADD 10pts. If there were minor findings or findings resolved ADD 5 pts. If findings are deemed "significant" then 0 pts.	<b>5</b>

<b>Unspent HUD Funds</b>	Project Application Section 11	Project's last full grant year shows unspent HUD COC funds	Total Points Possible: 10 spending at 97-100% = 10 points; 91-96% = 8 points; 85-90%=5 points; less than 85% = 0 points	5
<b>Repay/Return Grant Funds</b>	Project Application Section 11	Applicant Returned funds to HUD or other federal or state agency within 2 years.	Total Points Possible: 5 No funds returned – ADD 5 pts. If Yes, Explanation addresses all concerns = 3 Explanation addresses some concerns = 1 Explanation fails to address concerns = 0	5
<b>HUD Unresolved Findings</b>	Project Application Section 11	Has no outstanding obligation/debt to HUD in arrears	Total Points Possible: 5 No outstanding debt – ADD 5 pts. If Yes, documented payment schedule = 2 If Yes and no documented payment schedule then project is ineligible for funding	5
<b>Section C: Project Performance- 50 Points</b>			<b>Total Points Section B</b>	<b>20</b>
<b>Measurement</b>	<b>Source</b>	<b>Data Calculations</b>	<b>Scoring Values</b>	

<p><b>PSH Housing Stability:</b> % of persons who remained in the PH project at the end of the operating year or exited to a permanent housing destination</p>	<p>HUD CoC APR or Section 13. Verified by HMIS Lead</p>		<p>Total Points Possible: 20 92% + = 20 pts 87% -91% = 15 pts 82% - 86% = 10 pts 79% - 81% = 5 pts &lt; 79% = 0 pts</p>	<p>NA</p>
<p><b>RRH and TH Housing Stability:</b> % of persons who exited to a positive housing destination</p>	<p>HUD CoC APR or Section 13. Verified by HMIS Lead</p>	<p>Total persons exiting to positive housing destinations. Numerator is the number exited to stable housing and the demonitor is total exits.</p>	<p>Total Points Possible: 20 90% + = 20 pts 83% -89% = 15 pts 76% - 82% = 10 pts 70% - 75% = 5 pts &lt; 70% = 0 pts</p>	<p>3</p>
<p><b>Exits to Homelessness:</b> % of program exits to another homeless destination</p>	<p>HUD CoC APR or Section 13. Verified by HMIS Lead</p>	<p>Percentage of exits to place not meant for human habitation, emergency shelter, including hotel or motel paid for with emergency shelter voucher, safe haven or transitional housing</p>	<p>Total Points Possible: 10 5% or less = 10 pts 6% - 10% = 8 pts 11% - 15% = 6 pts 16% - 20% = 4 pts &gt; 20% = 0 pts</p>	<p>6</p>

<p><b>Increase Income and Ability to Live Independently</b></p>	<p>HUD CoC APR or Agency Data from Section 13</p>	<p>Project has increased income for project leavers and stayers as reported in HMIS over the last year and project provides employment services and/or SOAR case management to assist clients to increase income.</p>	<p>Total Points Possible: 10  IF PSH Project 20% + = 10 pts  25% - 19% =7 pts  10% - 18% =4 pts  5% - 9% =4 pts  &lt; 05% = 0 pts  IF RRH or TH Project  40% + =10 pts  39% -30% = 8 pts  29% - 20% =6 pts  10% - 10% =4 pts</p>	<p>0</p>
<p><b>Utilization Rate:</b> % of utilization reported on APR</p>	<p>HUD CoC APR or Section 13. Verified by HMIS Lead</p>	<p>The utilization rate (% of units occupied) for applicant program.</p>	<p>Total Points Possible: 10  95%+ = 10 pts  &lt;95%-90% = 8 pts  &lt;90%-85% = 5 pts  &lt;85%-80% = 2 pts  &lt; 80% = 0 pt</p>	<p>8</p>
<p><b>Section D Serving Priority Populations - 20 pts</b></p>			<p><b>Total Points Section C</b></p>	<p><b>17</b></p>
<p><b>Measurement</b></p>	<p><b>Source</b></p>	<p><b>Data Calculations</b></p>	<p><b>Scoring Values</b></p>	
<p><b>Street Homeless Placements:</b> % of program participants entering from a place not meant for human habitation</p>	<p>HUD CoC APR Verified by HMIS Lead</p>	<p>The percentage of participants entering the project for the grant year that are from a place not meant for human habitation</p>	<p>Total Points Possible: 10  IF PSH or RRH Project  100% + = 10 pts  &lt; 100% = 0 pts  IF TH Project  100% + = 10 pts  &lt; 100% = 0 pts</p>	<p>10</p>

<b>Promotion of Racial Equity</b>	Section 14	The degree to which the project reviewed program participant outcomes with an equity lens, has identified barriers to participation by persons of different races and ethnicities and has taken steps to eliminate the identified barriers including policies and processes to address racial disparities	Total Points Possible: 10 ADD 2 pts. For each question a, b, c, d and e in Section 15 answered yes and has fully described their answers.	8.5
<b>Section E: HMIS Data Quality - 30 Points</b>			<b>Total Points Section D</b>	<b>18.5</b>
<b>Measurement</b>	<b>Report</b>	<b>Data Calculations</b>	<b>Scoring Values</b>	
<b>Project's Data Quality:</b>	HUD CoC APR Verified by HMIS Lead	Includes data on entry of PII, disabling condition, timeliness of data entry, income data, and exit data	Total Points Possible: 25 95% + = 25 pts 89% to 94 % = 20 pts. 83% to 88 % = 15 pts 77% to 82 % = 10 pts 76% to 71% = 5 pts. Under 71% = 0 pts	0
<b>HMIS Policies and Procedures</b>	Project Application Section 9	Answers Yes to Commitment to Future HMIS Continuity, Commitment to Future HMIS Bed/Services Inventory Continuity, Compliance with HMIS License and Training Requirements, Commitment to Ensure Participation in HMIS Annual Refresher Training and Commitment to Enter Universal Data Elements & Personal Identifying Information Into HMIS.	If YES to all Add 5 pts. NO to any application receives 0 pts.	5
<b>Section F: Agency Commitment to COC Priorities - 55 points</b>			<b>Total Points Section E</b>	<b>5</b>
<b>Measurement</b>	<b>Report</b>	<b>Data Calculations</b>	<b>Scoring Values</b>	
<b>Alignment with Housing First</b>	Project Application Section 7	To what extent do the project's written policies and procedures ensure that participants are not screened out	Total Points Possible: 15 Receive 1 pt. for each NO	15
<b>Type of Unit and Total Units</b>	Project Application Section 3	PSH: Add 1 pt. for first 10 units and .25 for each additional unit (COC and Match funded) RRH: Add 1 pt. for first 10 units and .25 for each additional unit (COC and Match funded)	Total Points Possible: 10	6

<b>Filing of APR</b>	APR will be verified by HSN. Section 11	Applicant timely and successfully filed APR	Total Points Possible: 5 If filed on time receive full pts. If filed or late receive zero pts.	5
<b>COC Participation</b>	PIT and HIC Involvement Section 9 verified by HSN	Will commit to participation in 2022 PIT Count (No PIT in 2021) Application	Total Points Possible: 5 PIT Participation = 5 pts	5
<b>COC Participation</b>	COC membership participation Section 9 verified by HSN	Sign Up Sheets (Virtual meeting logs) for CoC General Membership Participation	Total Points Possible: 5 If attended = 2-3, Add 2 pts. If attended = 4-7, Add 4 pts. If attended = 8 or more, Add 5 pts.	5
<b>COC Participation</b>	COC membership participation Section 9 verified by HSN	Sign Up Sheets (Virtual meeting logs) for CoC Committee Participation	Total Points Possible: 5 If attended = 2-3, Add 2 pts. If attended = 4-7, Add 4 pts. If attended = 8 or more, Add 5 pts.	5

<b>Direct Practice Skills Training</b> (e.g., Motivational Interviewing, Trauma-Informed Care, DV & Human Trafficking)	Participation in Training Section 4 verified by HSN	Sign Up Sheets (Virtual meeting logs) for CoC Sponsored Training	Total Points Possible: 10 If 100% of direct practice & program supervisory staff having served more 6 months attended at least 1 training; If 75% to get 5 points.	10
<b>Section G - Geographic Coverage and Responsiveness to Jurisdictional Priorities - 6 Points</b>			<b>Total Points Section F</b>	<b>51</b>
<b>Measurement</b>	<b>Report</b>	<b>Data Calculations</b>	<b>Scoring Values</b>	
<b>Service Coverage of Jurisdiction</b>	Application must specify any and all Jurisdictions covered Section 5	For each Jurisdiction Applicant Commits to Serve Clients from : ADD 1 point	Total Points Possible: 6	6
<b>Section H - Project Design - 45 Possible Points</b>			<b>Total Points Section G</b>	<b>6</b>
<b>Measurement</b>	<b>Report</b>	<b>Data Calculations</b>	<b>Scoring Values</b>	
<b>Access to Mainstream Benefits</b>	Project Application Section 10	Applicant or project partner serves as DCF ACCESS or community partner agrees to ensure enrollment in mainstream benefits	If YES, ADD 5 pts. If NO, but will perform same function, ADD 2 pts.	5
<b>Access to Mainstream Benefits</b>	Project Application Section 10	Applicant or project partner has on staff a SOAR Specialist or will enter MOU with SOAR Provider	If YES, ADD 5 pts.	5
<b>Access to Transportation</b>	Project Application Section 10	Applicant or project partner has committed to provide transportation and has described the approach and level of transportation.	If YES, ADD 5 pts.	5



<b>School Liaison</b>	Project Application Section 10	Project partner has committed to have a designated staff person whose responsibilities include ensuring children are enrolled in school and receive appropriate services as required	If YES, ADD 5 pts.	5
<b>Cost Effectiveness</b>	Project Application Section 3 (total beds) and Section 12 Total Income Budget. Scored in Section 13	Project is cost effective Considered Elements: Cost per person served is comparable to COC average within project type. Divide Total Budget Income by Total Beds.	If YES, ADD 5 pts.	3
<b>Client Satisfaction Surveys</b>	Project Application Section 7	Award 5 points for a “Yes” response. If response is "No" then the project will score zero	If YES, ADD 5 pts.	5
<b>COVID-19</b>	Section 14	The Project has implemented safety protocols to address the safety needs of individuals and families participating in current projects and has identified project eligible individuals and families experiencing homelessness for COVID-19 vaccination based on local protocol.	If YES to both safety protocols and vaccinations and fully described each ADD 5 pts. If YES to 1 with a full description ADD 2pts. If NO = 0 pts	5
<b>Gender Inclusion/Non-Discrimination Policy</b>	Section 14	Applicant ensures inclusion and non-discrimination based on equal access criteria	If YES to both question j and k and fully described each ADD 5 pts. If YES to 1 with a full description ADD 2pts. If NO = 0 pts	4.5

<b>Gender Inclusion/Non-Discrimination Policy</b>	Section 15	Applicant ensures inclusion and non-discrimination based on equal access criteria	Total Pts = 3 If YES to both question j and k and fully described each ADD 5 pts. If YES to 1 with a full description ADD 2pts. If NO = 0 pts
<b>Participation by population served</b>	Project Application Section 7	Does the agency have a board of directors that includes representation from more than one person with lived experience? Written policies and procedures submitted by the project and narrative response demonstrating participation by persons with lived experience in program design and policy-making?	Total Pts = 3 If YES to both question g, h and I and fully described each ADD 5 pts. If YES to 2 with a full description ADD 3pts. If YES to 1 with a full description ADD 1pt. If NO = 0 pts
<b>Section J (20 Points)</b>			
<b>Measurement</b>	<b>Report</b>	<b>Data Calculations</b>	<b>Scoring Values</b>
<b>Experience Narrative</b>	Section 18	Applicant demonstrates previous performance of the applicant in serving survivors of domestic violence, dating violence, sexual assault, or stalking, and their ability to house survivors and meet safety outcomes. Applicant has an Emergency Transfer Plan. Applicant describes their use of a victim centered approach. Applicant will rapidly move persons into permanent housing.	Total Points Possible: 10 Agency performance is strong - 10 pts Agency performance is reasonable - 5 pts Agency performance is limited - 0 pts
<b>Demonstrating Improved Safety Planning</b>	Section 18	Applicant demonstrates it maintains data and how it reports objective improvement in safety for victims of domestic violence and human trafficking. Applicant provides examples of how they use their HMIS comparable database to assess the special needs of DV/HT project participants. Applicant describes Agency safety plans for participants.	Total Points Possible: 10 Agency performance is strong - 10 pts Agency performance is reasonable - 5 pts Agency performance is limited - 0 pts

Total 274

<b>Participation by population served</b>	Project Application Section 14	Does the agency have a board of directors that includes representation from more than one person with lived experience? Written policies and procedures submitted by the project and narrative response demonstrating participation by persons with lived experience in program design and policy-making?	If YES to both question g, h and I and fully described each ADD 5 pts. If YES to 2 with a full description ADD 3pts. If YES to 1 with a full description ADD 1pt. If NO = 0 pts	4.8
<b>Total Points Section H</b>				<b>42.3</b>
<b>Total Available Points = 236</b>			<b>Applicants Total</b>	<b>159.8</b>

		Page 39 <b>FINAL PROJECT SCORING</b>				Section 1		Section 3		Section 4		Section 5		Section 6		Section 7			Section 8		
						Application Score	Section A - Project Renewal Threshold	Signature of Authorized Representative	Section 3 - Key Description- Housing	Number of Housing Units	Section 4 - Key Description-SS	Direct Practice Skills Training	Section 5 - Geographic Coverage	Geographic area coverage	Target Population(s) and Service to	No Scoring Criteria	Housing First/Zero Barrier	Housing First	Client Satisfaction Surveys	Prioritization Based on Need	Street Homeless Placements: %
App. ID	Project Type	Agency Name	Project Name	EDA #s	Grand Total	Y/N	Y/N	Total	10	Total	10	Total	6	Total		Total	15	5	Total	10	
2021-48	PSH	Grand Avenue Economic Community Dev. Corp	Grand Avenue Economic Community Development Corp-Home New Beginning-Renewal		200.0	Y	Y	10.0	10.0	10.0	10.0	2.0	2.0			20.0	15.0	5.0	10.0	10.0	
2021-51	PSH	Homeless Services Network of Central Florida,	HSN Op & Serv Renewal		192.3	Y	Y	7.3	7.3	10.0	10.0	2.0	2.0			19.0	14.0	5.0	10.0	10.0	
2021-50	PSH	Homeless Services Network of Central Florida,	Homeless Services Network-HUD Leasing:PSH		184.3	Y	Y	10.0	10.0	10.0	10.0	6.0	6.0			19.6	14.6	5.0	10.0	10.0	
2021-37	PSH	Homeless Services Network of Central Florida,	Homeless Services Network-HUD Rental Assistance:PSH		184.0	Y	Y	10.0	10.0	10.0	10.0	6.0	6.0			20.0	15.0	5.0	10.0	10.0	
2021-41	PSH	Seminole County	Seminole County Shelter Plus Care		182.6	Y	Y	10.0	10.0	10.0	10.0	1.0	1.0			20.0	15.0	5.0	10.0	10.0	
2021-53	RRH	Homeless Services Network of Central Florida,	HSN RRH2 Renewal		178.0	Y	Y	10.0	10.0	10.0	10.0	6.0	6.0			19.5	14.5	5.0	10.0	10.0	
2021-43	TH	Covenant House Florida, Inc.	Covenant House Florida ROPAL TH		177.0	Y	Y	3.0	3.0	10.0	10.0	6.0	6.0			20.0	15.0	5.0	10.0	10.0	
2021-45	PSH	Orange County Government	Orange County Shelter Plus Care Renewal Application		175.0	Y	Y	10.0	10.0	10.0	10.0	2.0	2.0			15.0	15.0	0.0	10.0	10.0	
2021-52	RRH	Homeless Services Network of Central Florida,	HSN RRH1 Renewal		159.8	Y	Y	6.0	6.0	10.0	10.0	6.0	6.0			20.0	15.0	5.0	10.0	10.0	
2021-47	PSH	Embrace Families Solutions Inc.	Embrace Families Solutions Inc. + PSH Beacon of Light + Renewal Application		158.0	Y	Y	3.0	3.0	10.0	10.0	1.0	1.0			20.0	15.0	5.0	10.0	10.0	
2021-49	PSH	Osceola County Board of County Commissioners	Osceola County Government Shelter+Care		155.5	Y	Y	10.0	10.0	10.0	10.0	2.0	2.0			15.0	15.0	0.0	10.0	10.0	
2021-44	SO	Covenant House Florida, Inc.	Covenant House Florida- CMO/SSO- Renewal Application		133.0	Y	Y	0.0	0.0	10.0	10.0	6.0	6.0			15.0	15.0	0.0	10.0	10.0	

Section 9					Section 10					Section 11					Section 12		Section 13							Section 14				
CoC Involvement and	2022 PIT Count and submitted and 2021 HIC	CoC membership participation	CoC committee participation	HMIS Policies and Procedures	Increasing access	Access to Mainstream Benefits- DCF	Access to Mainstream Benefits- MOU	Access To Transportation	School Liaison	Program and Fin	Auditor's Report	Unspent HUD Funds	Repay/Return Grant Funds	HUD Unresolved Findings	Filing of APR	Project Budget	No scoring Criteria	Project Performance and Alignment	Housing Stability	Exits to Homelessness	Increase Income	Utilization Rate	Project's Data Quality	Cost Effectiveness	Inclusive Structure and Participation.	Promotion of Racial Equity	COVID-19	Gender
Total	5	5	5	5	Total	5	5	5	5	Total	10	10	5	5	5	Total		Total	20	10	10	10	25	5	Total	10	5	
20.0	5.0	5.0	5.0	5.0	17.5	5.0	5.0	5.0	2.5	33.0	10.0	8.0	5.0	5	5	Page 40		60.0	20.0	10.0	10.0	5.0	10.0	5.0	17.5	3.5	5.0	
20.0	5.0	5.0	5.0	5.0	20.0	5.0	5.0	5.0	5.0	28.0	5.0	8.0	5.0	5	5			53.0	11.0	6.0	10.0	2.0	20.0	4.0	23.0	10.0	5.0	
20.0	5.0	5.0	5.0	5.0	18.3	5.0	5.0	3.3	5.0	30.0	5.0	10.0	5.0	5	5			41.0	20.0	6.0	5.0	0.0	5.0	5.0	19.3	7.3	4.0	
20.0	5.0	5.0	5.0	5.0	10.0	5.0	0.0	5.0	0.0	28.0	5.0	8.0	5.0	5	5			46.0	20.0	4.0	5.0	10.0	5.0	2.0	24.0	10.0	5.0	
20.0	5.0	5.0	5.0	5.0	20.0	5.0	5.0	5.0	5.0	30.0	5.0	10.0	5.0	5	5			48.0	20.0	10.0	10.0	0.0	5.0	3.0	13.6	6.3	0.0	
20.0	5.0	5.0	5.0	5.0	20.0	5.0	5.0	5.0	5.0	30.0	5.0	10.0	5.0	5	5			29.0	3.0	6.0	5.0	10.0	0.0	5.0	23.5	8.5	5.0	
20.0	5.0	5.0	5.0	5.0	20.0	5.0	5.0	5.0	5.0	28.0	5.0	8.0	5.0	5	5			45.0	0.0	10.0	5.0	10.0	15.0	5.0	15.0	4.0	4.3	
20.0	5.0	5.0	5.0	5.0	15.0	5.0	5.0	5.0	0.0	28.0	5.0	8.0	5.0	5	5			55.0	20.0	8.0	10.0	10.0	5.0	2.0	10.0	1.0	2.0	
20.0	5.0	5.0	5.0	5.0	20.0	5.0	5.0	5.0	5.0	25.0	5.0	5.0	5.0	5	5			20.0	3.0	6.0	0.0	8.0	0.0	3.0	22.8	8.5	5.0	
20.0	5.0	5.0	5.0	5.0	20.0	5.0	5.0	5.0	5.0	35.0	10.0	10.0	5.0	5	5			30.0	0.0	0.0	5.0	10.0	10.0	5.0	9.0	1.0	0.0	
20.0	5.0	5.0	5.0	5.0	15.0	5.0	2.5	5.0	2.5	25.0	10.0	0.0	5.0	5	5			40.0	20.0	0.0	10.0	2.0	5.0	3.0	8.5	42	3.0	0.0
20.0	5.0	5.0	5.0	5.0	20.0	5.0	5.0	5.0	5.0	30.0	5.0	10.0	5.0	5	5			5.0						5.0	17.0	4.0	4.3	

					Section 1		Section 3		Section 4				Section 5		Section 6		Section 7			
					Application Score	Section A - Project Renewal Threshold Criteria	Signature of Authorized Representative	Section 3 - Key Description-Housing	Number of Housing Unit	Section 4 - Key Description-SS	Direct Practice Skills Training	Field Based Services	Supportive Services Plan	Section Geographic	Geographic area coverage	Target Population(s)	Priority Population-Applicable Sub-Populations	Housing First/Zero Barrier Approach	Housing First	Client Satisfaction Surveys
App. ID	Project Type	Agency Name	Project Name	EDA#s	Grand Total	Y/N	Y/N	Total	10	Total	6	5	5	Total	6	5	Total	#	2	
2021-46	RRH	Seminole County Victims' Rights Coalition	Project IMAGINE		193.4	Y	Y	10	10	16	6	5	5	6	6	2	1.7	15	#	0
2021-36	RRH	Catholic Charities of Central Florida	DV Bonus Project		174	Y	Y	6	6	11.7	6	4	2	6	6	5	5	15	#	2
					Application Score	Section A - Project Renewal Threshold Criteria	Signature of Authorized Representative	Section 3 - Key Description-Housing	Number of Housing Unit	Section 4 - Key Description-SS	Direct Practice Skills Training	Field Based Services	Supportive Services Plan	Section Geographic	Geographic area coverage	Target Population(s)	Priority Population-Applicable Sub-Populations	Housing First/Zero Barrier Approach	Housing First	Client Satisfaction Surveys
App. ID	Project Type	Agency Name	Project Name	EDA#s	Grand Total	Y/N	Y/N	Total	10	Total	6	5	5	Total	6	5	Total	#	2	
2021-56	PSH	HSN	HSN Housing and Health Care PSH Reallocation or Bonus		211.5	Y	Y	10.0	10.0	12.5	6.0	#	1.5	#	4.0	#	5.0	17.0	#	2.0
2021-40	PSH	Ability Housing, Inc	Central Florida Villages PSH		208.1	Y	Y	10.0	10.0	6.6	1.5	#	1.3	#	3.0	#	2.5	17.0	#	2.0
2021-33	PSH	Ability Housing, Inc	Central Florida Villages PSH		205.9	Y	Y	10.0	10.0	15.0	5.0	#	5.0	#	4.0	#	2.5	17.0	#	2.0
2021-42	PSH	Community Assisted and Supported Living,			174.2	Y	Y	10.0	10.0	5.5	2.5	#	2.0	#	2.0	#	5.0	17.0	#	2.0
2021-31	RRH	IMPOWER, Inc	RRH/Youth -Reallocation		137.3	Y	Y	0.0	0.0	14.0	6.0	#	5.0	#	5.0	#	5.0	17.0	#	2.0
2021-54	RRH	HSN	HSN RRH Rent Assistance New Reallocation or Bonus		0.0	Y	Y	0.0		0.0				#		#		0.0	43	
2021-55	PSH	HSN	HSN PSH Housing portion of Reallocation		0.0	Y	Y	0.0		0.0				#		#		0.0		

Section 8			Section 9					Section 10					Section 11				Section 12		Section 13							
Prioritization Based on	Families with Children, Unaccompanied	CES MOU and CES Continuity	CoC Involvement and Engagement	2022 PIT Count and submitted 2021 HIC	COC membership	COC committee participation	HMIS Policies and Procedures	Increasing access to Mainstream	Increasing access to mainstream benefits	Access to Mainstream	Access to Mainstream Benefits- MOU w/ SOAR Provider	Access To Transportation	School Liaison	Program and Financial	Auditor's Report	Repay/Return Grant	HUD Unresolved Findings	Project Budget	Project Budget	Project Performance and Alignment with SPM	Housing Stability	Exits to Homelessness	Increase Income	Utilization Rate	Project's Data Quality	Cost Effectiveness
Total	5	5	Total	3	3	3	5	Total	3	2	3	2	2	Total	10	5	5	Total	5	Total	15	15	12	13	#	5
5	5	0	10.7	3	3	3	1.7	12	3	2	3	2	2	20	10	5	5	4	4.3	42	7	15	8	0	#	2
5	0	5	14	3	3	3	5	8	3	2	3	0	0	18	10	3	5	3	3	57	15	15	0	13	#	4

Section 8			Section 9					Section 10					Section 11				Section 12		Section 13								
Prioritization Based on	Families with Children, Unaccompanied	CES MOU and CES Continuity	CoC Involvement and Engagement	2022 PIT Count and submitted 2021 HIC	COC membership	COC committee participation	HMIS Policies and Procedures	Increasing access to Mainstream	Increasing access to mainstream benefits	Access to Mainstream	Access to Mainstream Benefits- MOU w/ SOAR Provider	Access To Transportation	School Liaison	Program and Financial	Auditor's Report	Repay/Return Grant	HUD Unresolved Findings	Project Budget	Project Budget	Project Performance and Alignment with SPM	Housing Stability	Exits to Homelessness	Increase Income	Utilization Rate	Project's Data Quality	Cost Effectiveness	
Total	5	5	Total	3	3	3	5	Total	3	2	3	2	2	Total	10	5	5	Total	5	Total	15	15	12	13	#	5	
#	5.0	5.0	14.0	3.0	#	3.0	5.0	12.0	3.0	#	3.0	2.0	2.0	15.0	5.0	#	5.0	#	5.0	47.0	15.0	7.0	5.0	5.0	#	5.0	
#	5.0	2.5	14.0	3.0	#	3.0	5.0	10.5	3.0	#	2.5	2.0	1.0	20.0	10.0	#	5.0	#	5.0	73.0	15.0	15.0	12.0	13.0	#	3.0	
#	5.0	2.5	10.5	2.5	#	3.0	2.0	11.0	2.5	#	2.5	2.0	2.0	20.0	10.0	#	5.0	#	5.0	73.0	15.0	15.0	12.0	13.0	#	3.0	
#	3.3	3.3	8.0	3.0	#	0.0	5.0	10.0	3.0	#	3.0	2.0	0.0	20.0	10.0	#	5.0	#	5.0	41.0	7.0	7.0	12.0	0.0	#	5.0	
#	5.0	2.5	14.0	3.0	#	3.0	5.0	12.0	3.0	#	3.0	2.0	2.0	20.0	10.0	#	5.0	#	3.0	0.0	0.0	0.0	0.0	0.0	#	0.0	
#			0.0					0.0						0.0				#		0.0	Page 42				44		
#			0.0					0.0						0.0				#		0.0							

Section 14					Section 15			Section 17							Section 18	
Inclusive Structure and Participation.	Promotion of Racial Equity	COVID-19	Gender Inclusion/Non-	Participation by population served	New Projects: Key Information	Project Timeline	New Projects: Narrative for Supportive Services	Housing First and Housing First Competency	Housing Navigation and/or Housing Stability Case	Trauma Informed Care	Additional Supportive Services: Volunteerism and or	DV Experience Narrative	DV Safety Planning	New Projects: Narrative for Housing	Project Scope	
Total	10	5	3	3	Total	3	Total	5	5	3	2	10	10	Total	5	
19	10	3	3	3	0	0	28	3.7	4.3	2.7	0.7	8.3	8.3	3.7	3.7	
11	7	0	2	1.7	1	1	11.3	2	5	2.3	0.3	1.7	0	2	2	

Section 14					Section 15			Section 17							Section 18	
Inclusive Structure and Participation.	Promotion of Racial Equity	COVID-19	Gender Inclusion/Non-	Participation by population served	New Projects: Key Information	Project Timeline	New Projects: Narrative for Supportive Services	Housing First and Housing First Competency	Housing Navigation and/or Housing Stability Case	Trauma Informed Care	Additional Supportive Services: Volunteerism and or	Permanent Housing and Healthcare Project, detailed and	Permanent Housing and Healthcare Project Match; Units	Permanent Housing and Healthcare Project Match; Health	New Projects: Narrative for Housing	Project Scope
Total	10	5	3	3	Total	3	Total	5	5	3	2	10	5	5	Total	5
21.0	10.0	5.0	#	3.0	3.0	3.0	31.7	4.7	4.0	2.3	1.0	9.7	5.0	5.0	4.3	4.3
12.4	4.7	3.7	#	2.3	3.0	3.0	18.6	4.3	2.3	1.7	1.3	9.0	0.0	0.0	5.0	5.0
12.3	3.0	4.0	#	2.3	3.0	3.0	11.9	3.3	1.8	2.5	1.0	3.3	0.0	0.0	3.3	3.3
13.7	3.0	4.7	#	3.0	3.0	3.0	22.7	4.7	4.7	3.0	2.0	8.3	0.0	0.0	4.7	4.7
19.0	9.0	4.0	#	3.0	3.0	3.0	14.5	1.5	3.0	3.0	2.0	5.0	0.0	0.0	3.3	3.3
0.0					0.0		0.0								0.0	
0.0					0.0		0.0								0.0	



App. ID	Project Type	Agency Name	Project Name	EDA #s	Application Score Grand Total	Section 1		Section 3		Section 4		Section 5		Section 6		Section 7
						Section A - Project Renewal Threshold Criteria Y/N	Signature of Authorized Representative Y/N	Section 3 - Key Description- Housing Total	Number of Housing Units 10	Section 4 - Key Description-SS Total	Direct Practice Skills Training 10	Section Geographic Coverage Total	Geographic area coverage 6	Target Population(s) and Service to Sub-populations Total	No Scoring Criteria	Housing First/Zero Barrier Approach Total
2021-48	PSH	Grand Avenue Economic Community Dev. Corp.	Grand Avenue Economic Community Development Corp-Home New Beginning-Renewal		200.0	Y	Y	10.0	10.0	10.0	10.0	2.0	2.0			20.0
2021-51	PSH	Homeless Services Network of Central Florida, Inc.	HSN Op & Serv Renewal		192.3	Y	Y	7.3	7.3	10.0	10.0	2.0	2.0			19.0
2021-50	PSH	Homeless Services Network of Central Florida, Inc.	Homeless Services Network-HUD Leasing:PSH		184.3	Y	Y	10.0	10.0	10.0	10.0	6.0	6.0			19.6
2021-37	PSH	Homeless Services Network of Central Florida, Inc.	Homeless Services Network-HUD Rental Assistance:PSH		184.0	Y	Y	10.0	10.0	10.0	10.0	6.0	6.0			20.0
2021-41	PSH	Seminole County	Seminole County Shelter Plus Care		182.6	Y	Y	10.0	10.0	10.0	10.0	1.0	1.0			20.0
2021-53	RRH	Homeless Services Network of Central Florida, Inc.	HSN RRH2 Renewal		178.0	Y	Y	10.0	10.0	10.0	10.0	6.0	6.0			19.5
2021-43	TH	Covenant House Florida, Inc.	Covenant House Florida ROPAL TH		177.0	Y	Y	3.0	3.0	10.0	10.0	6.0	6.0			20.0
2021-45	PSH	Orange County Government	Orange County Shelter Plus Care Renewal Application		175.0	Y	Y	10.0	10.0	10.0	10.0	2.0	2.0			15.0
2021-52	RRH	Homeless Services Network of Central Florida, Inc.	HSN RRH1 Renewal		159.8	Y	Y	6.0	6.0	10.0	10.0	6.0	6.0			20.0
2021-47	PSH	Embrace Families Solutions Inc.	Embrace Families Solutions Inc. + PSH Beacon of Light + Renewal Application		158.0	Y	Y	3.0	3.0	10.0	10.0	1.0	1.0			20.0
2021-49	PSH	Osceola County Board of County Commissioners	Osceola County Government Shelter+Care		155.5	Y	Y	10.0	10.0	10.0	10.0	2.0	2.0			15.0
2021-44	SSO	Covenant House Florida, Inc.	Covenant House Florida- CMO/SSO- Renewal Application		133.0	Y	Y	0.0	0.0	10.0	10.0	6.0	6.0			15.0

Section 8

Section 9

Section 10

App. ID	Project Type	Agency Name	Project Name	EDA #s	7		Section 8		Section 9					Section 10			
					Housing First	Client Satisfaction Surveys	Prioritization Based on Need	Street Homeless Placements: %	CoC Involvement and Engagement	2022 PIT Count and submitted 2021 HIC	COC membership participation	COC committee participation	HMIS Policies and Procedures	Increasing access to	Access to Mainstream Benefits- DCF	ACCESS to Mainstream Benefits- MOU w/ SOAR Provider	Access To Transportation
					15	5	Total	10	Total	5	5	5	5	Total	5	5	5
2021-48	PSH	Grand Avenue Economic Community Dev. Corp.	Grand Avenue Economic Community Development Corp-Home New Beginning-Renewal		15.0	5.0	10.0	10.0	20.0	5.0	5.0	5.0	5.0	17.5	5.0	5.0	5.0
2021-51	PSH	Homeless Services Network of Central Florida, Inc.	HSN Op & Serv Renewal		14.0	5.0	10.0	10.0	20.0	5.0	5.0	5.0	5.0	20.0	5.0	5.0	5.0
2021-50	PSH	Homeless Services Network of Central Florida, Inc.	Homeless Services Network-HUD Leasing:PSH		14.6	5.0	10.0	10.0	20.0	5.0	5.0	5.0	5.0	18.3	5.0	5.0	3.3
2021-37	PSH	Homeless Services Network of Central Florida, Inc.	Homeless Services Network-HUD Rental Assistance:PSH		15.0	5.0	10.0	10.0	20.0	5.0	5.0	5.0	5.0	10.0	5.0	0.0	5.0
2021-41	PSH	Seminole County	Seminole County Shelter Plus Care		15.0	5.0	10.0	10.0	20.0	5.0	5.0	5.0	5.0	20.0	5.0	5.0	5.0
2021-53	RRH	Homeless Services Network of Central Florida, Inc.	HSN RRH2 Renewal		14.5	5.0	10.0	10.0	20.0	5.0	5.0	5.0	5.0	20.0	5.0	5.0	5.0
2021-43	TH	Covenant House Florida, Inc.	Covenant House Florida ROPAL TH		15.0	5.0	10.0	10.0	20.0	5.0	5.0	5.0	5.0	20.0	5.0	5.0	5.0
2021-45	PSH	Orange County Government	Orange County Shelter Plus Care Renewal Application		15.0	0.0	10.0	10.0	20.0	5.0	5.0	5.0	5.0	15.0	5.0	5.0	5.0
2021-52	RRH	Homeless Services Network of Central Florida, Inc.	HSN RRH1 Renewal		15.0	5.0	10.0	10.0	20.0	5.0	5.0	5.0	5.0	20.0	5.0	5.0	5.0
2021-47	PSH	Embrace Families Solutions Inc.	Embrace Families Solutions Inc. + PSH Beacon of Light + Renewal Application		15.0	5.0	10.0	10.0	20.0	5.0	5.0	5.0	5.0	20.0	5.0	5.0	5.0
2021-49	PSH	Osceola County Board of County Commissioners	Osceola County Government Shelter+Care		15.0	0.0	10.0	10.0	20.0	5.0	5.0	5.0	5.0	15.0	5.0	2.5	5.0
2021-44	SSO	Covenant House Florida, Inc.	Covenant House Florida- CMO/SSO- Renewal Application		15.0	0.0	10.0	10.0	20.0	5.0	5.0	5.0	5.0	20.0	5.0	5.0	5.0

App. ID	Project Type	Agency Name	Project Name	EDA #s	School Liaison	Section 11						Section 12		Section 13			
						Program and Financial	Auditor's Report	Unspent HUD Funds	Repay/Return Grant Funds	HUD Unresolved Findings	Filing of APR	Project Budget	No scoring Criteria	Project Performance and Alignment with SPM	Housing Stability	Exits to Homelessness	Increase Income
					5	Total	10	10	5	5	5	Total		Total	20	10	10
2021-48	PSH	Grand Avenue Economic Community Dev. Corp.	Grand Avenue Economic Community Development Corp-Home New Beginning-Renewal		2.5	33.0	10.0	8.0	5.0	5	5			60.0	20.0	10.0	10.0
2021-51	PSH	Homeless Services Network of Central Florida, Inc.	HSN Op & Serv Renewal		5.0	28.0	5.0	8.0	5.0	5	5			53.0	11.0	6.0	10.0
2021-50	PSH	Homeless Services Network of Central Florida, Inc.	Homeless Services Network-HUD Leasing:PSH		5.0	30.0	5.0	10.0	5.0	5	5			41.0	20.0	6.0	5.0
2021-37	PSH	Homeless Services Network of Central Florida, Inc.	Homeless Services Network-HUD Rental Assistance:PSH		0.0	28.0	5.0	8.0	5.0	5	5			46.0	20.0	4.0	5.0
2021-41	PSH	Seminole County	Seminole County Shelter Plus Care		5.0	30.0	5.0	10.0	5.0	5	5			48.0	20.0	10.0	10.0
2021-53	RRH	Homeless Services Network of Central Florida, Inc.	HSN RRH2 Renewal		5.0	30.0	5.0	10.0	5.0	5	5			29.0	3.0	6.0	5.0
2021-43	TH	Covenant House Florida, Inc.	Covenant House Florida ROPAL TH		5.0	28.0	5.0	8.0	5.0	5	5			45.0	0.0	10.0	5.0
2021-45	PSH	Orange County Government	Orange County Shelter Plus Care Renewal Application		0.0	28.0	5.0	8.0	5.0	5	5			55.0	20.0	8.0	10.0
2021-52	RRH	Homeless Services Network of Central Florida, Inc.	HSN RRH1 Renewal		5.0	25.0	5.0	5.0	5.0	5	5			20.0	3.0	6.0	0.0
2021-47	PSH	Embrace Families Solutions Inc.	Embrace Families Solutions Inc. + PSH Beacon of Light + Renewal Application		5.0	35.0	10.0	10.0	5.0	5	5			30.0	0.0	0.0	5.0
2021-49	PSH	Osceola County Board of County Commissioners	Osceola County Government Shelter+Care		2.5	25.0	10.0	0.0	5.0	5	5			40.0	20.0	0.0	10.0
2021-44	SSO	Covenant House Florida, Inc.	Covenant House Florida- CMO/SSO- Renewal Application		5.0	30.0	5.0	10.0	5.0	5	5			5.0			

Section 14

App. ID	Project Type	Agency Name	Project Name	EDA #s	Utilization Rate	Project's Data Quality	Cost Effectiveness	Section 14					Total points available
					10	25	5	Inclusive Structure and Participation.	Promotion of Racial Equity	COVID-19	Gender Inclusion/Non-Discrimination Policy	Participation by population served	
2021-48	PSH	Grand Avenue Economic Community Dev. Corp.	Grand Avenue Economic Community Development Corp-Home New Beginning-Renewal		5.0	10.0	5.0	Total	10	5	5	5	256
2021-51	PSH	Homeless Services Network of Central Florida, Inc.	HSN Op & Serv Renewal		2.0	20.0	4.0	17.5	3.5	5.0	5.0	4.0	
2021-50	PSH	Homeless Services Network of Central Florida, Inc.	Homeless Services Network-HUD Leasing:PSH		0.0	5.0	5.0	23.0	10.0	5.0	4.0	4.0	
2021-37	PSH	Homeless Services Network of Central Florida, Inc.	Homeless Services Network-HUD Rental Assistance:PSH		10.0	5.0	2.0	19.3	7.3	4.0	4.0	4.0	
2021-41	PSH	Seminole County	Seminole County Shelter Plus Care		0.0	5.0	3.0	24.0	10.0	5.0	5.0	4.0	
2021-53	RRH	Homeless Services Network of Central Florida, Inc.	HSN RRH2 Renewal		10.0	0.0	5.0	13.6	6.3	0.0	5.0	2.3	
2021-43	TH	Covenant House Florida, Inc.	Covenant House Florida ROPAL TH		10.0	15.0	5.0	23.5	8.5	5.0	5.0	5.0	
2021-45	PSH	Orange County Government	Orange County Shelter Plus Care Renewal Application		10.0	5.0	2.0	15.0	4.0	4.3	3.3	3.5	
2021-52	RRH	Homeless Services Network of Central Florida, Inc.	HSN RRH1 Renewal		8.0	0.0	3.0	10.0	1.0	2.0	5.0	2.0	
2021-47	PSH	Embrace Families Solutions Inc.	Embrace Families Solutions Inc. + PSH Beacon of Light + Renewal Application		10.0	10.0	5.0	22.8	8.5	5.0	4.5	4.8	
2021-49	PSH	Osceola County Board of County Commissioners	Osceola County Government Shelter+Care		2.0	5.0	3.0	9.0	1.0	0.0	5.0	3.0	
2021-44	SSO	Covenant House Florida, Inc.	Covenant House Florida- CMO/SSO- Renewal Application				5.0	8.5	3.0	0.0	5.0	0.5	
								17.0	4.0	4.3	4.3	4.5	

App. ID	Project Type	Agency Name	Project Name	EDA #s	Application Score	Section 1		Section 3		Section 4				Section 5		Section 6	
						Section A - Project Renewal Threshold Criteria	Signature of Authorized Representative	Section 3 - Key Description-Housing	Number of Housing Units	Section 4 - Key Description-SS	Direct Practice Skills Training	Field Based Services	Supportive Services Plan	Section Geographic Coverage	Geographic area coverage	Target Population(s) and Service to Sub-Populations	
					Grand Total	Y/N	Y/N	Total	10	Total	6	5	5	Total	6	Total	
2021-46	RRH	Seminole County Victims' Rights Coalition	Project IMAGINE		193.4	Y	Y	10.0	10.0	16.0	6.0	5.0	5.0	6.0	6.0	1.7	
2021-36	RRH	Catholic Charities of Central Florida	DV Bonus Project		174	Y	Y	6	6	12	11.7	6	4	2	23	6	5

App. ID	Project Type	Agency Name	Project Name	EDA #s	5	Section 7			Section 8			Section 9					Increasing access to Main
					Priority Population-Applicable Sub-Populations	Housing First/Zero Barrier Approach	Housing First	Client Satisfaction Surveys	Prioritization Based on Need	Families with Children, Unaccompanied Youth, Family Unity	CES MOU and CES Continuity	CoC Involvement and Engagement	2022 PIT Count and submitted 2021 HIC	COC membership participation	COC committee participation	HMIS Policies and Procedures	
					5	Total	15	2	Total	5	5	Total	3	3	3	5	Total
2021-46	RRH	Seminole County Victims' Rights Coalition	Project IMAGINE		1.7	15.0	15.0	0.0	5.0	5.0	0.0	10.7	3.0	3.0	3.0	1.7	12.0
2021-36	RRH	Catholic Charities of Central Florida	DV Bonus Project		5	15	13	2	5	0	5	14	3	3	3	5	8

					Section 10					Section 11				Section 12		Section 13	
App. ID	Project Type	Agency Name	Project Name	EDA #s	Increasing access to mainstream benefits	Access to Mainstream Benefits- DCF ACCESS	Access to Mainstream Benefits- MOU w/ SOAR Provider	Access To Transportation	School Liaison	Program and Financial Ma	Auditor's Report	Repay/Return Grant Funds	HUD Unresolved Findings	Project Budget	Project Budget	Project Performance and Alignment with SPM	Housing Stability
					3	2	3	2	2	Total	10	5	5	Total	5	Total	15
2021-46	RRH	Seminole County Victims' Rights Coalition	Project IMAGINE		3.0	2.0	3.0	2.0	2.0	20	10	5.0	5.0	4.3	4.3	42.0	7.0
2021-36	RRH	Catholic Charities of Central Florida	DV Bonus Project		3	2	3	0	0	18	10	3	5	3	3	57	15

					Section 14					Section 15		Section :					
App. ID	Project Type	Agency Name	Project Name	EDA #s	Exits to Homelessness	Increase Income	Utilization Rate	Project's Data Quality	Cost Effectiveness	Inclusive Structure and Participation.	Promotion of Racial Equity	COVID-19	Gender Inclusion/Non-	Participation by population served	New Projects: Key Information	Project Timeline	New Projects: Narrative for Supportive Services
					15	12	13	25	5	Total	10	5	3	3	Total	3	Total
2021-46	RRH	Seminole County Victims' Rights Coalition	Project IMAGINE		15.0	8.0	0.0	10.0	2.0	19.0	10.0	3.0	3	3	0	0	28.0
2021-36	RRH	Catholic Charities of Central Florida	DV Bonus Project		15	0	13	10	4	11	7	0	2	1.7	1	1	11.3



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Section 18

App. ID	Project Type	Agency Name	Project Name	EDA #s	Housing First and Housing First Competency	Housing Navigation and/or Housing Stability Case Management	Trauma Informed Care	Additional Supportive Services: Volunteerism and or Employment	DV Experience Narrative	DV Safety Planning	New Projects: Narrative for Housing	Project Scope	Total points available
					5	5	3	2	10	10	Total	5	264
2021-46	RRH	Seminole County Victims' Rights Coalition	Project IMAGINE		3.7	4.3	2.7	0.7	8.3	8.3	3.7	3.7	
2021-36	RRH	Catholic Charities of Central Florida	DV Bonus Project		2	5	2.3	0.3	1.7	0	2	2	

App. ID	Project Type	Agency Name	Project Name	EDA #s	Application Score	Section 1		Section 3		Section 4				Section 5		Section 6
						Section A - Project Renewal Threshold Criteria	Signature of Authorized Representative	Section 3 - Key Description-Housing	Number of Housing Units	Section 4 - Key Description-SS	Direct Practice Skills Training	Field Based Services	Supportive Services Plan	Section Geographic Coverage	Geographic area coverage	Target Population(s) and Service to Sub-Populations
					Grand Total	Y/N	Y/N	Total	10	Total	6	5	5	Total	6	Total
2021-56	PSH	HSN	HSN Housing and Health Care PSH Reallocation or Bonus		211.5	Y	Y	10.0	10.0	12.5	6.0	5.0	1.5	4.0	4.0	5.0
2021-40	PSH	Ability Housing, Inc	Central Florida Villages PSH		208.1	Y	Y	10.0	10.0	6.6	1.5	3.8	1.3	3.0	3.0	2.5
2021-33	PSH	Ability Housing, Inc	Central Florida Villages PSH		205.9	Y	Y	10.0	10.0	15.0	5.0	5.0	5.0	4.0	4.0	2.5
2021-42	PSH	Community Assisted and Supported Living, Inc.			174.2	Y	Y	10.0	10.0	5.5	2.5	1.0	2.0	2.0	2.0	5.0
2021-31	RRH	IMPOWER, Inc	RRH/Youth -Reallocation		137.3	Y	Y	0.0	0.0	14.0	6.0	3.0	5.0	5.0	5.0	5.0
2021-54	RRH	HSN	HSN RRH Rent Assistance New Reallocation or Bonus		0.0	Y	Y	0.0		0.0				0.0		0.0
2021-55	PSH	HSN	HSN PSH Housing portion of Reallocation or New or Bonus		0.0	Y	Y	0.0		0.0				0.0		0.0

App. ID	Project Type	Agency Name	Project Name	EDA #s	5	Section 7			Section 8			Section 9					Increasing access to Main
					Priority Population-Applicable Sub-Populations	Housing First/Zero Barrier Approach	Housing First	Client Satisfaction Surveys	Prioritization Based on Need	Families with Children, Unaccompanied Youth, Family Unity	CES MOU and CES Continuity	CoC Involvement and Engagement	2022 PIT Count and submitted 2021 HIC	COC membership participation	COC committee participation	HMIS Policies and Procedures	
					5	Total	15	2	Total	5	5	Total	3	3	3	5	Total
2021-56	PSH	HSN	HSN Housing and Health Care PSH Reallocation or Bonus		5.0	17.0	15.0	2.0	10.0	5.0	5.0	14.0	3.0	3.0	3.0	5.0	12.0
2021-40	PSH	Ability Housing, Inc	Central Florida Villages PSH		2.5	17.0	15.0	2.0	7.5	5.0	2.5	14.0	3.0	3.0	3.0	5.0	10.5
2021-33	PSH	Ability Housing, Inc	Central Florida Villages PSH		2.5	17.0	15.0	2.0	7.5	5.0	2.5	10.5	2.5	3.0	3.0	2.0	11.0
2021-42	PSH	Community Assisted and Supported Living, Inc.			5.0	17.0	15.0	2.0	6.6	3.3	3.3	8.0	3.0	0.0	0.0	5.0	10.0
2021-31	RRH	IMPOWER, Inc	RRH/Youth -Reallocation		5.0	17.0	15.0	2.0	7.5	5.0	2.5	14.0	3.0	3.0	3.0	5.0	12.0
2021-54	RRH	HSN	HSN RRH Rent Assistance New Reallocation or Bonus			0.0			0.0			0.0					0.0
2021-55	PSH	HSN	HSN PSH Housing portion of Reallocation or New or Bonus			0.0			0.0			0.0					0.0

					Section 10					Section 11				Section 12		Section 13	
App. ID	Project Type	Agency Name	Project Name	EDA #s	Increasing access to mainstream benefits	Access to Mainstream Benefits- DCF ACCESS	Access to Mainstream Benefits- MOU w/ SOAR Provider	Access To Transportation	School Liaison	Program and Financial Ma	Auditor's Report	Repay/Return Grant Funds	HUD Unresolved Findings	Project Budget	Project Budget	Project Performance and Alignment with SPM	Housing Stability
					3	2	3	2	2	Total	10	5	5	Total	5	Total	15
2021-56	PSH	HSN	HSN Housing and Health Care PSH Reallocation or Bonus		3.0	2.0	3.0	2.0	2.0	15	5	5.0	5.0	5.0	5.0	47.0	15.0
2021-40	PSH	Ability Housing, Inc	Central Florida Villages PSH		3.0	2.0	2.5	2.0	1.0	20.0	10.0	5.0	5.0	5.0	5.0	73.0	15.0
2021-33	PSH	Ability Housing, Inc	Central Florida Villages PSH		2.5	2.0	2.5	2.0	2.0	20	10	5.0	5.0	5.0	5.0	73.0	15.0
2021-42	PSH	Community Assisted and Supported Living, Inc.			3.0	2.0	3.0	2.0	0.0	20.0	10.0	5.0	5.0	5.0	5.0	41.0	7.0
2021-31	RRH	IMPOWER, Inc	RRH/Youth -Reallocation		3.0	2.0	3.0	2.0	2.0	20	10	5.0	5.0	3.0	3.0	0.0	0.0
2021-54	RRH	HSN	HSN RRH Rent Assistance New Reallocation or Bonus							0.0				0.0		0.0	
2021-55	PSH	HSN	HSN PSH Housing portion of Reallocation or New or Bonus							0				0.0		0.0	

										Section 14					Section 15		Section :
App. ID	Project Type	Agency Name	Project Name	EDA #s	Exits to Homelessness	Increase Income	Utilization Rate	Project's Data Quality	Cost Effectiveness	Inclusive Structure and Participation.	Promotion of Racial Equity	COVID-19	Gender Inclusion/Non-	Participation by population served	New Projects: Key Information	Project Timeline	New Projects: Narrative for Supportive Services
					15	12	13	25	5	Total	10	5	3	3	Total	3	Total
2021-56	PSH	HSN	HSN Housing and Health Care PSH Reallocation or Bonus		7.0	5.0	5.0	10.0	5.0	21.0	10.0	5.0	3	3	3	3	31.7
2021-40	PSH	Ability Housing, Inc	Central Florida Villages PSH		15.0	12.0	13.0	15.0	3.0	12.4	4.7	3.7	1.7	2.3	3.0	3.0	18.6
2021-33	PSH	Ability Housing, Inc	Central Florida Villages PSH		15.0	12.0	13.0	15.0	3.0	12.3	3.0	4.0	3	2.3	3	3	11.9
2021-42	PSH	Community Assisted and Supported Living, Inc.			7.0	12.0	0.0	10.0	5.0	13.7	3.0	4.7	3.0	3.0	3.0	3.0	22.7
2021-31	RRH	IMPOWER, Inc	RRH/Youth -Reallocation		0.0	0.0	0.0	0.0	0.0	19.0	9.0	4.0	3	3	3	3	14.5
2021-54	RRH	HSN	HSN RRH Rent Assistance New Reallocation or Bonus							0.0					0.0		0.0
2021-55	PSH	HSN	HSN PSH Housing portion of Reallocation or New or Bonus							0.0					0		0.0

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Section 18

App. ID	Project Type	Agency Name	Project Name	EDA #s	Housing First and Housing First Competency	Housing Navigation and/or Housing Stability Case Management	Trauma Informed Care	Additional Supportive Services: Volunteerism and or Employment	Permanent Housing and Healthcare Project, detailed and comprehensive	Permanent Housing and Healthcare Project Match; Units	Permanent Housing and Healthcare Project Match; Health Services	New Projects: Narrative for Housing	Project Scope	Total points available
					5	5	3	2	10	5	5	Total	5	258
2021-56	PSH	HSN	HSN Housing and Health Care PSH Reallocation or Bonus		4.7	4.0	2.3	1.0	9.7	5.0	5.0	4.3	4.3	
2021-40	PSH	Ability Housing, Inc	Central Florida Villages PSH		4.3	2.3	1.7	1.3	9.0	0.0	0.0	5.0	5.0	
2021-33	PSH	Ability Housing, Inc	Central Florida Villages PSH		3.3	1.8	2.5	1.0	3.3	0.0	0.0	3.3	3.3	
2021-42	PSH	Community Assisted and Supported Living, Inc.			4.7	4.7	3.0	2.0	8.3	0.0	0.0	4.7	4.7	
2021-31	RRH	IMPOWER, Inc	RRH/Youth -Reallocation		1.5	3.0	3.0	2.0	5.0	0.0	0.0	3.3	3.3	
2021-54	RRH	HSN	HSN RRH Rent Assistance New Reallocation or Bonus									0.0		
2021-55	PSH	HSN	HSN PSH Housing portion of Reallocation or New or Bonus									0.0		

**FY 2021**

**FL-507 – Orlando/Orange, Osceola, Seminole  
Counties**

**Continuum of Care**

**1E-5. Public Posting–Projects Rejected-  
Reduced**

- p. 1      Project Scores posted on Website**
  
- p. 2      Email notification to rejected projects**
  
- p. 4      Approved/Reduced/Rejected List**
  
- p. 5      Email advising of project scores posted on website**

ONLINE APPLICATION PORTAL

[Attachment A](#) Interim 2021 CoC Regional Paper Application Form (this is published for convenience only. All applications must be completed online). Detailed Application Instructions are available [HERE](#).

[Attachment A-1](#) Administrative Performance Data

[Attachment A-3](#) Jurisdictional Representative Certification Form

[Attachment B](#) Project Review Ranking Selection Description

[Attachment C](#) Activities Eligible or Prioritized for Funding

[Attachment D](#) Selected CoC FL-507 Policies and Priorities

[Attachment E](#) Requirements Related to Housing First Approach

[Attachment E-2](#) Project Scoring Final

[Attachment F](#) Housing Navigation and Housing Stability Case Management

[Attachment G](#) HMIS-related Requirements

[Attachment H](#) 2021 CoCo HUD NOFO Process Timeline

[Attachment I](#) List of Attachments Required for Application Submission

HUD FY 2021 CoC NOFO Program Competition is Now Open!





Martha Are &lt;martha.are@hsncfl.org&gt;

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## Notification of CoC 2021 Project Application Decision

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**Martha Are** <martha.are@hsncfl.org>

Thu, Oct 14, 2021 at 3:41 PM

To: PJ Brooks &lt;pj.brooks@caslinc.org&gt;

Bcc: Martha Are &lt;martha.are@hsncfl.org&gt;

RE : New project application submitted to Central Florida CoC

PJ Brooks  
CASL

Mr. Brooks,

Thank you for submitting an application to the central Florida CoC under the FY2021 Continuum of Care RFP. Unfortunately your application was not selected to be included in the federal submission to HUD.

One aspect of your application that led to this decision was that it was the lowest scoring new PSH application, with lower scores in system performance measures, geographic coverage, key descriptions for services and CoC involvement and engagement. Additionally, our region currently has more double-occupancy PSH units than it can easily fill as most of our chronically homeless population desire single occupancy units. Finally, the CoC received more requests for funding than we have available to allocate.

Should you wish to appeal this decision, please submit a written appeal to [appliance@hsncfl.org](mailto:appliance@hsncfl.org) no later than 5:00 on Monday, October 18, 2021. Please include the basis on which you would like for your appeal to be considered.

If you desire, our staff will be available to meet with you after the regional submission to HUD if you would like to have a debrief conversation related to your application.

For additional information, including the detailed scores for each application and the final list of projects slated for inclusion in the federal submission, please go to the HSN website at <https://hsncfl.org/funding>.

Thank you for the commitment of your organization and staff to be a partner to the Central Florida CoC as we work together to reduce and end homelessness.

Sincerely,

Ann Reinert

Chair, Central Florida Commission on Homelessness (CoC) Managing Board Board

**Martha Are** | CEO

Ph: (407) 893 - 0133 x602

Cel: (919) 559 - 6193

Fax: (407) 893 - 5299

142 E. Jackson St.

Orlando, FL 32801

Page 2



Martha Are &lt;martha.are@hsncfl.org&gt;

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## Notification of CoC 2021 Project Application Decision

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Martha Are <martha.are@hsncfl.org>  
To: Martha Are <martha.are@hsncfl.org>

Thu, Oct 14, 2021 at 3:40 PM

RE : New project application submitted to Central Florida CoC

Ms. Are,

Thank you for submitting an application to the central Florida CoC under the FY2021 Continuum of Care RFP. Unfortunately your application was not selected to be included in the federal submission to HUD.

Your application was not selected since it was a housing only application, intended to partner with a PSH services application if one was submitted. No such PSH services application was submitted. Therefore, the housing only application did not make a complete project and was not selected.

Should you wish to appeal this decision, please submit a written appeal to [applciation@hsncfl.org](mailto:applciation@hsncfl.org) no later than 5:00 on Monday, October 18, 2021. Please include the basis on which you would like for your appeal to be considered.

For additional information, including the detailed scores for each application and the final list of projects slated for inclusion in the federal submission, please go to the HSN website at <https://hsncfl.org/funding>.

Thank you for the commitment of your organization and staff to be a partner to the Central Florida CoC as we work together to reduce and end homelessness.

Sincerely,

Ann Reinert  
Chair, Central Florida Commission on Homelessness (CoC) Managing Board Board



**Martha Are** | CEO

Ph: (407) 893 - 0133 x602

Cel: (919) 559 - 6193

Fax: (407) 893 - 5299

142 E. Jackson St.

Orlando, FL 32801

[www.hsncfl.org](http://www.hsncfl.org) ; [www.cfch.org](http://www.cfch.org)

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## 2021 Local Competition - Approved, Reduced & Rejected applications

Approved

Type	Applicant	Project Name	Agencies to receive funding (not including admin)	Location/ Counties Served	Total
PSH	Grand Avenue Economic Community Dev. Corp.	Homes for New Beginnings	GAECDC	Located in Orange, Takes from all 3	\$ 63,117
PSH	HSN	Operating and Services	GAECDC, Wayne Densch, HSN	Located in Orange, Takes from all 3	\$ 478,101
PSH	HSN	Leasing	HSN	Located in Orange, Takes from all 3	\$ 1,392,509
PSH	Seminole County	Seminole County Shelter Plus Care	Seminole County	All 3	\$ 624,371
RRH	HSN	RRH2	Embrace Families, Coalition for the Homeless, Salvation Army, Community Hope Center, HSN	Seminole	\$ 1,333,011
TH	Covenant House Florida, Inc.	ROPAL - Youth TH	Covenant House, HSN	All 3	\$ 154,449
PSH	Orange County Government	Orange County Shelter Plus Care	Orange County	All 3	\$ 905,181
RRH	HSN	RRH1	Zebra Coalition, Seminole County, Embrace Families, HSN	Orange	\$ 661,214
PSH	Embrace Families Solutions Inc.	Beacon of Light	Embrace Families, HSN	All 3	\$ 112,145
PSH	Osceola County Board of County Commissioners	Osceola County Government Shelter+Care	Osceola County	Seminole	\$ 275,419
SSO	Covenant House Florida, Inc.	CMD-SSO - Youth	Covenant House, HSN	Osceola	\$ 91,003
HMS	HSN	HMS	HSN	All 3	\$ 337,565
SSO	HSN	Coordinated Entry System (CES)	HCCH, HSN	All 3	\$ 456,124
PSH	HSN	Medical and Housing Leverage PSH (reallocation)	HCCH, HSN	All 3	\$ 95,760
PSH	Ability Housing	New PSH 1	Ability, HSN	Located in Orange, Osceola - takes all 3	\$ 220,590.00
RRH	Impower	New Youth RRH	Impower, HSN	All 3	\$ 291,002.00
PSH	Ability Housing	New PSH 2	Ability, HSN	Located in Orange - takes all 3	\$ 31,484.00
RRH	Safe House	Project Imagine	Safe House, Help Now, Harbor House, HSN	3	\$ 1,163,225.00
RRH	Catholic Charities	Human Trafficking RRH	Catholic Charities, HSN	All 3	\$ 381,088.00
PSH	HSN	Rental Assistance & Services	GAECDC, I Dignity, HCCH, Aspire, HSN	All 3	\$ 2,260,599
PSH	CASL	New PSH	CASL	Orange	\$ 200,000

Voluntary Reduction

Rejected

Sent HUD NOFO 2021 - Local Application Results

Details Reporting Heat Map



 Preview

**Subject** 2021 HUD NOFO | CoC FL-507 Local Competition Scores  
**From name** Homeless Services Network of Central Florida  
**Sent** November 1st 2021 at 4:49 pm EDT  
**From Address** cfch@hsncfl.org  
**Reply to address** cfch@hsncfl.org  
**Lists** General Interest/CoC  
**Email link** <https://conta.cc/3w9Vjbx>

Desktop

Mobile

Inbox

November 1, 2021



2021 HUD NOFO | COC FL-507

## Local Competition Scores Now Available

The Scoring and Results from the Local Competition are available below or at this [link](#):

*The CoC Program is designed to promote a community-wide commitment to the goal of ending homelessness; to provide funding for efforts by nonprofit providers, States, and local governments to quickly re-house homeless individuals, families, persons fleeing domestic violence, and youth while minimizing the trauma and dislocation caused by homelessness; to promote access to and effective utilization of mainstream programs by homeless individuals and families; and to optimize self-sufficiency among those experiencing homelessness.*

[Scoring Results](#)

Please send all questions or requests for clarification to  
[application@hcnofl.org](mailto:application@hcnofl.org)

For the 2021 HUD NOFO Competition Timeline & Process, [Click Here](#)

Last Updated 9/10/2021

(Items and dates subject to change)

**FY 2021**  
**FL-507 - Orlando/Orange, Osceola,  
Seminole Counties Continuum of Care**  
**1E-5a Public Posting – Projects Accepted**

**P.1 Project Scoring on Website**

**P.2 Email Notices to Applicants**

**p.16 Approved/Reduced/Rejected List**

**P.19 Email blast advising of Local Competition Results (11/1)**

# Page 1

[ONLINE APPLICATION PORTAL](#)

[Attachment A](#) Interim 2021 CoC Regional Paper Application Form (this is published for convenience only. All applications must be completed online). Detailed Application Instructions are available [HERE](#).

[Attachment A-1](#) Administrative Performance Data

[Attachment A-3](#) Jurisdictional Representative Certification Form

[Attachment B](#) Project Review Ranking Selection Description

[Attachment C](#) Activities Eligible or Prioritized for Funding

[Attachment D](#) Selected CoC FL-507 Policies and Priorities

[Attachment E](#) Requirements Related to Housing First Approach

[Attachment E-2](#) Project Scoring Final

[Attachment F](#) Housing Navigation and Housing Stability Case Management

[Attachment G](#) HMIS-related Requirements

[Attachment H](#) 2021 CoCo HUD NOFO Process Timeline

[Attachment I](#) List of Attachments Required for Application Submission

HUD FY 2021 CoC NOFO Program Competition is Now Open!



Martha Are &lt;martha.are@hsncfl.org&gt;

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## Page 2

### Notification of CoC 2021 Project Application Decision

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Martha Are &lt;martha.are@hsncfl.org&gt;

Thu, Oct 14, 2021 at 3:41 PM

To: Cody Spencer &lt;cspencer@abilityhousing.org&gt;, Martha Are &lt;martha.are@hsncfl.org&gt;

RE : New project application submitted to Central Florida CoC

Mr. Spencer and Ms. Are,

Thank you for submitting an application to the Central Florida CoC under the FY2021 Continuum of Care RFP. The HSN-Ability Housing application was recommended by the CoC's Community Ranking Committee during their October 7th meeting and approved by the CoC Governing Board on October 13th.

**The organizations have been approved to expand an existing Permanent Supportive Housing project (application #33) in order to provide additional 100% chronically homeless dedicated units. The approved budget equals \$200,000. The project will be submitted as a Bonus Project.**

**The organizations have also been approved for a new Permanent Supportive Housing project (application #40) to provide additional 100% chronically homeless dedicated units. The approved budget equals \$38,461. The project will be submitted as a Bonus Project.**

For additional information, including the detailed scores for each application and the final list of projects slated for inclusion in the federal submission, please go to the HSN website at <https://hsncfl.org/funding>.

Thank you for the commitment of your organization and staff to be a partner to the Central Florida CoC as we work together to reduce and end homelessness.

Sincerely,

Ann Reinert  
Chair, Central Florida Commission on Homelessness (CoC) Managing Board Board

**Martha Are** | CEO**Ph:** (407) 893 - 0133 x602**Cel:** (919) 559 - 6193**Fax:** (407) 893 - 5299

142 E. Jackson St.

Orlando, FL 32801

[www.hsncfl.org](http://www.hsncfl.org) | [www.cfch.org](http://www.cfch.org)





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## Notification of CoC 2021 Project Application Decision

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Martha Are <martha.are@hsncfl.org>

Thu, Oct 14, 2021 at 3:40 PM

To: Judy Crawford <JCrawford@cfcc.org>, Martha Are <martha.are@hsncfl.org>

RE : New project application submitted to Central Florida CoC

Ms. Crawford and Ms. Are,

Thank you for submitting an application to the Central Florida CoC under the FY2021 Continuum of Care RFP. The HSN-Catholic Charities application was recommended by the CoC's Community Ranking Committee during their October 7th meeting and approved by the CoC Governing Board on October 13th.

**The organizations have been approved for a new Rapid Rehousing Project to provide additional 100% Human Trafficking units. The approved budget equals \$381,088, which includes services, rental assistance and administrative funding. The project will be submitted as a DV Bonus Project.**

For additional information, including the detailed scores for each application and the final list of projects slated for inclusion in the federal submission, please go to the HSN website at <https://hsncfl.org/funding>.

Thank you for the commitment of your organization and staff to be a partner to the Central Florida CoC as we work together to reduce and end homelessness.

Sincerely,

Ann Reinert  
Chair, Central Florida Commission on Homelessness (CoC) Managing Board Board

--



**Martha Are** | CEO

**Ph:** (407) 893 - 0133 x602

**Cel:** (919) 559 - 6193

**Fax:** (407) 893 - 5299

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Orlando, FL 32801

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## Notification of CoC 2021 Project Application Decision

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**Martha Are** <martha.are@hsncfl.org>

Thu, Oct 14, 2021 at 3:39 PM

To: Shaniqua Law <slaw@covenanthousefl.org>

Bcc: Martha Are <martha.are@hsncfl.org>

Ms. Law,

Thank you for submitting renewal applications to the Central Florida CoC under the FY2021 Continuum of Care RFP. The following applications were recommended for inclusion in the federal submission by the CoC's Community Ranking Committee during their October 7th meeting and approved by the CoC Governing Board on October 13th.

### **Covenant House ROPAL Transitional Housing for Youth Covenant House CMO/SSO**

For additional information, including the detailed scores for each application and the final list of projects slated for inclusion in the federal submission, please go to the HSN website at <https://hsncfl.org/funding>.

Thank you for the commitment of your organization and staff to be a partner to the Central Florida CoC as we work together to reduce and end homelessness.

Sincerely,

Ann Reinert  
Chair, Central Florida Commission on Homelessness (CoC) Managing Board Board

--



**Martha Are** | CEO

**Ph:** (407) 893 - 0133 x602

**Cel:** (919) 559 - 6193

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## Notification of CoC 2021 Project Application Decision

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**Martha Are** <martha.are@hsncfl.org>  
To: Melinda Clark <Melinda.Clark@embracefamilies.org>  
Bcc: Martha Are <martha.are@hsncfl.org>

Thu, Oct 14, 2021 at 3:39 PM

Ms. Clark,

Thank you for submitting a renewal application to the Central Florida CoC under the FY2021 Continuum of Care RFP. The following application was recommended for inclusion in the federal submission by the CoC's Community Ranking Committee during their October 7th meeting and approved by the CoC Governing Board on October 13th.

### Embrace Family Solutions' Beacon of Light

For additional information, including the detailed scores for each application and the final list of projects slated for inclusion in the federal submission, please go to the HSN website at <https://hsncfl.org/funding>.

Thank you for the commitment of your organization and staff to be a partner to the Central Florida CoC as we work together to reduce and end homelessness.

Sincerely,

Ann Reinert  
Chair, Central Florida Commission on Homelessness (CoC) Managing Board Board

--



**Martha Are** | CEO

**Ph:** (407) 893 - 0133 x602

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## Page 6

Martha Are <martha.are@hsncfl.org>

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### Notification of CoC 2021 Project Application Decision

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**Martha Are** <martha.are@hsncfl.org>  
To: Babette Allen <Babette@grandave.org>  
Cc: Helaine Blum <Helaine@pathlighthouse.org>  
Bcc: Martha Are <martha.are@hsncfl.org>

Thu, Oct 14, 2021 at 3:39 PM

Ms. Allen,

Thank you for submitting a renewal application to the Central Florida CoC under the FY2021 Continuum of Care RFP. The following application was recommended for inclusion in the federal submission by the CoC's Community Ranking Committee during their October 7th meeting and approved by the CoC Governing Board on October 13th.

#### **GAECDC Homes for New Beginnings**

For additional information, including the detailed scores for each application and the final list of projects slated for inclusion in the federal submission, please go to the HSN website at <https://hsncfl.org/funding>.

Thank you for the commitment of your organization and staff to be a partner to the Central Florida CoC as we work together to reduce and end homelessness.

Sincerely,

Ann Reinert  
Chair, Central Florida Commission on Homelessness (CoC) Managing Board Board



**Martha Are** | CEO

**Ph:** (407) 893 - 0133 x602

**Cel:** (919) 559 - 6193

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## Page 7

Martha Are <martha.are@hsncfl.org>

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### Notification of CoC 2021 Project Application Decision

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**Martha Are** <martha.are@hsncfl.org>  
To: Martha Are <martha.are@hsncfl.org>

Thu, Oct 14, 2021 at 3:40 PM

RE : Renewal project application submitted to Central Florida CoC

Ms. Are,

Thank you for submitting renewal applications to the Central Florida CoC under the FY2021 Continuum of Care RFP. The following HSN applications were recommended for inclusion in the federal submission by the CoC's Community Ranking Committee during their October 7th meeting and approved by the CoC Governing Board on October 13th.

**Rental Assistance and Services - PSH**  
**Leasing - PSH**  
**Operating and Services - PSH**  
**Coordinated Entry System**  
**HMIS**  
**Rapid Rehousing 1**  
**Rapid Rehousing 2**

For additional information, including the detailed scores for each application and the final list of projects slated for inclusion in the federal submission, please go to the HSN website at <https://hsncfl.org/funding>.

Thank you for the commitment of your organization and staff to be a partner to the Central Florida CoC as we work together to reduce and end homelessness.

Sincerely,

Ann Reinert  
Chair, Central Florida Commission on Homelessness (CoC) Managing Board Board



**Martha Are** | CEO

**Ph:** (407) 893 - 0133 x602

**Cel:** (919) 559 - 6193

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## Notification of CoC 2021 Project Application Decision

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**Martha Are** <martha.are@hsncfl.org>  
To: Martha Are <martha.are@hsncfl.org>

Thu, Oct 14, 2021 at 2:46 PM

RE : New project application submitted to Central Florida CoC

Ms. Are,

Thank you for submitting an application to the Central Florida CoC under the FY2021 Continuum of Care RFP. The HSN application was recommended by the CoC's Community Ranking Committee during their October 7th meeting and approved by the CoC Governing Board on October 13th.

**The organization's Health Care and Housing Leverage PSH project has been approved as part of a reallocation of an existing Permanent Supportive Housing project in order to provide additional 100% chronically homeless dedicated units. The approved budget is \$99,351. The project will be submitted in Tier 1.**

For additional information, including the detailed scores for each application and the final list of projects slated for inclusion in the federal submission, please go to the HSN website at <https://hsncfl.org/funding>.

Thank you for the commitment of your organization and staff to be a partner to the Central Florida CoC as we work together to reduce and end homelessness.

Sincerely,

Ann Reinert  
Chair, Central Florida Commission on Homelessness (CoC) Managing Board Board



**Martha Are** | CEO

**Ph:** (407) 893 - 0133 x602

**Cel:** (919) 559 - 6193

**Fax:** (407) 893 - 5299

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Martha Are &lt;martha.are@hsncfl.org&gt;

## Page 9

### Notification of CoC 2021 Project Application Decision

Martha Are &lt;martha.are@hsncfl.org&gt;

Thu, Oct 14, 2021 at 3:41 PM

To: Rebecca Farmerie &lt;rfarmerie@impowerfl.org&gt;, Martha Are &lt;martha.are@hsncfl.org&gt;

RE : New project application submitted to Central Florida CoC

Ms. Farmerie and Ms. Are,

Thank you for submitting an application to the Central Florida CoC under the FY2021 Continuum of Care RFP. The HSN-Impower application was recommended by the CoC's Community Ranking Committee during their October 7th meeting and approved by the CoC Governing Board on October 13th.

**The organizations have been approved for a new Rapid Rehousing Project to provide additional 100% unaccompanied youth units. The approved budget equals \$291,002, which includes services, rental assistance and administrative funding. The project will be submitted as a Bonus Project.**

For additional information, including the detailed scores for each application and the final list of projects slated for inclusion in the federal submission, please go to the HSN website at <https://hsncfl.org/funding>.

Thank you for the commitment of your organization and staff to be a partner to the Central Florida CoC as we work together to reduce and end homelessness.

Sincerely,

Ann Reinert  
Chair, Central Florida Commission on Homelessness (CoC) Managing Board Board

**Martha Are** | CEO**Ph:** (407) 893 - 0133 x602**Cel:** (919) 559 - 6193**Fax:** (407) 893 - 5299

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## Notification of CoC 2021 Project Application Decision

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**Martha Are** <martha.are@hscnfl.org>  
To: Olivette.Carter@ocfl.net  
Bcc: Martha Are <martha.are@hscnfl.org>

Thu, Oct 14, 2021 at 3:40 PM

RE : Renewal project application submitted to Central Florida CoC

Ms. Carter,

Thank you for submitting a renewal application to the Central Florida CoC under the FY2021 Continuum of Care RFP. The following application was recommended for inclusion in the federal submission by the CoC's Community Ranking Committee during their October 7th meeting and approved by the CoC Governing Board on October 13th.

### Orange County Shelter Plus Care

For additional information, including the detailed scores for each application and the final list of projects slated for inclusion in the federal submission, please go to the HSN website at <https://hscnfl.org/funding>.

Thank you for the commitment of your organization and staff to be a partner to the Central Florida CoC as we work together to reduce and end homelessness.

Sincerely,

Ann Reinert  
Chair, Central Florida Commission on Homelessness (CoC) Managing Board Board



**Martha Are** | CEO

**Ph:** (407) 893 - 0133 x602

**Cel:** (919) 559 - 6193

**Fax:** (407) 893 - 5299

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Orlando, FL 32801

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Martha Are &lt;martha.are@hsncfl.org&gt;

## Page 11

### Notification of CoC 2021 Project Application Decision

2 messages

**Martha Are** <martha.are@hsncfl.org>  
To: David Barnett <David.Barnett@osceola.org>  
Bcc: Martha Are <martha.are@hsncfl.org>

Thu, Oct 14, 2021 at 3:39 PM

RE : Renewal project application submitted to Central Florida CoC

Mr. Barnett,

Thank you for submitting a renewal application to the Central Florida CoC under the FY2021 Continuum of Care RFP. The following application was recommended for inclusion in the federal submission by the CoC's Community Ranking Committee during their October 7th meeting and approved by the CoC Governing Board on October 13th.

#### Osceola County Shelter Plus Care

For additional information, including the detailed scores for each application and the final list of projects slated for inclusion in the federal submission, please go to the HSN website at <https://hsncfl.org/funding>.

Thank you for the commitment of your organization and staff to be a partner to the Central Florida CoC as we work together to reduce and end homelessness.

Sincerely,

Ann Reinert  
Chair, Central Florida Commission on Homelessness (CoC) Managing Board Board



**Martha Are** | CEO

**Ph:** (407) 893 - 0133 x602

**Cel:** (919) 559 - 6193

**Fax:** (407) 893 - 5299

142 E. Jackson St.

Orlando, FL 32801

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**David Barnett** <David.Barnett@osceola.org>  
To: Martha Are <martha.are@hsncfl.org>

Thu, Oct 14, 2021 at 6:04 PM

Thank you 'Martha!

On Oct 14, 2021, at 3:53 PM, Martha Are <[martha.are@hsncfl.org](mailto:martha.are@hsncfl.org)> wrote:

## Page 12

**[EXTERNAL EMAIL] - This email originates outside of Osceola County Government. Do not click links or open attachments unless you recognize and confirm the sender's email address. If you are unsure if an email is safe or not, please forward the email to [itsecurity@osceola.org](mailto:itsecurity@osceola.org)**

[Quoted text hidden]

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Martha Are &lt;martha.are@hsncfl.org&gt;

## Page 13

### Notification of CoC 2021 Project Application Decision

Martha Are &lt;martha.are@hsncfl.org&gt;

Thu, Oct 14, 2021 at 3:41 PM

To: Jeanne Gold &lt;JGold@safehousefl.com&gt;, Martha Are &lt;martha.are@hsncfl.org&gt;

RE : New project application submitted to Central Florida CoC

Ms. Gold and Ms. Are,

Thank you for submitting an application to the Central Florida CoC under the FY2021 Continuum of Care RFP. The HSN-Seminole County Victim's Rights Coalition application was recommended by the CoC's Community Ranking Committee during their October 7th meeting and approved by the CoC Governing Board on October 13th.

**The organizations have been approved for a new Rapid Rehousing Project to provide additional 100% Domestic Violence units. The approved budget equals \$1,159,840, which includes services, rental assistance and administrative funding. The project will be submitted as a DV Bonus Project.**

For additional information, including the detailed scores for each application and the final list of projects slated for inclusion in the federal submission, please go to the HSN website at <https://hsncfl.org/funding>.

Thank you for the commitment of your organization and staff to be a partner to the Central Florida CoC as we work together to reduce and end homelessness.

Sincerely,

Ann Reinert  
Chair, Central Florida Commission on Homelessness (CoC) Managing Board Board

--

**Martha Are** | CEO**Ph:** (407) 893 - 0133 x602**Cel:** (919) 559 - 6193**Fax:** (407) 893 - 5299

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Orlando, FL 32801

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Martha Are &lt;martha.are@hsncfl.org&gt;

## Page 14

### Notification of CoC 2021 Project Application Decision

**Martha Are** <martha.are@hsncfl.org>  
To: Anea Brown <abrown04@seminolecountyfl.gov>  
Bcc: Martha Are <martha.are@hsncfl.org>

Thu, Oct 14, 2021 at 3:40 PM

RE : Renewal project application submitted to Central Florida CoC

Ms. Brown,

Thank you for submitting a renewal application to the Central Florida CoC under the FY2021 Continuum of Care RFP. The following application was recommended for inclusion in the federal submission by the CoC's Community Ranking Committee during their October 7th meeting and approved by the CoC Governing Board on October 13th.

#### Seminole County Shelter Plus Care

For additional information, including the detailed scores for each application and the final list of projects slated for inclusion in the federal submission, please go to the HSN website at <https://hsncfl.org/funding>.

Thank you for the commitment of your organization and staff to be a partner to the Central Florida CoC as we work together to reduce and end homelessness.

Sincerely,

Ann Reinert  
Chair, Central Florida Commission on Homelessness (CoC) Managing Board Board

--



**Martha Are** | CEO

**Ph:** (407) 893 - 0133 x602

**Cel:** (919) 559 - 6193

**Fax:** (407) 893 - 5299

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Orlando, FL 32801

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Sent

## HUD NOFO 2021 - Local Application Results

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Details

Reporting

Heat Map



 Preview

**Subject** 2021 HUD NOFO | CoC FL-507 Local Competition Scores

**From name** Homeless Services Network of Central Florida

**Sent** November 1st 2021 at 4:49 pm EDT

**From Address** cfch@hsncfl.org

**Reply to address** cfch@hsncfl.org

**Lists** General Interest/CoC

**Email link** <https://conta.cc/3w9Vjbx>

## 2021 Local Competition - Approved, Reduced & Rejected Page 16

Approved

Type	Applicant	Project Name	Agencies to receive funding (not including admin)	Location/ Counties Served	Total
PSH	Grand Avenue Economic Community Dev. Corp.	Homes for New Beginnings	GAECDC	Located in Orange, Takes from all 3	\$ 63,117
PSH	HSN	Operating and Services	GAECDC, Wayne Densch, HSN	Located in Orange, Takes from all 3	\$ 478,101
PSH	HSN	Leasing	HSN	All 3	\$ 1,392,509
PSH	Seminole County	Seminole County Shelter Plus Care	Seminole County	Seminole	\$ 624,371
RRH	HSN	RRH2	Embrace Families, Coalition for the Homeless, Salvation Army, Community Hope	All 3	\$ 1,333,011
TH	Covenant House Florida, Inc.	ROPAL - Youth TH	Covenant House, HSN	All 3	\$ 154,449
PSH	Orange County Government	Orange County Shelter Plus Care Renewal Application	Orange County	Orange	\$ 905,181
RRH	HSN	RRH1	Zebra Coalition, Seminole County, Embrace Families, HSN	All 3	\$ 661,214
PSH	Embrace Families Solutions Inc.	Beacon of Light	Embrace Families, HSN	Seminole	\$ 112,145

PSH	Osceola County Board of County Commissioners	Osceola County Government Shelter+Care	Osceola County			
				Osceola	\$	275,419
SSO	Covenant House Florida, Inc.	CMO-SSO - Youth	Covenant House, HSN			
				All 3	\$	91,003
HMIS						
	HSN	HMIS	HSN	All 3	\$	337,565
SSO						
	HSN	Coordinated Entry System (CES)	HCCH, HSN	All 3	\$	456,124
PSH		Medical and Housing Leverage PSH (reallocation)				
	HSN		HCCH, HSN	Orange, Seminole	\$	75,760
				Located in Orange, Osceola - takes all 3		
PSH	Ability Housing	New PSH 1	Ability, HSN		\$	215,000.00
RRH	Impower	New Youth RRH	Impower, HSN	All 3	\$	291,002.00
				Located in Orange - takes all 3		
PSH	Ability Housing	New PSH 2	Ability, HSN		\$	291,002.00
RRH	Safe House	Project Imagine	Safe House, Help Now, Harbor House, HSN	All 3	\$	1,159,840.00
RRH	Catholic Charities	Human Trafficking RRH	Catholic Charities, HSN	All 3	\$	381,088.00

<b>Voluntary Reduction</b>	PSH	HSN	Rental Assistance & Services	GAECDC, I Dignity, HCCH, Aspire, HSN	All 3		<b>Page 18</b>
						\$	2,260,599
<b>Rejected</b>	PSH	CASL	New PSH	CASL	Orange	\$	200,000





November 1, 2021

2021 HUD NOFO | COC FL-507

## Local Competition Scores Now Available

The Scoring and Results from the Local Competition are available below or at this [link](#):

*The CoC Program is designed to promote a community-wide commitment to the goal of ending homelessness; to provide funding for efforts by nonprofit providers, States, and local governments to quickly re-house homeless individuals, families, persons fleeing domestic violence, and youth while minimizing the trauma and dislocation caused by homelessness; to promote access to and effective utilization of mainstream programs by homeless individuals and families; and to optimize self-sufficiency among those experiencing homelessness.*

[Scoring Results](#)

Please send all questions or requests for clarification to  
[application@hsncfl.org](mailto:application@hsncfl.org)

For the 2021 HUD NOFO Competition Timeline & Process, [Click Here](#)

Last Updated 9/10/2021

(Items and dates subject to change)

**FY 2021**  
**FL-507 - Orlando/Orange, Osceola,  
Seminole Counties Continuum of Care**  
**Web Posting**  
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- P.3 Collaborative Application (pdf-screenshot)**
- P.4 Priority Listings (pdf-screenshot)**
- P.5 Attachments Posted**
- P.6 PHA Homeless Preference (pdf - screenshot)**
- P.7 PHA Moving On Preference (pdf - screenshot)**
- P.8 CE Assessment Tool (pdf - screenshot)**
- P.9 Local Competition Announcement (pdf - screenshot)**
- P.10 Project Review and Selection Process (pdf - screenshot)**
- P.11 Public Posting – Projects Rejected – Reduced (pdf - screenshot)**
- P.12 Public Posting – Projects Accepted (pdf - screenshot)**
- P.13 Web Posting – CoC Approved Consolidation Application (pdf - screenshot)**
- P.14 Housing Leverage Commitments (pdf - screenshot)**
- P.15 Healthcare Formal Agreements ((pdf - screenshot)**

## 2021 HUD CoC Competition NOFO

### Final Federal Submission CoC Program Competition FY2021

[Full Collaborative Application FL-507 \(pdf\)](#)

[Priority Listing of Project Applications Approved for Submission \(pdf\)](#)

#### Attachments

- [PHA Homeless Preference \(pdf\)](#)
- [PHA Moving On Preference \(pdf\)](#)
- [CE Assessment Tool \(pdf\)](#)
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**Applicant:** Orlando/Orange, Osceola, Seminole Counties  
**Project:** FL-507 CoC Registration FY 2021

FL-507\_CoC  
COC\_REG\_2021\_182082

## Before Starting the CoC Application

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

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

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

1. The FY 2021 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2021 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It  
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2021 CoC Program Competition on behalf of your CoC.  
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

### Answering Multi-Part Narrative Questions

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

### Attachments

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

- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.
- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

**Applicant:** Orlando/Orange, Osceola, Seminole Counties  
**Project:** FL-507 CoC Registration FY 2021

FL-507\_CoC  
COC\_REG\_2021\_182082

## Before Starting the Project Listings for the CoC Priority Listing

**The CoC Consolidated Application requires TWO submissions. Both this Project Priority Listing AND the CoC Application MUST be completed and submitted prior to the CoC Program Competition submission deadline stated in the NOFO.**

- The CoC Priority Listing includes:
- Reallocation forms – must be completed if the CoC is reallocating eligible renewal projects to create new projects or if a project applicant will transition from an existing component to an eligible new component.
  - Project Listings:
    - New;
    - Renewal;
    - UFA Costs;
    - CoC Planning;
    - YHPD Renewal; and
    - YHDP Replacement.
    - Attachment Requirement
  - HUD-2991, Certification of Consistency with the Consolidated Plan – Collaborative Applicants must attach an accurately completed, signed, and dated HUD-2991.

# Funding Opportunities.

Please note: If you are an individual or a family experiencing homelessness and need help, click here

## 2021 HUD CoC Competition NOFO

### Final Federal Submission CoC Program Competition FY2021

Full Collaborative Application FL-507 (pdf) *Coming Soon*

Priority Listing of Project Applications Approved for Submission (pdf)  
*Coming Soon*

#### Attachments

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**FY 2021**  
**FL-507 – Orlando/Orange, Osceola, Seminole**  
**Counties**  
**Continuum of Care**  
**Attachment #02:**  
**1C-7. PHA Homeless Preference**

**Attachment #02 documents include the following:**

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**FY 2021**  
**FL-507 – Orlando/Orange, Osceola, Seminole**  
**Counties**  
**Continuum of Care**  
**Attachment #03:**  
**1C-7. PHA Moving On Preference**

**Attachment #03 documents include the following:**

- **Orlando Housing Authority – Move On Strategy**



**FY 2021**

**FL-507 – Orlando/Orange, Osceola, Seminole  
Counties Continuum of Care**

**Continuum of Care**

**Attachment 01**

**1C-14 CE Assessment Tool**

- p. 1 Program Entry Intake Form (Adult)**
- P. 4 Program Entry Intake Form (Minor)**
- p. 5 Consent and Release of Authorization**
- p. 6 Prevention, Diversion and Rapid Exist Assessment**
- p. 8 Shelter Matching Tool**
- p. 11 VI-SPDAT (families)**

**FY 2021**  
**FL-507 - Orlando/Orange, Osceola,  
Seminole Counties Continuum of Care**  
**1E-1. Local Competition Announcement**

Attachment #04

**P.1 RFA Released to Community (website)**

**P.2 RFA Local Application Deadline clarified (website)**

**P.4 RFA Local Application (Email to Community)**

**P. 7 Project Review and Ranking (Attachment B)**

**P. 10 Selected Policies and Priorities (Attachment D)**

**FY 2021**  
**FL-507 - Orlando/Orange, Osceola,  
Seminole Counties Continuum of Care**  
**1E2. Project Review and Selection Process**

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**P. 9 Master Scorecard/ New and Bonus**

**P. 17 Master Scorecard/ DV**

**P. 28 Sample Project Scorecard Completed**

**P. 39 Project Scoring Final**

**FY 2021**  
**FL-507 – Orlando/Orange, Osceola, Seminole**  
**Counties**

**Continuum of Care**

**1E-5. Public Posting–Projects Rejected-  
Reduced**

- p. 1      Project Scores posted on Website**
  
- p. 2      Email notification to rejected projects**

**FY 2021**  
**FL-507 - Orlando/Orange, Osceola,  
Seminole Counties Continuum of Care**  
**1E-5a Public Posting – Projects Accepted**

- P.1 Project Scoring on Website**
- P.2 Email Notices to Applicants**
- p.16 Approved/Reduced/Rejected List**
- P.19 Email blast advising of Local Competition Results (11/1)**



## FY2021

[Full Collaborative Application FL-507 \(pdf\)](#)

[Priority Listing of Project Applications Approved for Submission \(pdf\)](#)

### Attachments

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**FY 2021**  
**FL-507 - Orlando/Orange, Osceola,  
Seminole Counties Continuum of Care**  
**3A-2a. Healthcare Formal Agreements**

**APPLICANT: HOMELESS SERVICES NETWORK**

**PROJECT: 2021 New Housing and Health Care PSH**

**P.1 Healthcare Agreements - HCCH**

**P.2 Healthcare Agreements – Aspire Healthcare Partners**



**FY 2021**  
**FL-507 - Orlando/Orange, Osceola,  
Seminole Counties Continuum of Care**  
**3A-1a. Housing Leverage Commitments**

**APPLICANT: HOMELESS SERVICES NETWORK**  
**PROJECT: 2021 New Housing and Healthcare PSH**

- P. 1 Housing Leverage Commitments - HSN**
- P. 2 Housing Leverage Commitments - Seminole County  
Housing**

**FY 2021**  
**FL-507 - Orlando/Orange, Osceola,  
Seminole Counties Continuum of Care**  
**3A-1a. Housing Leverage Commitments**

**APPLICANT: HOMELESS SERVICES NETWORK**  
**PROJECT: 2021 New Housing and Health Care PSH**

**P. 1 Housing Leverage Commitments - HSN**  
**P. 2 Housing Leverage Commitments - Seminole County  
Housing**



142 East Jackson Street, Orlando, FL 32801  
Phone: 407-893-0133  
Fax: 407-893-5299  
www.hsncl.org

**Page 1**

September 27, 2021

To Whom It May Concern

**RE: 2021 New Housing and Health Care PSH Project**

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HSN will match \$95,760 in rental assistance funding provided by the City of Orlando (N16-0108) during the grant term, which is expected to be fall of 2022 through all of 2023. (7 units x \$1140 per month x 12 months). The source of these funds is City of Orlando general funds.

Sincerely,

A handwritten signature in black ink that reads "Martha Are". The signature is written in a cursive, flowing style.

Martha Are  
CEO



www.schafla.org

September 27, 2021

Martha Are, CEO  
Homeless Services Network  
142 E Jackson St  
Orlando, FL 32801

Ms. Are,

The Seminole County Housing Authority is pleased to partner with the Homeless Services Network (HSN) for a New Housing and Health Care PSH Project.

The housing authority is committing rental assistance for 3 one-bedroom units to be paid each month for the duration of the grant term, which is likely to be Fall 2022 - Fall 2023.

The value of the commitment is \$41,040 (1 bedroom FMR is \$1,140 x 3 units x 12 months).

The source of the funds is PHA administered housing choice vouchers. Please see the excerpt for our Administrative Plan regarding our homeless preference which was adopted by the housing authority board effective 04/01/2021:

*E. Homeless Preference: A local preference will be established in the HCV program to provide housing assistance to homeless or chronically homeless individuals or families. The preference will given to applicants on a referral only basis; and as certified as homeless by a social service agency as homeless and referred to SCHA under the terms and conditions of a Memorandum of Agreement.*

- 1. Homeless individuals and families,*
- 2. Chronically homeless,*
- 3. Individuals graduating from or aging out of the foster care system administered by the Florida Dept of Protective and Regulatory Services; and*
- 4. Currently or formerly homeless applicants who are ready to transition from supportive housing program(s).*

*To qualify for the homeless preference applicants must be referred by a service agency that has partnered with SCHA as a homeless service provider through a Memorandum of Agreement (MOU). The service provider will agree to provide SCHA with a signed certification that the applicant meets the current HUD definition of homelessness and is*

[www.schafla.org](http://www.schafla.org)

*qualified to apply for housing under these criteria. Applicants graduating or aging out of foster care, or transitional housing must be referred, and certified as homeless under the terms and conditions of the Memorandum of Agreement.*

*Currently SCHA has agreements in place with the following agencies:*

- *Seminole County Government Community Assistance Office*
- *SafeHouse*
- *Seminole County Public Schools Families in Need program*
- *Continuum of Care FL507/The Central Florida Commission on Homelessness*
- *Embrace Families*

*Additional Details:*

*Families that are participants in the Seminole County Public School "Families in Need" program or Families that are Homeless referrals from the "Seminole County Community Assistance Office" as a part of the Seminole County Homeless Task Force Initiative. Initially, 25 vouchers are being set aside for this preference. If any of these 25 vouchers turns over through attrition, a homeless family referral will be issued the replacement voucher. If all 25 voucher slots are in use, 1 out of every 5 regular turnover vouchers will be made available for this preference. (Example: if the SCHA needs to issue 5 vouchers to fill vacant positions, 1 of the 5 issued will be to a homeless referral, the other 4 will come from the waiting list) Pursuant to the MOU, SafeHouse may utilize up to 5 vouchers.*

The housing authority looks forward to this partnership and will continue support HSN's efforts to end homelessness in Central Florida.

Sincerely,

A handwritten signature in blue ink, appearing to read "Shannon Young".

Shannon Young  
Executive Director

**FY 2021**  
**FL-507 - Orlando/Orange, Osceola,  
Seminole Counties Continuum of Care**  
**3A-2a. Healthcare Formal Agreements**

**APPLICANT: HOMELESS SERVICES NETWORK**

**PROJECT: 2021 New Housing and Health Care PSH**

**P.1 Healthcare Agreements - HCCH**

**P.2 Healthcare Agreements – Aspire Healthcare Partners**



## Health Care Center For The Homeless

September 22, 2021

**page 1**

Ms. Martha Are  
Homeless Services Network of Central Florida  
142 E. Jackson Street  
Orlando, FL 32801

Ms. Are:

Health Care Center for the Homeless, Inc. (HCCH), dba Orange Blossom Family Health, is pleased to provide this Letter of Commitment to provide a minimum of \$20,000 in health care services for at least 10 clients served by a new Housing and Health Care Permanent Supportive Housing Project.

HCCH will commit medical, dental, and behavioral health counseling services for at least 10 program participants for the duration of the 12-month grant term, anticipated to begin in the Fall of 2022. Services to be provided may include primary and preventive medical care; oral health services; health services for persons living with HIV; and mental health and substance use counseling (excluding in-patient treatment). Program participants are anticipated to have crucial health care concerns and services will be tailored to the needs of these clients.

Funding for the services to be provided for these clients will be provided by non-HUD government funds, private grants and/or Medicaid or Medicare revenue where applicable.

We are please to continue and expand our partnership with the Homeless Services Network of Central Florida through this new Housing and Health Care Project.

Yours in health,

Bakari F. Burns, MPH, MBA  
President and Chief Executive Officer





September 22, 2021

page 2

Martha Are, CEO  
Homeless Services Network  
142 E. Jackson St  
Orlando, FL 32801

Dear Ms. Are ,

Please accept this letter as evidence of our commitment to partner with you in support of your new Housing and Health Care Permanent Supportive Housing Project. Aspire will provide \$25,000 in mental health services for 10 program participants to be served during the Fall 2022-Fall 2023 fiscal year. These individuals will be provides access to the Aspire continuum of care, including crisis stabilization, assessment and referral, case management, outpatient counseling, medication management, inpatient psychiatric care, and other behavioral healthcare services as needed. Services will be delivered in accordance with individualize client needs according to individual services plans. All services provided will be pending bed and provider availability. Funding will be provided for all eligible clients through Florida Medicaid or DCF SAMH funding in partnership with the local Managing Entity, the Central Florida Cares Health System.

Aspire is a comprehensive, community-based behavioral healthcare organization that provides prevention, intervention, and treatment to individuals and families coping with mental health, substance abuse, and co-occurring disorders, juvenile delinquency, HIV/AIDS, Hepatitis, and other behavioral health issues. Each year, Aspire serves over 35,000 individuals and provides more than 1,000,000 client specific services.

Aspire greatly values our collaborations with other organizations serving our Central Florida community as we work together to transform our community. We recognize that a multi-disciplinary approach is needed to solve the crisis of affordable housing and homelessness that we are currently facing, and we look forward to partnering with the Homeless Services Network to assist in this initiative.

Sincerely,

Babette Hankey  
President & CEO

5151 Adanson Street, Orlando, Florida 32804 | (407) 875-3700

