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 2023 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
- 2. The FY 2023 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 2023 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 HÚD's funding determination.

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

1A. Continuum of Care (CoC) Identification

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
 Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1A-1. CoC Name and Number: FL-605 - West Palm Beach/Palm Beach County

CoC

1A-2. Collaborative Applicant Name: Palm Beach County Board of County

Commissioners

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Palm Beach County Board of County

Commissioners

1B. Coordination and Engagement–Inclusive Structure and Participation

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

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 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.
	1. 1
	In the chart below for the period from May 1, 2022 to April 30, 2023:
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC's coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC's geographic area:

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

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16.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
17.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
18.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	Yes	Yes
24.	Substance Abuse Service Organizations	Yes	Yes	Yes
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	Yes	Yes	Yes
29.	State Domestic Violence Coalition	Yes	Yes	Yes
30.	State Sexual Assault Coalition	Yes	Yes	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.				
35.				

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

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

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1The Homeless and Housing Alliance (HHA), the Continuum of Care (CoC) for Palm Beach County (PBC), communicates a transparent invitation process using a variety of techniques to solicit new members, such as public postings on the HHA website. There are membership applications and an invitation for people with lived experience, businesses and organizations to join at every HHA meeting. The HHA actively seeks out engagement from leaders of established systems who have knowledge in particular facets of homelessness, particularly those who speak for underrepresented groups. By getting in touch with prospective members directly and explaining what's involved and how much time is needed, the HHA is transparent in its approach. The HHA is able to demonstrate the mutual benefits attained through collaboration and pinpoint strengths within particular fields of expertise. 2The HHA ensures that communication with people with disabilities is just as successful as communication with people without disabilities and is in compliance with the ADA. In addition to a formal public invitation that is regularly sent to the county listsery, the HHA offers an online invitation for membership on its website. Additionally, invitations are extended at all Project Connects and open-to-thepublic HHA events. Regardless of a person's physical, sensory, or cognitive limitations, all HHA messages are available in a range of digital formats, along with auxiliary support. Website documents and email attachments can both be in PDF format. Zoom is used to host virtual meetings and offers a number of closed captioning alternatives. On demand, additional accessibility alternatives, such as reading services, ASL, large print, or meeting transcripts, are available. 3The HHA has organized a number of on-going, in-person Community Homeless Summits to facilitate dialogue with members of marginalized communities and their organizations. The HHA wants to promote intercultural communication within the framework of the homeless services system in order to maintain relationships and distribute power in relationships with culturally distinct communities in a fair and effective manner. Strategic planning, street outreach, and gap analyses are all tools the HHA uses to promote equitable representation as it works to contact, engage, and support vulnerable people.

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

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1The HHA solicits a broad array of stakeholders who are knowledgeable about homelessness. The HHA's technique for obtaining various viewpoints and ideas begins with its membership. The HHA actively recruits community members, those with lived experience, and cross-system partners. The Collaborative Applicant (CA) meets frequently with public housing authorities, local municipalities and healthcare organizations to exchange information and devise solutions. The HHA created six committees that meet monthly to discuss innovative concepts related to ending homelessness as outlined in Leading the Way Home, PBC's plan to end homelessness.2All HHA meetings are public, and all meeting information is provided via email and is posted publicly on the HHA website. All HHA meetings are open to non-members and information about the meetings are announced via listsery. An annual calendar of HHA meetings and trainings is distributed in the beginning of the year. HHA meeting minutes and training materials are posted in video format and PDF and are sent out electronically to the listsery. 3The HHA ensures that all people can physically access them to provide feedback on homelessness no matter their ability. A public summit was established to gain feedback when considering the development of new policies or make change to existing standards and public comment is welcomed. Other opportunities include in-person public input including the monthly HHA General Membership Meeting which has a standing agenda item for public comment. The meetings are held virtually and in-person to accommodate differently abled persons and also includes closed-captioning. The HHA makes use of the following to guarantee effective communication with people with disabilities: TTY phone lines, large print materials, access to interpreter services, and electronic documents. 4The HHA has held summits attended by people who are currently homeless, local municipalities, services providers, health care providers, public housing authorities, law enforcement agencies, DV shelters, the VA, education providers, and many other organizations. Numerous areas of concern as well as recommendations and proposals for system reform were revealed. There have been meetings created solely for those currently experiencing homelessness to provide feedback about specific issues. In order to address issues and offer solutions, this kind of information is documented and shared with the various HHA Committees to begin working on

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

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1The CA met with organizations that had not previously received CoC funding and urged them to apply, particularly those serving populations that were identified as HHA priorities. The listsery of the entire PBC Community Services Department (CSD) received an email encouraging new agencies to apply. At monthly HHA meetings new candidates were invited to take part in the technical assistance (TA) workshop which included a process overview and a town hallstyle Q&A session. The PBC CSD website and the HHA provided information on the CoC New Competition and included resource links to apply. The details were also disseminated via the county's social media pages. All NOFOs are published in the Vendor Self-Service (VSS) system of PBC, which automatically publishes them in the Palm Beach Post, which is distributed throughout PBC.2Various methods are used to notify new project candidates about the procedure for submitting project applications. A TA workshop is offered to explain the entire process, followed by a Q&A session. Detailed information on the entire application procedure is also available on the HHA and CSD websites. CA staff is on hand to answer applicants' inquiries concerning the process. Applicants are provided a unique email address to submit questions. To ensure that everyone has access to the same information, all queries and answers are then made publicly available on the HHA website.3The CA staff evaluates each proposal to determine whether it meets threshold requirements. During a public meeting, the Non Conflict Grant Review Committee (NCGRC) reviews, assesses, scores, and ranks the applications in accordance with the HHA priorities. Recommendations are sent to the HHA Governance Board for evaluation and approval before being sent to HUD. Along with an email informing the HHA membership of the outcomes, this information is made publicly available on the HHA and county websites.4The HHA employs a variety of techniques to guarantee that everyone, including those with impairments, can access information on how to apply for CoC funding if they had not been previously funded. The monthly HHA meetings and TA workshops are available in person and virtually with the availability of closed captioning. Additionally, to ensure efficient communication with people with disabilities, the HHA uses the following methods: TTY phone lines, publications in large print, availability of interpretation services, and electronic documents in formats like PDF and email

1C. Coordination and Engagement

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

 - 24 CFR part 578;- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

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18.	
1C-2.	CoC Consultation with ESG Program Recipients.
	NOFO Section V.B.1.b.
	Describe in the field below how your CoC:
1.	consulted with ESG Program recipients in planning and allocating ESG Program funds;
2.	participated in evaluating and reporting performance of ESG Program recipients and subrecipients;
3.	provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area; and
4.	provided information to Consolidated Plan Jurisdictions to address homelessness within your CoC's geographic area so it could be addressed in the Consolidated Plan update.

1PBC has the ability to set its own funding goals and programmatic priorities as an entitlement county. The HHA, one of Florida's biggest jurisdictions, is fortunate to be a state ESG-CV recipient and a member of the state office on homelessness. They collaborate with various local and state jurisdictions on a monthly basis. Therefore, with regard to ESG funding, the HHA's responsibility is to review and analyze the data amassed through the PIT, HMIS, and HIC in order to make suggestions regarding the intended use of ESG money.2 The HHA serves as the funding source for all of the ESG Program funds. The CA is responsible for the oversight of all ESG agreements, contracts, and yearly monitoring. Data from HMIS and rigorous evaluation and performance reporting of ESG Program recipients is the foundation for recommendations for future funding and program activities.3The HHA provides the Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to all seven (7) Consolicdated Plan jurisdictions within its geographic area and is published annually to the public.4When the Department of Housing and Economic Development (HED) invites public feedback as a step in updating the Consolidated Plan for PBC, the HHA is an active participant. Recently, the HHA provided data for the Action Plan including the lack of affordable housing, the need for an additional Homeless Resource Center and the need for community resources for those experiencing homelessness. The updated Consolidated Plan included these items and outlined how these items would be paid for and how the HHA would prioritize them through the ESG program's emergency shelter component.

1C-3.	Ensuring Families are not Separated.
	NOFO Section V.B.1.c.
	Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate

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	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	No
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 questions or requesting technical assistance to resolve noncompliance by service providers.	Yes

1C-4. CoC Collaboration Related to Children and Youth–SEAs, LEAs, School Districts.

NOFO Section V.B.1.d.

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

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

1C-4a. Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.

NOFO Section V.B.1.d.

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

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To ensure that school-aged children and their families who are experiencing homelessness receive equal help as others without housing insecurity and may access educational programs, events, and services throughout PBC, the HHA is involved in a number of formal agreements with youth education providers, local education agencies (LEAs), and the local school district. The HHA Governance Charter specifies a reserved seat for a member of the PBC School District, which has been held by our local McKinney-Vento Liaison for the past several years. In order to share data and pertinent information on all homeless students and their families, the PBC CSD, the CA and the HHA have entered into a formal partnership. Data on students experiencing homelessness can be entered into HMIS, and local outreach staff can get in touch with the families to assess their needs, offer resources for connecting to housing and related services, and guide families through the programs. A member of the PBC School Board sits on the Board of County Commissioner appointed Homeless Advisory Board (HAB) and, together with the HHA, they have formalized the relationship between the organizations so that all systems can work collaboratively instead of individually. Both parties have benefited from the strengthened collaboration with the PBC School Board and the McKinney-Vento Liaisons. The enhanced partnership with the PBC School Board has been mutually beneficial. The HHA is strengthening and formalizing partnerships with post-secondary institutions to expand the services and resources available to young people on campus who may be facing homelessness. The HHA and the CA also collaborate closely with the homeless liaisons in the school districts to identify homeless children and families across PBC. During CE, housing service providers ensure that every family with children ages 0-7 are connected with the Early Learning Coalition and they are able to obtain quick access to services. Additionally, they make sure that every student has completed the McKinney Vento Program referral and is connected with their liaison. The HHA is constantly looking for LEAs and youth education organizations to partner to help better coordinate services for the families experiencing homelessness or at risk of homelessness. The HHA is dependent on both of these partnerships in order to end youth homelessness

1C-4b. Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services.

NOFO Section V.B.1.d.

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

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The HHA has adopted a policy and set of procedures requiring programs to inform individuals and families who become homeless of their eligibility for education services, regardless of funding. During Coordinted Entry, the HHA ensures that all programs within the continuum provides children and adults information on the availability of educational resources and refers clients through its assessment process when appropriate. In particular, agency staff serving households with school-aged children and youth are required to adhere to the following education assurances: First, they must establish policies and practices that are consistent with, and do not restrict the exercise of rights provided by the McKinney-Vento Act's education subtitle, and other laws relating to the provision of education and related services to individuals and families experiencing homelessness; and second, they must designate a staff member to make sure that kids are connected to the right community resources, including early childhood initiatives like Head Start, Part C of the Individuals with Disabilities Education Act, and McKinney-Vento education services, and that they are enrolled in school. To ensure that all providers and school personnel are familiar with these procedures, CSD and the CA train school board staff on resources available throughout the CoC and how to refer families for assistance. The Mckinney-Vento Liaisons in turn educates all homeless providers about eligibility for youth and families for educational services.

C-4c. Written/Formal Agreements or Partnerships with Early Childhood Services Providers.

NOFO Section V.B.1.d.

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

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

1C-5. Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Collaboration with Federally Funded Programs and Victim Service Providers.

NOFO Section V.B.1.e.

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

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	Organizations	
1.	state domestic violence coalitions	Yes
2.	state sexual assault coalitions	Yes
3.	other organizations that help this population	Yes

1C-5a.	Collaboration with Federally Funded Programs and Victim Service Providers to Address Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
		•
	Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:	

2. ensure all housing and services provided in the CoC's geographic area are trauma-informed and

(limit 2,500 characters)

1. update CoC-wide policies; and

can meet the needs of survivors.

 The CoC-wide policies and procedures for survivors of domestic violence (DV) are currently being updated by a workgroup within the HHA Support Services Committee to include safety planning, CE access points, and the process for referrals. These policies include input from victim service providers, state DV coalitions, and state sexual assault coalitions. The main objective is to offer fair and equal access to resources and services when a person enters the homeless system based on their unique needs and preferences. The most recent HMIS standards stipulate that victim service providers are not allowed to reveal identifying information. The HHA includes system-wide coordination requirements in the standards updates every year to ensure integration with programs primarily supporting DV survivors. According to the HMIS Standards, entering protected personal data about survivors in prohibited. 2.To best meet the safety needs of DV survivors, those who have experienced dating violence, sexual assault, stalking, and trafficking, the HHA, DV service providers, and PBC Victim Services (VS) are working to develop guidelines. The HHA sponsors annual training on HHA standards, rules, and procedures as well as new HUD mandates and best practices. Trainings offered regularly each year include those on trauma-informed care, client-centered care, and DV. The HHA collaborates with experts in DV, PBC VS, law enforcement, and other fields whose organizations have incorporated some of these best practices. All HUDfunded organizations and other HHA members are required to adhere to the HHA standards, regulations, and procedures, which also include safety and planning measures. This year the HHA offered trainings in Harm Reduction and Cultural Competency. The HHA is working on making training available through the HHA website and offering it throughout the year to new hires. The CA oversees all CoC and ESG-funded initiatives to guarantee that all service providers deal with DV survivors in accordance with trauma-informed standards. The two domestic violence organizations within the HHA have been available to train all service providers on how to conduct evaluations and referrals for families affected by DV as one of their top goals for the coming year. Through this training, families are less likely to experience new trauma while they get treatment.

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1C-5b.	Coordinated Annual Training on Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC coordinates to provide training for:	
1.	project staff that addresses best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and	
2.	Coordinated Entry staff that addresses best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).	

 The HHA ensures that service providers receive annual training on best practices to assist victims of dating and DV, sexual assault, and stalking. Both of the state-certified DV centers in the HHA provide information and instruction to aid professionals in identifying the symptoms of DV and to facilitate discussions regarding sensitivity to the needs of survivors. All staff employees who administer, coordinate, or provide direct advocacy or counseling services to survivors and their children are required to take thirty hours of training each year (Section 90.5036 of the FL Statutes). Additionally, 16 hours of annual training in domestic violence, elder abuse, child abuse, or other subjects pertaining to providing efficient assistance to survivors and their dependents must be completed by all direct service personnel and volunteers. All DV training uses empowerment-based, trauma-informed, hope-centered, solutionfocused methodologies. Collaboratively, the HHA has been able to develop a parallel CES for DV survivors and their families. Clients can be referred to the CES while in shelter thanks to the DV system's mutual flow with HMIS. This ensures that the anonymity and safety of survivors is maintained while ensuring fair access, employing a standardized evaluation, and prioritizing placement and referral to services chosen by the participant.2. All DV training must comply with the CES guidelines regarding frequency and requirements. Training announcements are distributed through the HHA listsery and HHA meetings. DV agencies execute planning and safety processes internally. The CA monitors activities to confirm DV employees are properly trained and follow safety regulations. The HHA ensures that annual DV training is accessible to all HHA members so that non-victim providers are informed of safety precautions and tools available to help DV survivors while providing safe and adaptable housing options. Employees who don't provide direct services but record data and case notes have received training on how to keep client information secure and confidential. The HHA member agencies are responsible for the safety of their staff and they receive the proper training that complies with all applicable local, state, and federal laws regarding confidentiality. DV program staff is required to be trained in trauma-informed care annually, with a focus on victim protection, confidentiality, and the development of staff safety plans and procedures.

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

(limit 2,500 characters)

1. Safety planning is integral to the CE system, prioritizing survivor and staff well-being. The HHA partners with VS agencies to ensure that the CE system includes the necessary protocols and includes a client-centered approach. The first step is to conduct a comprehensive assessment which evaluates vulnerability, including DV, substance use and mental health concerns, or other risks. Trained staff identify safety concerns through targeted questions. If safety concerns are identified, the next step is to create a safety plan. Safety plans are tailored to address immediate threats, connect participants with resources and provide emergency contacts in case of crisis. In the event of urgent safety situations, there are also crisis response protocols in place to address safety situations promptly. The CE system continuously monitors and evaluates the effectiveness of their safety planning protocols. The CE system prioritizes confidentiality with stringent protocols to ensure the privacy and security of client information. 2. Upon entering the CE system, survivors are informed about confidentiality policies and practices. Participants are required to provide informed consent for the collection, sharing and use of their personal information and withdrawal of consent. Access to information is restricted to authorized personnel, ensuring privacy. CE staff and partner agencies involved in CE receive training on confidentiality regulations and protocols. This training emphasizes the importance of safeguarding client information, defines what constitutes confidential data, and outlines the consequences of breaches. CE staff adheres to protocols outlined in the VAWA notification, including posting VAWA information, making it readily available to anyone who requests it and providing it to all participants. CE staff are also trained to provide disclosures to participants to maintain autonomy when providing personal information. CE staff adheres to VAWA confidentiality guidelines, including notifying applicants and participants about their rights to confidentiality under VAWA and the obligation to keep confidential any information from a victim unless the disclosure is requested or consented to by the individual in writing. Data is stored securely with encryption and password protection. For reporting, de-identified data is used to protect privacy. Regular audits and reviews ensure strict adherence to protocols, with incident response plans in place.

1C-5d.	Used De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below:	
1.	the de-identified aggregate data source(s) your CoC used for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and	
2.	how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.	

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1. The HHA is able to gain valuable insights into the prevalence, needs and outcomes of survivors, facilitating informed decision-making and targeted resource allocation to address needs within our community. The HHA collects de-identified aggregate data on survivors of DV from several sources. There are two state-approved DV shelters that manage data through the state-run Osnium Database. Additionally, local sexual assault crisis centers contribute deidentified client demographic data, service utilization and outcomes. Law enforcement agencies provide statistics on reported incidents while ensuring no personally identifiable information is included. Healthcare facilities share deidentified medical records, including injuries and treatments related to DV, sexual assault and stalking. Data from crisis hotlines and helplines include deidentified call logs and trends in survivor inquiries for immediate assistance. Partnered nonprofits compile comprehensive statistics on survivor demographics, needs, and services accessed. The CA and HMIS lead is able to aggregate, anonymize, and analyze the collected data to identify trends, gaps in services, and emerging issues related to DV, sexual assault, and stalking survivors. The HHA uses de-identified aggregate data strategically to evaluate and address the specialized needs related to DV and homelessness.2.Deidentified aggregate data helps to conduct comprehensive needs assessments to understand the scope and specific challenges faced by DV survivors experiencing homelessness. Demographic trends, service utilization patterns, and risk factors are all examined. By analyzing the data, gaps in services and support are identified including pinpointing areas where survivors are not accessing needed resources or where specialized services for DV survivors experiencing homelessness may be lacking. Resources are allocated more efficiently when informed by data analysis, including directing funding and services to areas where the needs are most acute while ensuring that shelters, support services, and outreach efforts are well-targeted. By systematically collecting, analyzing, and acting upon de-identified aggregate data, the HHA ensures that our efforts to meet the specialized needs of DV survivors experiencing homelessness are evidence-based, responsive, and continually improving to better serve this vulnerable population.

·
1C-5e. Implemented Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.
NOFO Section V.B.1.e.
Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:
1. whether your CoC has policies and procedures that include an emergency transfer plan;
2. the process for individuals and families to request an emergency transfer; and
3. the process your CoC uses to respond to individuals' and families' emergency transfer requests.

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1.HHA prioritizes clear communication with those seeking assistance, ensuring they understand the emergency transfer policies. The emergency transfer policies are in line with the VAWA guidelines that enables DV survivors to ask for an emergency transfer to another location. This info is shared during CE. with written guidelines and CES support intake. Our CES team, trained in safety planning and emergency relocation, educates DV survivors about VAWA and transfer procedures. Case managers discuss emergency transfers during housing enrollment, assisting participants in safety planning, housing choices, paperwork, and logistics. The HHA collaborates closely with participants and offer various safe service options for DV survivors and homeless families.2.In situations necessitating an emergency transfer, case managers play a vital role in assisting participants. Their support includes outlining the process, aiding in the creation of safety plans, helping participants choose secure housing alternatives, and ensuring all necessary paperwork is completed. Throughout this process, participants are fully informed about each step, and decisions are made collaboratively, considering the participant's preferences and needs. Case managers also assist in coordinating the request, seeking extra assistance if required, and managing the logistical details of the move. The HHA offers a range of secure service options tailored to the specific needs of DV survivors experiencing homelessness.

3. Within the CE system, assessments are performed to evaluate the DV history of survivors. Individuals at an imminent risk of violence are swiftly directed to DV shelters, ensuring their safety. Law enforcement may assess DV survivors, offering transportation and recommending contact with a 24-hour hotline in some cases. DV survivors also have the option to independently reach out to this hotline, where staff assess their situation and facilitate immediate entry into an Emergency Shelter. The HHA and all of the housing providers place a high premium on maintaining participant confidentiality when an emergency transfer request is made, unless explicit written consent for disclosure is provided by the participant.

1C-5f.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.
	NOFO Section V.B.1.e.
	Describe in the field below how your CoC:
1.	ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within the CoC's geographic area; and
2.	proactively identifies systemic barriers within your homeless response system that create barriers to safely house and provide services to survivors of domestic violence, dating violence, sexual assault, or stalking.

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1. The HHA employs a comprehensive and survivor-centric approach to ensure that individuals impacted by DV, dating violence, sexual assault, or stalking have safe access to all available housing and services within the geographic area. By combining CE, specialized services, safety planning, confidentiality measures, and a commitment to survivor empowerment, the HHA strives to create a secure and supportive environment for survivors to rebuild their lives. The HHA has established a well-structured CE that acts as a central point of entry for individuals seeking housing and services. This system ensures that survivors can easily access assistance without disclosing sensitive information to multiple providers. The HHA collaborates with DV service providers to offer specialized assistance tailored to survivors' needs. This includes DV shelters, legal advocacy, counseling, and support groups, providing survivors with comprehensive care options. The HHA ensures that survivors are aware of their legal rights and protections, including those offered by the Violence Against Women Act (VAWA). This empowers survivors to make informed choices regarding housing and services. The HHA promotes cultural competence among service providers to ensure that survivors from diverse backgrounds receive culturally sensitive and relevant support.2. By proactively identifying and addressing systemic barriers, the HHA aims to create a more inclusive, survivor-centered, and responsive homeless response system. This approach not only enhances access to safe housing and services but also fosters a supportive environment where survivors can rebuild their lives with dignity and security. The CoC actively seeks input from survivors themselves. Through direct interviews survivors are encouraged to share their experiences and highlight any barriers they encountered while seeking housing and services. The HHA collaborates closely with DV-specific service providers and organizations. This partnership allows for insights into the unique needs of survivors and the systemic challenges they may encounter within the broader homeless response system. The HHA examines how systemic barriers intersect with other factors, such as gender, race, ethnicity, sexual orientation, and disability, which can compound the challenges faced by survivors. This intersectional analysis helps identify disparities and informs targeted interventions.

1C-5g.	Ensuring Survivors With a Range of Lived Expertise Participate in Developing CoC-Wide Policy and Programs.	
	NOFO Section V.B.1.e.	
		•
	Describe in the field below how your CoC:	
1.	ensured survivors with a range of lived expertise are involved in the development of your CoC-wide policy and programs; and	
2.	accounted for the unique and complex needs of survivors.	

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1.By actively involving survivors with diverse lived expertise in the development of CoC-wide policies and programs, we aim to create more inclusive, survivorcentered, and effective initiatives. This approach ensures that the policies and programs implemented are sensitive to the unique needs and perspectives of survivors, ultimately enhancing their access to safe housing and services. Survivors are actively consulted and invited to provide feedback at various stages of policy and program development. Their input is sought during the planning, design, implementation, and evaluation phases. Survivors can identify systemic and institutional barriers that may hinder access to housing and services. Survivors provide trauma-informed input to ensure that policies and programs consider the emotional and psychological needs of individuals who have experienced DV. Survivors are able to highlight the intersectionality of their experiences, considering factors like race, ethnicity, gender identity, and disability. This helps shape policies that address the unique challenges faced by different groups. The HHA ensures that survivors have safe and confidential channels to express their interest in participating in policy development. Through the HHA's collaboration with DV service providers who have established relationships with survivors, the HHA is able to identify survivors who are interested in being engaged. The intentional and meaningful integration of survivors' feedback is a critical aspect of policy and program development within the HHA and is centered around survivors' needs and preferences. Their feedback is the cornerstone of the decision-making process and this feedback is actively considered. Policy and program adjustments are made to address identified concerns and align with survivors' preferences. 2. The HHA places a strong emphasis on accounting for the unique and complex needs of DV survivors. Survivors are respected by their self-identification and expression. Their choices regarding name, gender, and language preferences are honored without question or judgement. We respect survivors' choices regarding their preferred communication channels. Survivors are empowered to select the method that aligns with their comfort and safety. Survivors are provided with clear information about the purpose, scope, and potential impact of their involvement. Informed consent is obtained, ensuring they understand and agree to their participation.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+–Anti-Discrimination Policy and Training.		
	NOFO Section V.B.1.f.		
1	Did your CoC implement a written CoC wide anti-disprimination policy analysing that I CPTO+ individu	uala and	Yes
	Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individual families receive supportive services, shelter, and housing free from discrimination?	uais ariu	165
2.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the E to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Fin	qual Access al Rule)?	Yes
3.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equa Accordance With an Individual's Gender Identity in Community Planning and Development Programs Identity Final Rule)?	l Access in Gender	Yes
1C-6a	n. Anti-Discrimination Policy–Updating Policies–Assisting Providers–Evaluating Compliance–Addressing Noncompliance.		
	NOFO Section V.B.1.f.		

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	Describe in the field below:
1.	how your CoC regularly collaborates with LGBTQ+ and other organizations to update its CoC-wide anti-discrimination policy, as necessary to ensure all housing and services provided in the CoC are trauma-informed and able to meet the needs of LGBTQ+ individuals and families;
2.	how your CoC assisted housing and services providers in developing project-level anti- discrimination policies that are consistent with the CoC-wide anti-discrimination policy;
3.	your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and
4.	your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.

1. The HHA maintains ongoing collaboration with LGBTQ+ organizations to update their anti-discrimination policy. They prioritize regular dialogue to ensure housing and services are trauma-informed and inclusive. This collaboration informs policy adjustments that promote safety and respect for LGBTQ+ individuals and families, fostering a supportive environment within the HHA. The HHA actively supports housing and service providers in developing project-level anti-discrimination policies aligned with our CoC-wide policy. The HHA Race and Equity Committee analyzes all updates to ensure an equity lens has been incorporated.2. The CA provides guidance, resources, and training to ensure consistency. By fostering a collaborative approach, help is available so providers can create inclusive policies that uphold the HHA's commitment to non-discrimination, making sure all individuals and families are treated with respect and fairness.3. The CA employs a rigorous compliance evaluation process. They conduct regular reviews, audits, and assessments of housing and service providers to ensure adherence to the anti-discrimination policies. This includes site visits, data analysis, and feedback mechanisms. The CA conducts annual monitoring where reviews of reports, and evaluations of grievance complaint rulings, can verify compliance with fair housing and non-discrimination regulations. Non-compliance issues are addressed through corrective actions and continuous monitoring to guarantee that all policies are consistently followed.4. The HHA has a structured process for addressing noncompliance with anti-discrimination policies. It begins with documented reports or observations of noncompliance. An investigation is conducted, and corrective actions are outlined. Providers are given an opportunity to rectify issues, and if noncompliance persists, sanctions may be imposed, including funding adjustments or termination of participation. Continuous monitoring ensures long-term compliance. Technical assistance will be provided to all agencies that are found to be noncompliant. The CA may also mediate grievances with all parties until a resolution is reached.

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

NOFO Section V.B.1.g.

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

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

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Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 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?
Palm Beach County Housing Authority	10%	Yes-Both	No
West Palm Beach Housing Authority	20%	Yes-Both	No

10.70	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section V.B.1.g.	
	Describe in the field below:	
1.	steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or	
2.	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.	

1.PBC has six Public Housing Authorities (PHA), with the two largest being West Palm Beach (WPBPHA) and PBC PHA totaling 6,500 units. The HHA collaborates with all PHAs, particularly the largest two. Since the approval of the PBC Ten Year Plan to End Homelessness in 2008. HHA has been working with each PHA to incorporate a Homeless Preference into their charters and policies. WPBPHA has successfully added a Homeless Preference to its policies. In 2020, WPBPHA, HHA, and PBCPHA partnered to begin construction on 17 housing units for homeless families with children under 18. WPBPHA also acted as a housing developer and secured funding from PBC's sales tax proceeds dedicated to homelessness. HHA will oversee the project, PBC will provide the land and funding, and WPBPHA will manage and develop the housing. This project is the first of its kind in PBC and serves as a model for very low-income multifamily housing with a small urban footprint. The partnership with PBC PHA continues to yield positive outcomes. Future projects include adding mainstream vouchers for HHA, securing Emergency Housing Vouchers (EHV) for the homeless, collaborating with other housing authorities like Pahokee PHA, and involving PHAs in real estate development decisions. PBC PHA also has representation on the HHA and a seat at the development table, appointed by the Board of County Commissioners, 2.By taking these steps in collaboration with the two largest PHAs within our geographic area, we have successfully adopted a homeless admission preference that enhances access to housing for individuals experiencing homelessness. This proactive approach aligns with the HHA's commitment to addressing homelessness and ensuring housing opportunities for those in need.

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

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

2.	1111011011011	y assisted housing owners			Yes
	PHA				Yes
3.	Low Inco	ne Housing Tax Credit (LIHTC) developments			Yes
4.	Local low	-income housing programs			Yes
	Other (lim	it 150 characters)			
5.					
	1C-7c.	Include Units from PHA Administered Program NOFO Section V.B.1.g.	ms in Your CoC's Coordinated Entry.		
		In the chart below, indicate if your CoC include CoC's coordinated entry process:	les units from the following PHA progra	ms in your	
	1	Emergency Housing Vouchers (EHV)		Ye	s
		Family Unification Program (FUP)		Ye	
		Housing Choice Voucher (HCV)		Ye	
		HUD-Veterans Affairs Supportive Housing (HU	ID-VASH)	No	
		Mainstream Vouchers	<i>-</i>	Ye	
		Non-Elderly Disabled (NED) Vouchers		Ye	
		Public Housing		No	
		Other Units from PHAs:			
	0.	<u> </u>			
	_				
	1C-7d.	Submitting CoC and PHA Joint Applications f	or Funding for People Experiencing Ho	melessness.	
	1C-7d.		or Funding for People Experiencing Ho	melessness.	
			bmit a competitive joint application(s) fo	r funding Yes	
		NOFO Section V.B.1.g. Did your CoC coordinate with a PHA(s) to sular jointly implement a competitive project serhomelessness (e.g., applications for mainstre	bmit a competitive joint application(s) fo	rfunding Yes	gram Funding Source
		NOFO Section V.B.1.g. Did your CoC coordinate with a PHA(s) to sul or jointly implement a competitive project senhomelessness (e.g., applications for mainstre (FUP), other programs)?	bmit a competitive joint application(s) fo ving individuals or families experiencing eam vouchers, Family Unification Progra	r funding Yes am Pro a joint Main	gram Funding Sourc nstream, EHV, disabled, elderly, ly reunification
	1.	Did your CoC coordinate with a PHA(s) to sull or jointly implement a competitive project sen homelessness (e.g., applications for mainstre (FUP), other programs)? Enter the type of competitive project your Cod application for or jointly implement. Coordinating with PHA(s) to Apply for or Implemergency Housing Voucher (EHV).	bmit a competitive joint application(s) fo ving individuals or families experiencing eam vouchers, Family Unification Progra C coordinated with a PHA(s) to submit a	r funding Yes am Pro a joint Mair Non fami	nstream, EHV, disabled, elderly,
	2.	Did your CoC coordinate with a PHA(s) to sul or jointly implement a competitive project ser homelessness (e.g., applications for mainstre (FUP), other programs)? Enter the type of competitive project your Cod application for or jointly implement.	bmit a competitive joint application(s) fo ving individuals or families experiencing eam vouchers, Family Unification Progra C coordinated with a PHA(s) to submit a	r funding Yes am Pro a joint Mair Non fami	nstream, EHV, disabled, elderly,

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Pi:	during Co.C. coordinate with any DIIA to analy for an implement finaling manifest for the contract of	lv
Vo	d your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice suchers dedicated to homelessness, including vouchers provided through the American Rescue an?	Yes
1C-7e.1	. List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored–For Information Only	
	s your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the / Program?	Yes
If yo	u select yes to question 1C-7e.1., you must use the list feature below to enter the name of every a your CoC has an active MOU with to administer the Emergency Housing Voucher Program.	
PHA		
Pahokee Housing A		
Palm Beach County		
West Palm Beach H		
Delray Beach Hous		

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

Name of PHA: Pahokee Housing Authority

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

Name of PHA: Palm Beach County Housing Authority

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

Name of PHA: West Palm Beach Housing Authority

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

Name of PHA: Delray Beach Housing Authority

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1D. Coordination and Engagement Cont'd

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;FY 2023 CoC Application Navigational Guide;

1D-2a. Project Evaluation for Housing First Compliance.

NOFO Section V.B.1.i.

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- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1D-	1. Discharge Planning Coordination.	
	NOFO Section V.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 no discharged directly to the streets, emergency shelters, or other homeless assistance programs	ot
1. Foster Care	Ye	es
2. Health Care	Ye	es
3. Mental Health Care	Ye	es
4. Correctional Facilities	Ye	98
Correctional Facilities	2. Housing First–Lowering Barriers to Entry. NOFO Section V.B.1.i.	98
I. Correctional Facilities	2. Housing First–Lowering Barriers to Entry.	98
I. Correctional Facilities 1D-	2. Housing First–Lowering Barriers to Entry.	
1. E. e. P. 2. E. e.	Housing First–Lowering Barriers to Entry. NOFO Section V.B.1.i. Inter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated price. Safe Hayen, and Transitional Housing projects your CoC is applying for in FY 2023 CoC.	d 1:

You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.

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	Describe in the field below:
	how your CoC evaluates every project—where the applicant checks Housing First on their project application—to determine if they are using a Housing First approach;
2.	the list of factors and performance indicators your CoC uses during its evaluation; and
	how your CoC regularly evaluates projects outside of your local CoC competition to ensure the

1. The HHA implements Housing First strategies in all its homeless services. The HHA operates low-barrier shelters and regularly assesses its procedures to remove any obstacles that might hinder or prevent individuals from accessing services. To achieve this, the HHA conducts daily meetings and collaborates with housing providers through case conferencing to review priority housing placements based on acuity lists. The Acuity List is the primary tool used for housing placements. The HHA places a strong emphasis on permanent housing as the central objective of its efforts. Importantly, participants are not required to engage in services or meet any preconditions before being placed in housing. The HHA places a premium on flexibility, offering individualized wrap-around services that prioritize client choice and autonomy. The CA evaluates adherence to Housing First practices through ongoing program monitoring. This monitoring tool includes objective measures to assess the application of Housing First principles, philosophy, and practices. 2. The HHA has an established set of factors and performance indicators to guide its evaluations. The accessibility of programs is not contingent on sobriety, income, or criminal history, except when mandated by state regulation. All participants are provided equitable access to services, regardless of their required service level upon entry. The evaluation criteria for rapid placement and stabilization in housing include the provision of necessary supports for housing maintenance, the absence of preconditions for entry, the average time it takes for the program to initiate housing, and the transitions to permanent housing.3. The HHA regularly evaluates projects to ensure their alignment with Housing First principles. Using a newly developed monitoring tool, the CA conducts comprehensive reviews of CE assessments, referral determinations, enrollment policies, procedures, and case notes. An annual administrative review is conducted for all projects funded by the CoC and Emergency Solutions Grant (ESG) programs. When areas of concern are identified, the CA provides written reports to the respective agencies, offering guidance for necessary corrections. This process allows the CA to identify and address barriers while providing technical assistance to ensure compliance with Housing First principles.

1D-3.	Street Outreach—Scope.
	NOFO Section V.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.

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1An effective approach to identifying programs and services for homeless individuals is to directly consult them. PBC's HSCA operates a specialized team known as the Homeless Outreach (HOT) team dedicated to this. The HOT team conducts one-on-one interactions at locations where homeless individuals are known to congregate. These interactions are friendly and non-threatening, with a primary goal of establishing trust and rapport, so team members can conduct assessments. Individuals always have the choice to accept assistance. The first step is simply asking, "How are you doing?" The HOT team is very responsive to the needs of the homeless community, considering special requests and known locations where homeless individuals gather. The teams are strategically organized and deployed to cover all areas of PBC, identifying people experiencing homelessness. They prioritize individuals using an assessment tool, and all those assessed are added to an acuity list. A scoring matrix is employed to evaluate chronicity, severity, and other pertinent factors to determine appropriate placement for those assessed 2The HOT team's coverage extends throughout 100% of the entire county, encompassing thirtynine incorporated municipalities and all unincorporated areas within the HHA's jurisdiction.3Street outreach efforts are conducted five days a week, with varying shifts, including early mornings and late evenings, to accommodate the community's diverse needs and respond swiftly to emergencies. To ensure comprehensive coverage, outreach teams are assigned specific geographic zones throughout the county, preventing duplication of services. 4The HHA has tailored its street outreach initiatives to focus on several vulnerable populations, including LGBTQ+ individuals, mentally ill youth, as well as individuals and families. New outreach teams have been added composed of peer specialists who target individuals least likely to seek assistance and more challenging to engage. These populations include those severely affected by mental illness, substance users, and chronically homeless individuals who resist engagement with institutions. Additionally, the HOT team is equipped to serve individuals with limited English proficiency, as outreach teams are proficient in multiple languages and assist individuals in navigating the social service systems. effective communications for persons with disabilities including large print, signlanguage interpreters. Braille, and other formats.

1D-4. Strategies to Prevent Criminalization of Homelessness.

NOFO Section V.B.1.k.

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

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

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

	HIC Longitudinal HMIS Data	2022	2023
Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	Longitudinal HMIS Data	420	635

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

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

		CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	SSDI–Social Security Disability Insurance	Yes
4.	TANF-Temporary Assistance for Needy Families	Yes
5.	Substance Use Disorder Programs	Yes
6.	Employment Assistance Programs	Yes
7.	Other (limit 150 characters)	

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.
	NOFO Section V.B.1.m
	Describe in the field below how your CoC:
1.	systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, SSDI, TANF, substance abuse programs) within your CoC's geographic area;
2.	works with project staff to collaborate with healthcare organizations, including substance abuse treatment and mental health treatment, to assist program participants with receiving healthcare services; and
3.	works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

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1The HHA provides current information about mainstream resources accessible to program participants throughout PBC. The HHA collaborates with Florida Department of Children and Families (DCF) for training sessions on mainstream benefits for the HHA. The trainings focus on assisting individuals experiencing homelessness applying for benefits, which include SNAP, TANF, and Medicaid. Participants can also submit electronic applications for assistance through the CA's online application system. The provided data encompasses a directory of links to various benefits, including public assistance, food stamps, and local food banks, as well as service options for those who are homeless or at risk of homelessness. The Social Security Administration (SSA) provides updates on available benefits. Provider agencies contribute by reporting services they offer and sharing resources during the monthly HHA Membership meetings.2The HHA collaborates with healthcare organizations, hospitals, crisis stabilization units, and treatment facilities throughout the county. The HHA facilitates connections between housing providers and healthcare organizations to assist participants in accessing primary care, substance abuse treatment, and mental health services. Also, the HHA works with the PBC Health Department to provide current resources and information. Individuals experiencing homelessness and those in homeless prevention programs are encouraged to apply for Medicaid and the PBC Health Care District, which delivers comprehensive medical, dental, primary, and preventive healthcare services to homeless individuals and families in PBC. The HHA Healthcare Committee is actively engaged in enhancing coordination with healthcare entities.3The HHA actively promotes the attainment of SOAR (SSI/SSDI Outreach, Access, and Recovery) certification during annual training initiatives. It leverages the expertise of SOAR-certified staff members who participate in HHA meetings. Furthermore, SSI/SSDI outreach efforts are ongoing and conducted by agencies that are crucial partners and members of the HHA. Facilitating access to SSI/SSDI benefits is a core strategy aimed at reducing barriers for program participants. The HHA provides information about SOAR training opportunities to its members. Completion of SOAR training is one of the factors considered when rating applications for CoC Program funding. Renewal applications are evaluated based on performance in increasing participants' income.

1D-7. Increasing Capacity for Non-Congregate Sheltering.

NOFO Section V.B.1.n.

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

While the HHA faced challenges in providing non-congregate shelter space at several of their facilities during the COVID-19 pandemic, they utilized federal emergency relief funds to establish and finance non-congregate shelter options through hotel and motel accommodations when no traditional emergency shelter was available. Prior to the pandemic, all shelters for individuals in PBC followed a congregate model. At the outset of the health crisis, the HHA, in collaboration with shelter providers, implemented temporary non-congregate shelter initiatives utilizing hotels, offering secure shelter, housing-focused case management, and additional supportive services. During this period, local PBC authorities took action to clear a homeless encampment in a local park. necessitating the relocation of over 120 individuals. Many of these individuals were at a heightened risk of severe medical complications if exposed to COVID-19 and required strict adherence to social distancing measures. This approach allowed for a gradual transition from the park encampment to the newly established shelter facilities. Non-congregate sheltering emerged as a crucial strategy to minimize the spread of infectious diseases, catering to participants who were either COVID-positive or affected by other contagious conditions such as Monkeypox. The HHA has sustained its partnerships with local motels to increase occupancy for clients directly impacted or indirectly affected by COVID-19. This model proved highly successful in PBC, not only in safeguarding client health and safety but also in facilitating participants' transition to permanent housing. Essential services were consistently provided to participants throughout their stay. Over time, the temporary programs served various populations, including accommodating overflow from existing shelters and addressing COVID outbreaks within congregate shelters. The HHA remains committed to identifying funding opportunities that can be leveraged to establish new non-congregate shelters. Furthermore, they are actively exploring alternative methods for utilizing unused county spaces to create smaller noncongregate shelters across the continuum of care. The HHA recognizes that non-congregate sheltering not only preserves lives and enhances capacity but also reduces the community spread of COVID-19, ultimately serving as a foundation for accessing long-term stable housing within the CoC.

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

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1. The onset of the COVID-19 pandemic necessitated the HHA to develop and maintain a highly detailed and ongoing response plan, which is still in progress. A formalized COVID response was established through collaboration among the Health Department, HHA, homeless service providers, and County Administration. The HHA has engaged in extensive collaboration with the Public Health Department and homeless programs to prevent and address infectious diseases within the homeless population. In response to COVID-19, various entities, including the PBC Health Department, the PBC Healthcare District, the HHA, and the County Administration, strengthened their partnerships and integrated their operations. Public health authorities regularly disseminate updates, CDC recommendations, and guidelines aimed at preventing and managing infectious diseases within the homeless community. In instances where shelter outbreaks occurred, representatives from the CoC and Public Health officials convened frequently to collaboratively develop tailored strategies for the Emergency Shelters. 2 Managing infectious disease outbreaks presents numerous challenges, and ongoing communication between the HHA, CA staff and the Health Department, including Public Health and Executive Health leadership, facilitates early detection and effective management of emerging issues. Regarding infectious diseases, the HHA works in concert with Public Health officials to ensure that housing programs are well-informed and equipped with the necessary resources. Joint efforts have resulted in various resources being provided to the community, such as flu shots, personal protective equipment (PPE), and COVID tests for individuals experiencing homelessness and the staff members of programs serving them. Additionally, information and support related to COVID vaccines and boosters have been made available. Specialized clinics and resources have been established to administer vaccines at shelters and to provide isolation for homeless individuals who test positive for COVID. Individuals who are homeless and are exposed to infectious diseases also have access to specialized care through outreach teams specializing in street medicine.

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

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1. The HHA effectively equipped homeless service providers with information to prevent infectious diseases, offering training to both providers and program participants. Throughout the COVID-19 pandemic, there was improved communication and coordination among the HHA, public health authorities, HOT team staff, County Administration, and the CA. The shared information remained consistent and followed best practices, covering topics such as social distancing, testing and vaccination resources, and the proper use of personal protective equipment (PPE). This information dissemination occurred regularly during monthly HHA meetings, through email alerts, and via television broadcasts. County Administration and public health officials provided daily reports on the pandemic, continually monitoring new local and national developments. These reports also included details about safety precautions and measures to prevent infectious diseases. This information was widely circulated within the HHA through various channels.2.A cooperative effort involving Public Health Officials, HOT team staff, County Administration, the CA, and the HHA was essential to prevent or manage infectious disease outbreaks among program participants. With access to information from the Centers for Disease Control and Prevention (CDC) and direct interactions with unsheltered homeless individuals in the community, all street outreach providers were equipped with CDC guidance to ensure the safety of the homeless population and staff members. The CA collaborated with shelters to implement and maintain sanitation and safety standards, including masking, screening, and social distancing measures. Information and support were provided to mitigate the spread of COVID-19 through isolation measures, including stays in hotels and motels. This allowed individuals at high risk who tested positive or were exposed to COVID-19 to be securely isolated from other participants. Ongoing safety procedures were implemented and updated for all emergency shelters under the HHA's purview. The entire community-wide team continued to convey consistent messages to the community to promote safety and awareness.

1D-9.	Centralized or Coordinated Entry System–Assessment Process.	
	NOFO Section V.B.1.p.	
	Describe in the field below how your CoC's coordinated entry system:	
1.	covers 100 percent of your CoC's geographic area;	
2.	uses a standardized assessment process; and	
	is updated regularly using feedback received from participating projects and households that participated in coordinated entry.	

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1. The HHA's CES is committed to focusing on individuals, families, and youth who are among the most vulnerable and are either currently homeless or at risk of homelessness. The primary objective of the CES is to minimize the duration of homelessness by facilitating swift and uncomplicated access to low-barrier or barrier-free housing solutions. The CES extends its coverage to include 39 incorporated municipalities as well as all unincorporated areas. To reach those individuals who may not actively seek assistance, the CES collaborates with outreach teams that span the entire county. Through collaboration with the HOT team and support from local partners engaged in street outreach, the CA plays a supervisory role in managing outreach efforts, coordinating service delivery. and making referrals for individuals residing in unsuitable living conditions. The HHA employs a standardized assessment process to prioritize assistance for those with the greatest needs. Vulnerability assessments are conducted using tools such as the VI-SPDAT, VI-F-SPDAT, and TAY VI-SPDAT. For individuals with the highest levels of vulnerability, case conferences are conducted multiple times each week. The CA offers annual SPDAT training to ensure housing providers and CE staff have a comprehensive understanding of the assessment process. While participants have the autonomy to decide which information to provide during the assessment, it's important to note that not answering specific questions may affect their eligibility for tailored services and subsequent prioritization. Staff responsible for conducting intake assessments undergo training in best practices and HMIS (Homeless Management Information System) data entry before being authorized to perform assessments. Once the assessment is complete, and participants have communicated their preferences and needs, and a suitable housing program has been identified, they are prepared for referrals and subsequent housing placement. 3. The CE process is subject to regular updates based on feedback received from both service providers and participants. Continuous improvement is achieved through ongoing workshops and routine evaluations conducted by the HHA. Recommended modifications are deliberated and presented to the HHA Governance Board, which includes individuals with lived experiences, for approval. The overarching goal of the HHA is to continually refine the CES, with the aim of eliminating barriers and promoting equity.

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

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1. The CES proactively engages individuals who are less likely to seek homeless assistance by forging partnerships with law enforcement, local government entities, school districts, street outreach providers, and various community stakeholders. The HHA also collaborates with organizations like 211 to ensure that the community is well-informed about the CES and that people have streamlined access to services. Faith-based organizations, businesses, and other referring entities actively contribute to the planning and evaluation of the CES, aiming to reach individuals and families who may be hesitant to seek assistance. These concerted efforts align with the HHA's ongoing commitment to provide access to services for the most vulnerable populations.2. The CE process systematically prioritizes individuals with the highest levels of vulnerability and need, employing various assessment tools such as the VISPDAT, VI-F-SPDAT, and TAY VI-SPDAT. Additional factors contributing to prioritization encompass the duration of homelessness, the frequency of homelessness episodes and the presence of medical conditions or disabilities. Case conferencing is a pivotal follow-up step following the initial assessment, expediting the connection of individuals with the most pressing needs to housing and essential services.3. The HHA has established measures to ensure that individuals in dire need of assistance promptly secure permanent housing, following the principles of Housing First. Furthermore, service delivery techniques prioritize a client-centered, inclusive, just, and timely approach that takes into account the preferences of participants. This is accomplished through diligent HHA oversight, comprehensive training initiatives, and adherence to the CE standards. All assessments are conducted within HMIS, which meticulously tracks service delivery. CE staff actively collaborate with participants to ensure their housing preferences are acknowledged and factored into the decisionmaking process.4. The HHA firmly believes the focus should be on connecting participants with the appropriate resources, rather than relying on a scoring system that could potentially disqualify them from assistance due to resource limitations. One effective approach to reduce the burden on individuals navigating the CE process is to implement an open HMIS system. Such a system promotes seamless collaboration and communication among service providers, ultimately streamlining the assistance provided

1D-9b.	Informing Program Participant about Rights and Remedies through Centralized or Coordinated Entry–Reporting Violations.
	NOFO Section V.B.1.p.
	Describe in the field below how your CoC through its centralized or coordinated entry:
1.	affirmatively markets housing and services provided within the CoC's geographic area and ensures it reaches all persons experiencing homelessness;
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.

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1. The HHA ensures that program participants are well-informed about their rights and the remedies available to them under federal, state, and local fair housing and civil rights laws through the standards that have been put in place through the CES. Housing and supportive services are marketed to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status, or disability. The HHA notifies all participants of their fair housing and civil rights during the intake process and ongoing case management services. Various distributed material also clearly outline the fair housing and civil rights laws and protections afforded to program participants. Information about local legal resources, fair housing organizations, and legal aid services that can assist program participants if they believe their rights have been violated is also advertised in all program-related material. 2. The HHA ensures that program policies contains a section explicitly addressing fair housing and civil rights. This section details the rights of participants, the responsibilities of the program, and the procedures for addressing any fair housing or civil rights concerns. Non-Discrimination statements are prominently displayed in prominently in Emergency Shelters, offices, and on program-related documents. The statements explicitly state the commitment to adhering to fair housing and civil rights laws. 3. Information about local legal resources, fair housing organizations, and legal aid services that can assist program participants if they believe their rights have been violated are available in addition to contact information and resources for legal assistance in multiple languages. The CE staff maintain thorough documentation of any concerns related to fair housing violations, discrimination, or actions that impede fair housing choice. This documentation should include details such as dates, times, locations, individuals involved, and a description of the incident. There is also an anonymous reporting mechanism in place to encourage individuals experiencing discrimination or fair housing violations to come forward without fear of retaliation. This can be done through dedicated email addresses and phone lines. Fair housing concerns are to be reported promptly to the jurisdictions responsible for certifying consistency with the Consolidated Plan, this ensures timely intervention and resolution for participants

1D-	10. Advancing Racial Equity in Homelessness–C	conducting Assessment.	
	NOFO Section V.B.1.q.		
1. l	las your CoC conducted a racial disparities asse	ssment in the last 3 years?	Yes
2. [Enter the date your CoC conducted its latest asse	essment for racial disparities.	05/20/2022
			<u> </u>
1D-10	Oa. Process for Analyzing Racial Disparities–Ider Homeless Assistance.	ntified Racial Disparities in Provision or	Outcomes of
	NOFO Section V.B.1.q.		
	Describe in the field below:		
	your CoC's process for analyzing whether an outcomes of homeless assistance; and	y racial disparities are present in the p	rovision or
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2. what racial disparities your CoC identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

 The HHA uses a comprehensive approach to examining disparities in service delivery and outcomes of homeless assistance. This approach integrates feedback from housing providers and assessments from individuals with lived experience. In 2020, the HHA established a dedicated Race and Equity Committee to evaluate and appraise the current utilization of homeless services. By leveraging demographic data obtained from the HMIS and the Point-in-Time (PIT) Count, the HHA has developed and applied a strategic planning methodology for identifying and scrutinizing racial disparities. To facilitate this analysis, the HMIS Lead Agency utilizes Power BI software to generate visual data reports. These statistics are then compared with those derived from the CoC Racial Equity Analysis Tool. As part of its ongoing initiatives, the HHA now mandates that all providers receiving CoC or ESG funding conduct a self-evaluation focused on racial equity. This self-evaluation aims to address existing disparities and assess the providers' internal commitment to rectify these inequities. The HHA maintains a continuous dedication to enhancing equitable outcomes, with the overarching goal of minimizing racial disparities in the provision of homeless assistance. 2. The analysis has revealed numerous racial disparities within the area served by the HHA. Black individuals, families, and youth constitute the majority of those in need of homeless services in Palm Beach County. Research indicates that individuals from racial minority groups experience homelessness at significantly higher rates and enter the homeless assistance system at a greater frequency than other racial demographics. Qualitative studies have underscored the absence of culturally competent services and highlighted barriers to access for BIPOC (Black, Indigenous, and People of Color) groups. When comparing the broader population to the homeless population within the area, the HHA has identified some of the most pronounced racial and equity imbalances in the state of Florida. To address these disparities comprehensively, the HHA has forged a partnership with the Florida Housing Coalition. Together, they are committed to assessing and enhancing equity outcomes in the community by conducting interviews and organizing focus groups involving participants and housing providers from diverse racial backgrounds within the CoC.

1D-10b. li	Implemented Strategies that Address Racial Disparities.	
N	NOFO Section V.B.1.q.	
T-	Select was or no in the chart helow to indicate the strategies your CoC is using to address any	1

racial disparities.

Ę	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
4	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
3	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
2	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
1	. The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	

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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.		
10.	ethnicities experiencing homelessness. 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. The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes

You must select a response for elements 1 through 11 in question 1D-10b.

1D-10c.	Implemented Strategies that Address Known Disparities.	
	NOFO Section V.B.1.q.	

Describe in the field below the steps your CoC is taking to address the disparities identified in the provision or outcomes of homeless assistance.

The HHA and homeless service providers have undertaken proactive measures to rectify disparities within the CoC. In an effort to identify gaps in service delivery, the HHA routinely conducts an analysis of demographic data and gathers qualitative feedback from both service providers and individuals with lived experience. All projects funded by the CoC and the ESG are required to perform a self-evaluation focused on racial equity. The goal is to unearth any internal issues contributing to unfairness and inequities within their operations. The HHA will offer the necessary support to ensure that equity is consistently upheld throughout the homeless response system. In addition to promoting the use of culturally competent approaches, the HHA will continue to provide training for homeless service providers to enhance their knowledge and address inequities within the homeless care system. The HHA's Race and Equity Committee oversees the development of strategies and measures aimed at tackling racial disparities. The HHA plans to expand its training efforts, focusing on bias, equity, and inclusion, and intends to replace the VI-SPDAT assessment tool used in CE with a new one that demonstrates no evidence of racial bias. To enhance diversity and representation, the HHA aims to employ recruitment strategies involving other community systems to increase the participation of individuals from BIPOC communities on the HHA Governance Board. The CA will assess projects based on their prioritization for marginalized populations, particularly BIPOC individuals and those with language barriers, to address disparities in accessing assistance from agencies funded by the CoC. Various HHA committees are actively identifying solutions to address these inequities, such as providing culturally relevant services to ensure fairness and inclusion. Furthermore, the HHA is exploring ways to improve and expand front-end services like CE and street outreach to better coordinate and centralize services for unsheltered individuals experiencing homelessness in the community. The HHA maintains ongoing communication with community stakeholders who may not receive funding and encourages their participation in the local homeless system, with the aim of increasing the pool of providers and enhancing service provision.

1D-10d.	Fracked Progress on Preventing or Eliminating Disparities.	
	NOFO Section V.B.1.q.	
	Describe in the field below:	
1.	the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and	
2.	the tools your CoC uses.	

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1. The HHA and CA employ various methods to monitor and address disparities in homeless assistance. The HHA actively seeks feedback from individuals with firsthand knowledge of homelessness and from homeless service providers. This feedback helps identify procedures that may contribute to discrepancies and suggest potential discriminatory practices. The HHA delineates priorities for serving culturally specific communities through its Race and Equity Committee, drawing insights from neighborhood advocates and individuals with lived experience. They conduct an in-depth analysis of local housing-related program data to identify instances of racial inequalities. The insights derived from this data enable the HHA to formulate strategies to mitigate inequities across the entire CoC. The Race and Equity Committee ensures a racial equity lens is applied to all aspects of homeless systems, involving individuals of color in planning and culturally sensitive approaches. The continuous evaluation of systems and programs for racial disparities drives action plans. Programs strive to avoid racial biases, and data collection guidelines consider diverse client populations for culturally sensitive services. 2. The HHA utilizes a variety of tools to track progress in preventing or eliminating disparities in the provision of homeless assistance. Some of the key tools and strategies include data collection and analysis. The HHA relies heavily on data collection and analysis to identify disparities. This includes gathering demographic information, service utilization data, and outcome data for individuals and families experiencing homelessness. The data is typically collected through HMIS and is analyzed to identify patterns and trends related to disparities. SPMs are a set of performance metrics used to assess the effectiveness of homeless assistance programs. CoCs use these measures to evaluate the overall performance of their homeless service systems and identify areas where disparities may exist. Finally, the HHA uses specific racial equity analysis tools to assess disparities related to race and ethnicity. These tools help in examining the impact of homelessness assistance programs on different racial and ethnic groups and identifying areas where targeted interventions may be needed.

D-11. Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking–CoC's Outreach Efforts.

NOFO Section V.B.1.r.

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

The HHA is committed to ensuring that individuals who are currently or have previously experienced homelessness are actively involved in its operations. Each year, the HHA actively seeks new members by inviting representation from various groups with expertise in different aspects of homelessness. To reach out to potential members with lived experiences, the HHA employs various channels, including social media, community outreach, workgroups, existing members, and partnerships. The CA and HHA prioritize creating a secure, transparent, and welcoming environment to engage these potential members. Particular attention is given to underrepresented groups, including individuals working with children, survivors of domestic and sexual abuse, and racial and ethnic minorities. Outreach staff directly engage with unsheltered homeless individuals to encourage their participation in HHA meetings, Board of County Commission meetings, or focus groups. The HHA Governance Board is led by a previously homeless individual, and it reserves five seats for individuals with lived experiences, including three for youth and young adults. In 2019, a Youth Action Board (YAB) was established, comprising young people who have experienced homelessness, contributing their insights to develop a comprehensive care system for adolescents and young adults aged 18 to 24. The HHA's approach to gathering and considering diverse perspectives and ideas begins with its membership. Community members, individuals with lived experiences, and agencies from various sectors are invited to participate in HHA deliberations and decision-making processes. This inclusive approach is evident in events like the HHA's Community Homeless Summit, where over 60% of attendees this year were either currently or previously homeless. In an effort to promote professional development opportunities, one of the largest homeless service providers prioritizes hiring individuals with lived experiences. The HHA highly values the contributions of those with lived experiences and actively encourages their participation in meetings and workgroups to discuss community needs, assess existing plans, contribute to future service plans, and directly engage with service providers, donors, and government organizations. The HHA recognizes the immense value of these perspectives in delivering high-quality services and ultimately achieving the goal of ending homelessness.

1D-11a. Active CoC Participation of Individuals with Lived Experience of Homelessness.

NOFO Section V.B.1.r.

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

You must upload the Letter Signed by Working Group attachment to the 4B. Attachments Screen.

	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 in the decisionmaking processes related to addressing homelessness.	6	90
2.	Participate on CoC committees, subcommittees, or workgroups.	6	0
3.	Included in the development or revision of your CoC's local competition rating factors.	14	0
4.	Included in the development or revision of your CoC's coordinated entry process.	14	0

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	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

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

(limit 2,500 characters)

The HHA continually explores innovative ways to provide individuals with lived experience access to professional growth and employment prospects. Among the strategies used is the inclusion of membership organizations with social enterprise businesses, which offer an employment approach leveraging the strengths of the open market. This strategy allows employees to gain valuable real-world work experiences in a supportive workplace environment. Participating in such a supportive workplace can be instrumental in developing the skills necessary for individuals who may not yet be prepared for private sector employment or face barriers to securing jobs due to factors like prior criminal history. Moreover, it affords prospective employees the opportunity to establish a consistent work history, obtain supervisor reviews, and secure references. Employment is not only crucial for leading a healthy and fulfilling life but also vital for the overall economy. Many job seekers experiencing homelessness in our community encounter significant challenges when seeking employment in the private sector. These barriers may include a history of substance misuse, homelessness, a criminal record, disabilities, or mental health issues. For participants in homeless assistance programs, finding meaningful employment can be the final elusive hurdle to overcome on their journey to achieving independence and self-sufficiency.

Another avenue through which the CA can provide professional development and employment opportunities is the Parks 2 Work (P2W) program. P2W is a collaborative initiative involving multiple county departments and community partners dedicated to assisting homeless individuals in accessing resources to break the cycle of homelessness. Participants in the program receive transportation, tools, uniforms, shelter, food, and compensation in exchange for their work within the PBC Parks and Recreation Department. This program has proven successful in transitioning many individuals out of homelessness and into permanent housing.

Additionally, a Youth Homeless Demonstration Program (YHDP) program within the HHA compensates youth and young adults serving on the Youth Action Board (YAB) for their time and expertise. Additionally, the HHA collaborates with Career Source to facilitate employment opportunities for individuals with lived experiences, further enhancing their access to professional development and employment prospects.

1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	
	Describe in the field below:	

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Project: FL-605 CoC Registration FY 2023

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

(limit 2,500 characters)

1The HHA regularly collects input from individuals experiencing homelessness, utilizing methods such as focus groups, exit interviews, and surveys. The HHA is committed to ensuring that all our clients feel empowered, valued as unique individuals, and included in decision-making processes. This is achieved through thorough data collection and analysis. While soliciting direct feedback through surveys can be challenging, the HHA has recognized that individuals often have valuable insights to share if given the opportunity. Recently, the CA organized a Community Summit for Unsheltered Homeless, which saw the participation of over 90 people experiencing homelessness. A majority of attendees expressed gratitude for the services and support they had received. This feedback serves the dual purpose of improving the understanding of what services and supports are working well and where enhancements can be made to ensure the delivery of high-quality services. When examining this data, correlations between experiences and factors like race, gender, and ethnicity are explored, shedding light on how the HHA's work affects the individuals served.2Based on this feedback, both CoC and ESG-funded agencies are required to conduct exit interviews and adapt program policies and practices. The CA evaluates these efforts during annual monitoring, with a crucial component being interviews with program participants. The insights gleaned from these interviews are used to drive systemic changes within the HHA's standards.3The HHA proactively addresses challenges raised by individuals with lived experience of homelessness. The CA is presently collaborating with a workgroup consisting of individuals who have lived experience to gather feedback on improving processes, making them more inclusive and accessible. The "Lived Experience Advisory Board" serves as a platform for ongoing feedback and continues to address challenges identified by those with firsthand experience. Originally formed to assist in designing the CoC's Plan to End Unsheltered Homelessness for the HUD Special NOFO, the team is exploring funding opportunities to provide participants with salaries, rather than stipends and lunches. The CA envisions this group evolving into a permanent committee capable of making recommendations based on their personal experiences. This commitment to involving individuals with lived experience underscores the HHA's dedication to creating effective and inclusive programs and policies

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

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(limit 2,500 characters)

1. Improving access to affordable permanent housing for those experiencing homelessness is one of the HHA's main objectives. The housing supply has expanded, with new units anticipated to open this year, thanks to joint applications and collaborations with regional municipalities and public housing agencies. In the most recent Action Plan for PBC, the goal is for 589 units to be constructed. The CA collaborates with housing providers, both public and private, as well as with developers, to encourage the creation and accessibility of affordable housing units. The HHA participates in the Affordable Housing Collaborative and the Housing Leadership Council. They have attended zoning meetings and met with both elected and unelected officials. The HHA General Membership is updated regularly. Leading the Way Home, PBC's strategy to end the cycle of homelessness, also outlines several tactics for securing a supply of accessible and affordable homes. The HHA launched a SMART Landlord Campaign to foster better communication with landlords. Additionally, the HHA works closely with various Housing Authorities to coordinate housing services. PBC will keep utilizing HOME and SHIP money to construct affordable housing. The HHA Engagement and Advocacy Committee has led several letter-writing efforts to our elected officials. Finally, PBC passed a vote on an infrastructure sales tax to increase the funds available to construct more affordable housing. The County has improved the process of identifying barriers and work with housing developers who are obtaining tax credits. In addition to leveraging funding commitments, the HHA has been exploring innovative approaches such as tiny homes, container homes, and hotel-to-housing conversion.2. The CA collaborates with various housing providers, community organizations, and county departments to update and develop county regulations that obstruct the availability of affordable housing. The creation of affordable housing is hampered by out-of-date zoning laws and other regional rules. The HHA is investigating affordable housing that is currently prohibited and is subordinate to the primary residence, including accessory dwelling units and different housing types.

Yes

09/26/2023

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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1	E-1. Web Posting of Your CoC's Local Competition Deadline–Advance Public Notice.	
	NOFO Section V.B.2.a. and 2.g.	
	You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.	
1.	Enter your CoC's local competition submission deadline date for New Project applicants to submit their	08/28/2023
	project applications to your CoC-meaning the date your CoC published the deadline.	
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC's local competition–meaning the date your CoC published the deadline.	07/31/2023
1	E-2. Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e.	
	You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.	
	Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	
1	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes

4. Provided points for projects that addressed specific severe barriers to housing and services.

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5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes
6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those overrepresented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	Yes
1E	Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., and 2.d.	
	You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.	
	Complete the chart below to provide details of your CoC's local competition:	
1.	What were the maximum number of points available for the renewal project form(s)?	177
2.	How many renewal projects did your CoC submit?	17
3.	What renewal project type did most applicants use?	PH-PSH
1E	-2b. Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section V.B.2.d.	
	Describe in the field below:	
	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;	
	2. how your CoC analyzed data regarding how long it takes to house people in permanent housing;	
	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and	
	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.	
	· · · · · · · · · · · · · · · · · · ·	

1The HHA examines data from each renewal project that successfully placed program participants in permanent housing. The Renewal Scoring Tool evaluates the effectiveness of each project by utilizing data from HMIS and APR records for the most recent fiscal year. This tool is employed by the Non-Conflict Grant (NCG) Review Panelists to assign scores to renewal projects. The CoC Renewal Scoring Tool consisted of 32 out of 100 points, primarily based on performance metrics. These metrics used factors such as the duration between the project's initiation and the date of housing placement, transitions to permanent housing, instances of returning to homelessness, increased income for participants who remained in the program, augmented non-employment income for program stayers, and enhanced income for those who left the program, along with amplified non-employment income for program leavers.2The HHA's tool for rating renewal projects scrutinizes the time taken by each project to secure permanent housing for program participants. The rating criteria predominantly hinge on the average duration between a project's commencement and the date of housing placement for various project types. Furthermore, the HHA actively seeks input from individuals with lived experiences who can identify barriers to obtaining housing.3The CA records participant demographics, and evaluates factors that may influence how long it takes for a client to secure housing. To gauge the severity of needs and vulnerability, the rating tool assigns points to projects that demonstrate a commitment to prioritizing participants who are chronically homeless, possess dedicated beds for DV survivors, or serve individuals with one or more disabilities. The CoC Renewal Scoring Tool included 31 out of 100 points, based on the provision of low-barrier services to individuals with the most severe needs. Projects also garnered points based on their assessment scores. particularly if 95% of their participants required intensive interventions.4The HHA affords special consideration to projects that serve the most challengingto-reach populations, as indicated by their established priorities during the funding allocation process. Points awarded to projects catering to the hardestto-serve population can offset any deductions in performance outcome scores. Conversely, these points can be regained when projects are ranked based on priorities established by the HHA Governance Board in advance of the competition.

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

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1. The HHA utilizes input from individuals of diverse racial and ethnic backgrounds, especially those who are over-represented in the local homelessness population, to inform the rating factors employed for reviewing project applications. This input is integrated into the process through various channels within the Race and Equity Committee. The HHA ensures that decision-making bodies, such as the rating committees, have diverse representation, including members from over-represented racial and ethnic backgrounds. This diversity ensures that rating factors are developed with a comprehensive understanding of the unique challenges and needs faced by these communities 2The HHA is committed to ensuring that the HHA reflects the racial, ethnic, and overall demographic composition of the community, particularly those who are disproportionately represented among the homeless population. The HHA also endeavors to establish a Non-Conflict Grant (NCG) Review Panel that is diverse and mirrors the demographics of the individuals it serves. In the current year, the NCG Review Panel comprised 60% representation from BIPOC members who assessed and ranked applications. The HHA Race and Equity Committee serves as a platform for individuals of different racial and ethnic backgrounds to engage in constructive discussions and offer input on all HHA-related processes. Much of the data used for evaluation is derived from HMIS data, which facilitates the identification of overrepresentation within the homeless response system. Within the local community, African Americans constitute the majority of the homeless population served, despite comprising a significantly smaller proportion of the general population. 3. The HHA is steadfast in its commitment to mitigating racial disparities among BIPOC individuals within the realm of homeless services. Housing providers have been tasked with identifying barriers and highlighting existing disparities, allowing the HHA Race and Equity Committee to concentrate its efforts on addressing these issues. Equity criteria are intentionally included in the scoring tools used to evaluate project applications. These criteria are designed to assess how well a project aligns with our CoC's equity goals and priorities. Equity-related indicators are assigned specific points or ratings within the scoring tool. Projects that prioritize serving marginalized populations, particularly those who are over-represented in homelessness, receive special attention.

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

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Last year, the HHA Governance Board voted in favor of a new reallocation process. This process outlines several criteria for reallocation, including low performance based on the Scoring and Ranking Tool, failure to meet threshold criteria, outstanding obligations to HUD, overdue or unsatisfactory responses to audit findings, a history of inadequate financial management practices. evidence of untimely expenditures on prior awards, noncompliance with HUD or HHA policies, significant capacity issues affecting project operation, serving ineligible individuals, spending on ineligible costs, or failing to meet established expenditure timelines. Additionally, projects must consistently meet performance measures, score well in the evaluation process, provide required documentation, and may voluntarily request reallocation. Applications for reallocation must adhere to set deadlines. A member of the NCG Review Panel can recommend project reallocation after assessing whether low performance stems from administrative or programmatic issues. The HHA Governance Board reviews and approves reallocation via motion. Agencies are notified in writing of reallocation recommendations and the appeal process. Recommendations for reallocation based on reduced community need follow the same process. During the competition this year, there were no projects that failed to meet threshold criteria or had low performance based on the Scoring and Ranking Tool. There were two renewal projects that opted to voluntarily return their renewal projects and did not opt to apply for funding during the competition. The HHA recaptured those funds and were able to reallocate them to new or expansion projects during the competition. This question is not applicable since the HHA did not reallocate funding based on low performance or less needed projects.

1E- 4 a.	Reallocation Between FY 2018 and FY 2023.	
	NOFO Section V.B.2.f.	
	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023?	No
1	E-5. Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	
		_
1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	Yes
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	Yes
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/12/2023

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1E-0a.	Projects Accepted–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen	1.
ran app	ter the date your CoC notified project applicants that their project applications were accepted and ked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified blicants on various dates, enter the latest date of any notification. For example, if you notified blicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/12/2023
1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	
2. F 3. F 4. F 5. F	Project Names; Project Scores; Project accepted or rejected status; Project Rank–if accepted; Requested Funding Amounts; and Reallocated funds.	
		1
1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline. NOFO Section V.B.2.g. and 24 CFR 578.95.	
1E-5c.	Competition Application Submission Deadline.	3.
Ent par 1. ti	Competition Application Submission Deadline. NOFO Section V.B.2.g. and 24 CFR 578.95. You must upload the Web Posting—CoC-Approved Consolidated Application attachment to the 48	
Ent par 1. ti	Competition Application Submission Deadline. NOFO Section V.B.2.g. and 24 CFR 578.95. You must upload the Web Posting—CoC-Approved Consolidated Application attachment to the 48 Attachments Screen. ter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or ther's website—which included: the CoC Application; and	
Ent par 1. ti	Competition Application Submission Deadline. NOFO Section V.B.2.g. and 24 CFR 578.95. You must upload the Web Posting—CoC-Approved Consolidated Application attachment to the 48 Attachments Screen. ter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or the CoC Application; and Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings. 1E-5d. Notification to Community Members and Key Stakeholders that the CoC-Approved	
Ent par 1. ti	Competition Application Submission Deadline. NOFO Section V.B.2.g. and 24 CFR 578.95. You must upload the Web Posting—CoC-Approved Consolidated Application attachment to the 48 Attachments Screen. ter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or tner's website—which included: he CoC Application; and Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings. 1E-5d. Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	

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2A. Homeless Management Information System (HMIS) Implementation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 - 24 CFR part 578;
 - FY 2023 CoC Application Navigational Guide;
 - Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2A-1.	HMIS Vendor.		
	Not Scored–For Information Only		
Ente	er the name of the HMIS Vendor your CoC is o	currently using.	Eccovia
			<u>'</u>
2A-2.	HMIS Implementation Coverage Area.		
	Not Scored–For Information Only		
	,		
Sele	ect from dropdown menu your CoC's HMIS co	/erage area.	Single CoC
			og.e eee
2A-3.	HIC Data Submission in HDX.		
	NOFO Section V.B.3.a.		
Ente	er the date your CoC submitted its 2023 HIC d	ata into HDX.	04/10/2023
00.4	Comparable Database for DV Providers–CoC	and HMICL and Comparting Data Coll	location and
ZA-4.	Data Submission by Victim Service Providers		lection and
	NOFO Section V.B.3.b.		
	In the field below:		
1.	describe actions your CoC and HMIS Lead haproviders in your CoC collect data in HMIS co	ave taken to ensure DV housing and s omparable databases;	ervice
2.	state whether DV housing and service provide comparable database–compliant with the FY	ers in your CoC are using a HUD-com 2022 HMIS Data Standards; and	pliant
_			
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3. state whether your CoC's HMIS is compliant with the FY 2022 HMIS Data Standards.

(limit 2,500 characters)

The DV housing and service providers are using a HMIS comparable database. AVDA and YWCA are a part of the HHA and track their programs in a comparable database. DV service providers are active members of the HHA General Membership meetings to ensure they are aware of changes within the CoC. The DV housing and service providers submit de-identified aggregated system data to the HMIS lead yearly in order to ensure that the DV providers are included in the System Performance Measures data. The HMIS lead provides the DV service provides the HMIS lead with a spreadsheet to complete to submit their data HIC data. This data is monitored quarterly to ensure data quality. The CoC's HMIS is compliant with the FY2022 HMIS Data Standards.

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

Enter 2023 HIC and HMIS data in the chart below by project type:

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	693	118	546	94.96%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	178	32	146	100.00%
4. Rapid Re-Housing (RRH) beds	635	50	585	100.00%
5. Permanent Supportive Housing (PSH) beds	1,315	0	1,315	100.00%
6. Other Permanent Housing (OPH) beds	129	0	129	100.00%

2A-5a.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.
NOFO Section V.B.3.c.	
	For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:
1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,500 characters)

N/A all percentages are above 85%

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2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2023 HDX Competition Report to the 4B. Attachments Screen.	

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 p.m. EST?	Yes
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2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 - 24 CFR part 578;
 - FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section V.B.4.a	
Ent	er the date your CoC conducted its 2023 PIT count.	01/26/2023
2B-2.	PIT Count Data-HDX Submission Date.	
	NOFO Section V.B.4.a	
Ent	er the date your CoC submitted its 2023 PIT count data in HDX.	04/10/2023
2B-3.	PIT Count–Effectively Counting Youth in Your CoC's Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	
	Describe in the field below how your CoC:	
1.	engaged unaccompanied youth and youth serving organizations in your CoC's most recent PIT count planning process;	
2.	worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC's most recent PIT count planning process; and	
3.	included youth experiencing homelessness as counters during your CoC's most recent unsheltered PIT count.	

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1. The HHA engages unaccompanied youth and youth-serving organizations in the PIT Count planning process to ensure an accurate representation of homelessness among this demographic. The HHA typically involves various stakeholders, including youth-serving organizations, in the planning process for the PIT count. This collaboration ensures that the count is comprehensive and sensitive to the unique needs of unaccompanied youth. Outreach teams are established to specifically target areas where unaccompanied youth are known to congregate. These teams may include representatives from youth-serving organizations, social workers, volunteers, and peer navigators who have experience with homelessness. Organizations involved in the PIT count receive training to effectively identify and engage with unaccompanied youth. This training often includes sensitivity training to ensure that outreach efforts are respectful and considerate of the unique challenges these youth face. With the help of one of the YHDP providers, the Drop-in Center remained open during the count so that unaccompanied youth could access services while completing the surveys.2. The HHA has established an annual PIT Crew Committee to facilitate planning process and one of the items they are tasked with is conducting a needs assessment to determine where unaccompanied youth are most likely to be found based on factors such as geographic patterns, access to resources, and information from service providers. This assessment helps identify hotspots and target areas for the count. Some of the youth-focused outreach teams even conduct pre-count surveys or assessments to identify potential locations and gather information on the movements and behaviors of homeless youth. This information helps in planning count activities effectively.3. Unfortunately, we did not have any youth experiencing homelessness help as counters this year, but one YHDP service provider in the community did encourage youth participation with the youth participants. The program actively engages the youth that visit their Drop-In Center and they do provide training to ensure they understand the importance of the PIT count and how to approach their peers.

2B-4.	PIT Count-Methodology Change-CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	
	In the field below:	
1.	describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;	
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and	
3.	describe how the changes affected your CoC's PIT count results; or	
4.	state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2023.	

(limit 2,500 characters)

N/A there were no changes

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2C. System Performance

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

 - 24 CFR part 578;- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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1. The HHA uses a combination of data analysis, research, collaboration with service providers and a deep understanding of the local homelessness landscape to determine risk factors to identify persons experiencing first time homelessness. The process begins by analyzing existing data on homelessness within the community. This includes data from the annual PIT count, HMIS, shelters, and outreach programs. By examining trends and demographics, they can identify patterns that indicate which individuals are more likely to experience homelessness for the first time. Local service providers, shelters, outreach teams and non-profits provide the HHA with valuable insights into the risk factors observed because of their close contact with participants. Additionally collaboration with agencies that deal with mental health, addiction, and other social services is vital. These agencies have data on individuals at risk of homelessness due to their specific circumstances.2. The CA allocates resources to prevention services aimed at individuals and families who are at risk of becoming homeless. These services include financial assistance, case management and legal aid to prevent evictions. The CA with the HHA have developed programs that focus on maintaining housing stability for those at risk. This can involve providing ongoing support to address the root causes of housing instability, such as unemployment, substance abuse, or mental health issues.3. The HHA have encouraged the development of rapid rehousing programs because they are designed to quickly rehouse individuals and families who have become homeless or are at risk. This may include shortterm financial assistance for rental deposits and ongoing case management to ensure housing stability. The oversight of HHA's strategy to combat first-time homelessness and ultimately end homelessness is entrusted to the HHA Governance Board and the Director of PBC Division of Human Services and Community Action for the CA.

		T
2C-1a.	Impact of Displaced Persons on Number of First Time Homeless.	
	NOFO Section V.B.5.b	
		7
	Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:	
1.	natural disasters?	No
2.	having recently arrived in your CoCs' geographic area?	No
2C-2.	Length of Time Homeless–CoC's Strategy to Reduce.	
	NOFO Section V.B.5.c.	
		_
	In the field below:	
1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;	
2.	describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.	

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(limit 2,500 characters)

1. The HHA's strategy to decrease the duration of homelessness for individuals and families includes several components. A CoC-wide standard for all homeless housing projects mandating access to case management services delivered by trained staff for every individual or family within these projects. Clients experiencing homelessness, regardless of whether they are entering through a DV Shelter or the CES undergo the same standardized assessment. This assessment evaluates the clients' housing challenges and their history of homelessness. The use of a consistent assessment at each entry point ensures greater uniformity in data and allows for better comparison of client responses across all entry points. Additionally, there is a "Housing First" mandate utilized throughout the provision of case management, with an emphasis on creating and executing a housing plan as a primary task. 2. Homeless households are prioritized on the By Name List (BNL) of individuals who are currently homeless. based on a combination of vulnerability and the likelihood of resolving their homelessness independently. Vulnerability pertains to the potential or actual harm due to ongoing homelessness, while the likelihood of self-resolution is determined by the severity of housing barriers faced by the client. Depending on their priority ranking on the BNL, homeless households are referred to rapid rehousing or permanent supportive housing opportunities. The duration of time that households experience homelessness is monitored through the HMIS. The system records both the client's self-reported start date of homelessness and the date of entry into a homeless housing project. These data points are taken into account when discussing community-wide referrals for housing opportunities during case conferencing. If all other factors are equal, households with the longest homelessness experiences are given priority for housing referrals.3. The oversight of HHA's strategy to reduce the length of time individuals and families remain homeless is the responsibility of the HHA Governance Board and the Director of PBC Division of Human Services and Community Action for the CA.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing–CoC's Strategy
	NOFO Section V.B.5.d.
	In the field below:
1.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;
2.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.

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1. The HHA has observed that over a two-year period, the rate of individuals returning to homelessness from various housing situations, including street outreach, emergency shelters, transitional housing, and permanent housing, is approximately 17.78%. Among these, the highest percentage of individuals returning to homelessness from permanent housing is observed in street outreach, with 25.40% returning, followed by emergency shelter, with 18.04% returning. The overall two-year return rate to homelessness for those in permanent housing is 16.59%, with 9.53% of these returns occurring within the first twelve months. 2. Over the past two years, the HHA has analyzed data trends and identified necessary improvements in response to factors such as rising housing costs, the impact of COVID-19 on employment, and the need for non-congregate shelters. The HHA's initial focus was on addressing return-tohomelessness rates and identifying partnerships to enhance housing retention. Shared housing has emerged as a preferred model in PBC due to its affordability, being utilized for housing individuals, youth, and seniors. This approach is no longer limited to specific populations and has become essential for affordable living in PBC. The demand for enhanced services for shared housing participants has grown apparent. The HHA's collaborations with various systems of care, including behavioral health, child welfare, criminal justice, and re-entry, are crucial for the sustained success of permanent housing retention for homeless households. Partnerships with systems such as PHAs have been pivotal, with programs like Mainstream Vouchers, Family Unification Vouchers, and Emergency Housing Vouchers playing a significant role. These programs have facilitated the transition of individuals from Permanent Supportive Housing (PSH) to open up PSH beds for those in emergency shelters and experiencing street homelessness.3. The oversight of HHA's strategy to increase the rate that individuals and families exit to or retain permanent housing is the responsibility of the HHA Governance Board and the Director of PBC Division of Human Services and Community Action for the CA

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

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1. The HHA employs a comprehensive strategy to identify households that have experienced a return to homelessness. The goal is to detect and respond to homelessness recurrence promptly to provide appropriate support and prevent further housing instability. These strategies include utilizing HMIS to allow providers to view prior stays, outreach interactions, or contact with CE, even if such interactions did not lead to shelter enrollment. Providers routinely inquire about individuals' previous experiences with homelessness during program entry and update this information in HMIS. Additionally, all of our housing partners are required to follow up for a specific amount of time depending on the program type.2. The HHA's approach to decrease the frequency of individuals returning to homelessness is to first, apply research findings related to the commonly identified factors contributing to homelessness recurrence. They make practical adjustments to policies and the delivery of services based on this research. Secondly, the CoC incorporates homelessness returns as a key contractual performance metric. Other strategies mitigating returns to homelessness include: CE Standards that mandate projects prioritize individuals with more significant needs and longer durations of homelessness. ensuring that Permanent Supportive Housing (PSH) projects adhere to HUD's Order of Priority, providing post placement services to clients leaving homelessness, especially those with a higher risk of return, providing homeless prevention assistance to individuals with a history of homelessness in doubledup situations, and providing technical assistance to CoC and ESG RRH service providers to redesign programs that provide longer support when needed and offering landlord incentives to cover damages. 3. The oversight of HHA's strategy to reduce the rate individuals and persons in families return to homelessness is the responsibility of the HHA Governance Board and the Director of PBC Division of Human Services and Community Action for the CA

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

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1. The HHA's priority is housing placement and safety, closely followed by employment. The HHA strategy is to meet the client or participant where they are in the process. The HHA members, including PBC, have developed employment programs that include job development, on-the-job coaching and training, job placement, internships, and micro-enterprise businesses. Several HHA partners also collaborate with the local CareerSource of Florida and the Vocational Rehabilitation Center for employment opportunities and skills training for the homeless. CareerSource funds many partners to provide homelessspecific employment services in PBC. 2. The HHA and its partners provide tools and certification resources to individuals and families who need such and daycare assistance if needed. The HHA and the Early Learning Coalition created a partnership many years ago that still exists and provides six months of daycare to any child who resides in a homeless shelter setting. This benefit assists families in finding employment without an additional barrier of childcare. Families and Individuals that are disabled are assisted with SOAR applications to expedite the social security disability process. The HHA also provides access to ACCESS Florida (Mainstream Benefits Application) through providers and homeless outreach teams. PBC Veterans Services and Veterans Administration (VA) target homeless veterans for VA benefits through street outreach and services requests.3. The oversight of HHA's strategy to increase income from employment is the responsibility of the HHA Governance Board and the Director of PBC Division of Human Services and Community Action for the CA.

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

(limit 2.500 characters)

1.The HHA has made a concerted effort to increase non-cash resources for persons experiencing homelessness in the community. Through the CE process and Street Outreach, the HHA identified that applications to social security, food stamps, Medicaid and Medicare, Health Care District insurance, and Veteran's Benefits needed to be prioritized as many homeless are eligible but not receiving benefits. Street Outreach Teams throughout Palm Beach County began to complete ACCESS Florida applications for mainstream benefits. SOAR (social security application specialists) specialists were placed at the CE sites and on Outreach Teams. Outreach Teams also worked with the street homeless to secure birth certificates and other vital documents that often prohibit applications from moving forward. 2. The oversight of HHA's strategy to increase non-employment cash income is the responsibility of the HHA Governance Board and the Director of PBC Division of Human Services and Community Action for the CA.

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3A. Coordination with Housing and Healthcare

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

 - 24 CFR part 578;- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3/	A-1. New P	H-PSH/PH-RRH Project-Le	veraging Housing Resources.	
	NOFO	Section V.B.6.a.		
	You mu Screen	ust upload the Housing Leve 	eraging Commitment attachment to the 4B. Attachm	ents
	housing uni		H or PH-RRH project that uses housing subsidies or ough the CoC or ESG Programs to help individuals a	
3/	A-2. New Pi	H-PSH/PH-RRH Proiect-Le	overaging Healthcare Resources.	
	_	Section V.B.6.b.		
You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.				nts Screen.
	Is your CoC individuals	applying for a new PH-PSH and families experiencing ho	H or PH-RRH project that uses healthcare resource omelessness?	s to help Yes
	ls your CoC individuals	applying for a new PH-PSF and families experiencing ho	H or PH-RRH project that uses healthcare resource omelessness?	s to help Yes
	individuals a	applying for a new PH-PSH and families experiencing ho Housing/Healthcare Resour	omelessness?	s to help Yes
3A-3.	individuals	and families experiencing ho	omelessness?	s to help Yes
3A-3.	individuals	and families experiencing ho	omelessness?	s to help Yes
3A-3.	Leveraging NOFO Sect	Housing/Healthcare Resourtions V.B.6.a. and V.B.6.b.	omelessness?	
3A-3.	Leveraging NOFO Sect	Housing/Healthcare Resourtions V.B.6.a. and V.B.6.b.	or 3A-2., use the list feature icon to enter information to evaluate to determine if they meet the criteria.	

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578; FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3B-1.	Rehabilitation/New Construction Costs-New Projects.	
	NOFO Section V.B.1.s.	
Ta		Nia
for I	our CoC requesting funding for any new project application requesting \$200,000 or more in funding nousing rehabilitation or new construction?	NO
3B-2.	Rehabilitation/New Construction Costs-New Projects.	
	NOFO Section V.B.1.s.	
		1
	If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:	
1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and	
2.	HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.	

(limit 2,500 characters)

N/A

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	
		J
proj	our CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component ects to serve families with children or youth experiencing homelessness as defined by other eral statutes?	No
3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	
	You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.	
	If you answered yes to question 3C-1, describe in the field below:	
1.	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and	
2.	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.]

(limit 2,500 characters)

The HHA only uses the HUD definition of homelessness.

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 - 24 CFR part 578;
 - FY 2023 CoC Application Navigational Guide;
 - Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

4	A-1. New DV Bonus Project Applications.	
	NOFO Section I.B.3.I.	
	Did your CoC submit one or more new project applications for DV Bonus Funding?	
4.4	N-1a. DV Bonus Project Types.	
	NOFO Section I.B.3.I.	
	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 2023 Priority Listing.	
	Project Type	
1.	SSO Coordinated Entry	No
	PH-RRH or Joint TH and PH-RRH Component	Yes

to view questions 4A-2, 4A-2a. and 4A-2b.

4A-3.	Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area.	
	NOFO Section I.B.3.I.(1)(c)	
		<u> </u>
1.	Enter the number of survivors that need housing or services:	219
2.	Enter the number of survivors your CoC is currently serving:	126
3.	Unmet Need:	93

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

(limit 2,500 characters)

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

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

Applicant Name

YWCA of Palm Beac...

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

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

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2023 Priority Listing for New Projects:

1.	Applicant Name	YWCA of Palm Beach County, Inc
2.	Project Name	YWCA DV SAFEhouse Rapid Re-Housing
3.	Project Rank on the Priority Listing	13
4.	Unique Entity Identifier (UEI)	
5.	Amount Requested	\$780,846
6.	Rate of Housing Placement of DV Survivors–Percentage	
7.	Rate of Housing Retention of DV Survivors–Percentage	

You must enter a response for elements 1 through 7 in question 4A-3b.

4A-3b.1.	Applicant Experience in Housing Placement and Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below:	
1.	how the project applicant calculated both rates;	
2.	whether the rates accounts for exits to safe housing destinations; and	
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).	

4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.
	NOFO Section I.B.3.I.(1)(d)
	Describe in the field below how the project applicant:
	ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;
2.	prioritized survivors–you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.;
3.	determined which supportive services survivors needed;

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4. connected survivors to supportive services; and
5. moved clients from assisted housing to housing they could sustain–address housing stability after the housing subsidy ends.

(limit 2,500 characters)

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

(limit 2,500 characters)

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

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

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

(limit 5,000 characters)

4A-3f.	Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New
	PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.

NOFO Section I.B.3.I.(1)(d)

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

(limit 5,000 characters)

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

(limit 5,000 characters)

4A-3h.	Involving Survivors in Policy and Program Development, Operations, and Evaluation of New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(f)	
	Describe in the field below how the new project will involve survivors:	
1.	with a range of lived expertise; and	
2.	in policy and program development throughout the project's operation.	

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

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4B. Attachments Screen For All Application Questions

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

1.	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.					
2.	You must upload an at	You must upload an attachment for each document listed where 'Required?' is 'Yes'.				
3.	files to PDF, rather that create PDF files as a F	We prefer that you use PDF files, though other file types are supported–please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.				
4.	Attachments must mat	ch the questions the	ey are associated with.			
5.	Only upload document ultimately slows down	s responsive to the the funding process	questions posed–including other materia	I slows down the review process, which		
6.	If you cannot read the	attachment, it is like	ly we cannot read it either.			
	. We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).					
	. We must be able t	. We must be able to read everything you want us to consider in any attachment.				
7.	After you upload each Document Type and to	After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.				
8.	Only use the "Other" at	ttachment option to	meet an attachment requirement that is r	not otherwise listed in these detailed instructions.		
Document Typ	Document Type		Document Description	Date Attached		
1C-7. PHA Homeless Preference		No	PHA Homeless/Movi	09/26/2023		
1C-7. PHA Moving On Preference		No				
1D-11a. Letter Signed by Working Group		Yes	Letter Signed by	09/26/2023		
1D-2a. Housin	g First Evaluation	Yes	Housing First Eva	09/26/2023		
1E-1. Web Posting of Local Competition Deadline		Yes	Web Posting of Lo	09/26/2023		
1E-2. Local Competition Scoring		Yes	Local Competition	09/26/2023		
1E-2a. Scored Forms for One Project		Yes	Scored Forms for	09/26/2023		
1E-5. Notification of Projects Rejected-Reduced		Yes	Notification of P	09/26/2023		
1E-5a. Notifica Accepted	1E-5a. Notification of Projects Accepted		Notification of P	09/26/2023		
1E-5b. Local Competition Selection Results		Yes	Final Project Sco	09/26/2023		
	1E-5c. Web Posting–CoC- Approved Consolidated					

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1E-5d. Notification of CoC- Approved Consolidated Application	Yes		
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	HDX Competition R	09/26/2023
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No	Healthcare Formal	09/26/2023
3C-2. Project List for Other Federal Statutes	No		
Other	No		

FL-605

Attachment Details

Document Description: PHA Homeless/Moving On Preference

Attachment Details

Document Description:

Attachment Details

Document Description: Letter Signed by Working Group

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Web Posting of Local Competition Deadline

Attachment Details

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Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Final Project Scores For All Projects

Attachment Details

Document Description:

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Attachment Details

Document Description:

Attachment Details

Document Description: HDX Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description: Healthcare Formal Agreements

Attachment Details

Document Description:

Attachment Details

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Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	08/02/2023
1B. Inclusive Structure	09/26/2023
1C. Coordination and Engagement	09/26/2023
1D. Coordination and Engagement Cont'd	Please Complete
1E. Project Review/Ranking	09/24/2023
2A. HMIS Implementation	09/26/2023
2B. Point-in-Time (PIT) Count	09/26/2023
2C. System Performance	09/26/2023
3A. Coordination with Housing and Healthcare	09/26/2023
3B. Rehabilitation/New Construction Costs	09/24/2023
3C. Serving Homeless Under Other Federal Statutes	09/24/2023

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Applicant: Palm Beach County (FL-605)FL-605Project: FL-605 CoC Registration FY 2023COC_REG_2023_204558

4A. DV Bonus Project Applicants Please Complete

4B. Attachments Screen Please Complete

Submission Summary No Input Required

Notes:

4A. DV Bonus Project Applicants list contains 1 incomplete item.



FY23 CoC Consolidated Application

Attachment: PHA

Homeless/Moving on Preference

Agreements

Question 1C-7

Cover Sheet

Palm Beach County Housing Authority
West Palm Beach Housing Authority
Pahokee Housing Authority
Delray Beach Housing Authority
Boca Raton Housing Authority





Wendy Tippett, MNM, GPC
Director of Human Services and Community Action
810 Datura Street
West Palm Beach, FL 33401

September 22, 2023,

Please be advised that the PBCHA has consistently partnered with the Homeless and Housing Alliance (HHA) the CoC for Palm Beach County for programs within its Low-Income Public Housing and Housing Choice Voucher Programs (HCVP).

Within its HCV program, the PBCHA admitted 326 households from 10/1/2022 to 9/21/23. Of this 326, 32 were homeless at admission for 9.82%.

Please feel free to contact me at 561-684-2160, should further information be needed.

Carol Jones-Gilbert

Chief Executive Officer



cjones-gilbert@pbchafl.org

www.pbchafl.org [pbchafl.org]

Please find the requested information for the PBCHA below. Please advise if any additional information is needed.

PBCHA - PHA Homeless Preference (PH – ACOP)

Local Preferences [24 CFR 960.206]

PHAs are permitted to establish local preferences and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion.

Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources [24 CFR 960.206(a)], PHA Policy

The PHA will use the following local preference:

In order to bring higher income families into public housing, the PHA will establish a preference for "working" families, where the head, spouse, co-head, or sole member is employed at least 30 hours per week. As required by HUD, families where the head and spouse, or sole member is a person age 62 or older, or is a person with disabilities, will also be given the benefit of the working preference [24 CFR 960.206(b)(2)].

The PHA will also offer a preference for families who are homeless, veterans, disabled, victims of domestic violence, families who have been involuntarily displaced.

PBCHA- Moving On Preference

Local Preferences [24 CFR 982.207; HCV p. 4-16]

PBCHA Policy

The PBCHA will not offer any local preferences.

1

PAHOKEE HOUSING AUTHORITY, INC.

Padgett Island Office 899 Padgett Circle Pahokee, FL 33476

Administrative Office 465 Friend Terrace Pahokee, FL 33476 (561) 924-5565 FAX (561) 924-1952

Fremd Village 401 Shirley Drive Pahokee, FL 33476

September 21, 2023

To:

Ms. Maria Bond, PBC

From:

Inger Harvey, Executive Director

Pahokee Housing Authority

Ms. Bond,

Please find attached our policy regarding PHA Homeless Preference. For FY 2022 (January 1, 2022 through December 31, 2022), the Pahokee Housing Authority (HCV Program) had thirty-one (31) new admissions. Of these, eleven (22) were homeless individuals/families at the time of admission. This represents a 71% of total new admissions, administered by the HCV, and/or Pahokee Housing Authority (Public Housing) programs.

Please feel free to contact me if you need any additional information.

Inger Harvey, Executive Director

Pahokee Housing Authority

561-924-5565

iharvey@pahokeehousing.org

 PHA revised its ACOP and VAWA to include language to comply with Domestic Violence regulation, particularly to include language to protect persons who are victims of sexual assault.

The Housing Authority requests criminal records from the following enforcement agencies for screening purposes:

- Local law enforcement agencies
- State law enforcement agencies
- Federal enforcement agencies
- Tenant PI

(2) Selection and Assignment

Selection for admission to public housing shall be made from the PHA's current waiting list in accordance with date and time of application and applicable preference(s) as follows.

(3) Preferences

The PHA does not plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of the median area income.

It is the policy of the PHA that transfers will take precedence over new admissions in the following circumstances:

- Emergencies (e.g., VAWA, fire, and/or as determined by the PHA)
- Over-housed
- Under-housed
- Medical justification
- Administrative reasons determined by the PHA
- Domestic Violence

The PHA plans to employ the following admission preferences for admission to public housing:

11	- Involuntary Displacement (based on governmental action, e.g., fire,
	flood, hurricane and any President declared natural disasters).
2	- Single persons who are elderly, displaced, homeless, or persons with
	With disabilities over other single persons

- Veterans and veterans' families
 Elderly for zero, one, two, and three-bedroom units at Isles of Pahokee II Projects to comply with HUD-approved Elderly Designation (LIHTC Only)
 Extremely Low-Income or Special Needs Households (e.g., LINK) to its Low-Income Housing Tax Credits (LIHTC) developments referred by participating agency, pursuant to the executed memorandum of understanding (LIHTC Only)
- 2 Homeless/Chronically Homeless:
 Category 1: An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
 - a. An individual or family with 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; or
 - An individual or family living in a supervised publicly or privatelyoperated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or
 - c. An individual who is exiting an institution where he or she 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:

- i. Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or lifethreatening 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; and
- 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

Chronically Homeless:

- (1) A "homeless individual with a disability" as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:
 - i. Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
 - ii. Has been homeless and living as described in paragraph (1)(i) of this definition continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (1)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering the institutional care facility;
- (2) An individual who has been residing in an institutional care facility, including jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or
- (3) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) and (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless

The points associated with each preference are as follows:

Involuntary Displacement – 100 points

Single persons who are elderly, displaced, homeless, or persons with disabilities over other single persons – 50 points

Veterans and veteran's families - 50 points

Homeless/Chronically Homeless -50 points

Elderly for zero, one, two, and three-bedroom units at Isles of Pahokee II Projects to comply with HUD-approved Elderly Designation (LIHTC Only) – 100 points

Extremely Low-Income or Special Needs Households (e.g., LINK) to Its Low-Income Housing Tax Credits (LIHTC) developments referred by participating agency, pursuant to the executed memorandum of understanding (LIHTC Only) - 200 points

Preference points applies to all PHA programs except where noted.

The more preferences points that apply to an applicant, the higher their status on the waiting list. Where preferences are equal, as to unit size, date and time will determine the next applicant to be admitted.

In relationship of preferences to income targeting requirements, the pool of applicant families ensures that the PHA will meet income targeting requirements.

Additional preferences for LIHTC:

- Relocated families prior to LIHTC conversion
- Preference for near elderly will be given to those housed in Elderly Designated units (LIHTC)

(4) Unit Assignment

Applicants are ordinarily given two (2) vacant unit choices before they are removed from the waiting list. This policy is consistent across all waiting list types.

(5) Maintaining Waiting List

The Pahokee Housing Authority maintains a community-wide waiting list. Interested persons may apply for admission to public housing at the main administrative office located at 465 Friend Terrace, Pahokee, FL 33476.

PHA will maintain a separate waiting list for special rental/housing assistance program (e.g., LIHTC, TBRA).

The Pahokee Housing Authority does not plan to operate any site-based waiting lists.

Maria Bond

From: Bridgette Huff <bhuff@dbha.org> **Sent:** Monday, September 18, 2023 5:51 PM

To: Maria Bond

Subject: RE: Documents Needed for HUD Applications

Attachments: PH Admissions & Continued Occupancy Policy (ACOP).docx; 00 Adm Plan TOC

7-17.doc; 01 Adm Plan Overview 7-17.doc; 02 Adm Plan Fair Housing 3-17.doc; 03 Adm Plan Eligibility 7-17.doc; 04 Adm Plan Applications 7-17.doc; 05 Adm Plan Briefings 7-17 (Autosaved).doc; 06 Adm Plan Income 3-17.doc; 07 Adm Plan Verification 7-17.doc; 08 Adm Plan HQS 7-17.doc; 09 Adm Plan Leasing 7-17 Chapter.doc; 10 Adm Plan Moving 7-17.doc; 11 Adm Plan Reexaminations 3-17.doc; 12 Adm Plan Termination 7-17.doc; 13 Adm Plan Owners 10-15 (Repaired).doc; 14 Adm Plan Prog Integrity 4-13.doc; 15 Adm Plan Special Hsg 7-17.doc; 16 Adm Plan Prog Admin 7-17.doc; 17 Adm Plan PBVouchers

7-17.doc; 18 Adm Plan RAD PBV 7-17.doc

This Message Is From an External Sender

This message came from outside your organization.

Good Afternoon Maria.

As per your request please see the attached Public Housing Admissions & Continued Occupancy Policy, and the Section 8 Administrative Plan.

In response to your questions please see the e-mail thread below:

- 1. Delray Beach Housing Authority's policy on Homeless Preference. <u>The DBHA only have a working Preference.</u>
- 2.
- 3. Delray Beach Housing Authority's policy on Moving On for individuals in Permanent Supportive Housing (PSH) who no longer require the intensive services of PSH but still need rental assistance. <u>DBHA does not have a Moving On for Individuals in Permanent Supportive Housing Policy.</u>
- 4
- The higher percentage of either new admissions into the Public Housing Choice Voucher Program during FY 2022 who were experiencing homelessness at entry or at the time of admission to the HCV program. DBHA is not required and does not keep a track record of applicants who were experiencing homelessness at the time of application/or new admissions.

Kind Regards,

Bridgette Huff Section 8 Coordinator/FSS Coordinator Delray Beach Housing Authority/West Settlers Office 82 NW 5th Avenue Delray Beach, Fl. 33444 Phone (561) 272-6766 ext. 116

Fax: (561) 272-7352



From: Shirley Erazo < serazo@dbha.org > Sent: Monday, September 18, 2023 10:12 AM

To: Bridgette Huff < bhuff@dbha.org >

Subject: Fwd: Documents Needed for HUD Applications

Please handle.

Shirley Erazo Sent from my iPhone

Begin forwarded message:

From: Maria Bond < MBond@pbcgov.org> **Date:** September 18, 2023 at 10:09:04 AM EDT

To: serazo@dbha.org

Cc: Wendy Tippett < WTippett@pbcgov.org>

Subject: FW: Documents Needed for HUD Applications

Good morning Ms Erazo,

We are currently working on our CoC HUD application and I am in need of assistance from the DBHA. I need help specifically as it relates to CoC coordination with PHA programs, the HCV programs and special purpose vouchers.

This information is needed for our HUD application which is scheduled to go before the Board of County Commissioners soon. We need:

- 1. Delray Beach Housing Authority's policy on Homeless Preference.
- 2. Delray Beach Housing Authority's policy on Moving On for individuals in Permanent Supportive Housing (PSH) who no longer require the intensive services of PSH but still need rental assistance.
- The above may be sections of DBHA's Administrative Policy, Admissions and Continued Occupancy Plan (ACOP) or Five Year Plan that contain this information.
- 4. We also need the higher percentage of either new admissions into the Public Housing Choice Voucher Program during FY 2022 who were experiencing homelessness at entry or at the time of admission to the HCV program.

As this is very time sensitive, we would greatly appreciate your efforts to expedite provision of the requested information. Thanks so much for your help.

Maria Bond
Homeless Program and Contract Manager
Division of Human Services
810 Datura St. 2 nd Floor
West Palm Beach, FL 33401
561-355-4779
mbond@pbcgov.org
We need to stop just pulling people out of the river.

We need to go upstream and find out why they're falling in.

Kind regards,

-Desmond Tutu

Under Florida law, e-mail addresses are public records. If you do not want your e-mail address released in response to a public records request, do not send electronic mail to this entity. Instead, contact this office by phone or in writing.

Chapter 10

MOVING WITH CONTINUED ASSISTANCE AND PORTABILITY

INTRODUCTION

Freedom of housing choice is a hallmark of the housing choice voucher (HCV) program. In general, HUD regulations impose few restrictions on where families may live or move with HCV assistance. This chapter sets forth HUD regulations and DBHA policies governing moves within or outside the DBHA's jurisdiction in two parts:

<u>Part I: Moving with Continued Assistance</u>. This part covers the general rules that apply to all moves by a family assisted under the DBHA's HCV program, whether the family moves to another unit within the DBHA's jurisdiction or to a unit outside the DBHA's jurisdiction under portability.

<u>Part II: Portability</u>. This part covers the special rules that apply to moves by a family under portability, whether the family moves out of or into the DBHA's jurisdiction. This part also covers the special responsibilities that the DBHA has under portability regulations and procedures.

PART I: MOVING WITH CONTINUED ASSISTANCE

10-LA. ALLOWABLE MOVES

HUD lists six regulatory conditions under which an assisted family is allowed to move to a new unit with continued assistance. Permission to move is subject to the restrictions set forth in section 10-I.B.

- The family has a right to terminate the lease on notice to the owner (for the owner's breach or otherwise) and has given a notice of termination to the owner in accordance with the lease [24 CFR 982.354(b) (3)]. If the family terminates the lease on notice to the owner, the family must give the DBHA a copy of the notice at the same time [24 CFR 982.354(d) (1)].
- The lease for the family's unit has been terminated by mutual agreement of the owner and the family [24 CFR 982.354(b) (1) (ii)].

DBHA Policy

If the family and the owner mutually agree to terminate the lease for the family's unit, the family must give the DBHA a copy of the termination agreement.

- The owner has given the family a notice to vacate, has commenced an action to evict the family, or has obtained a court judgment or other process allowing the owner to evict the family [24 CFR 982.354(b) (2)]. The family must give the DBHA a copy of any owner eviction notice [24 CFR 982.551(g)].
- The family or a member of the family is or has been the victim of domestic violence, dating violence, sexual assault, or stalking and the move is needed to protect the health or safety of the family or family member [24 CFR 982.354(b)(4)]. This condition applies even when the family has moved out of its unit in violation of the lease, with or without prior notification to the DBHA, if the family or family member who is the victim reasonably believed that he or she was imminently threatened by harm from further violence if he or she remained in the unit [24 CFR 982.354(b) (4), 24 CFR 982.353(b)]. The DBHA must adopt an emergency transfer plan as required by regulations at 24 CFR 5.2007(e).

DBHA Policy

If a family requests permission to move with continued assistance or for an external transfer to another covered housing program operated by the DBHA based on a claim that the move is necessary to protect the health or safety of a family member who is or has been the victim of domestic violence, dating violence, sexual assault, or stalking, the DBHA will request that the resident request the emergency transfer using form HUD-5383, and the DBHA will request documentation in accordance with section 16-IX.D of this plan.

The DBHA reserves the right to waive the documentation requirement if it determines that a statement or other corroborating evidence from the family or family member will suffice. In such cases the DBHA will document the waiver in the family's file.

The DBHA may choose to provide a voucher to facilitate an emergency transfer of the victim without first terminating the assistance of the perpetrator.

Before granting an emergency transfer, the DBHA will ensure the victim is eligible to receive continued assistance based on the citizenship or immigration status of the victim.

The DBHA has adopted an emergency transfer plan, which is included as Exhibit 16-3 to this plan and discuses external transfers to other covered housing programs.

- The DBHA has terminated the HAP contract for the family's unit for the owner's breach [24 CFR 982.354(b) (1) (i)].
- The DBHA determines that the family's current unit does not meet the HQS space standards because of an increase in family size or a change in family composition. In such cases, the DBHA must issue the family a new voucher, and the family and DBHA must try to find an acceptable unit as soon as possible. If an acceptable unit is available for the family, the DBHA must terminate the HAP contract for the family's old unit in accordance with the HAP contract terms and must notify both the family and the owner of the termination. The HAP contract terminates at the end of the calendar month that follows the calendar month in which the DBHA gives notice to the owner. [24 CFR 982.403(a) and (c)]

10-I.B. RESTRICTIONS ON MOVES

A family's right to move is generally contingent upon the family's compliance with program requirements [24 CFR 982.1(b) (2)]. HUD specifies two conditions under which a DBHA may deny a family permission to move and two ways in which a DBHA may restrict moves by a family.

Denial of Moves

HUD regulations permit the DBHA to deny a family permission to move under the following conditions:

Insufficient Funding

The DBHA may deny a family permission to move either within or outside the DBHA's jurisdiction if the DBHA does not have sufficient funding for continued assistance [24 CFR 982.354(e) (1)]. However, Notice PIH 2016-09 significantly restricts the ability of DBHAs to deny permission to move due to insufficient funding and places further requirements on DBHAs regarding moves denied due to lack of funding. The requirements found in this notice are mandatory.

DBHA Policy

The DBHA will deny a family permission to move on grounds that the DBHA does not have sufficient funding for continued assistance if (a) the move is initiated by the family, not the owner or the DBHA; (b) the DBHA can demonstrate that the move will, in fact, result in higher subsidy costs (c) the DBHA can demonstrate, in accordance with the policies in Part VIII of Chapter 16, that it does not have sufficient funding in its annual budget to accommodate the higher subsidy costs; and (d) for portability moves, the receiving DBHA is not absorbing the voucher.

If the DBHA does not have sufficient funding for continued assistance, but the family must move from their unit (e.g., the unit failed HQS), the family may move to a higher cost unit if the move is within the DBHA's jurisdiction. The DBHA, however, will not allow the family to move under portability in this situation if the family wishes to move to a higher cost area.

For both moves within the DBHA's jurisdiction and outside under portability, the DBHA will not deny a move due to insufficient funding if the DBHA previously approved the move and subsequently experienced a funding shortfall if the family cannot remain in their current unit. The DBHA will rescind the voucher in this situation if the family will be allowed to remain in their current unit.

The DBHA will create a list of families whose moves have been denied due to insufficient funding. The DBHA will keep the family's request open indefinitely, and when funds become available, the families on this list will take precedence over families on the waiting list. The DBHA will use the same procedures for notifying families with open requests to move when funds become available as it uses for notifying families on the waiting list (see section 4-III.D).

The DBHA will inform the family of its policy regarding moves denied due to insufficient funding in a letter to the family at the time the move is denied.

Grounds for Denial or Termination of Assistance

The DBHA may deny a family permission to move if it has grounds for denying or terminating the family's assistance [24 CFR 982.354(e) (2)].

DBHA Policy

If the DBHA has grounds for denying or terminating a family's assistance, the DBHA will act on those grounds in accordance with the regulations and policies set forth in Chapters 3 and 12, respectively. In general, it will not deny a family permission to move for this reason; however, it retains the discretion to do so under special circumstances.

Restrictions on Elective Moves [24 CFR 982.354(c)]

HUD regulations permit the DBHA to prohibit any elective move by a participant family during the family's initial lease term. They also permit the DBHA to prohibit more than one elective move by a participant family during any 12-month period. However, such prohibitions, if adopted, do not apply when the family or a member of the family is or has been the victim of domestic violence, dating violence, sexual assault, or stalking and the move is needed to protect the health or safety of the family or family member. (For the policy on documentation of abuse, see section 10-I.A.) In addition, the DBHA may not establish a policy permitting moves only at reexamination [Notice PIH 2016-09].

DBHA Policy

The DBHA will deny a family permission to make an elective move during the family's initial lease term. This policy applies to moves within the DBHA's jurisdiction or outside it under portability.

The DBHA will also deny a family permission to make more than one elective move during any 12-month period. This policy applies to all assisted families residing in the DBHA's jurisdiction.

The DBHA will consider exceptions to these policies for the following reasons: to protect the health or safety of a family member (e.g., lead-based paint hazards, domestic violence, witness protection programs), to accommodate a change in family circumstances (e.g., new employment, school attendance in a distant area), or to address an emergency situation over which a family has no control.

In addition, the DBHA will allow exceptions to these policies for purposes of reasonable accommodation of a family member who is a person with disabilities (see Chapter 2).

10-I.C. MOVING PROCESS

Notification

If a family wishes to move to a new unit, the family must notify the DBHA and the owner before moving out of the old unit or terminating the lease on notice to the owner [24 CFR 982.354(d)(2)]. If the family wishes to move to a unit outside the DBHA's jurisdiction under portability, the notice to the DBHA must specify the area where the family wishes to move [24 CFR 982.354(d) (2)]. The notices must be in writing [24 CFR 982.5].

Approval

DBHA Policy

Upon receipt of a family's notification that it wishes to move, the DBHA will determine whether the move is approvable in accordance with the regulations and policies set forth in sections 10-I.A and 10-I.B. The DBHA will notify the family in writing of its determination within 10 business days following receipt of the family's notification.

Reexamination of Family Income and Composition

DBHA Policy

For families approved to move to a new unit within the DBHA's jurisdiction, the DBHA will perform a new annual reexamination in accordance with the policies set forth in Chapter 11 of this plan.

For families moving into or families approved to move out of the DBHA's jurisdiction under portability, the DBHA will follow the policies set forth in Part II of this chapter.

Voucher Issuance and Briefing

DBHA Policy

For families approved to move to a new unit within the DBHA's jurisdiction, the DBHA will issue a new voucher within 10 business days of the DBHA's written approval to move. No briefing is required for these families. The DBHA will follow the policies set forth in Chapter 5 on voucher term, extension, and expiration. If a family does not locate a new unit within the term of the voucher and any extensions, the family may remain in its current unit with continued voucher assistance if the owner agrees and the DBHA approves. Otherwise, the family will lose its assistance.

For families moving into or families approved to move out of the DBHA's jurisdiction under portability, the DBHA will follow the policies set forth in Part II of this chapter.

Housing Assistance Payments [24 CFR 982.311(d)]

When a family moves out of an assisted unit, the DBHA may not make any housing assistance payment to the owner for any month **after** the month the family moves out. The owner may keep the housing assistance payment for the month when the family moves out of the unit.

If a participant family moves from an assisted unit with continued tenant-based assistance, the term of the assisted lease for the new assisted unit may begin during the month the family moves out of the first assisted unit. Overlap of the last housing assistance payment (for the month when the family moves out of the old unit) and the first assistance payment for the new unit, is not considered to constitute a duplicative housing subsidy.

PART II: PORTABILITY

10-II.A. OVERVIEW

Within the limitations of the regulations and this plan, a participant family or an applicant family that has been issued a voucher has the right to use tenant-based voucher assistance to lease a unit anywhere in the United States providing that the unit is located within the jurisdiction of a HA administering a tenant-based voucher program [24 CFR 982.353(b)]. The process by which a family obtains a voucher from one HA and uses it to lease a unit in the jurisdiction of another HA is known as portability. The HA that issues the voucher is called the **initial HA**. The HA that has jurisdiction in the area to which the family wants to move is called the **receiving HA**.

The receiving HA has the option of administering the family's voucher for the initial HA or absorbing the family into its own program. Under the first option, the receiving HA provides all housing services for the family and bills the initial HA for the family's housing assistance payments and the fees for administering the family's voucher. Under the second option, the receiving HA pays for the family's assistance with its own program funds, and the initial HA has no further relationship with the family. The initial HA must contact the receiving HA via email or other confirmed delivery method to determine whether the receiving HA will administer or absorb the initial HA's voucher. Based on the receiving HA's response, the initial HA must determine whether they will approve or deny the portability request [Notice PIH 2016-09].

HAs commonly act as both the initial and receiving HA because families may move into or out of their jurisdiction under portability. Each role involves different responsibilities. The DBHA will follow the rules and policies in section 10-II.B when it is acting as the initial HA for a family. It will follow the rules and policies in section 10-II.C when it is acting as the receiving HA for a family.

In administering portability, the initial HA and the receiving HA must comply with financial procedures required by HUD, including the use of HUD-required forms [24 CFR 982.355(e) (5)].

HAs must also comply with billing and payment deadlines. HUD may reduce an administrative fee to an initial or receiving HA if the HA does not comply with HUD portability requirements [24 CFR 982.355(e) (7)].

10-II.B. INITIAL DBHA ROLE

Allowable Moves under Portability

A family may move with voucher assistance only to an area where there is at least one HA administering a voucher program [24 CFR 982.353(b)]. If there is more than one HA in the area, the initial HA provides the family with the contact information for the receiving HAs that serve the area, and the family selects the receiving HA. The family must inform the initial HA which HA it has selected. If the family prefers not to select the receiving HA, the initial HA will select the receiving HA on behalf of the family [24 CFR 982.255(b)].

Applicant families that have been issued vouchers as well as participant families may qualify to lease a unit outside the HA's jurisdiction under portability. HUD regulations and HA policy determine whether a family qualifies.

Applicant Families

Under HUD regulations, most applicant families qualify to lease a unit outside the HA's jurisdiction under portability. However, HUD gives the HA discretion to deny a portability move by an applicant family for the same two reasons that it may deny any move by a participant family: insufficient funding and grounds for denial or termination of assistance. If a HA intends to deny a family permission to move under portability due to insufficient funding, the HA must notify HUD within 10 business days of the determination to deny the move [24 CFR 982.355(e)].

DBHA Policy

In determining whether or not to deny an applicant family permission to move under portability because the HA lacks sufficient funding or has grounds for denying assistance to the family, the initial DBHA will follow the policies established in section 10-I.B of this chapter. If the HA does deny the move due to insufficient funding, the HA will notify HUD in writing within 10 business days of the HA's determination to deny the move.

In addition, the DBHA may establish a policy denying the right to portability to nonresident applicants during the first 12 months after they are admitted to the program [24 CFR 982.353(c)].

DBHA Policy

If neither the head of household nor the spouse/co-head of an applicant family had a domicile (legal residence) in the DBHA's jurisdiction at the time that the family's initial application for assistance was submitted, the family must lease a unit within the initial HA's jurisdiction for at least 12 months before requesting portability.

The DBHA will consider exceptions to this policy for purposes of reasonable accommodation (see Chapter 2) or reasons related to domestic violence, dating violence, sexual assault, or stalking.

Participant Families

The initial DBHA must not provide portable assistance for a participant if a family has moved out of its assisted unit in violation of the lease [24 CFR 982.353(b)]. The Violence against Women Act of 2013 (VAWA) creates an exception to this prohibition for families who are otherwise in compliance with program obligations but have moved to protect the health or safety of a family member who is or has been a victim of domestic violence, dating violence, sexual assault, or stalking and who reasonably believed he or she was imminently threatened by harm from further violence if he or she remained in the unit [24 CFR 982.353(b)].

DBHA Policy

The DBHA will determine whether a participant family may move out of the DBHA's jurisdiction with continued assistance in accordance with the regulations and policies set forth here and in sections 10-I.A and 10-I.B of this chapter. The DBHA will notify the family of its determination in accordance with the approval policy set forth in section 10-I.C of this chapter.

Determining Income Eligibility

Applicant Families

An applicant family may lease a unit in a particular area under portability only if the family is income eligible for admission to the voucher program in that area [24 CFR 982.353(d) (1)]. The family must specify the area to which the family wishes to move [24 CFR 982.355(c) (1)].

The initial HA is responsible for determining whether the family is income eligible in the area to which the family wishes to move [24 CFR 982.353(d) (1), 24 CFR 982.355(9)]. If the applicant family is not income eligible in that area, the DBHA must inform the family that it may not move there and receive voucher assistance [Notice PIH 2016-09].

Participant Families

The income eligibility of a participant family is not redetermined if the family moves to a new jurisdiction under portability [24 CFR 982.353(d) (2)].

Reexamination of Family Income and Composition

No new reexamination of family income and composition is required for an applicant family.

DBHA Policy

For a participant family approved to move out of its jurisdiction under portability, the DBHA generally will conduct a reexamination of family income and composition only if the family's annual reexamination must be completed on or before the initial billing deadline specified on form HUD-52665, Family Portability Information.

The DBHA will make any exceptions to this policy necessary to remain in compliance with HUD regulations.

Briefing

The regulations and policies on briefings set forth in Chapter 5 of this plan require the DBHA to provide information on portability to all applicant families that qualify to lease a unit outside the DBHA's jurisdiction under the portability procedures. Therefore, no special briefing is required for these families.

DBHA Policy

No formal briefing will be required for a participant family wishing to move outside the DBHA's jurisdiction under portability. However, the DBHA will provide the family with the same oral and written explanation of portability that it provides to applicant families selected for admission to the program (see Chapter 5).

The DBHA will provide the name, address, and phone of the contact for the DBHAs in the jurisdiction to which they wish to move. If there is more than one DBHA with jurisdiction over the area to which the family wishes to move, the DBHA will advise the family that the family selects the receiving HA and notify the initial HA of which receiving HA was selected. The DBHA will provide the family with contact information for all of the receiving HAs that serve the area. The DBHA will not provide any additional information about receiving HAs in the area. The DBHA will further inform the family that if the family prefers not to select the receiving HA, the initial HA will select the receiving HA on behalf of the family. In this case, the HA will not provide the family with information for all receiving HAs in the area.

The DBHA will advise the family that they will be under the RHA's policies and procedures, including screening, subsidy standards, voucher extension policies, and payment standards.

Voucher Issuance and Term

An applicant family has no right to portability until after the family has been issued a voucher [24 CFR 982.353(b)]. In issuing vouchers to applicant families, the DBHA will follow the regulations and procedures set forth in Chapter 5.

DBHA Policy

For participating families approved to move under portability, the DBHA will issue a new voucher within 10 business days of the HA's written approval to move.

The initial term of the voucher will be 60 days.

Voucher Extensions and Expiration

DBHA Policy

The DBHA will approve **no** extensions to a voucher issued to an applicant or participant family porting out of the DBHA's jurisdiction except under the following circumstances: (a) the initial term of the voucher will expire before the portable family will be issued a voucher by the receiving HA, (b) the family decides to return to the initial HA's jurisdiction and search for a unit there, or (c) the family decides to search for a unit in a third HA's jurisdiction. In such cases, the policies on voucher extensions set forth in

Chapter 5, section 5-II.E, of this plan will apply, including the requirement that the family apply for an extension in writing prior to the expiration of the initial voucher term.

To receive or continue receiving assistance under the initial HA's voucher program, a family that moves to another HA's jurisdiction under portability must be under HAP contract in the receiving HA's jurisdiction within 90 days following the expiration date of the initial HA's voucher term (including any extensions). (See below under "Initial Billing Deadline" for one exception to this policy.)

Preapproval Contact with the Receiving DBHA

Prior to approving a family's request to move under portability, the initial HA must contact the receiving HA via e-mail or other confirmed delivery method to determine whether the receiving HA will administer or absorb the family's voucher. Based on the receiving HA's response, the initial HA must determine whether it will approve or deny the move [24 CFR 982.355(c) (3)].

DBHA Policy

The DBHA will use e-mail, when possible, to contact the receiving DBHA regarding whether the receiving DBHA will administer or absorb the family's voucher.

Initial Notification to the Receiving DBHA

After approving a family's request to move under portability, the initial HA must promptly notify the receiving HA via email or other confirmed delivery method to expect the family [24 CFR 982.355(c) (3); 24 CFR 982.355(c) (7)]. The initial DBHA must also advise the family how to contact and request assistance from the receiving HA [24 CFR 982.355(c) (6)].

DBHA Policy

Because the portability process is time-sensitive, the DBHA will notify the receiving HA by phone, fax, or e-mail to expect the family. The initial HA will also ask the receiving HA to provide any information the family may need upon arrival, including the name, fax, e-mail address, and telephone number of the staff person responsible for business with incoming portable families and procedures related to appointments for voucher issuance. The DBHA will pass this information along to the family. The DBHA will also ask for the name, address, telephone number, fax and e-mail of the person responsible for processing the billing information.

Sending Documentation to the Receiving DBHA

The initial HA is required to send the receiving HA the following documents:

- Form HUD-52665, Family Portability Information, with Part I filled out [Notice PIH 2016-09]
- A copy of the family's voucher [Notice PIH 2016-09]
- A copy of the family's most recent form HUD-50058, Family Report, or, if necessary in the case of an applicant family, family and income information in a format similar to that of form HUD-50058 [24 CFR 982.355(c)(7), Notice PIH 2016-09]
- Copies of the income verifications backing up the form HUD-50058, including a copy of the family's current EIV data [24 CFR 982.355(c)(7), Notice PIH 2016-09]

DBHA Policy

In addition to these documents, the DBHA will provide the following information, if available, to the receiving DBHA:

Social security numbers (SSNs)

Documentation of SSNs for all nonexempt household members whose SSNs have not been verified through the EIV system

Documentation of legal identity

Documentation of citizenship or eligible immigration status

Documentation of participation in the earned income disallowance (EID) benefit

Documentation of participation in a family self-sufficiency (FSS) program

The DBHA will notify the family in writing regarding any information provided to the receiving DBHA [HCV GB, p. 13-3].

Initial Billing Deadline [Notice PIH 2016-09]

The deadline for submission of initial billing is 90 days following the expiration date of the voucher issued to the family by the initial HA. In cases where suspension of the voucher delays the initial billing submission, the receiving HA must notify the initial HA of delayed billing before the billing deadline and document the delay is due to the suspension. In this case, the initial HA must extend the billing deadline by 30 days.

If the initial HA does not receive a billing notice by the deadline and does not intend to honor a late billing submission, it must notify the initial HA in writing. The initial HA may report to HUD the receiving HA's failure to comply with the deadline.

If the initial HA will honor the late billing, no action is required.

DBHA Policy

If the DBHA has not received an initial billing notice from the receiving HA within the billing deadline, it will contact the receiving HA to inform them that it will not honor a late billing submission and will return any subsequent billings that it receives on behalf of the family. The DBHA will send the receiving HA a written confirmation of its decision by mail.

The DBHA will allow an exception to this policy if the family includes a person with disabilities and the late billing is a result of a reasonable accommodation granted to the family by the receiving HA.

Monthly Billing Payments [24 CFR 982.355(e), Notice PIH 2016-09]

If the receiving HA is administering the family's voucher, the receiving HA bills the initial HA for housing assistance payments and administrative fees. When reimbursing for administrative fees, the initial HA must promptly reimburse the receiving HA for the lesser of 80 percent of the initial HA ongoing administrative fee or 100 percent of the receiving HA's ongoing administrative fee for each program unit under contract on the first day of the month for which the receiving HA is billing the initial HA under portability. If the administrative fees are prorated for the HCV program, the proration will apply to the amount of the administrative fee for which the receiving HA may bill [24 CFR 982.355(e) (2)].

The initial HA is responsible for making billing payments in a timely manner. The first billing amount is due within 30 calendar days after the initial HA receives Part II of form HUD-52665 from the receiving HA. Subsequent payments must be **received** by the receiving HA no later than the fifth business day of each month. The payments must be provided in a form and manner that the receiving HA is able and willing to accept.

The initial HA may not terminate or delay making payments under existing portability billing arrangements as a result of over-leasing or funding shortfalls. The HA must manage its tenant-based program in a manner that ensures that it has the financial ability to provide assistance for families that move out of its jurisdiction under portability and are not absorbed by receiving HAs as well as for families that remain within its jurisdiction.

DBHA Policy

The initial DBHA will utilize direct deposit to ensure that the payment is received by the deadline unless the receiving HA notifies the initial HA that direct deposit is not acceptable to them. If the initial HA extends the term of the voucher, the receiving HA's voucher will expire 30 calendar days from the new expiration date of the initial HA's voucher.

Annual Updates of Form HUD-50058

If the initial HA is being billed on behalf of a portable family, it should receive an updated form HUD-50058 each year from the receiving HA. If the initial HA fails to receive an updated 50058 by the family's annual reexamination date, the initial HA should contact the receiving HA to verify the status of the family. The initial HA must continue paying the receiving HA based on the last form HUD-50058 received, unless instructed otherwise by HUD. The initial HA may seek absorption of the vouchers by following steps outlined in Notice PIH 2016-09.

Denial or Termination of Assistance [24 CFR 982.355(c) (17)]

At any time, either the initial HA or the receiving HA may make a determination to deny or terminate assistance with the family in accordance with 24 CFR 982.552 and 24 CFR 982.553. (For DBHA policies on denial and termination, see Chapters 3 and 12, respectively.)

10-II.C. RECEIVING HA ROLE

If a family has a right to lease a unit in the receiving HA's jurisdiction under portability, the receiving HA must provide assistance for the family [24 CFR 982.355(10)]. HUD may determine in certain instances that a HA is not required to accept incoming portable families, such as a HA in a declared disaster area. However, the HA must have approval in writing from HUD before refusing any incoming portable families [24 CFR 982.355(b)].

Administration of the voucher must be in accordance with the receiving HA's policies. This requirement also applies to policies of Moving to Work agencies. The receiving HA procedures and preferences for selection among eligible applicants do not apply to the family, and the receiving HA waiting list is not used [24 CFR 982.355(c) (10)]. The family's unit, or voucher, size is determined in accordance with the subsidy standards of the receiving HA [24 CFR 982.355(c) (12)], and the receiving HA's policies on extensions of the voucher term apply [24 CFR 982.355(c) (14)].

Responding to Initial HA's Request [24 CFR 982.355(c)]

The receiving HA must respond via e-mail or other confirmed delivery method to the initial HA's inquiry to determine whether the family's voucher will be billed or absorbed [24 CFR 982.355(c) (3)]. If the receiving HA informs the initial HA that it will be absorbing the voucher, the receiving HA cannot reverse its decision at a later date without consent of the initial HA (24 CFR 982.355(c) (4).

DBHA Policy

The DBHA will use e-mail, when possible, to notify the initial HA whether it will administer or absorb the family's voucher.

Initial Contact with Family

When a family moves into the DBHA's jurisdiction under portability, the family is responsible for promptly contacting the DBHA and complying with the DBHA's procedures for incoming portable families. The family's failure to comply may result in denial or termination of the receiving HA's voucher [24 CFR 982.355(c) (8)].

If the voucher issued to the family by the initial HA has expired, the receiving HA must contact the initial HA to determine if it will extend the voucher [24 CFR 982.355(c) (13)]. An informal hearing is not required when a voucher has expired without the family leasing a unit.

If for any reason the receiving HA refuses to process or provide assistance to a family under the portability procedures, the family must be given the opportunity for an informal review or hearing [Notice PIH 2016-09]. (For more on this topic, see later under "Denial or Termination of Assistance.")

Briefing

HUD allows the receiving HA to require a briefing for an incoming portable family as long as the requirement does not unduly delay the family's search [Notice PIH 2016-09].

DBHA Policy

The DBHA will not require the family to attend a briefing. The DBHA will provide the family with a briefing packet (as described in Chapter 5) and, in an individual briefing, will orally inform the family about the DBHA's payment and subsidy standards, procedures for requesting approval of a unit, the unit inspection process, and the leasing process. The DBHA will suggest that the family attend a full briefing at a later date.

Income Eligibility and Reexamination

The receiving HA does not re-determine eligibility for a portable family that was already receiving assistance in the initial HA's voucher program [24 CFR 982.355(c) (9)]. If the receiving HA opts to conduct a new reexamination for a current participant family, the receiving HA may not delay issuing the family a voucher or otherwise delay approval of a unit [24 CFR 982.355(c) (11)].

DBHA Policy

For any family moving into its jurisdiction under portability, the DBHA will conduct a new reexamination of family income and composition. However, the DBHA will not delay issuing the family a voucher for this reason. Nor will the DBHA delay approving a unit for the family until the reexamination process is complete unless the family is an applicant and the DBHA cannot otherwise confirm that the family is income eligible for admission to the program in the area where the unit is located.

In conducting its own reexamination, the DBHA will rely upon any verifications provided by the initial HA to the extent that they (a) accurately reflect the family's current circumstances and (b) were obtained within the last 120 days. Any new information may be verified by documents provided by the family and adjusted, if necessary, when third party verification is received.

Voucher Issuance

When a family moves into its jurisdiction under portability, the receiving HA is required to issue the family a voucher [24 CFR 982.355(c) 13)]. The family must submit a request for tenancy approval to the receiving HA during the term of the receiving HA's voucher

[24 CFR 982.355(c) 15)].

Timing of Voucher Issuance

HUD expects the receiving HA to issue the voucher within two weeks after receiving the family's paperwork from the initial HA if the information is in order, the family has contacted the receiving HA, and the family complies with the receiving HA's procedures [Notice PIH 2016-09].

DBHA Policy

When a family ports into its jurisdiction, the DBHA will issue the family a voucher based on the paperwork provided by the initial HA unless the family's paperwork from the initial HA is incomplete, the family's voucher from the initial HA has expired or the family does not comply with the HA's procedures. The DBHA will update the family's information when verification has been completed.

Voucher Term

The term of the receiving HA's voucher may not expire before 30 calendar days from the expiration of the initial HA's voucher [24 CFR 982.355(c) (13)]. If the initial HA extends the term of the voucher, the receiving HA's voucher may not expire before 30 days from the new expiration date of the initial HA's voucher [Notice PIH 2016-09].

DBHA Policy

The receiving HA's voucher will expire 30 calendars days from the expiration date of the initial HA's voucher. If the initial HA extends the term of the voucher, the receiving HA's voucher will expire 30 calendar days from the new expiration date of the initial HA's voucher.

Voucher Extensions [24 CFR 982.355(c)(14), Notice 2016-09]

Once the receiving HA issues the portable family a voucher, the receiving HA's policies on extensions of the voucher term apply. The receiving HA must inform the initial HA of any extension granted to the term of the voucher. It must also bear in mind the billing deadline provided by the initial HA. Unless willing and able to absorb the family, the receiving HA should ensure that any voucher expiration date would leave sufficient time to process a request for tenancy approval, execute a HAP contract, and deliver the initial billing to the initial HA.

DBHA Policy

The DBHA generally will not extend the term of the voucher that it issues to an incoming portable family unless the DBHA plans to absorb the family into its own program, in which case it will follow the policies on voucher extension set forth in section 5-II.E.

The DBHA will consider an exception to this policy as a reasonable accommodation to a person with disabilities (see Chapter 2).

Voucher Suspensions [24 CFR 982.303, 24 CFR 982.355(c)(15)]

If the family submits a request for tenancy approval during the term of the receiving HA's voucher, the DBHA must suspend the term of that voucher. The term of the voucher stops from the date that the family submits a request for DBHA approval of the tenancy until the date the DBHA notifies the family in writing whether the request has been approved or denied [24 CFR 982.4(b)] (see Section 5-II.E).

Notifying the Initial HA

The receiving HA must promptly notify the initial HA if the family has leased an eligible unit under the program or if the family fails to submit a request for tenancy approval for an eligible unit within the term of the receiving HA's voucher [24 CFR 982.355(c) (16)]. The receiving HA is required to use Part II of form HUD-52665, Family Portability Information, for this purpose [Notice PIH 2016-09]. (For more on this topic and the deadline for notification, see below under "Administering a Portable Family's Voucher.")

If an incoming portable family ultimately decides not to lease in the jurisdiction of the receiving HA but instead wishes to return to the initial HA's jurisdiction or to search in another jurisdiction, the receiving HA must refer the family back to the initial HA. In such a case the voucher of record for the family is once again the voucher originally issued by the initial HA. Any extension of search time provided by the receiving HA's voucher is only valid for the family's search in the receiving HA's jurisdiction [Notice PIH 2016-09].

Administering a Portable Family's Voucher

Portability Billing [24 CFR 982.355(e)]

To cover assistance for a portable family that was not absorbed, the receiving HA bills the initial HA for housing assistance payments and administrative fees. The amount of the housing assistance payment for a portable family in the receiving HA's program is determined in the same manner as for other families in the receiving HA's program.

The receiving HA may bill the initial HA for the lesser of 80 percent of the initial HA's ongoing administrative fee or 100 percent of the receiving HA's ongoing administrative fee for each program unit under contract on the first day of the month for which the receiving HA is billing the initial HA under portability. If the administrative fees are prorated for the HCV program, the proration will apply to the amount of the administrative fee for which the receiving DBHA may bill (i.e., the receiving HA may bill for the lesser of 80 percent of the initial HA's prorated ongoing administrative fee or 100 percent of the receiving HA's ongoing administrative fee).

If both HAs agree, the HAs may negotiate a different amount of reimbursement.

DBHA Policy

Unless the DBHA negotiates a different amount of reimbursement with the initial HA, the DBHA will bill the initial HA the maximum amount of administrative fees allowed, ensuring any administrative fee proration has been properly applied.

Initial Billing Deadline

If a portable family's search for a unit is successful and the receiving HA intends to administer the family's voucher, the receiving HA must submit its initial billing notice (Part II of form HUD-52665) in time that the notice will be **received** no later than 90 days following the expiration date of the family's voucher issued by the initial HA [Notice PIH 2016-09]. This deadline may be extended for 30 additional days if the delay is due to suspension of the voucher's term (see Initial Billing Section). A copy of the family's form HUD-50058, Family Report, completed by the receiving HA must be attached to the initial billing notice. The receiving HA may send these documents by mail, fax, or e-mail.

DBHA Policy

The DBHA will send its initial billing notice by fax or e-mail, if necessary, to meet the billing deadline but will also send the notice by regular mail.

If the receiving HA fails to send the initial billing by the deadline, it is required to absorb the family into its own program unless (a) the initial HA is willing to accept the late submission or (b) HUD requires the initial HA to honor the late submission (e.g., because the receiving HA is over-leased) [Notice PIH 2016-09].

Ongoing Notification Responsibilities [Notice PIH 2016-09, HUD-52665]

Annual Reexamination. The receiving HA must send the initial HA a copy of a portable family's updated form HUD-50058 after each annual reexamination for the duration of time the receiving HA is billing the initial HA on behalf of the family, regardless of whether there is a change in the billing amount.

DBHA Policy

The DBHA will send a copy of the updated HUD-50058 by regular mail no later than 10 business days after the effective date of the reexamination.

Change in Billing Amount. The receiving HA is required to notify the initial HA, using form HUD-52665, of any change in the billing amount for the family as a result of:

- A change in the HAP amount (because of a reexamination, a change in the applicable payment standard, a move to another unit, etc.)
- An abatement or subsequent resumption of the HAP payments
- Termination of the HAP contract
- Payment of a damage/vacancy loss claim for the family
- Termination of the family from the program

The timing of the notice of the change in the billing amount should correspond with the notification to the owner and the family in order to provide the initial HA with advance notice of the change. Under no circumstances should the notification be later than 10 business days following the effective date of the change in the billing amount. If the receiving HA fails to send Form HUD-52665 within 10 days of effective date of billing changes, the initial HA is not responsible for any increase prior to notification. If the change resulted in a decrease in the monthly billing amount, the initial HA will offset future monthly payments until the difference is reconciled.

Late Payments [Notice PIH 2016-09]

If the initial HA fails to make a monthly payment for a portable family by the fifth business day of the month, the receiving HA must promptly notify the initial HA in writing of the deficiency. The notice must identify the family, the amount of the billing payment, the date the billing payment was due, and the date the billing payment was received (if it arrived late). The receiving HA must send a copy of the notification to the Office of Public Housing (OPH) in the HUD area office with jurisdiction over the receiving HA. If the initial HA fails to correct the problem by the second month following the notification, the receiving HA may request by memorandum to the director of the OPH with jurisdiction over the receiving HA that HUD transfer the unit in question. A copy of the initial notification and any subsequent correspondence between the HAs on the matter must be attached. The receiving HA must send a copy of the memorandum to the initial HA. If the OPH decides to grant the transfer, the billing arrangement on behalf of the family ceases with the transfer, but the initial HA is still responsible for any outstanding payments due to the receiving HA.

Overpayments [Notice PIH 2016-09]

In all cases where the receiving HA has received billing payments for billing arrangements no longer in effect, the receiving HA is responsible for returning the full amount of the overpayment (including the portion provided for administrative fees) to the initial HA.

In the event that HUD determines billing payments have continued for at least three months because the receiving HA failed to notify the initial HA that the billing arrangement was terminated, the receiving HA must take the following steps:

- Return the full amount of the overpayment, including the portion provided for administrative fees, to the initial HA.
- Once full payment has been returned, notify the Office of Public Housing in the HUD area office with jurisdiction over the receiving HA of the date and the amount of reimbursement to the initial HA.

At HUD's discretion, the receiving HA will be subject to the sanctions spelled out in Notice PIH 2016-09.

Denial or Termination of Assistance

At any time, the receiving HA may make a determination to deny or terminate assistance to a portable family for family action or inaction [24 CFR 982.355(c) (17)].

In the case of a termination, the HA should provide adequate notice of the effective date to the initial HA to avoid having to return a payment. In no event should the receiving HA fail to notify the initial HA later than 10 business days following the effective date of the termination of the billing arrangement [HUD-52665; Notice PIH 2016-09].

DBHA Policy

If the DBHA elects to deny or terminate assistance for a portable family, the DBHA will notify the initial HA within 10 business days after the informal review or hearing if the denial or termination is upheld. The DBHA will base its denial or termination decision on the policies set forth in Chapter 3 or Chapter 12, respectively. The informal review or hearing will be held in accordance with the policies in Chapter 16. The receiving HA will furnish the initial HA with a copy of the review or hearing decision.

Absorbing a Portable Family

The receiving HA may absorb an incoming portable family into its own program when the HA executes a HAP contract on behalf of the family or at any time thereafter providing that the HA has funding available under its annual contributions contract (ACC) [24 CFR 982.355(d) (1), Notice PIH 2016-09].

If the receiving HA absorbs a family from the point of admission, the admission will be counted against the income targeting obligation of the receiving HA [24 CFR 982.201(b) (2) (vii)].

If the receiving HA absorbs a family after providing assistance for the family under a billing arrangement with the initial HA, the receiving HA must send an updated form HUD-52665 to the initial HA no later than 10 business days following the effective date of the termination of the billing arrangement [Notice PIH 2016-09].

DBHA Policy

If the DBHA decides to absorb a portable family upon the execution of a HAP contract on behalf of the family, the DBHA will notify the initial HA by the initial billing deadline specified on form HUD-52665. The effective date of the HAP contract will be the effective date of the absorption.

If the DBHA decides to absorb a family after that, it will provide the initial HA with 30 days' advance notice, but no later than 10 business days following the effective date of the termination of the billing arrangement.

Following the absorption of an incoming portable family, the family is assisted with funds available under the consolidated ACC for the receiving HA's voucher program [24 CFR 982.355(d)], and the receiving HA becomes the initial HA in any subsequent moves by the family under portability [24 CFR 982.355(e) (4)].

Riviera Beach Housing Authority

Inactive at this time

Maria Bond

From: Karla Laboy <klaboy@bocahousing.org>
Sent: Monday, September 18, 2023 3:08 PM

To: Maria Bond Cc: John Scannell

Subject: RE: Documents Needed for HUD Applications

Attachments: Policy Homeless_0001.pdf

This Message Is From an External Sender

This message came from outside your organization.

Good afternoon,

Please see below in RED, thank you.

- 1. 1. Boca Raton Housing Authority's policy on Homeless Preference. Please see attached.
- 2. 2. Boca Raton Housing Authority's policy on Moving On for individuals in Permanent Supportive Housing (PSH) who no longer require the intensive services of PSH but still need rental assistance. N/A
- 3. 3. The above may be sections of BRHA's Administrative Policy, Admissions and Continued Occupancy Plan (ACOP) or Five Year Plan that contain this information. N/A
- 4. 4. We also need the higher percentage of either new admissions into the Public Housing Choice Voucher Program during FY 2022 who were experiencing homelessness at entry or at the time of admission to the HCV program. (Higher) Public Housing Choice Voucher Program = 2%

Regards, Karla Laboy Director of Section 8



2333A W. Glades Road Boca Raton, FL 33431 Phone 561.614.1859 Fax 561.206.6215 klaboy@bocahousing.org

www.bocahousing.org [bocahousing.org]



From: John Scannell < jscannell@bocahousing.org> Sent: Monday, September 18, 2023 10:13 AM To: Karla Laboy <klaboy@bocahousing.org>

Subject: FW: Documents Needed for HUD Applications

Karla

They need this for something the County is doing.

John H. Scannell, CPA Executive Director



2333A W. Glades Road Boca Raton, FL 33431 Phone 561.614.1801 Fax 561.206.6215 jscannell@bocahousing.org www.bocahousing.org [bocahousing.org]



Florida has a very broad public records law. As a result, any written communication created or received by the Boca Raton Housing Authority officials and employees will be made available to the public and media, upon request, unless otherwise exempt. Under Florida law, email addresses are public records. If you do not want your email address released in response to a public records request, do not send electronic mail to this office. Instead, contact our office by phone.

From: Maria Bond < MBond@pbcgov.org>
Sent: Monday, September 18, 2023 10:11 AM
To: John Scannell < iscannell@bocahousing.org>
Subject: Documents Needed for HUD Applications

Good morning Mr. Scannell,

We are currently working on our CoC HUD application and I am in need of assistance from the BHHA. I need help specifically as it relates to CoC coordination with PHA programs, the HCV programs and special purpose vouchers.

This information is needed for our HUD application which is scheduled to go before the Board of County Commissioners soon. We need:

- 1. Boca Raton Housing Authority's policy on Homeless Preference.
- 2. Boca Raton Housing Authority's policy on Moving On for individuals in Permanent Supportive Housing (PSH) who no longer require the intensive services of PSH but still need rental assistance.
- 3. The above may be sections of BRHA's Administrative Policy, Admissions and Continued Occupancy Plan (ACOP) or Five Year Plan that contain this information.

4. We also need the higher percentage of either new admissions into the Public Housing Choice Voucher Program during FY 2022 who were experiencing homelessness at entry or at the time of admission to the HCV program.

As this is very time sensitive, we would greatly appreciate your efforts to expedite provision of the requested information. Thanks so much for your help.

Kind regards,

Maria Bond Homeless Program and Contract Manager Division of Human Services 810 Datura St. 2nd Floor West Palm Beach, FL 33401 561-355-4779 mbond@pbcgov.org

We need to stop just pulling people out of the river.

We need to go upstream and find out why they're falling in.

-Desmond Tutu

Under Florida law, e-mail addresses are public records. If you do not want your e-mail address released in response to a public records request, do not send electronic mail to this entity. Instead, contact this office by phone or in writing.

4-I.D. PLACEMENT ON THE WAITING LIST

The PHA must review each complete application received and make a preliminary assessment of the family's eligibility. The PHA must accept applications from families for whom the list is open unless there is good cause for not accepting the application (such as denial of assistance) for the grounds stated in the regulations [24 CFR 982.206(b)(2)]. Where the family is determined to be ineligible, the PHA must notify the family in writing [24 CFR 982.201(f)]. Where the family is not determined to be ineligible, the family will be placed on a waiting list of applicants.

No applicant has a right or entitlement to be listed on the waiting list, or to any particular position on the waiting list [24 CFR 982.202(c)].

Ineligible for Placement on the Waiting List

PHA Policy

If the PHA can determine from the information provided that a family is ineligible, the family will not be placed on the waiting list. Where a family is determined to be ineligible, the PHA will send written notification of the ineligibility determination within 10 business days of receiving a complete application. The notice will specify the reasons for ineligibility, and will inform the family of its right to request an informal review and explain the process for doing so (see Chapter 16).

Eligible for Placement on the Waiting List

PHA Policy

The PHA will send written notification of the preliminary eligibility determination within 10 business days of receiving a complete application.

Placement on the waiting list does not indicate that the family is, in fact, eligible for assistance. A final determination of eligibility will be made when the family is selected from the waiting list.

Applicants will be placed on the waiting list according to the date and time their complete application is received by the PHA with the exception of those applicants who can establish that they qualify for one of the local preferences approved by the PHA.

The PHA will use the following local preferences:

The PHA maintains the following local preferences

- To allow families of federally declared disasters who have been displaced to receive preference over other waiting list placeholders. The family must be able to substantiate that they have been displaced and the area from which they have been displaced has been declared a federal disaster area.
- To allow a preference for families whose head of household or co-head is currently serving or has served in a war zone. The family must present the required substantiation.
- To allow homeless families receive a preference; 5% of all incoming applicants to be selected before other families from the waiting list; these families must be referred from approved support agencies in Palm Beach County.



FY23 CoC Consolidated Application

Attachment: Letter Signed by Working Group

Question1D-11A

Cover Sheet





Executive Committee Uwe Naujak Chairman Homeless Coalition

Elizabeth Jo Miller Vice-Chair Dept. of Housing & Econom

Dept. of Housing & Economic Development

Gibbie Nauman Secretary Cros Ministries

Robriannia Johnson Race & Equity Pillar Chair Vita Nova Inc.

Linda Kane Healthcare Pillar Chair Southeast Behavioral Health Network

Jennifer Sellars Engagement & Advocacy Pillar Chair The Lord's Place

Cristina Lucier, Ph.D. Supportive Services Pillar Chair The Lord's Place

Josh Maddock Member at Large Stand Down

Lyndsey Morrell HMIS Chair Adopt-A-Family

Nydia Sabugo-Marrou Member at Large Adopt-A-Family

Shelby Swiderski Community Member Mental Health of America

Ezra Krieg Permanent Housing Pillar Chair Community Activist

Lisa Kemp Systems Chair City of West Palm Beach

Steven Coufal Community Member The Lord's Place September 18, 2023

To Whom it May Concern:

My name is Uwe Naujak and I am the Chairman of the Palm Beach County (PBC) Homeless and Housing Alliance (HHA), the Continuum of Care (CoC) in PBC. I am writing to you today as a representative of a group of individuals who have personally experienced homelessness that serve in a leadership capacity. The HHA has set aside three (3) seats on the HHA Governance Board to be filled by individuals with lived experience. The three individuals, including myself have been invited to share our stories, insights, and thoughts with the stakeholders in our community in the hope of fostering greater understanding and empathy for the issues surrounding homelessness. We believe that by sharing our experiences, we can help dispel some of the misconceptions and stereotypes associated with homelessness. I am writing this letter on behalf of the three of us.

Our experiences have taught us the importance of community support and understanding. It's crucial to recognize that homelessness is not a choice but a circumstance. Often, the individuals experiencing homelessness are striving to regain their stability and self-sufficiency, and they need a helping hand along the way.

We believe that by raising awareness and promoting empathy, we can work together to address the root causes of homelessness and create a society where everyone has access to safe and stable housing.

It is our hope that together we can make homelessness a thing of the past.

Uwe Naujak HHA Chairperson

Silicerel



FY23 CoC Consolidated Application

Attachment: Housing First Evaluation

Question 1D-2a

Cover Sheet

Monitoring Tool and Report for Bridges to Success

CoC 2023 -P	ERMANE	NT SUPPORTED F	IOUSING - PROGRAM MONITORI	NG FORM			
	D.	Program		<u> </u>			
Families First	Bridges to Success		Jean-Marie Moore	4/14/2023			
		COOF	RDINATION				
Requirement	Yes	No	Documentation	Comments			
The organization demonstrates coordination							
with the HHA, including participating in HHA							
meetings and subcommittees?	х		HHA Records				
Does the organization demonstrate							
coordination and integration with other							
1	x		Case notes in client files				
Does the organization demonstrate referral							
to community mainstream services as							
appropriate?	х		Case notes in client files				
Does the organization assist the client to							
apply for benefits (unemployment, TANF,							
Social Security) for which he/she might be							
eligible?	х		Case notes in client files				

Referrals from Adopt a Family

The Coordinated Entry system is used for selection and referral of participants

POLICIES						
Requirement	Yes	No	Documentation	Comments		
Agency has written policies & procedures that require intake staff to document eligibility at intake.	x		Policies & Procedures			
			r officies & Procedures			
Policy includes standards for documenting homelessness						
	x		Policies & Procedures			
Agency has policy for documenting disability	x		Policies & Procedures			
Agency has policy for documenting chronic homelessness	x		Policies & Procedures			
Agency has written Policies & Procedures for administering assistance.	х		Client Handbook			
Agency makes a Client Grievance Procedure available to all clients and applicants	x		Receipt in Client File, Client Handbook			
Agency makes a Client Handbook including rights and responsibilities available to all families served.	х		Receipt in Client file, Client Handbook			

Agency policies include requirement that all participants receive the appropriate SPADT at intake				
Policy includes requirement to give appropriate SPDAT at 30, 90, 180, 270, 365 days and if circumstances change	Х		Client Handbook	
Policy includes requirements for Individual Service Plans consistent with requirements of HHA	x		Client Handbook Client Handbook	
Is there a written process for approval and documentation of costs of support services provided?	x		Policies & Procedures	
Support services are not provided after rental assistance stops	x		Client Files	
		(CMIS	
Requirement	Yes	No	Documentation	Comments
Data is entered into CMIS in real time, no later than 2 business days after intake/entry, assessment, program or service provision, and exit.	v		CMIS Records	
Data is entered in compliance with CMIS Policies & Procedures	x		CMIS Records	
Reports from CMIS indicate data accuracy	x		CMIS Reports	
			TRAINING	
Requirement	Yes	No	Documentation	Comments
Trauma-Informed Care				
All staff administering SPADT have SPADT Training				

Ι			
	S	ERVICE DELIVERY	
Yes	No	Documentation	Comments
х		Client Handbook	
х		The Residential Sublease Agreement requires the applicant to have a negative drug test. Per discussion with management, participants are accepted regardless of outcome of drug test. Agreed to remove this from the lease agreement	
	Yes	Yes No	The Residential Sublease Agreement requires the applicant to have a negative drug test. Per discussion with management, participants are accepted regardless of outcome of drug test. Agreed to remove

Client Handbook

Client Handbook

Client Handbook

Client files

Client files

Client Handbook

Policies & Procedures

Policies & Procedures/Client Files

restrictions)

victimization

the writer

Applicants are not screened out due to

Programs use a housing first approach

Programs use a trauma informed approach

Programs use a client-centered approach

Case notes are timely, signed and dated by

Case notes include services received and

Program/Service Plans are developed within

progress or lack of toward goals.

30 days of entry into the program

The case manager and participant consider issues related to the participant's disability when developing the plan and services that			
may be needed to address them.	x	Service Plans	
Evidence of adequate supervision of staff	х		

Requirement	Yes	No	Documentation	Comments
The program has met or demonstrates				
satisfactory progress toward meeting the				
number to be served stated in the contract	х		HMIS Records	
The program has met or demonstrates				
satisfactory progress toward meeting the				
outcomes designated in the contract stated in				
the contract.	N/A			
		COMPLIANCE V	VITH REGULATIONS	
Requirement	Yes	No	Documentation	Comments
T I				
The program documents that participants in				
the program meet the Category 1 or 4 of HUD				
definition of Homelessness	х		Documentation in Client files	
The program documents by certification of				
the head of household that no subsequent				
residence has been identified (category 4				
only)	N/A		N/A	
The program reevaluates the types and				
amounts of assistance the program				
participant needs before beginning the				
program and at least annually				
	PERMA	NENT SUPPORTI	VE HOUSING REQUIRMENTS	
Requirement	Yes	No	Documentation	Comments
Rental assistance is provided per client needs				
(not set time frame)	х		Client Handbook	
Do all participants have a signed lease, for no				
less than 12 months for the first rental				
period?	х		Initial Lease	

OUTCOMES

	,	
Are leases renewable for at least one month after end of rental period, unless notice is given by tenant and landlord?	x	Does not indicate in sublease, is actually done in practice.
Are all participants are charged occupancy		·
charge (unless household has no includable		
income)	х	Rent Calculation Worksheet
Program is operated in compliance with HHA approved policies and procedures	x	Client Files
Does the process for determining the amount of rent the participant will pay follow criteria in 578.77? Rent cannot exceed 30% of the household's adjusted income or 10% of the household's gross income.	x	Rent Calculation Worksheet
The program follows 24 CFR 5.609 Subpart F		
(Section 5.609) when calculating household income	x	Rent Calculation Worksheet
Rental costs do not exceed FMR for the year in which leases are initiated or renewed?	x	On Line Check of FMR
Rental Costs do not exceed Rent Reasonableness for the year in which the leases were initiated or renewed	x	Rent Reasomable Valuation

Correct version of Appendix A is signed by both landlord and tenant and is in all files				
reviewed		х	Needs to start being done.	
Supportive Services designed to meet the needs of the program participants must be made available to program participants.	x		Client Case Files	

EXITS AND TERMINATIONS

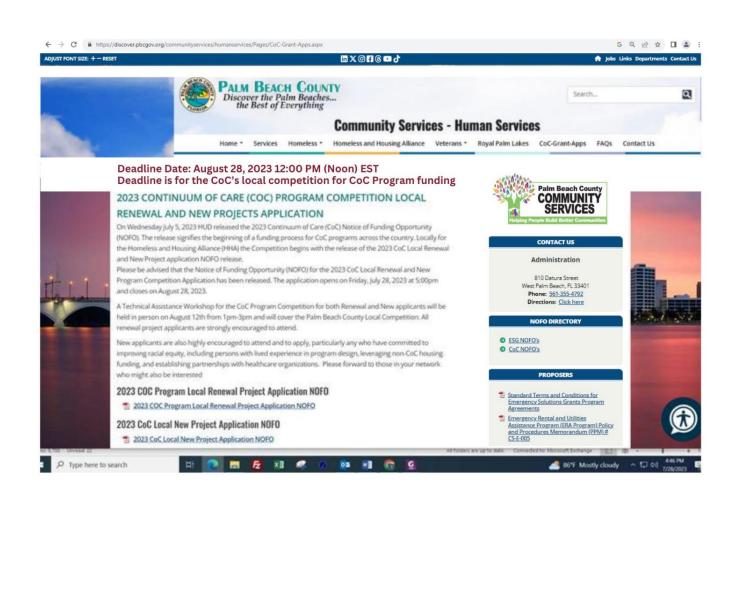
Zes]	No	Documentation	Comments
		Policies & Procedures	
		Dalisias & Dusas dunas	
			Policies & Procedures Policies & Procedures



FY23 CoC Consolidated Application Attachment: Web Posting of Local Competition Deadline

Question1E-1

Cover Sheet





FY23 CoC Consolidated Application Attachment: Local Competition Scoring Tool Question 1E-2

Cover Sheet

Renewal Scoring Tool

Renewal Scoring Tool Summary

New Scoring Tool

New Scoring Tool Summary

ATTACHMENT 2: SCORECARD FOR COC RENEWAL APPLICATIONS

The Non Conflict Grant (NCG) Review Committee will use the scorecard to rate the local renewal project applications for the U.S. Department of Housing and Urban Development (HUD) 2023 Continuum of Care (CoC) Program Competition funding.

The scorecard has five goals:

- Fund organizations that can run effective programs (can manage and administer a HUD-funded program, can operate on a reimbursement basis, have experience servicing this or a similar population)
- Fund projects that reflect the Palm Beach County Housing and Homeless Alliance (HHA), the local CoC, and HUD's priorities: permanent supportive housing and serving the chronically homeless
- Incentivize agencies to be members in good standing with HHA and actively input data into the HMIS system.
- Ensure that funded projects are being good stewards of HUD CoC Program funding in Palm Beach County and performing to HUD and HHA's standards.
- Ensure that funded projects meet HUD requirements

Reviewer:	
Applicant:	
Project Name:	
Project Type:	
Reviewer Signature:	
Date:	

Scoring:

Each application is scored by the Non-Conflict Grant (NCG) Review Committee members. Scores are based on the highest percentage of points awarded of those which the category could have received.

2023 SCORECARD FOR COC RENEWAL APPLICATIONS

The Non Conflict Grant (NCG) Review Committee will use the scorecard to rate the local renewal project applications for the U.S. Department of Housing and Urban Development (HUD) 2023 Continuum of Care (CoC) Program Competition funding.

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- Incentivize agencies to be members in good standing with HHA and actively input data into the HMIS system.
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- Ensure that funded projects meet HUD requirements

Reviewer:	
Applicant:	
Project Name:	
Project Type:	
Reviewer Signature:	
Date:	

Scoring:

Each application is scored by Non-Conflict Grant (NCG) Review Committee members. Scores are based on the highest percentage of points awarded of those which the category could have received.

	PROJECT QUALITY	Maximum Regular Points Possible:			
	REQUIREMENTS	PSH RRH		162 157	
		Bonus Score (PSH, RR Tie Breaker (PSH, RRI	•	15 20	
A. HHA and PBC Prioritization:			Project Score:		
Dedica Partici	ting Beds for Chronically Homeless pants	DV, Youth, Family			
1	What percentage of the project's PSH beds are dedicated to chronically homeless Participants? PSH			oints elow: 0 pts	
2	What % of the RRH projects beds are DV; Youth (18-24); Families with children; RRH			oints elow: 0 pts	

B. Project Performance	Project	
Unless otherwise noted, the following project performance scores are based on the calendar year	Score:	
(January 1, 2022, to December 31, 2022) HMIS report. If projects have not been operational for one		
year, the data will be based on what is currently in the HMIS system. If projects have not input data		
into the HMIS system, the project will receive no points.		
Possible Points + PSH =62 RRH=62		

PSH =10 RRH 10

Pop	ulations Served	Possible Score	Project Score
3	Length of time between participant's project start date and housing move- in-date What is the percentage of program participants placed in housing within 45 days after the participant start date in RRH/PSH? PSH; RRH; HMIS Report	79% - 60% = 8	
4	Exits to permanent housing Did 90% or more program participants move from RRH to Permanent Housing? RRH APR Q23c	90% or more = 25 80% - 89% = 20 70% - 79% = 15 60% - 69% = 10 50% - 59% = 5 49% or less = 0	
5	Exits to permanent housing (PSH) Did 90% or more program participants remain in PSH or move from PSH to PH? PSH; APR Q23c	90% or more = 25 89% - 85% = 20 84% - 80% = 15 79% - 75% = 10 74% - 70% = 5 69% or less = 0	

Possible Points +

6	Returns to Homelessness Did 15% or fewer program participants return to homelessness within 12 months of exit to PH? PSH; RRH; HMIS Report – Sys PM Measure 2 Note: If the program has no exits, the question is excluded from the total score. The total includes all members of the family who became homeless.	15% or less = 15 16% - 20% = 5 21% or more = 0
7	New or increased earned income (Stayers) Did 8% or more increase their earned income for program participants who remained in the program? PSH; RRH; APR Q19a1	10% = 3 points 8% = 2 points 6% = 1 point Less than 6% = 0
8	New or increased non-employment income (Stayers) Did 8% or more increase their non-employment income for program participants who remained in the program? PSH; RRH; APR Q19a1	10% = 3 points 8% = 2 points 6% = 1 point Less than 6% = 0
9	New or increased earned income (Exits) Did 8% or more increase their earned income for program participants who exited the program? PSH; RRH; Note: If the program has no exits, the question is excluded from the total score. APR Q19a2	10% = 3 points 8% = 2 points 6% = 1 point Less than 6% = 0
10	New or increased non-employment income (Exits) Did 8% or more increase their non-employment income for program participants who exited the program? PSH; RRH; Note: If the program has no exits, the question is excluded from the total score. APR Q19a2	10% = 3 points 8% = 2 points 6% = 1 point Less than 6% = 0

C. Service to High Needs Population

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022, to December 31, 2022) HMIS report. If projects have not been operational for one year, the data will be based on what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will receive either no points or the most negative points available for each question.

Project Score:

Possible Points

PSH =30 RRH=30

Pop	ulations Served	Possible Score	Project Score
11	Assessment Score –RRH Does the assessment score indicate that 95% or more of the program participants require RRH or more intensive intervention? RRH HMIS Report	95% or more = 15 90% - 94% = 10 85% - 89% = 5 84% or less = 0	
12	Homeless Category – RRH Do 95% or more program participants fall into Category 1 or Category 4 homeless status? *Youth RRH- Category 1, 2, or 4 Homeless Status RRH; HMIS Report	95% or more = 15 94% or less = 0	
13	One or more disabilities – PSH Do 95%, or more program participants have one or more disability types? PSH; Note: Only Include entries after 10/1/2015 HMIS Report The report includes only adult data. Head of the household over 18	95% or more = 15 90% - 94% = 10 85% - 89% = 5 84% or less = 0	
14	Homeless Category – PSH Did 95% or more program participants who entered the program after October 1, 2015, meet the criteria for Category 1 or Category 4 homeless status? *Youth PSH- Category 1, 2, or 4 homeless Status PSH HMIS Report Note: Will use homeless status as opposed to previous living status	95% or more = 15 94% or less = 0	

D. Project Effectiveness		Project Score:
Possible Points +	PSH =45 RRH=45	

Popu	ulations Served	Possible Score	Project Score
15	The project has reasonable costs Was 100% of project funding allocation expended in the previous grant year? PSH; RRH;	100% = 20 90% - 99% = 10 89% or less = 0	
16	Coordinated Entry Participation Are 100% of entries to the program from coordinated entry referrals after October 1, 2015? PSH; RRH;	100% =15 95% -99% = 10 94 or less = 0	
17	Housing First Based on the program description, does the project utilize a Housing First and/or Low Barrier model? PSH; RRH	Yes = 10 No = 0	

E. O	ther and Local Criteria	Project Score:		
Possil	ole Points +	PSH =15 RRH=10		
Popul	lations Served		Possible Score	Project Score
18	CoC Monitoring Score How many findings were noted on m programs? PSH; RRH;	onitoring report for HUD	0 findings = 10 1 finding = 5 2 findings = 2 3+ findings = 0	
19	Unit Utilization Rate What is the program's unit utilization rate. A. Average = January + April + July 4	+ October eport – Housing and Shelter nber of units is found in the	90% or higher = 5 80% - 89% = 2 70% - 79% = 1 0% - 78% = 0	

Ui ba HI da ha	Is Questions: (total possible bonus points: 15) Inless otherwise noted, the following project performance scores are used on the calendar year (January 1, 2022, to December 31, 2022) INIS report. If the project has not been operational for one year, the uta will be based on what is currently in the HMIS system. If projects we not input data into the HMIS system, the project will not be eligible or bonus question points.	Proje	ect Score:	
Possik	le Points	PSH = :	15 RRH=15	
Popul	ations Served	Possib	ole Score	Project Score
20	If the project applicant has additional non-HUD-funded homeless beds (not a part of this application), are those beds being entered into the HMIS system or Comparable Data System? PSH; RRH	Yes = 5 No = 0		
21	Percentage of program leavers who were employed at program exit.	30% - 4	more = 10 49% = 5 29% = 2 ess = 0	
Th gi [,] Ui th pr cu	reaker (if needed): (Maximum tie-breaker points = 20) the project must meet the minimum attendance requirements, and point yen based on each question's overall attendance. The calendar year (January 1, 2022, to December 31, 2022) HMIS report. Toject has not been operational for one year, the data will be based on we rrently in the HMIS system. If projects have not input data into the stem, the project will not be eligible for bonus question points.	ed on If the hat is	Project S	Score:
Possik	le Points	PSH = :	15 RRH=15	
22	Percentage of program leavers who were employed at program exit. % PSH;RRH	30% - 4	more = 10 19% = 5 29% = 2 ess = 0	

23	What is the average time between the project start date and	Lowest Average Time = 10	
	the housing move-in date? The lowest average time receives	Second Lowest Average	
	the highest points. Points will only be awarded to the top four	Time = 8	
	projects with the lowest average. All other projects will not	Third Lowest Average Time	
	receive tie-breaker points. PSH;RRH	= 5	
		Fourth Lowest Average	
		Time = 2	

	PSH	RRH
Maximum Score Possible:	162	157
A. HHA and PBC Prioritization	10	10
A1	10	N/A
A2	N/A	10
B. Project Performance	62	62
В3	10	10
В4	N/A	25
B5	25	N/A
В6	15	15
В7	3	3
B8	3	3
В9	3	3
B10	3	3
C. Service to High Needs Population	30	30
C11	N/A	15
C12	N/A	15
C13	15	N/A
C14	15	N/A
D. Project Effectiveness	45	45
E15	20	20
E16	15	15
E17	10	10
E. Other and Local Criteria	15	10
F18	10	10
F19	5	0
Bonus Question	15	15
Bonus Question 20	5	5
Bonus Question 21	10	10
<u>Tie Breaker</u>	20	20
Tie Breaker 22	10	10
Tie Breaker 23	10	10



202³ SCORECARD FOR COC RAPID RE-HOUSING AND PERMANENT SUPPORTIVE HOUSING NEW PROJECT APPLICATIONS

The Non-Conflict Grant (NCG) Review Committee will use this scorecard to rate the local new project applications for the U.S. Department of Housing and Urban Development (HUD) 2023 Continuum of Care (CoC) Program Competition Funding.

The scorecard has five goals:

- Fund organizations that have the capacity to run effective programs (can manage and administer a HUD-funded program, can operate on reimbursement basis, have experience serving this or a similar population)
- Fund projects that reflect the Palm Beach County Housing and Homeless Alliance (HHA), the local CoC, and HUD's priorities: assisting unsheltered individuals and families to rapidly access permanent housing
- Incentivize agencies to be members in good standing with HHA and actively input data into the HMIS system.
- Ensure that funded projects are being good stewards of HUD CoC Program funding inPalm Beach County and performing to HUD and HHA's standards.
- Ensure that all funded projects meet HUD requirements.

The NCG Review Committee may ask applicant agencies to provide additional information to determine agency capacity to: implement projects in a timely manner with successful outcomes, score well on the HUD Annual Performance Report (APR) and avoid jeopardizing overall agency stability or future funding for the HHA.

Reviewer:	
Applicant:	
Project Name:	
Project Type:	
Review Signature and Date:	



Scoring:

Each application is scored by at least one member of the Review Committee and one staff member of the CoC lead Agency.

FROJECT QUALITY REQUIREIVIENTS	Maximum Score Possible: <mark>PSH</mark>	212
	RRH	212
Further review will be triggered if the application does not score a	PSH	202
minimum of 33% of possible points on the scoring tool. The Review	RRH:	202
Committee will determine if the project is ineligible for inclusion in the final PBC CoC application should scoring occur below 33%.	Tie Break:	10
Section I: Application (Possible Points = 11 PSH, RRH)	Project Score:	
	1	
Accuracy and Appropriateness of Response (PSH, RRH, SSO)	Possible Score	Project
	11	Score
Is the project description sufficient to understand the extent of the project? (PSH, RRH)	2	
Does the application describe prior experience serving homeless persons	2	
that has prepared the agency for administering this grant? (PSH, RRH)		
Is the description of services complete? (PSH, RRH)	2	
Is the description of housing for participants complete? (PSH, RRH)	2	
Are the standard performance measures completed? Are the goals	2	
appropriate for the project and are the descriptions complete? (Score		
includes both required Standard Performance Measures and any optional		
Additional Performance Measures) (PSH, RRH)		
Is the overall application complete, accurate, and internally consistent? (PSH, RRH)	1	



Section II: BUDGET (Possible Points PSH, RRH = 40)	Project Score:	
Housing Budget: Percentage of project budget (including match) devoted to providing housing?		
Administrative Cost:	\$	
Supportive Services Cost:	\$	
Operating Cost:	\$	
Housing Cost: (Leasing, Rental Assistance, Utilities Assistance)	\$	
Total HUD budget request:	\$	
Housing Match	\$	
Other Match	\$	
Total Project Budget	\$	
Percentage of total budget devoted to housing costs? Housing Cost + Housing Match / Total Project Budget		
	Possible Score	Project Score
Less than 35%	0	
Between 35% and 54.9%	5	
Between 55% and 74.9%	10	1
Between 75% and 84.9%	20	1
Between 85% and 100%	30	
Budget Reasonableness		
s Budget reasonable given services proposed? (PSH, RRH)	10	



Section III: Scope of Services (Possible Points PSH, RRH = 35)	Project Score:	
Service Needs	Possible Score (<mark>PSH</mark> , RRH = 20	Project Score
Are the housing and/or services proposed appropriate and adequate to the anticipated needs of program participants and the community (PSH, RRH)	4	
Is the type of housing proposed, including the number and configuration of units will fit the needs of the proposed program participants (e.g. Ensuring a range of bedroom sizes to assist various family sizes) (PSH, RRH)	4	
Are the type of supportive services offered to program participants sufficient to ensure retention in, or help to obtain permanent housing? May include services from other funding sources.) (PSH, RRH)	4	
Does the project provide or link participants to employment services? Does the program have employment goals? (PSH, RRH)	2	
Does the project provide or effectively link participants to health care services, including mental health and substance disorder treatment? [PSH, RRH]	2	
Does the project propose to serve one or more of the HHA priority groups?	Seniors = 4 Chronic Homeless= 3 Families = 2 Youth = 1 Score is Total of All Points	
Key Elements of Rapid Re-Housing (RRH) & Permanent Supportive Housing (PSH)	Possible Score <mark>PSH</mark> , RRH = 10	Project Score
Participation in services is voluntary and participants cannot be evicted for rejecting services. (PSH, RRH)	1	
Programmatic rules, if any, are similar to those found in housing for people who are not participants in a HUD-funded program and do not restrict visitors or otherwise interfere with a life in the community. (PSH, RRH)	1	
PSH Housing is not time-limited, and the lease is renewable at participants' and owners' option. RRH is limited to no more than 24 months (PSH, RRH)	1	
Participants have choices in the support services that they receive. They are offered choices, can choose from a range of services, and different participants receive different types of services based on their needs and preferences. (PSH, RRH)	1	
As needs change over time, participants can receive more intensive or less intensive support services without losing their homes. (PSH, RRH)	1	



Are program participants assisted to obtain and remain in permanent housing in a manner that fits their needs (e.g. transportation, access to needed services, safety planning, case management, housing that meets accessibility needs, additional assistance to ensure retention of permanent housing. (PSH, RRH)	5	
Access to Mainstream Benefits		Project Score
Does the proposed project have a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible, including access to SOAR-trained staff? (PSH, RRH)	5	

Section IV: Organizational Capacity (Possible Points = 44)	Project Score:	
Consistency with Mission	Possible Score 14	Project Score
Does the project fit within the mission of the agency? (PSH, RRH)	Yes = 5 No = 0	
Does the Agency currently serve homeless households in their community? (PSH, RRH)	Yes = 5 No = 0	
Does the organization have experience providing services to the Priority Groups: Seniors, Chronically Homeless, Families, Youth (PSH, RRH)	Each priority population = 1 point Max = 4	
Administrative Capacity	Possible Score 10	Project Score
Is funding for the administrative staff stable? Is there adequate staff to ensure agency stability throughout program implementation? [Budget, Organizational Chart] (PSH, RRH)	Clearly to both questions = 5	
Does the agency have an active and engaged board of directors? (PSH, RRH) [Consider Board minutes, discussion of relevant topics, regular attendance]	Maximum = 5	



Capacity to Provide Needed Services	Possible Score 20	Project Score
Does the agency have the capacity to provide the services that will be needed? (PSH, RRH)	Maximum 5	
Is the staffing pattern adequate and the key staff sufficient to effectively operate the type of program proposed? (PSH, RRH)	qualified, sufficient number=5	
[organizational chart, qualifications of key staff, vacancies, sufficient number of positions))	Meet some but not all of the above = 3 Serious Deficiencies = 0	
Does the applicant demonstrate the financial and management capacity and experience to carry out the project as detailed in the project application and the capacity to administer federal funds? Demonstration may include a description of the applicant's experience with similar projects (PSH, RRH)	Previous successful HUD projects = 5 Previous experience with Federally funded non-HUD projects = 3 No experience with Federally funded programs = 0	
Does the applicant have satisfactory capacity, drawdowns, and performance for existing grant(s) funded under S+C or CoC programs, as evidenced by timely payment of sub-recipients, regular drawdowns and timely resolution of any monitoring findings within the time allotted. (PSH, RRH,)	Yes =5 No = 0	
Section V: Experience/Past Performance (Possible Points PSH, RRH = 36,	Project Score:	
		Project Score
has the agency successfully implemented a housing project? (PSH, RRH)	4	
Agency has successfully implemented the same project type that they are proposing? (PSH, RRH)	2	
If the agency has implemented the same or similar project, what was the percentage of people served in the project's last calendar year who obtained or maintained permanent housing? (PSH, RRH)	90% - 100% =10 80% - 89% = 5 Below 80% =0 Agency has not operated a similar program =0	
History of serving ineligible program participants, or expending funds on ineligible costs. (PSH, RRH)	No: 5 Yes: 0	



Does the agency have any monitoring or audit findings? If so, findings must be resolved or explained to the satisfaction of the Review Committee for the application to meet the standard. (PSH, RRH)	0 Findings = 5 2 Findings = 3	
	3+ Findings = 0	
Section VI: Match (Possible Points = 8)	Project Score:	
Documentation of Match		Project Score
Does Match Documentation Form sufficiently document the required	Yes = 3	
match for the proposed project? (25% of funding sought minus leasing costs) (PSH, RRH)	No = 0	
Did the Agency submit a match amount that exceeds the required 25%?	Yes = 5	
(PSH, RRH)	No = 0	

Section VII: Data/HMIS (Possible Points = 8)	Project Score:	
HMIS Participation (Per federal law, domestic violence programs are prohibited from using HMIS.) Reports from comparable databases will be submitted in place of HMIS reports.	Possible Score 8	Project Score
If the agency has additional beds (not HUD funded), are those beds also being entered into HMIS? (HMIS report or report from Comparable Database) (PSH, RRH)	Yes = 5 No = 0	
Does the agency commit to enter 100% of the beds into HMIS? (PSH, RRH)	Yes = 3 No =0	
Section VIII: Applicant Agency's Participation in CoC (Possible Points = 10)	Possible Score 10	Project Score
Did the applicant participate in 70% of HHA meetings? (PSH, RRH)	Yes = 5 No = 0	
Did the applicant participate in 60% of the meetings of at least one HHA sub-committee? (PSH, RRH)	Yes = 5 No = 0	
Section IX: Addressing Equity Issues (Possible Points = 10	Possible Score 10	Project Score
Does agency have a plan for examining the impact of racial, ethnic, age and/or gender identity in programmatic services or outcomes? (PSH, RRH)	Yes=10 No = 0	

Tie Breaker Questions (if needed)	Project Score:	
1) Which proposal demonstrates the more innovative approach to	5	
ending homelessness in the community? (PSH, RRH)		
2) Which project has most units for proposed project? (PSH, RRH)	5	

	PSH	RRH
Maximum Score Possible:	212	212
I. Application	11	11
A1	2	2
A2	2	2
A3	2	2
A4	2	2
A5	2	2
A6	1	1
<u>II Budget</u>	40	40
В7	30	30
B8	10	10
III. Scope of Services	35	35
C9	4	4
C10	4	4
C11	4	4
C12	2	2
C13	2	2
C14	4	4
C15	1	1
C16	1	1
C16	1	1
C17	1	1
C17	1	1
C18	5	5
C19	5	5
<u>IV</u>		
Organizational	44	44
<u>Capacity</u>		
D20	5	5
D21	5	5
D22	4	4
D23	5	5
D24	5	5
D25	5	5
D26	5	5
D27	5	5
D28	5	5

	PSH	RRH
V Experience/Past Performance	36	36
E29	4	4
E30	2	2
E31	10	10
E32	5	5
E33	5	5
<u>VI Match</u>	8	8
F34	5	5
F35	3	3
VII Data/HMIS	8	8
G36	5	5
G37	3	3
VIII Applicant Participation in CoC	10	10
H38	5	5
H39	5	5
IX Addressomg Equity Issues	10	10
140	10	10
<u>Tie Breaker</u>	10	10
J41	5	5
J42	5	5



FY23 CoC Consolidated Application

Attachment: Scored Forms for One Project

Question 1E-2a

Cover Sheet

Scored form for New Avenues

NEW AVENUES

1790

GULFSTREAM GOODWILL INDUSTRIES, INC. © 2023 CoC Program Competition Local Renewal Project Application

9/5/2023 3:00 PM

00 days 00:00:00 2023 CoC PROGRAM COMPETITION LOCAL RENEWAL AND NEW PROJECTS APPLICATION

Shantel Drayton

岱ID	C	A NI	NOCO/DED	Dur Data	Time	Davison Teem	Team
ال کا	Status	Agency Name	NOFO/RFP	Due Date	Remaining	Review Team	Leader
100				the second second			11.0

NEW AVENUES

Review

Reviewer

Elisa Cramer

NOFO

2023 CoC Program Competition Local Renewal Project Application

Proposal

@ New Avenues

Service Category

Housing / Homelessness

Score

146.0

Percentage of Possible Score

Possible Score Total

Reviewer Designation

Community Subject Matter Expert (SME)

Score Signature

Date Signed Score

Ranking Signature

Date Signed Priority Ranking

CoC Program Local Renewal Project Review Form

PROJECT QUALITY REQUIREMENTS (Total Possible Score = Varies)

Project Quality Requirements

Maximum Regular Points Possible

FSH = 102

RRH = 157

Bonus Score (PSH, RRH) = 15

Tie Breaker (PSH,RRH) = 20

A. HHA and PBC Prioritization (Possible Points = 10)

A1. Dedicated Beds

Dedicating Bads for Chronically Homeless DV, Youth, Family Participants

100% = 10 points 99% and below = 0 points

What percentage of the project's PSH beds are dedicated for chronically homeless Participants?

1514

100%

Dedicated Bed Score

Please enter scores during the Review Committee Meeting ONLY.

10

A2. RRH Beds

100% = 10 points 99% and below = 0 points

What percentage (%) of the RRH project beds are DV; Youth (18-24); Families with children:

RRH

N/A

RRH Score

Please enter scores during the Review Committee Meeting ONLY.

0

HHA and PBC Prioritization Strengths

CH high-need, high-cost

HHA and PBC Prioritization Weaknesses

C. Project Performance (Points Possible Varies)

B3. Length of Time

Project Performance

PER SE

10011 = 62

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 3 L, 2022) HMIS report. If projects have not been operational for one year, the data will be based upon what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will receive no points.

Length of time between project start date and housing move-in-date

100% - 80% = 10

79% - 60% = 8

59% - 40% = 6

39% - 20% = 4

19% or less = 0

What is the percentage of program participants placed in housing within 45 days after the participant start date in RRH/PSH?

PSH: RRH

HMIS Report

95%

Length of Time Score

Please enter scores during the Review Committee Meeting ONLY.

10

B4. Exits to Permanent Housing

Exits to permanent housing

90% or more = 25

80% - 89% = 20

70% - 79% = 15

60% - 69% = 10

50% - 59% = 549% or less = 0

Did 90% or more program participants move from RRH to Permanent Housing?

RRH

APR Q23c

N/A

Exits to Permanent Housing Score

Please enter scores during the Review Committee Meeting ONLY

0

B5. Exits to Permanent Housing (PSH)

Exits to permanent housing (PSH)

90% or more = 25 89% - 85% = 20 84% - 80% = 15 79% - 75% = 10

74% - 70% = 5

69% or less = 0

Did 90% or more program participants remain in PSH or move from PSH to PH?

8.534

APR Q23c

89%

Exits to Permanent Housing (PSH) Score

Please enter scores during the Review Committee Meeting ONLY.

20

B6. Returns to Homelessness

Returns to Homelessness

15% or tess = 15 16% - 20% = 5 21% or more = 0

Did 15% or fewer program participants return to homelessness within 12 months of exit to PH?

25% RRH

HMIS Report - Sys PM Measure 2

Note: If the program has no exits, the question is excluded from the total score. The total includes all members of the family who became homeless.

0

Returns to Homelessness Score

Please enter scores during the Review Committee Meeting ONLY.

15

B7. New / Increased Income (NII) & Earned Income

New or increased earned income (Stayers)

10% = 3 points

8% = 2 points

6% = 1 point

9/21/23, 9:32 AM

Less than 6% = 0

Did 8% or more increase their earned income for program participants who remained in the program?

PISH, KRH

APR Q19a1

4%

NII & Earned Income - Remain Score

Please enter scores during the Review Committee Meeting ONLY.

0

B8. NII & Non-Employment Income

New or increased non-emplyment income (Stayers)

10% = 3 points

8% = 2 points

6% = 1 point

Less than 6% = 0

Did 8% or more increase their non-employment income for program participants who remained in the program?

POHERRH

APR Q19a1

46%

NII & Non-Employment Income Score

Please enter scores during the Review Committee Meeting ONLY.

3

B9. NII & Earned Income

New or increased earned income (Exits)

10% = 3 points

8% = 2 points

6% = 1 point.

Less than 6% = 0

Did 8% or more increase their earned income for program participants who exited the program?

色岩柱,和阳柱

Note. If the program has no exits, the question is excluded from the total score.

APR Q19a2

0%

NII & Earned Income - Exit Score

Please enter scores during the Review Committee Meeting ONLY.

B10. NII & Non-Employment Income - Exited

New or increased non-employment income (Exits)

10% = 3 points

8% = 2 points

6% = 1 point

Less than 6% = 0

Did 8% or more increase their non-employment income for program participants who exited the program?

FISH, ARH

Note: If the program has no exits, the question is excluded from the total score.

APR Q19a2

43%

NII & Non-Employment Income - Exit Score

Please enter scores during the Review Committee Meeting ONLY.

3

Project Performance Strengths

Project Performance Weaknesses

D. Serve to High Needs Population (Possible Points Varies)

C11. Assessment Score -RRH

Service to High Needs Population

PSH = 9d

RRH = 30

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to Occamber 31, 2022) HMIS report. If projects have not been operational for one year, the data will be based upon what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will receive either no points or the most negative points available for each question.

95% or more = 15

90% - 94% = 10

85% - 89% = 5

84% or less = 0

Assessment Score- RRH

Does the assessment score indicate that 95% or more of the program participants require RRH or more intensive intervention?

RRH

HMIS Report

Assessment Score Score

Please enter scores during the Review Committee Meeting ONLY.

0

C12. Homeless Category - RRH

Homeless Category - RRH

95% or more = 1594% or less = 0

Ooes 95% or more of program participants fall into Category 1 or Category 4 homeless status?

*Youth RRH- Category 1, 2, or 4 Homeless Status

RRH

HMIS Report

N/A

Homeless Category - RRH Score

Please enter scores during the Review Committee Meeting ONLY

0

C13. One or More Disability - PSH

One or more disabilities - PSH

95% or more = 15

90% - 94% = 10

85% - 89% = 5

84% or tess ≈ 0

Do 95% or more program participants have one or more disability types?

POINT.

Note: Only Include entries after 10/1/2015

HMIS Report

The report includes only adult data. Head of the household over 18

100%

One or More Disability - PSH Score

Please enter scores during the Review Committee Meeting ONLY.

15

C14. Homeless Category - PSH

95% or more = 15 94% or less = 0

Did 95% of program participants who entered the program after October 1, 2015, meet the criteria for Category 1 or Category 4 homeless status?

*Youth PSH- Category 1, 2, or 4 Homeless Status

1256

HMIS Report

Note: Will use homeless status as opposed to previous living status 98%

Homeless Category - PSH Score

Please enter scores during the Review Committee Meeting ONLY.

15

Service to High Needs Population Strengths

Personal Development Plan, strong supports

Service to High Needs Population Weaknesses

E. Project Effectiveness (Possible Score Varies)

D15. Project has Reasonable Costs

Populations Served

MH = M

RRH = 45

100% = 20

90% - 99% = 10

89% or tess = 0

The project has reasonable costs

Was 100% of project funding allocation expended in the previous grant year?

RESERVANT

100%

Project has Reasonable Costs Score

Please enter scores during the Review Committee Meeting ONLY.

20

D16. Coordinated Entry Participation

Coordinated Entry Participation

100% = 15

95% -99% = 10

94or less = 0

Are 100% of entries to the program from coordinated entry referrals after October 1, 2015?

CONTRACT

Coordinated Entry Participation Score

Please enter scores during the Review Committee Meeting ONLY.

15

D17. Housing First

Housing First

Yes = 10

 $No \approx 0$

Based on the program description, does the project utilize a Housing First and/or Low Barrier model?

PSHERRH

Yes

Housing First Score

Please enter scores during the Review Committee Meeting ONLY.

10

Project Effectiveness Strengths

Project Effectiveness Weaknesses

F. Other and Local Criteria (Possible Score Varies)

E18. CoC Monitoring Score

PSH= 15

RRH = 10

0 findings = 1.0

1 finding = 5

2 findings = 2

3 ← findings ≈ 0

How many findings were noted on monitoring report for HUD programs?

PSE: RRH

3 findings (all resolved)

CoC Monitoring Score Score

Please enter scores during the Review Committee Meeting ONLY.

0

E19. Unit Utilization Rate

90% or higher = 5

80% - 89% = 2

70% - 79% = 1

0% - 78% = 0

9/21/23, 9:32 AM Proposals: Proposals

A. Average = (January + April + July + October) + 4

8. (Q9 Average + Available Beds or Units) X 100

17614

The average can be found in HMIS report- Housing and Shelter Utilization History report, and the number of units is found in the grant application. *

* Bads for singles programs and units for family programs.

95%

Unit Utilization Rate Score

Please enter scores during the Review Committee Meeting ONLY.

5

Other and Local Criteria Strengths

Other and Local Criteria Weaknesses

Bonus Questions: (Total Bonus Points = 15)

20. Non-HUD-Funded Homeless Beds

Bouns Questions:

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If the project has not been operational for one year, the data will be based upon what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will not be eligible for bonus question points.

Possible Points

PSH = 15

RRH = 15

Populations Served

Yas ≈ 5

Mo = 0

If the project applicant has additional non-HUD-funded homeless beds (not a part of this project application), are those beds being entered into the HMIS system or Comparable Data system?

PASE & RRH

Yes

Non-HUD-Funded Homeless Beds Score

Please enter scores during the Review Committee Meeting ONLY.

5

21. Percentage of Program Leavers

50% or more = 10 $30\% \cdot 49\% = 5$

10% - 29% = 2

9% and below = 0

Percentage of program Leavers that were employed at program exic?

......%

TSO LIBRA

0%

Percentage of Program Leavers Exit Score

Please enter scores during the Review Committee Meeting ONLY.

0

Bonus Question Strengths

Bonus Question Weaknesses

Tie-Breaker (if needed): (Total Tie Breaker Points = 20)

22. Tie Breaker (if needed)

The project must meet the minimum attendance requirements, and points are given based on each question's overall attendance.

Unless otherwise noted, the following project performance scores are based on the calendar year (January I, 2022 to December 31, 2022) HMIS report. If the project has not been operational for one year, the data will be based on information currently in HMIS. If projects have not input data into HMIS, the project will not be eligible for bonus question points.

1509 245

RRH = 15

Percentage of program leavers who were employed at program exit % (PSH, RR

0%

Tie Breaker Score

Please enter scores during the Review Committee Meeting ONLY.

23. Average Time to Move-In Date

Lowest Average Time = 10 Second Lowest Average Time = 8 Third Lowest Average Time = 5 Fourth Lowest Average Time = 2

What is the average time between the project start date and the housing move-in date? The lowest average time receives the highest point. Points will only be awarded to the top four projects with the lowest average. All other projects will not receive tiebreaker points. (PSE); RRH)

9/21/23, 9:32 AM	Proposals: Proposals
Tie Breaker Average Time to Move-In Date Score	
Please enter scores during the Review Committee Meeting	ONLY.

Tie Breaker Strengths

Tie Breaker Weaknesess

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NEW AVENUES

1790

GULFSTREAM GOODWILL INDUSTRIES, INC. © 2023 CoC Program Competition Local Renewal Project Application

9/5/2023 3:00 PM

00 days 00:00:00 2023 CoC
PROGRAM
COMPETITION
LOCAL RENEWAL
AND NEW
PROJECTS
APPLICATION

Shantel Drayton

区ID	Status	Agency Name	NOFO/RFP	Due Date	Time Remaining	Review Team	Team Leader
-----	--------	-------------	----------	----------	-------------------	-------------	----------------

NEW AVENUES

Review

Reviewer

Arlene Griffiths

NOFO

2023 CoC Program Competition Local Renewal Project Application

Proposal

@ New Avenues

Service Category

Housing / Homelessness

Score

146.0

Percentage of Possible Score

Possible Score Total

Reviewer Designation

Score Signature

Date Signed Score

Ranking Signature

Date Signed Priority Ranking

9/21/23, 9:30 AM Proposals: Proposals

CoC Program Local Renewal Project Review Form

PROJECT QUALITY REQUIREMENTS (Total Possible Score = Varies)

Project Quality Requirements

Maximum Regular Points Possible

PSH = 167

RRH = 157

Bonus Score (PSH, RRH) = 15

Tie Breaker (PSH,RRH) = 20

A. HHA and PBC Prioritization (Possible Points = 10)

A1. Dedicated Beds

Dedicating Beds for Chronically Homeless DV, Youth, Family Participants

100% = 10 points 99% and below = 0 points

What percentage of the project's PSH beds are dedicated for chronically homeless Participants?

PSH

Dedicated Bed Score

Please enter scores during the Review Committee Meeting ONLY.

10

A2. RRH Beds

100% =10 points 99% and below = 0 points

What percentage (%) of the RRH project beds are DV; Youth (18-24); Families with children;

RRH

RRH Score

Please enter scores during the Review Committee Meeting ONLY.

HHA and PBC Prioritization Strengths

Scattered sites that allow easy placement across the county, clients involved in their treatment plan, expertise in the agency to serve individuals, and the agency's experience in serving the chronically homeless.

HHA and PBC Prioritization Weaknesses

C. Project Performance (Points Possible Varies)

B3. Length of Time

Project Perfomance

PSH = 52

RRH = 62

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If projects have not been operational for one year, the data will be based upon what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will receive no points.

Length of time between project start date and housing move-in-date

100% - 80% = 10 79% - 60% = 8

59% - 40% = 6

39% - 20% = 4

19% or tess = 0

What is the percentage of program participants placed in housing within 45 days after the participant start date in RRH/PSH?

PSH; RRH

HMIS Report

Length of Time Score

Please enter scores during the Review Committee Meeting ONLY.

10

B4. Exits to Permanent Housing

Exits to permanent housing

90% or more = 25

80% - 89% = 20

70% - 79% = 15

60% - 69% = 10

50% - 59% = 5

49% or less = 0

Did 90% or more program participants move from RRH to Permanent Flousing?

RRH

APR 023c

Exits to Permanent Housing Score

Please enter scores during the Review Committee Meeting ONLY.

9/21/23, 9:30 AM

Proposals: Proposals

B5. Exits to Permanent Housing (PSH)

Exits to permanent housing (PSH)

90% or more = 25

89% - 85% = 20

84% - 80% = 15

79% - 75% = 10

74% - 70% = 5

69% or less = 0

Did 90% or more program participants remain in PSH or move from PSH to PH?

14514

APR Q23c

Exits to Permanent Housing (PSH) Score

Please enter scores during the Review Committee Meeting ONLY.

20

B6. Returns to Homelessness

Returns to Homelessness

15% or less = 15

16% - 20% = 5

21% or more = 0

Did 15% or fewer program participants return to homelessness within 12 months of exit to PH?

PSH; RRH

HMIS Report - Sys PM Measure 2

Note: If the program has no exits, the question is excluded from the total score. The total includes all members of the family who became homeless.

Returns to Homelessness Score

Please enter scores during the Review Committee Meeting ONLY.

15

B7. New / Increased Income (NII) & Earned Income

New or increased earned income (Stayers)

10% = 3 points

8% = 2 points

6% = 1 point

Less than 6% = 0

Did 8% or more increase their earned income for program participants who remained in the program?

POST BRID

APR Q19a1

NII & Earned Income - Remain Score

Please enter scores during the Review Committee Meeting ONLY

0

B8. NII & Non-Employment Income

New or increased non-emplyment income (Stayers)

10% = 3 points

8% = 2 points

6% = 1 point

Less than 6% = 0

Did 8% or more increase their non-employment income for program participants who remained in the program?

PSHERRH

APR Q19a1

NII & Non-Employment Income Score

Please enter scores during the Review Committee Meeting ONLY.

3

B9. NII & Earned Income

New or increased earned income (Exits)

10% = 3 points

8% = 2 points

6% = 1 point

Less than 6% = 0

Did 8% or more increase their earned income for program participants who exited the program?

PSHIRRH

Note: If the program has no exits, the question is excluded from the total score.

APR Q19a2

NII & Earned Income - Exit Score

Please enter scores during the Review Committee Meeting ONLY.

0

B10. NII & Non-Employment Income - Exited

New or increased non-employment income (Exits)

10% = 3 points

8% = 2 points

6% = 1 point

Less than 6% = 0

Did 8% or more increase their non-employment income for program participants who exited the program?

POH; RRH

Note: If the program has no exits, the question is excluded from the total score.

APR Q19a2

NII & Non-Employment Income - Exit Score

Please enter scores during the Review Committee Meeting ONLY.

3

Project Performance Strengths

Project Performance Weaknesses

D. Serve to High Needs Population (Possible Points Varies)

C11. Assessment Score -RRH

Service to High Needs Population

PSM = 30

RRH = 30

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If projects have not been operational for one year, the data will be based upon what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will receive either no points or the most negative points available for each question.

95% or more = 15

90% - 94% = 10

85% - 89% = 5

84% or tess = 0

Assassment Score - RRH

Does the assessment score indicate that 95% or more of the program participants require RRH or more intensive intervention?

RON

HMIS Report

Assessment Score Score

Please enter scores during the Review Committee Meeting ONLY.

C12. Homeless Category - RRH

Homeless Category- RRH

95% or more = 15

94% or less = 0

Does 95% or more of program participants fall into Category 1 or Category 4 homeless status?

*Youth RRH- Category 1, 2, or 4 Homeless Status

RRH

HMIS Report

Homeless Category - RRH Score

Please enter scores during the Review Committee Meeting ONLY.

C13. One or More Disability - PSH

One or more disabilities- PSH

95% or more = 15

90% - 94% = 10

85% - 89% = 5

84% or tess = 0

Do 95% or more program participants have one or more disability types?

1954

Note: Only Include entries after 10/1/2015

HMIS Report

The report includes only adult data. Head of the household over 18

One or More Disability - PSH Score

Please enter scores during the Review Committee Meeting ONLY.

15

C14. Homeless Category - PSH

95% or more = 1594% or tess = 0

Oid 95% of program participants who entered the program after October 1, 2015, meet the criteria for Category 1 or Category 4 homeless status?

*Youth PSH- Category 1, 2, or 4 Homeless Status

PAST

HMIS Report

Note: Will use homeless status as opposed to previous living status

Homeless Category - PSH Score

Please enter scores during the Review Committee Meeting ONLY.

15

Service to High Needs Population Strengths

Intentionally servicing the high needs high cost individuals

Service to High Needs Population Weaknesses

E. Project Effectiveness (Possible Score Varies)

D15. Project has Reasonable Costs

Populations Served

PSH = 45

RRH = 45

100% = 20

90% - 99% = 10

89% or tess = 0

The project has reasonable costs

Was 100% of project funding allocation expended in the previous grant year?

PSH; RRH

Project has Reasonable Costs Score

Please enter scores during the Review Committee Meeting ONLY.

20

D16. Coordinated Entry Participation

Coordinated Entry Participation

100% = 15

95% -99% = 10

94or less = 0

Are 100% of entries to the program from coordinated entry referrals after October 1, 2015?

PSH: RRH

Coordinated Entry Participation Score

Please enter scores during the Review Committee Meeting ONLY.

15

D17. Housing First

Housing First

Yes = 10

No = 0

Based on the program description, does the project utilize a Housing First and/or Low Barrier model?

PSH; RRH

Housing First Score

Please enter scores during the Review Committee Meeting ONLY.

10

Project Effectiveness Strengths

Project Effectiveness Weaknesses

F. Other and Local Criteria (Possible Score Varies)

E18. CoC Monitoring Score

```
PSH = 15
RRH = 10
0 findings = 10
1 finding = 5
2 findings = 2
3+ findings = 0
```

How many findings were noted on monitoring report for HUO programs?

PSHIRRH

CoC Monitoring Score Score

Please enter scores during the Review Committee Meeting ONLY.

0

E19. Unit Utilization Rate

```
90% or higher = 5
80% - 89% = 2
70% - 79% = 1
0% - 78% = 0
```

What is the program's unit utilization rate?

```
A. Average = (January + April + July + October) + 4
B. (Q9 Average + Available Beds or Units) X 100
```

175331

The average can be found in HMIS report. Housing and Shelter Utilization History report, and the number of units is found in the grant application.

Unit Utilization Rate Score

Please enter scores during the Review Committee Meeting ONLY.

5

Other and Local Criteria Strengths

Other and Local Criteria Weaknesses

^{*} Bads for singles programs and units for family programs.

Bonus Questions: (Total Bonus Points = 15)

20. Non-HUD-Funded Homeless Beds

Bouns Questions:

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If the project has not been operational for one year, the data will be based upon what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will not be eligible for bonus question points.

Possible Points

PSH × 15

RRH = 15

Populations Served

Yes = 5

0 = oM

If the project applicant has additional non-HUD-funded homeless beds (not a part of this project application), are those beds being entered into the HMIS system or Comparable Data system?

PSHERRH

Non-HUD-Funded Homeless Beds Score

Please enter scores during the Review Committee Meeting ONLY.

5

21. Percentage of Program Leavers

50% or more = 10

30% - 49% = 5

10% - 29% = 2

9% and below = 0

Percentage of program leavers that were employed at program exit?

____%

PSHERRH

Percentage of Program Leavers Exit Score

Please enter scores during the Review Committee Meeting ONLY.

0

Bonus Question Strengths

Bonus Question Weaknesses

Tie-Breaker (if needed): (Total Tie Breaker Points = 20)

22. Tie Breaker (if needed)

The project must meet the minimum attendance requirements, and points are given based on each question's overall attendance.

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If the project has not been operational for one year, the data will be based on information currently in HMIS. If projects have not input data into HMIS, the project will not be eligible for bonus question points.

PSH-15

RRH = 15

Percentage of program leavers who were employed at program exit. % (PSH), RR

Tie Breaker Score

Please enter scores during the Review Committee Meeting ONLY.

23. Average Time to Move-In Date

Lowest Average Time = 10 Second Lowest Average Time = 8 Third Lowest Average Time = 5 Fourth Lowest Average Time = 2

What is the average time between the project start date and the housing move-in date? The lowest average time receives the highest point. Points will only be awarded to the top four projects with the lowest average. All other projects will not receive tiebreaker points. (PSH; RRH)

Tie Breaker Average Time to Move-In Date Score

Please enter scores during the Review Committee Meeting ONLY.

Tie Breaker Strengths

Tie Breaker Weaknesess

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NEW AVENUES

1790

GULFSTREAM GOODWILL INDUSTRIES, INC. © 2023 CoC Program Competition Local Renewal Project Application

9/5/2023 3:00 PM

00 days 00:00:00 2023 CoC PROGRAM COMPETITION LOCAL RENEWAL AND NEW PROJECTS APPLICATION

Shantel Drayton

区ID	Status	Agency Name	NOFO/RFP	Due Date	Time Remaining	Review Team	Team Leader
-----	--------	-------------	----------	----------	-------------------	-------------	----------------

NEW AVENUES

Review

Reviewer

🝱 Gibbie Nauman

NOFO

2023 CoC Program Competition Local Renewal Project Application

Proposal

@ New Avenues

Service Category

Housing / Homelessness

Score

146.0

Percentage of Possible Score

Possible Score Total

Reviewer Designation

Community Subject Matter Expert (SME)

Score Signature

Date Signed Score

Ranking Signature

Date Signed Priority Ranking

CoC Program Local Renewal Project Review Form

PROJECT QUALITY REQUIREMENTS (Total Possible Score = Varies)

Project Quality Requirements

Maximum Regular Points Possible

PSH = 343

RRH = 157

Bonus Score (PSH, RRH) = 15

Tie Breaker (P5H,RRH) = 20

A. HHA and PBC Prioritization (Possible Points = 10)

A1. Dedicated Beds

Dedicating Beds for Chronically Homeless DV, Youth, Family Participants

100% = 10 points 99% and below = 0 points

What percentage of the project's PSH beds are dedicated for chronically homeless Participants?

PSH

Yes. 100%

Dedicated Bed Score

Please enter scores during the Review Committee Meeting ONLY.

10

A2. RRH Beds

100% =10 points 99% and below = 0 points

What percentage (%) of the RRH project beds are DV; Youth (18-24); Families with children:

RRH

N/A

RRH Score

Please enter scores during the Review Committee Meeting ONLY.

0

HHA and PBC Prioritization Strengths

HHA and PBC Prioritization Weaknesses

C. Project Performance (Points Possible Varies)

B3. Length of Time

Project Perfomance

PSH = 53

RRH = 62

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If projects have not been operational for one year, the data will be based upon what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will receive no points.

Length of time between project start date and housing move-in-date

100% - 80% = 10

79% - 60% = 8

59% - 40% = 6

39% - 20% = 4

19% or less = 0

What is the percentage of program participants placed in housing within 45 days after the participant start date in RRH/PSH?

PSH; RRH

HMIS Report

95%

Length of Time Score

Please enter scores during the Review Committee Meeting ONLY.

10

B4. Exits to Permanent Housing

Exits to permanent housing

90% or more = 25

80% - 89% = 20

70% - 79% = 15

60% - 69% = 10

50% - 59% = 5

49% or less = 0

Did 90% or more program participants move from RRH to Permanent Housing?

RRH

APR Q23c

N/A

Exits to Permanent Housing Score

Please enter scores during the Review Committee Meeting ONLY.

0

B5. Exits to Permanent Housing (PSH)

Exits to permanent housing (PSH)

```
90% or more \approx 25
```

89% - 85% = 20

84% - 80% = 15

79% - 75% = 10

74% - 70% = 5

69% or less = 0

Did 90% or more program participants remain in PSH or move from PSH to PH?

1441

APR Q23c

89%

Exits to Permanent Housing (PSH) Score

Please enter scores during the Review Committee Meeting ONLY.

20

B6. Returns to Homelessness

Returns to Homelessness

1.5% or tess = 1.5

16% - 20% = 5

21% or more = 0

Did 15% or fewer program participants return to homelessness within 12, months of exit to PH?

PSH RRH

HMIS Report - Sys PM Measure 2

Note: If the program has no exits, the question is excluded from the total score. The total includes all members of the family who became homeless.

0%

Returns to Homelessness Score

Please enter scores during the Review Committee Meeting ONLY.

15

B7. New / Increased Income (NII) & Earned Income

New or increased earned income (Stayers)

10% = 3 points

8% = 2 points

5% = 1 point

Less than $6\% \approx 0$

Did 8% or more increase, their earned income for program participants who ramained in the program?

PSEERRH

APR Q19a1

4%

NII & Earned Income - Remain Score

Please enter scores during the Review Committee Maeting ONLY.

0

B8. NII & Non-Employment Income

New or increased non-emptyment income (Stayers)

10% = 3 points

8% = 2 points

6% = 1 point

Less than 6% = 0

Old 8% or more increase their non-employment income for program participants who remained in the program?

PREBRINE

APR-Q19a1

46%

NII & Non-Employment Income Score

Please enter scores during the Review Committee Meeting ONLY.

3

B9. NII & Earned Income

New or increased earned income (Exits)

10% = 3 points

8% = 2 points

6% = 1 point

Less than 6% = 0

Oid 8% or more increase their earned income for program participants who exited the program?

FISH, RRH

Note: If the program has no exits, the quastion is excluded from the total score.

APR Q19a2

0%

NII & Earned Income - Exit Score

Please enter scores during the Review Committee Meeting ONLY.

9/21/23, 9:34 AM

Proposals: Proposals

B10. NII & Non-Employment Income - Exited

New or increased non-employment income (Exits)

10% = 3 points

8% = 2 points

6% = 1 point

Less than 6% = 0

Old 8% or more increase their non-employment income for program participants who exited the program?

PSH; RRH

Note: If the program has no exits, the question is excluded from the total score.

APR Q19a2

43%

NII & Non-Employment Income - Exit Score

Please enter scores during the Review Committee Meeting ONLY.

3

Project Performance Strengths

Project Performance Weaknesses

D. Serve to High Needs Population (Possible Points Varies)

C11. Assessment Score -RRH

Service to High Needs Population

PS21 = 30

RRH = 30

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If projects have not been operational for one year, the data will be based upon what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will receive either no points or the most negative points available for each question.

95% or more = 15

 $90\% \cdot 94\% = 10$

85% - 89% = 5

84% or less = 0

Assessment Score - RRH

Does the assessment score indicate that 95% or more of the program participants require RRH or more intensive intervention?

13731

HMIS Report

N/A

Assessment Score Score

Please enter scores during the Review Committee Meeting ONLY.

0

C12. Homeless Category - RRH

Homeless Category- RRM

95% or more = 15 94% or less = 0

Does 95% or more of program participants fall into Category 1 or Category 4 homeless status?

*Youth RRH- Category 1, 2, or 4 Homeless Status

RRH

HMIS Report

N/A

Homeless Category – RRH Score

Please enter scores during the Review Committee Meeting ONLY.

0

C13. One or More Disability – PSH

One or more disabilities - PSH

95% or more = 15

90% - 94% = 10

85% - 89% = 5

84% or tess = 0

Do 95% or more program participants have one or more disability types?

11:00

Note: Only Include entries after 10/1/2015

HMIS Report

The report includes only adult data. Head of the household over 18

100%

One or More Disability - PSH Score

Please enter scores during the Review Committee Meeting ONLY.

15

C14. Homeless Category - PSH

95% or more = 15 94% or less = 0

Did 95% of program participants who entered the program after October 1, 2015, meet the criteria for Category 1 or Category 4 homeless status?

*Youth PSH- Category 1, 2, or 4 Homeless Status

13534

HMIS Raport

Note: Will use homeless status as opposed to previous living status 98%

Homeless Category - PSH Score

Please enter scores during the Review Committee Meeting ONLY.

15

Service to High Needs Population Strengths

Service to High Needs Population Weaknesses

E. Project Effectiveness (Possible Score Varies)

D15. Project has Reasonable Costs

Populations Served

PSH > 40

 $RRH \approx 45$

100% = 20

90% - 99% = 10

89% or less = 0

The project has reasonable costs

Was 100% of project funding altocation expended in the previous grant year?

PSH; RRH

Yes

Project has Reasonable Costs Score

Please enter scores during the Review Committee Meeting ONLY.

20

D16. Coordinated Entry Participation

Coordinated Entry Participation

100% ≈15

95% -99% = 10

9 dorless = 0

Are 100% of entries to the program from coordinated entry referrals after October 1, 2015?

PSMARN

Yes, individuals come directly off the streets or from Emergency Shelter

9/21/23, 9:34 AM Proposals: Proposals

Coordinated Entry Participation Score

Please enter scores during the Review Committee Meeting ONLY

15

D17. Housing First

Housing First

Yes = 10

Mo = 0

Based on the program description, does the project utilize a Housing First and/or Low Barrier model?

PSHERRH

Yes

Housing First Score

Please enter scores during the Review Committee Meeting ONLY.

10

Project Effectiveness Strengths

Project Effectiveness Weaknesses

F. Other and Local Criteria (Possible Score Varies)

E18. CoC Monitoring Score

PSH 5-16

RRH = 10

0 findings = 10

1 finding = 5

2 findings = 2

3 + findings = 0

How many findings were noted on monitoring report for HUD programs?

PSERRH

3 findings

CoC Monitoring Score Score

Please enter scores during the Review Committee Meeting ONLY.

0

E19. Unit Utilization Rate

90% or higher = 5

80% + 89% = 2

70% - 79% = 1

0% - 78% = 0

What is the organic unit utilization rate?

- A. Average = (January + April + July + October) + 4
- 8. (Q9 Average + Available Beds or Units) X 100

14311

The average can be found in HMIS report- Housing and Shelter Utilization History report, and the number of units is found in the grant application. *

* Beds for singles programs and units for family programs.

95%

Unit Utilization Rate Score

Please enter scores during the Review Committee Meeting ONLY.

5

Other and Local Criteria Strengths

Other and Local Criteria Weaknesses

Bonus Questions: (Total Bonus Points = 15)

20. Non-HUD-Funded Homeless Beds

Bouns Questions:

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If the project has not been operational for one year, the data will be based upon what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will not be eligible for bonus quastion points.

Possible Points

FSH = 15

RRH = 15

Populations Served

Yes = 5

Mo = 0

If the project applicant has additional non-HUD-funded homeless beds (not a part of this project application), are those beds being entered into the HMIS system or Comparable Data system?

FEH; RRH

Non-HUD-Funded Homeless Beds Score

Please enter scores during the Review Committee Meeting OMCY.

5

21. Percentage of Program Leavers

```
50% or more = 10
```

30% - 49% = 5

10% - 29% = 2

9% and below = 0

Percentage of program leavers that were employed at program exit?

____%

PSCHRRH

0%

Percentage of Program Leavers Exit Score

Please enter scores during the Review Committee Meeting ONLY.

0

Bonus Question Strengths

Bonus Question Weaknesses

Tie-Breaker (if needed): (Total Tie Breaker Points = 20)

22. Tie Breaker (if needed)

The project must meet the minimum attendance requirements, and points are given based on each question's overall attendance.

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If the project has not been operational for one year, the data will be based on information currently in HMIS. If projects have not input data into HMIS, the project will not be eligible for bonus question points.

17534 + 1.57

RRH =15

Percentage of program leavers who were employed at program exit. % (PDH, RR

Tie Breaker Score

Please enter scores during the Review Committee Meeting ONLY.

23. Average Time to Move-In Date

Lowest Average Time =10 Second Lowest Average Time =8 Third Lowest Average Time =5 Fourth Lowest Average Time =2

What is the average time between the project start date and the housing move in date? The lowest average time receives the highest point. Points will only be awarded to the top four projects with the lowest average. All other projects will not receive tiebreaker points. (PSE); RRH)

9/21/23, 9:34 AM Proposals: Proposals

Please enter scores during the Review Committee Meeting ONLY.

Tie Breaker Strengths

Tie Breaker Weaknesess

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NEW AVENUES

1790



GULFSTREAM GOODWILL INDUSTRIES, INC. © 2023 CoC Program Competition Local Renewal Project Application

9/5/2023 3:00 PM

00 days 00:00:00 2023 CoC PROGRAM COMPETITION LOCAL RENEWAL AND NEW PROJECTS APPLICATION

Shantel Drayton

Status

Agency Name

NOFO/RFP

Due Date

Time Remaining

Review Team

Team Leader

NEW AVENUES

Review

Reviewer

Shayenne Weatherspoon

NOFO

Ø 2023 CoC Program Competition Local Renewal Project Application

Proposal

@ New Avenues

Service Category

Housing / Homelessness

Score

146.0

Percentage of Possible Score

Possible Score Total

Reviewer Designation

Community Subject Matter Expert (SME)

Score Signature

Date Signed Score

Ranking Signature

Date Signed Priority Ranking

CoC Program Local Renewal Project Review Form

PROJECT QUALITY REQUIREMENTS (Total Possible Score = Varies)

Project Quality Requirements

Maximum Regular Points Possible

PS41 = 454

RRH = 157

Bonus Score (PSH, RRH) = 15

Tie Breaker (PSH,RRH) = 20

A. HHA and PBC Prioritization (Possible Points = 10)

A1. Dedicated Beds

Dedicating Beds for Chronically Homeless DV, Youth, Family Participants

100% = 10 points 99% and below = 0 points

What percentage of the project's PSH beds are dedicated for chronically homeless Participants?

PSH

100%

Dedicated Bed Score

Please enter scores during the Review Committee Meeting ONLY.

10

A2. RRH Beds

100% = 10 points 99% and below = 0 points

What percentage (%) of the RRH project beds are DV; Youth (18-24); Families with children;

RRH

RRH Score

Please enter scores during the Review Committee Meeting ONLY.

HHA and PBC Prioritization Strengths

HHA and PBC Prioritization Weaknesses

C. Project Performance (Points Possible Varies)

B3. Length of Time

Project Perfomance

PSH = 67

RRH = 62

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If projects have not been operational for one year, the data will be based upon what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will receive no points.

Length of time between project start date and housing move-in-date

100% - 80% = 10

79% - 60% = 8

59% - 40% = 6

39% - 20% = 4

19% or less = 0

What is the percentage of program participants placed in housing within 45 days after the participant start date in RRH/PSH?

PSH: RRH

HMIS Report

95%

Length of Time Score

Please enter scores during the Review Committee Meeting ONLY.

10

B4. Exits to Permanent Housing

Exits to permanent housing

90% or more = 25

80% - 89% = 20

70% - 79% = 15

60% - 69% = 10

50% - 59% = 5

49% or tess = 0

Did 90% or more program participants move from RRH to Permanent Housing?

RRH

APR Q23c

Exits to Permanent Housing Score

Please enter scores during the Review Committee Meeting ONLY.

9/21/23, 9:32 AM Proposals: Proposals

B5. Exits to Permanent Housing (PSH)

Exits to permanent housing (PSH)

90% or more = 25 89% - 85% = 20

84% - 80% = 15

79% - 75% = 10

74% - 70% = 5

69% or less = 0

Did 90% or more program participants remain in PSH or move from PSH to PH?

14634

APR Q23c

89%

Exits to Permanent Housing (PSH) Score

Please enter scores during the Review Committee Meeting ONLY.

20

B6. Returns to Homelessness

Returns to Homelessness

15% or tess = 15 15% - 20% = 521% or more = 0

Did 15% or fewer program participants return to homelessness within 12 months of exit to PH?

PSH; RRH

HMIS Report - Sys PM Measure 2

Note: If the program has no exits, the question is excluded from the total score. The total includes all members of the family who became homeless.

0

Returns to Homelessness Score

Please enter scores during the Review Committee Meeting ONLY.

15

B7. New / Increased Income (NII) & Earned Income

New or increased earned income (Stayers)

10% = 3 points

8% = 2 points

6% = 1 point

Less than $6\% \approx 0$

Did 8% or more increase their earned income for program participants who remained in the program?

PSH RRH

APR Q19at 4%

Please enter scores during the Review Committee Meeting ONLY.

0

B8. NII & Non-Employment Income

NII & Earned Income - Remain Score

New or increased non-emptyment income (Stayers)

10% = 3 points

8% = 2 points

6% = 1 point

Less than 6% = 0

Did 8% or more increase their non-employment income for program participants who remained in the program?

PSHERRH

APR Q19a1

46%

NII & Non-Employment Income Score

Please enter scores during the Review Committee Meeting ONLY.

3

B9. NII & Earned Income

New or increased earned income (Exits)

10% = 3 points

8% = 2 points

6% = 1 point

Less than 6% = 0

Did 8% or more increase their earned income for program participants who exited the program?

PERG RRH

Note: If the program has no exits, the question is excluded from the total score.

APR Q19a2

0

NII & Earned Income - Exit Score

Please enter scores during the Review Committee Meating ONLY.

0

B10. NII & Non-Employment Income - Exited

New or increased non-employment income (Exits)

10% = 3 points

 $8\% \approx 2$ points

6% = 1 point

Less than 6% = 0

Did 8% or more increase their non-employment income for program participants who exited the program?

POHERRH

Note: If the program has no exits, the question is excluded from the total score.

APR Q19a2

43%

NII & Non-Employment Income - Exit Score

Please enter scores during the Review Committee Meeting ONLY.

3

Project Performance Strengths

Project Performance Weaknesses

D. Serve to High Needs Population (Possible Points Varies)

C11. Assessment Score -RRH

Service to High Meeds Population

PSH = 30

RRH = 30

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If projects have not been operational for one year, the data will be based upon what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will receive either no points or the most negative points available for each question.

95% or more = 15

90% - 94% = 10

85% - 89% = 5

84% or tess = 0

Assessment Score - RRH

Opes the assessment score indicate that 95% or more of the program participants require RRH or more intensive intervention?

RRH

HMIS Report

Assessment Score Score

Please enter scores during the Review Committee Meeting ONLY.

Homeless Category- RRH

```
95% or more = 15
94% or tess = 0
```

Does 95% or more of program participants fall into Category 1 or Category 4 homeless status?

*Youth RRH- Category 1, 2, or 4 Homeless Status

RRH

HMIS Report

Homeless Category - RRH Score

Please enter scores during the Review Committee Meeting ONLY.

C13. One or More Disability - PSH

One or more disabilities - PSH

95% or more = 15

 $90\% \cdot 94\% = 10$

85% - 89% = 5

84% or less = 0

Do 95% or more program participants have one or more disability types?

14014

Note: Only Include entries after 10/1/2015

HMIS Report

The report includes only adult data. Head of the household over 18

100%

One or More Disability - PSH Score

Please enter scores during the Review Committee Meeting ONLY.

15

C14. Homeless Category - PSH

```
95% or more = 15
94% or less = 0
```

Did 95% of program participants who entered the program after October 1, 2015, meet the criteria for Category 1 or Category 4 homeless status?

*Youth PSH- Category 1, 2, or 4 Homeless Status

MOSE I

HMIS Report

Note: Will use homeless status as opposed to previous living status

Homeless Category - PSH Score

Please enter scores during the Review Committee Meeting ONLY.

15

Service to High Needs Population Strengths

Service to High Needs Population Weaknesses

E. Project Effectiveness (Possible Score Varies)

D15. Project has Reasonable Costs

Populations Served

P%1 = 1%1 RBH = 85 100% = 20 90% - 99% = 10 89% or tess = 0

The project has reasonable costs

Was 100% of project funding allocation expended in the previous grant year?

PSH; RRH

Yes

Project has Reasonable Costs Score

Please enter scores during the Review Committee Meeting ONLY

20

D16. Coordinated Entry Participation

Coordinated Entry Participation

100% = 15 95% - 99% = 10 94or tess = 0

Are 100% of entries to the program from coordinated entry referrals after October 1, 2015?

rent RRH

Yes

Coordinated Entry Participation Score

Please enter scores during the Review Committee Meeting ONLY.

15

D17. Housing First

Housing First

```
Yes ≈ 1.0
No ≈ 0
```

Based on the program description, does the project utilize a Housing First and/or Low Barner model?

```
25H_RRH
```

Yes

Housing First Score

Please enter scores during the Review Committee Meeting ONLY.

10

Project Effectiveness Strengths

Project Effectiveness Weaknesses

F. Other and Local Criteria (Possible Score Varies)

E18. CoC Monitoring Score

```
1934 = 15
1884 = 10
```

0 findings = 10

1 finding = 5

2 findings = 2

3+ findings = 0

How many findings were noted on monitoring report for HUD programs?

PSEERRH

3

CoC Monitoring Score Score

Please enter scores during the Review Committee Meeting ONLY.

0

E19. Unit Utilization Rate

```
90% or higher = 5
80% - 89% = 2
70% - 79% = 1
0% - 78% = 0
```

What is the program's unit utilization rate?

```
A. Average = (January + April + July + October) + 4
B. (Q9 Average + Available Beds or Units) X 100
```

The average can be found in HMIS report- Housing and Shelter Utilization History report, and the number of units is found in the grant application.

* Beds for singles programs and units for family programs.

95%

Unit Utilization Rate Score

Please enter scores during the Review Committee Meeting ONLY.

5

Other and Local Criteria Strengths

Other and Local Criteria Weaknesses

Bonus Questions: (Total Bonus Points = 15)

20. Non-HUD-Funded Homeless Beds

Bouns Questions:

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If the project has not been operational for one year, the data will be based upon what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will not be eligible for bonus question points.

Possible Points

FRH HIAN

RRH = 15

Populations Served

Yas = 5

No = 0

If the project applicant has additional non-HUD-funded homeless beds (not a part of this project application), are those beds being entered into the HMIS system or Comparable Data system?

PSH; RRH

Yes

Non-HUD-Funded Homeless Beds Score

Please enter scores during the Review Committee Meeting ONLY.

5

21. Percentage of Program Leavers

50% or more = 10 $30\% \cdot 49\% = 5$

10% - 29% = 2

9% and below = 0

Percentage of program leavers that were employed at program exit?

____%

HS/ERRH

0

Percentage of Program Leavers Exit Score

Please enter scores during the Review Committee Meeting ONLY.

0

Bonus Question Strengths

Bonus Question Weaknesses

Tie-Breaker (if needed): (Total Tie Breaker Points = 20)

22. Tie Breaker (if needed)

The project must meet the minimum attendance requirements, and points are given based on each question's overall attendance.

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If the project has not been operational for one year, the data will be based on information currently in HMIS. If projects have not input data into HMIS, the project will not be eligible for bonus question points.

學的技術學

RRH = 1.5

Percentage of program leavers who were employed at program exit. % (PSE), RR

Tie Breaker Score

Please enter scores during the Review Committee Meeting ONLY.

23. Average Time to Move-In Date

Lowest Average Time =10
Second Lowest Average Time =8
Third Lowest Average Time =5
Fourth Lowest Average Time =2

What is the average time between the project start date and the housing move-in date? The towest average time receives the highest point. Points will only be awarded to the top four projects with the lowest average. All other projects will not receive tiebreaker points. (ESH, RRH)

Tie Breaker Average Time to Move-In Date Score

Please enter scores during the Review Committee Meeting ONLY

Tie Breaker Strengths

Tie Breaker Weaknesess

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NEW AVENUES

1790



GULFSTREAM GOODWILL INDUSTRIES, INC. © 2023 CoC Program Competition Local Renewal Project Application

9/5/2023 3:00 PM

00 days 00:00:00 2023 CoC PROGRAM COMPETITION LOCAL RENEWAL AND NEW PROJECTS APPLICATION

Shantel Drayton

岱ID	Status	Agency Name	NOFO/RFP	Due Date	Time Remaining	Review Team	Team Leader
-----	--------	-------------	----------	----------	-------------------	-------------	----------------

NEW AVENUES

Review

Reviewer

Michael Wright

NOFO

2023 CoC Program Competition Local Renewal Project Application

Proposal

@ New Avenues

Service Category

Housing / Homelessness

Score

146.0

Percentage of Possible Score

Possible Score Total

Reviewer Designation

Staff Subject Matter Expert (SME)

Score Signature

Date Signed Score

Ranking Signature

Date Signed Priority Ranking

CoC Program Local Renewal Project Review Form

PROJECT QUALITY REQUIREMENTS (Total Possible Score = Varies)

Project Quality Requirements

Maximum Regular Points Possible

PSH = 262

RRH = 157

Bonus Score (PSH, RRH) = 15

Tie Breaker (PSH,RRH) = 20

A. HHA and PBC Prioritization (Possible Points = 10)

A1. Dedicated Beds

Dedicating Beds for Chronically Homeless DV, Youth, Family Participants

100% = 10 points 99% and below = 0 points

What percentage of the project's PSH beds are dedicated for chronically homeless Participants?

PSH

100%

Dedicated Bed Score

Please enter scores during the Review Committee Meeting ONLY.

10

A2. RRH Beds

100% =10 points 99% and below = 0 points

What percentage (%) of the RRH project beds are DV; Youth (18-24); Families with children:

RRH

N/A

RRH Score

Please enter scores during the Review Committee Meeting ONLY.

0

HHA and PBC Prioritization Strengths

HHA and PBC Prioritization Weaknesses

C. Project Performance (Points Possible Varies)

B3. Length of Time

Project Performance

PSH = 52

RRH = 62

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If projects have not been operational for one year, the data will be based upon what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will receive no points.

Length of time between project start date and housing move-in-date

100% - 80% = 10

79% - 60% = 8

59% - 40% = 6

39% - 20% = 4

1.9% or less = 0

What is the percentage of program participants placed in housing within 45 days after the participant start date in RRH/PSH?

PSH: RRH

HMIS Report

95%

Length of Time Score

Please enter scores during the Review Committee Meeting ONLY.

10

B4. Exits to Permanent Housing

Exits to permanent housing

90% or more = 25

80% - 89% = 20

70% - 79% = 15

60% - 69% = 10

50% - 59% = 5

49% or less = 0

Did 90% or more program participants move from RRH to Permanent Housing?

RRH

APR Q23c

N/A

Please enter scores during the Review Committee Meeting ONLY.

0

B5. Exits to Permanent Housing (PSH)

Exits to permanent housing (PSH)

90% or more = 25

89% - 85% = 20

84% - 80% = 15

79% - 75% = 10

74% - 70% = 5

69% or tess = 0

Did 90% or more program participants remain in PSH or move from PSH to PH?

PSM

APR Q23c

89%

Exits to Permanent Housing (PSH) Score

Please enter scores during the Review Committee Meeting ONLY.

20

B6. Returns to Homelessness

Returns to Homelessness

15% or less = 15

16% - 20% = 5

21% or more = 0

Did 15% or fewer program participants return to homelessness within 12 months of exit to PH?

PSS: RRH

HMIS Report - Sys PM Measure 2

Note: If the program has no exits, the question is excluded from the total score. The total includes all members of the family who became homeless.

0%

Returns to Homelessness Score

Please enter scores during the Review Committee Meeting ONLY.

15

B7. New / Increased Income (NII) & Earned Income

New or increased earned income (Stayers)

10% = 3 points

8% = 2 points

6% = 1 point

Less than 6% = 0

Did 8% or more increase their earned income for program participants who remained in the program?

FSH, RRH

APR Q19a1

4%

NII & Earned Income - Remain Score

Please enter scores during the Review Committee Meeting ONLY.

0

B8. NII & Non-Employment Income

New or increased non-emplyment income (Stayers)

10% = 3 points

8% = 2 points

6% = 1 point

Less than 6% = 0

Did 8% or more increase their non-employment income for program participants who remained in the program?

POST RRH

APR Q19al

46%

NII & Non-Employment Income Score

Please enter scores during the Review Committee Meeting ONLY.

3

B9. NII & Earned Income

New or increased earned income (Exits)

10% = 3 points

8% = 2 points

6% = 1 point

Less than 6% = 0

Did 8% or more increase their earned income for program participants who exited the program?

PSHIRRH

Note: If the program has no exits, the question is excluded from the total score.

APR Q19a2

0%

NII & Earned Income - Exit Score

Please enter scores during the Review Committee Meeting ONLY.

B10. NII & Non-Employment Income - Exited

New or increased non-employment income (Exits)

10% = 3 points

8% = 2 points

6% = 1 point

Less than 6% = 0

Did 8% or more increase their non-employment income for program participants who exited the program?

PSH BBH

Note: If the program has no exits, the question is excluded from the total score.

APR Q19a2

43%

NII & Non-Employment Income - Exit Score

Please enter scores during the Review Committee Meeting ONLY.

3

Project Performance Strengths

Project Performance Weaknesses

D. Serve to High Needs Population (Possible Points Varies)

C11. Assessment Score -RRH

Service to High Needs Population

PSH 4 30

RRH = 30

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If projects have not been operational for one year, the data will be based upon what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will receive either no points or the most negative points available for each question.

95% or more = 1.5

90% - 94% = 10

85% - 89% = 5

84% or less = 0

Assessment Score- RRH

Does the assessment score indicate that 95% or more of the program participants require RRH or more intensive intervention?

RRH

HMIS Report

N/A

Assessment Score Score

Please enter scores during the Review Committee Meeting ONLY.

0

C12. Homeless Category – RRH

Homeless Category- RRH

95% or more = 15 94% or less = 0

Doas 95% or more of program participants fall into Category 1 or Category 4 homeless status?

*Youth RRH- Category 1, 2, or 4 Homeless Status

CRH

HMIS Report

N/A

Homeless Category - RRH Score

Please enter scores during the Review Committee Meeting ONLY.

0

C13. One or More Disability - PSH

One or more disabilities- PSH

95% or more = 15

90% - 94% = 10

85% - 89% = 5

84% or tess = 0

Do 95% or more program participants have one or more disability types?

13511

Note: Only Include entries after 10/1/2015

HMIS Report

The report includes only adult data. Head of the household over 18

100%

One or More Disability - PSH Score

Please enter scores during the Review Committee Meeting ONLY.

15

C14. Homeless Category - PSH

95% or more = 15 94% or less = 0

Did 95% of program participants who entered the program after October 1, 2015, meet the criteria for Category 1 or Category 4 homeless status?

*Youth PSH- Category 1, 2, or 4 Homeless Status

\$1845.5

HMIS Report

Note: Will use homeless status as opposed to previous living status

98%

Homeless Category - PSH Score

Please enter scores during the Review Committee Meeting ONLY.

15

Service to High Needs Population Strengths

Service to High Needs Population Weaknesses

E. Project Effectiveness (Possible Score Varies)

D15. Project has Reasonable Costs

Populations Served

FSH-W48

RRH = 45

100% = 20

90% - 99% = 10

89% or less ≈ 0

The project has reasonable costs

Was 100% of project funding allocation expended in the previous grant year?

PSH RRH

Yes

Project has Reasonable Costs Score

Please enter scores during the Review Committee Meeting ONLY.

20

D16. Coordinated Entry Participation

Coordinated Entry Participation

100% =15

95% - 99% = 10

94 or tess = 0

Are 100% of entries to the program from coordinated entry referrals after October 1, 2015?

FOR RENT

100%

Coordinated Entry Participation Score

Pleasa enter scores during the Review Committee Meeting ONLY.

15

D17. Housing First

Housing First

Yes = 10

No = 0

Based on the program description, does the project utilize a Housing First and/or Low Barrier model?

15H, RRH

Yes

Housing First Score

Please enter scores during the Review Committee Meeting ONLY.

10

Project Effectiveness Strengths

Project Effectiveness Weaknesses

F. Other and Local Criteria (Possible Score Varies)

E18. CoC Monitoring Score

PSH HIB

RRH = 10

0 findings = 10

1 finding = 5

 $2 \text{ findings} \approx 2$

3 + findings = 0

How many findings were noted on monitoring report for HUD programs?

PERENRH

3 findings

CoC Monitoring Score Score

Please enter scores during the Review Committee Meeting ONLY.

0

E19. Unit Utilization Rate

90% or higher = 5

80% - 89% = 2

70% - 79% = 1

0% - 78% = 0

What is the program's unit utilization rate?

Proposals: Proposals

A. Average = (January + April + July + October) ÷ 4 B. (Q9 Average ÷ Available Beds or Units) X 100

P534]

The average can be found in HMIS report- Housing and Shelter Utilization History report, and the number of units is found in the grant application. *

* Beds for singles programs and units for family programs.

95%

Unit Utilization Rate Score

Please enter scores during the Review Committee Meeting ONLY.

5

Other and Local Criteria Strengths

Other and Local Criteria Weaknesses

Bonus Questions: (Total Bonus Points = 15)

20. Non-HUD-Funded Homeless Beds

Bouns Questions:

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If the project has not been operational for one year, the data will be based upon what is currently in the HMIS system. If projects have not input data into the HMIS system, the project will not be eligible for bonus question points.

Possible Points

RSH=15

RRH = 15

Populations Served

Yes = 5

Mo = 0

If the project applicant has additional non-HUD-funded homeless bads (not a part of this project application), are those bads being entered into the HMIS system or Comparable Data system?

PSH: RRH

Yes

Non-HUD-Funded Homeless Beds Score

Please enter scores during the Review Committee Meeting UNLY.

5

21. Percentage of Program Leavers

50% or more = 10

30% - 49% = 5

Proposals: Proposals

10% - 29% = 2

9% and below = 0

Percentage of program leavers that were employed at program exit?

____%

PSH: RRH

0%

Percentage of Program Leavers Exit Score

Please enter scores during the Review Committee Meeting ONLY.

0

Bonus Question Strengths

Bonus Question Weaknesses

Tie-Breaker (if needed): (Total Tie Breaker Points = 20)

22. Tie Breaker (if needed)

The project must meet the minimum attendance requirements, and points are given based on each question's overall attendance.

Unless otherwise noted, the following project performance scores are based on the calendar year (January 1, 2022 to December 31, 2022) HMIS report. If the project has not been operational for one year, the data will be based on information currently in HMIS. If projects have not input data into HMIS, the project will not be eligible for bonus question points.

P\$H=15

RRH=15

Percentage of program leavers who were employed at program exit. % (ESE), RR

Tie Breaker Score

Please enter scores during the Review Committee Meeting ONLY.

23. Average Time to Move-In Date

Lowest Average Time =10 Second Lowest Average Time =3 Third Lowest Average Time =5

Fourth Lowest Average Time = 2

What is the average time between the project start date and the housing move-in date? The lowest average time receives the highest point. Points will only be awarded to the top four projects with the lowest average. All other projects will not receive tiebreaker points. (PSH; RRH)

Please enter scores during the Review Committee Meeting ONLY.

Tie Breaker Strengths

Tie Breaker Weaknesess

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FY23 CoC Consolidated Application

Attachment: Notification of Projects Rejected-Reduced Question 1E-5

Cover Sheet

Rejected/Reduced Projects

Integrated Health Systems-Dignity Village

YWCA –Persimmon Housing Initiative

Southeast Fl Behavioral Health Network-SEFBHN PSH

Public notification on website of priority listing that a project was reduced or rejected. Posted on 9/12/23.

Final priority listing emailed to all project applicants via email showing a projects were reduced or rejected. Sent 9/12/23.

Constant Contact notification to all project applicants/listserv of projects reduced or rejected. Sent 9/12/23 with evidence of who emails were sent to.



A Technical Assistance Workshop for the CoC Program Competition for both New and Renewal applicants will be held in person on August 3rd from 1pm to 3pm in the basement conference room and will cover the Palm Beach County Homeless and Housing Alliance (HHA) Local Competition, All renewal project applications are strongly encouraged to attend.

New applicants are also highly encouraged to attend and to apply, particularly any who have committed to improving racial equity, including persons with lived experience in program design, leveraging non-CoC housing funding and establishing partnerships with healthcare organizations. Please forward to those in your network who might be interested."

2023 CoC Local Competition Project Final Score and Ranking

2023 CoC Local Competition Project Final Score and Ranking

2023 CoC Final Projects Submitted

Tinal 2023 CoC Projects Submitted

2023 CoC Projects Accepted/Rejected

2023 CoC Projects Accepted/Rejected

2023 COC Program Local Renewal Project Application NOFO

2023 CoC Program Local Renewal Project Application Amendment 1

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2023 COC Program Local Renewal Project Application NOFO

2023 CoC Local New Project Application NOFO

- 2023 CoC Program Local New Application Amendment 1
- 2023 CoC Local New Project Application NOFO

810 Datura Street West Palm Beach, FL 33401 Phone: 561-355-4792 Directions: Click here

NOFO DIRECTORY

- ESG NOFO's
- O CoC NOFO's

PROPOSERS

- **Standard Terms and Conditions for Emergency Solutions Grants Program** Agreements
- Emergency Rental and Utilities Assistance Program (ERA Program) Policy and Procedures Memorandum (PPM) # CS-E-005

















Maria Bond

From: Maria Bond

Sent: Tuesday, September 12, 2023 10:58 AM

To: 'Monique Brown Faust'

Subject: CoC Program Competition Notification

Attachments: Final 2023 CoC Projects Accepted Rejected.pdf; Final 2023 CoC Projects Submitted.pdf;

2023 CoC Project Final Score and Ranking from Local Competition.pdf; Integrated

Healthcare Systems Program Competition Notification.pdf

Good morning Dr. Brown Faust,

It is with great regret that I must to inform you that the HHA was not able to recommend funding for the new project submitted by Integrated Healthcare Systems.

Please find attached, a formal notification summarizing the HHA recommendation of the project that was submitted. I have also included the final HHA approved ranking and tier listing of all projects, a list of all projects accepted or rejected and a listing of all HHA approved projects that will be a part of the HUD Collaborative Application.

You can also find these documents publicly listed at the link below:

https://discover.pbcgov.org/communityservices/humanservices/Pages/CoC-Grant-Apps.aspx.

If you have any questions, please feel free to contact me.

Kind regards,

Maria Bond Homeless Program and Contract Manager Division of Human Services 810 Datura St. 2nd Floor West Palm Beach, FL 33401 561-355-4779 mbond@pbcgov.org

We need to stop just pulling people out of the river. We need to go upstream and find out why they're falling in. -Desmond Tutu





HOMELESS AND HOUSING ALLIANCE OF PALM BEACH COUNTY



September 12, 2023

Dr. Monique D. Brown Faust Chief Executive Officer Integrated Healthcare Systems 31 W 20th Street Riviera Beach, FL 33404

Dear Mrs. Brown Faust,

Thank you for submitting a new project application in the 2023 Continuum of Care (CoC) Program Application process. This year there were 10 renewal project submissions that were ranked. The HHA ranked the HMIS Implementation project to be the highest in the Tier 1 ranking. Additionally, there were 6 YHDP renewal/replacement projects submitted that will be renewed noncompetitively and there is no requirement that they be ranked. Finally, there was 1 new expansion project and 4 new projects submitted that were ranked including submissions for the DV Bonus and CoC Bonus Project.

The CoC Non-Conflict Grant Review Committee representing various stakeholder groups in the community, worked diligently to thoroughly review all projects. After reviewing all submitted applications, the committee ranked the projects according to their scores and their priority listing. This letter is to inform you that after the 2023 CoC Non-Conflict Grant Review process was completed, while the Review Committee has recognized the merits of your project, unfortunately, your submitted application was not recommended for funding.

 Dignity Village, your new RRH application, was ranked number 16 in the new competition with a score of 94 out of 212 possible points. There simply was not enough dollars available to fund everyone requesting new projects.

While the reviewers were reviewing the strengths and weaknesses, there were some questions about the type of RRH your project offered that they didn't fully understand. I do believe you are definitely on the right path and with some technical assistance, you will have no problem applying again and achieving some success.

As I stated during our conversation, after the competition, I will be happy to assist you with the process.

Kind regards,

María Bond

Maria Bond Homeless Program and Contract Manager

Maria Bond

From: Maria Bond

Sent: Tuesday, September 12, 2023 11:14 AM

To: Shea Spencer

Cc: Donna Skees; Shaundelyn Emerson; Wendy Tippett

Subject: CoC Program Competition Notification

Attachments: Final 2023 CoC Projects Accepted Rejected.pdf; Final 2023 CoC Projects Submitted.pdf;

2023 CoC Project Final Score and Ranking from Local Competition.pdf; YWCA Program

Competition Notification.pdf

Good morning Shea,

We are pleased to notify you that the new projects submitted by the YWCA have been recommended for funding. While the DV Bonus project was recommended for the full amount of \$780,846.00, the CoC Bonus project, Persimmon Housing Initiative was recommended for a reduced amount of \$582,086.00.

Please find attached, a formal notification summarizing the HHA recommendation of the project that were submitted. I have also included the final HHA approved ranking and tier listing of all projects, a list of all projects accepted or rejected and a listing of all HHA approved projects that will be a part of the HUD Collaborative Application.

You can also find these documents publicly listed at the link below:

https://discover.pbcgov.org/communityservices/humanservices/Pages/CoC-Grant-Apps.aspx.

If you have any questions, please feel free to contact me.

Kind regards,

Maria Bond Homeless Program and Contract Manager Division of Human Services 810 Datura St. 2nd Floor West Palm Beach, FL 33401 561-355-4779 mbond@pbcgov.org

We need to stop just pulling people out of the river.

We need to go unstream and find out why they're falling in.

Palm Beach County
COMMUNITY
SERVICES

-Desmond Tutu

HOMELESS AND HOUSING ALLIANCE OF PALM BEACH COUNTY



September 12, 2023

Shea Spencer Chief Executive Officer YWCA of Palm Beach County 1016 N Dixie Highway West Palm Beach, FL 33401

Dear Ms. Spencer,

Thank you for submitting new project applications in the 2023 Continuum of Care (CoC) Program Application process. This year there were 10 renewal project submissions that were ranked. The HHA ranked the HMIS Implementation project to be the highest in the Tier 1 ranking. Additionally, there were 6 YHDP renewal/replacement projects submitted that will be renewed noncompetitively and there is no requirement that they be ranked. Finally, there was 1 new expansion project and 4 new projects submitted that were ranked including submissions for the DV Bonus and CoC Bonus Project.

The CoC Non-Conflict Grant Review Committee representing various stakeholder groups in the community, worked diligently to thoroughly review all projects. After reviewing all submitted applications, the committee ranked the projects according to their scores and their priority listing. This letter is to inform you that after the 2023 CoC Non-Conflict Grant Review process was completed, the Review Committee has recognized the merits of your programs and your submitted applications were recommended for funding.

- YWCA Persimmon Housing Initiative, your new RRH application, was ranked number 15 in the new competition with a score of 168 out of 212 possible points. This project was recommended and approved by the HHA for reduced and partial funding of your request. \$582,086.00 was recommended out of the \$754,895.00 requested when submitted to the Department of Housing and Urban Development (HUD). As a new project, YWCA DV SAFEhouse was placed in Tier 2 which will now compete nationally with other Continuum's for dollars allocated to Tier 2.
- YWCA DV SAFEhouse, your DV Bonus application, was the only DV Bonus submission in the competition with a score of 168 out of 212 possible points. This project was recommended and approved by the HHA for full funding of your request. It was recommended that the YWCA apply for an additional amount of \$25,951.00 when submitted to HUD. There was \$780,846.00 available in the DV Bonus and the initial funding request of \$754,895.00 fell below the total of available. All DV Bonus projects will now compete nationally with other Continuum's for dollars allocated for the DV Bonus.

HUD is the ultimate funding authority and will make the final award decisions. If you have any questions or concerns, please don't hesitate to contact me at 561-355-4779.

Kind regards,

María Bond

Maria Bond

Homeless Program and Contract Manager





Maria Bond

From: Maria Bond

Sent: Tuesday, September 12, 2023 11:05 AM

To: Ann Berner

Cc: Becky Walker; Linda Kane; Wendy Tippett
Subject: CoC Program Competition Notification

Attachments: Final 2023 CoC Projects Accepted Rejected.pdf; Final 2023 CoC Projects Submitted.pdf;

2023 CoC Project Final Score and Ranking from Local Competition.pdf; SEFBHN

Program Competition Notification.pdf

Good morning Ms. Berner,

We are pleased to notify you that the new project submitted by Southeast Florida Behavioral Health Network has been recommended for reduced funding.

Please find attached, a formal notification summarizing the HHA recommendation of the projects submitted. I have also included the final HHA approved ranking and tier listing of all projects, a list of all projects accepted or rejected and a listing of all HHA approved projects that will be a part of the HUD Collaborative Application.

You can also find these documents publicly listed at the link below:

https://discover.pbcgov.org/communityservices/humanservices/Pages/CoC-Grant-Apps.aspx.

If you have any questions, please feel free to contact me.

Kind regards,

Maria Bond Homeless Program and Contract Manager Division of Human Services 810 Datura St. 2nd Floor West Palm Beach, FL 33401 561-355-4779 mbond@pbcgov.org

We need to stop just pulling people out of the river.

We need to go upstream and find out why they're falling in.

-Desmond Tutu



HOMELESS AND HOUSING ALLIANCE OF PALM BEACH COUNTY



September 12, 2023

Ann Berner Chief Executive Officer Southeast Florida Behavioral Health Network, Inc. 1070 E Indiantown Rd. #408 Jupiter, FL 33477

Dear Ms. Berner,

Thank you for submitting a new project application in the 2023 Continuum of Care (CoC) Program Application process. This year there were 10 renewal project submissions that were ranked. The HHA ranked the HMIS Implementation project to be the highest in the Tier 1 ranking. Additionally, there were 6 YHDP renewal/replacement projects submitted that will be renewed noncompetitively and there is no requirement that they be ranked. Finally, there was 1 new expansion project and 4 new projects submitted that were ranked including submissions for the DV Bonus and CoC Bonus Project.

The CoC Non-Conflict Grant Review Committee representing various stakeholder groups in the community, worked diligently to thoroughly review all projects. After reviewing all submitted applications, the committee ranked the projects according to their scores and their priority listing. This letter is to inform you that after the 2023 CoC Non-Conflict Grant Review process was completed, the Review Committee has recognized the merits of your project and your submitted application was recommended for funding.

• **SEFBHN PSH**, your new PSH application, was ranked number 13 in the competition with a score of 179 out of 212 possible points. This project was recommended and approved by the HHA for partial funding of your request for \$1,086,808.00 when submitted to the Department of Housing and Urban Development (HUD). \$318,564.00 of funding was approved and is secure in Tier 1 and \$724,481.00 was placed in Tier 2 for a total of \$900,650.00. All Tier 2 projects will now compete nationally with other Continuum's for dollars allocated to Tier 2.

HUD is the ultimate funding authority and will make the final award decisions. If you have any questions or concerns, please don't hesitate to contact me at 561-355-4779.

Kind regards,

María Bond

Maria Bond

Homeless Program and Contract Manager



Palm Beach County

Good afternoon,

As a HUD requirement, the HHA is required to publicly post the FY 2023 HUD CoC Program Competition final results. Please find below:

CoC Projects Accepted/Rejected/Reduced Final 2023 CoC Projects Submitted The CoC Project Final Score and Ranking

CoC Projects Accepted/Rejected

Agency	Program	Amount Required	Amount Recommended	Accepted/III justed	1
Falm Seath County than on Services	HIGH Implementation	5 281,510.00		Accepted	
To Leaf's Mary, Inc.	Operation from Booky III	5 SON, DANSON	5 308,048.00	Accepted	
The Lend's Place, Inc.	Operation force Booky W	5 331,002.03	\$ 310,000.00	Accepted	
Californian Geodurill Industries Inc.	New Avenues	5 374,412.00	5 574,417.00	Accepted	
Trailional's Place, Inc.	Home First	5 363,414.00	5 360,414.00	Accepted	_
Children's Case Management Organization, Inc. dbs Families First	Exidges to Sursens	\$ 730,513.00	5 738,015.08	Accepted	
Children's Coor Management Organization, Inc. (But Families First)	Endges to Sussess			Reported	
Adopt 4 have by of the Paler Beaches, Inc.	Property III	5 202,315.00	5 312,131.08	Assested	
the Level's Many, Inc.	Project Family Core	5 340,014.03	\$ 148,014.00	Strongled.	
PSCCSD (City of W78)	Pathways in Interpretation	\$ 682,317.00	\$ 482,117.00	Accepted	
Adopt is Family of the Falm Seathers, Inc.	Conserving Yorks to Opport a	5 205,515.00	5 295,521.00	Aveging	
The Level's Place, Inc.	Operation flower Booky V	5 734,485.00	5 724,481.00	Accepted	
Southeast Enterties Health South South	ST78/04 75.6	5 1,386,806.00	5 900,650.00	Assessed	Redirer
MWCA of Palm Beach County, Inc.	YWCA DV SAFChouse Rapid B	\$ 754,895.00	5 592,090.09	Accepted	Beduter
Congressed & Authorize Systems	Electrical and	5 331,454,00		Secretary.	
MMCA of Palm Beach Counts, Inc.	MWCA BY SAFChouse Fapid N	5 754,805.00	5 780,646.00	Accepted	Экспен

Anto Joshind Removal Projects Novoled Joshind Projects Topicals

Final 2022 CoC Projects Submitted





FY 2023 HUD CoC Local Co... al Results

Sent September 12th 2023 at 5:34 pm EDT

Subject FY 2023 HHA CoC Local Program New and R...

Preheader Final Competition Results
From name PBC Homeless and Housing Alliance

From communityservices@pbcgov.org

Reply mbond@pbcgov.org

Lists HAB (Homeless Advisory Board), HHA Advisory

Counci... Show more

Email link https://conta.cc/3ECE1ZS

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0/400



← Back to Email Details FY 2023 HUD CoC Local Competition Final Results Export Search Results Sent Tue, Sep 12, 2023 96.4% 88% How do I compare? Send Rate Average Send Rate Select an industry 1 Item Sent ~ Q mdfaust × Email address First name Last name Sent time Dr. Monique mdfaust@integratedhcs.org Brown-Wellons Tue, Sep 12, 2023 at 5:34 PM EDT Show 50 🕶 < Page 1 of 1 >







FY23 CoC Consolidated Application

Attachment: Final Project Scores for All Projects

Question 1E-5a

Cover Sheet

Accepted Projects

Palm Beach County Human Services-HMIS

Adopt-A-Family-Project Safe II, Connecting Youth to Opportunities City of WPB/PBC

Children's Case Management Organization, Inc.-Bridges to Success Gulfstream Goodwill-New Avenues

Southeast Florida Behavioral Health Network-SEFBHN PSH YWCA-YWCA DV SAFEhouse, Persimmon Housing Initiative The Lord's Place-Operation Home Ready III, IV,V, Home First, Project Family Care

Vita Nova

Public notification on website of priority listing that a project was approved. Posted on 9/12/23.

Final priority listing emailed to all project applicants via email showing a projects were reduced or rejected. Sent 9/12/23.

Constant Contact notification to all project applicants/listserv of all accepted projects Sent 9/12/23 with evidence of who emails were sent to.



A Technical Assistance Workshop for the CoC Program Competition for both New and Renewal applicants will be held in person on August 3rd from 1pm to 3pm in the basement conference room and will cover the Palm Beach County Homeless and Housing Alliance (HHA) Local Competition. All renewal project applications are strongly encouraged to attend.

New applicants are also highly encouraged to attend and to apply, particularly any who have committed to improving racial equity, including persons with lived experience in program design, leveraging non-CoC housing funding and establishing partnerships with healthcare organizations. Please forward to those in your network who might be interested."

2023 CoC Local Competition Project Final Score and Ranking

2023 CoC Local Competition Project Final Score and Ranking

2023 CoC Final Projects Submitted

The Final 2023 CoC Projects Submitted

2023 CoC Projects Accepted/Rejected

2023 CoC Projects Accepted/Rejected

2023 COC Program Local Renewal Project Application NOFO

- 2023 CoC Program Local Renewal Project Application Amendment 1
- 2023 COC Program Local Renewal Project Application NOFO

2023 CoC Local New Project Application NOFO

- 2023 CoC Program Local New Application Amendment 1
- 💈 2023 CoC Local New Project Application NOFO

810 Datura Street West Palm Beach, FL 33401 Phone: 561-355-4792

Directions: Click here

NOFO DIRECTORY

- ESG NOFO's
- CoC NOFO's

PROPOSERS

- Standard Terms and Conditions for Emergency Solutions Grants Program
- The Emergency Rental and Utilities Assistance Program (ERA Program) Policy and Procedures Memorandum (PPM) # CS-E-005







































From: Maria Bond

Sent: Tuesday, September 12, 2023 10:15 AM

To: Wendy Tippett

Cc: CoC Program Competition Notification

Subject: Final 2023 CoC Projects Accepted Rejected.pdf; Final 2023 CoC Projects Submitted.pdf;
Attachments: 2023 CoC Project Final Score and Ranking from Local Competition.pdf; PBC Program

Competition Notification.pdf

Good morning Wendy,

We are pleased to notify you that all of the projects submitted by Palm Beach County have been recommended for full funding.

Please find attached, a formal notification summarizing the HHA recommendations of the projects that were submitted by Palm Beach County. I have also included the final HHA approved ranking and tier listing of all projects, a list of all projects accepted or rejected and a listing of all HHA approved projects that will be a part of the HUD Collaborative Application.

You can also find these documents publicly listed at the link below:

https://discover.pbcgov.org/communityservices/humanservices/Pages/CoC-Grant-Apps.aspx.

If you have any questions, please feel free to contact me.

Kind regards,

Maria Bond Homeless Program and Contract Manager Division of Human Services 810 Datura St. 2nd Floor West Palm Beach, FL 33401 561-355-4779 mbond@pbcgov.org

We need to stop just pulling people out of the river.
We need to go upstream and find out why they're falling in.
-Desmond Tutu

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September 12, 2023

Wendy Tippett
Director PBC Human Services and Community Action
810 Datura Street, 2nd Floor
West Palm Beach, FL 33401

Dear Ms. Tippett,

Thank you for submitting a renewal application in the 2023 Continuum of Care (CoC) Program Application process. This year there were 10 renewal project submissions that were ranked. The HHA ranked the HMIS Implementation project to be the highest in the Tier 1 ranking. Additionally, there were 6 YHDP renewal/replacement projects submitted that will be renewed noncompetitively and there is no requirement that they be ranked. Finally, there was 1 expansion project and 4 new projects submitted that were ranked including submissions for the DV Bonus and CoC Bonus Project.

The CoC Non-Conflict Grant Review Committee representing various stakeholder groups in the community, worked diligently to thoroughly review all projects. After reviewing all submitted applications, the committee ranked the projects according to their scores and their priority listing. This letter is to inform you that after the 2023 CoC Non-Conflict Grant Review process was completed, the Review Committee has recognized the merits of your programs and your submitted applications were recommended for funding.

- HMIS Implementation was recommended and approved for the renewal amount of \$281,530.00. The HHA
 has determined that HMIS Implementation grant is the top priority for the competition.
- CoC Planning Grant was recommended and approved for the amount of \$415,776.00

HUD is the ultimate funding authority and will make the final award decisions. If you have any questions or concerns, please don't hesitate to contact me at 561-355-4779.

Kind regards,

María Bond

Maria Bond



From: Maria Bond

Sent: Tuesday, September 12, 2023 10:40 AM

To: Matt Constantine

Cc: Emily E. Gorman; Sabugo-Marrou, Nydia; Wendy Tippett

Subject: CoC Program Competition Notification

Attachments: Final 2023 CoC Projects Accepted Rejected.pdf; Final 2023 CoC Projects Submitted.pdf;

2023 CoC Project Final Score and Ranking from Local Competition.pdf; AAF Program

Competition Notification.pdf

Good morning Matt,

We are pleased to notify you that all of the projects submitted by Adopt-A-Family have been recommended for full funding.

Please find attached, a formal notification summarizing the HHA recommendations of the projects that were submitted by Adopt-A-Family. I have also included the final HHA approved ranking and tier listing of all projects, a list of all projects accepted or rejected and a listing of all HHA approved projects that will be a part of the HUD Collaborative Application.

You can also find these documents publicly listed at the link below:

https://discover.pbcgov.org/communityservices/humanservices/Pages/CoC-Grant-Apps.aspx.

If you have any questions, please feel free to contact me.

Kind regards,

Maria Bond Homeless Program and Contract Manager Division of Human Services 810 Datura St. 2nd Floor West Palm Beach, FL 33401 561-355-4779 mbond@pbcgov.org









September 12, 2023

Matt Constantine Chief Executive Officer Adopt-A-Family of the Palm Beaches 1712 2nd Avenue N, Lake Worth, FL 33460

Dear Mr. Constantine,

Thank you for submitting renewal applications in the 2023 Continuum of Care (CoC) Program Application process. This year there were 10 renewal project submissions that were ranked. The HHA ranked the HMIS Implementation project to be the highest in the Tier 1 ranking. Additionally, there were 6 YHDP renewal/replacement projects submitted that will be renewed noncompetitively and there is no requirement that they be ranked. Finally, there was 1 expansion project and 4 new projects submitted that were ranked including submissions for the DV Bonus and CoC Bonus Project.

The CoC Non-Conflict Grant Review Committee representing various stakeholder groups in the community, worked diligently to thoroughly review all projects. After reviewing all submitted applications, the committee ranked the projects according to their scores and their priority listing. This letter is to inform you that after the 2023 CoC Non-Conflict Grant Review process was completed, the Review Committee has recognized the merits of your programs and your submitted applications were recommended for funding.

- Project Safe II, your renewal PSH application, was ranked number 7 in the renewal competition with a score of 159 out of 177 possible points. This project was recommended and approved by the HHA for the full funding request of \$252,131.00 when submitted to the Department of Housing and Urban Development (HUD).
- •Connecting Youth to Opportunities, your renewal RRH application, was ranked number 10 in the renewal competition with a score of 147 out of 172 possible points. This project was recommended and approved by the HHA for the full funding request of \$295,573.00 when submitted to HUD.

While your two YHDP projects were not ranked, they were approved by the HHA for the full funding request and will be included in the Collaborative Application and submitted to HUD.

- •YHDP-CYTO 2 was recommended and approved for the renewal amount of \$252,131.00.
- •YHDP-Youth Establishing Stability was recommended and approved for the renewal amount of \$283,571.00.

HUD is the ultimate funding authority and will make the final award decisions. If you have any questions or concerns, please don't hesitate to contact me at 561-355-4779.

Kind regards,

María Bond

Maria Bond



From: Maria Bond

Sent: Tuesday, September 12, 2023 10:44 AM

To: 'jferriol@wpb.org'

Cc: Lisa Kemp; Wendy Tippett

Subject: CoC Program Competition Notification

Attachments: Final 2023 CoC Projects Accepted Rejected.pdf; Final 2023 CoC Projects Submitted.pdf;

2023 CoC Project Final Score and Ranking from Local Competition.pdf; City of WPB

Program Competition Notification.pdf

Good morning Jennifer,

We are pleased to notify you that the project submitted by Palm Beach County and The City of West Palm Beach has been recommended for full funding.

Please find attached, a formal notification summarizing the HHA recommendation of the project that was submitted by Palm Beach County and the City of West Palm Beach. I have also included the final HHA approved ranking and tier listing of all projects, a list of all projects accepted or rejected and a listing of all HHA approved projects that will be a part of the HUD Collaborative Application.

You can also find these documents publicly listed at the link below:

 $\underline{https://discover.pbcgov.org/communityservices/humanservices/Pages/CoC-Grant-Apps.aspx.}$

If you have any questions, please feel free to contact me.

Kind regards,

Maria Bond Homeless Program and Contract Manager Division of Human Services 810 Datura St. 2nd Floor West Palm Beach, FL 33401 561-355-4779 mbond@pbcgov.org







September 12, 2023

Jennifer Ferriol
Director of Housing and Community Development
West Palm Beach, Department of Housing and Community Development
401 Clematis Street – 3rd Floor
West Palm Beach, FL 33401

Dear Ms.Ferriol,

Thank you for submitting a renewal application in the 2023 Continuum of Care (CoC) Program Application process. This year there were 10 renewal project submissions that were ranked. The HHA ranked the HMIS Implementation project to be the highest in the Tier 1 ranking. Additionally, there were 6 YHDP renewal/replacement projects submitted that will be renewed noncompetitively and there is no requirement that they be ranked. Finally, there was 1 new expansion project and 4 new projects submitted that were ranked including submissions for the DV Bonus and CoC Bonus Project.

The CoC Non-Conflict Grant Review Committee representing various stakeholder groups in the community, worked diligently to thoroughly review all projects. After reviewing all submitted applications, the committee ranked the projects according to their scores and their priority listing. This letter is to inform you that after the 2023 CoC Non-Conflict Grant Review process was completed, the Review Committee has recognized the merits of your project and your submitted application was recommended for funding.

• Pathways to Independence, your renewal RRH application, was ranked number 9 in the renewal competition with a score of 169 out of 177 possible points. Unfortunately, this project was not recommended for funding.

HUD is the ultimate funding authority and will make the final award decisions. If you have any questions or concerns, please don't hesitate to contact me at 561-355-4779.

Kind regards,

María Bond

Maria Bond



From: Maria Bond

Sent: Tuesday, September 12, 2023 10:51 AM

To: Julie Swindler

Cc: Wendy Tippett; Andres Torrens

Subject: CoC Program Competition Notification

Attachments: Final 2023 CoC Projects Accepted Rejected.pdf; Final 2023 CoC Projects Submitted.pdf;

2023 CoC Project Final Score and Ranking from Local Competition.pdf; FF Program

Competition Notification.pdf

Good morning Julie,

We are pleased to notify you that the renewal project and the new expansion project submitted by Families First have been recommended for full funding.

Please find attached, a formal notification summarizing the HHA recommendation of the project that was submitted by Families First. I have also included the final HHA approved ranking and tier listing of all projects, a list of all projects accepted or rejected and a listing of all HHA approved projects that will be a part of the HUD Collaborative Application.

You can also find these documents publicly listed at the link below:

https://discover.pbcgov.org/communityservices/humanservices/Pages/CoC-Grant-Apps.aspx.

If you have any questions, please feel free to contact me.

Kind regards,

Maria Bond Homeless Program and Contract Manager Division of Human Services 810 Datura St. 2nd Floor West Palm Beach, FL 33401 561-355-4779 mbond@pbcgov.org







September 12, 2023

Julie Swindler
Chief Executive Officer
Families First
3333 Forest Hill Blvd, 2nd Floor
West Palm Beach, FL 33406

Dear Mrs. Swindler,

Thank you for submitting renewal applications in the 2023 Continuum of Care (CoC) Program Application process. This year there were 10 renewal project submissions that were ranked. The HHA ranked the HMIS Implementation project to be the highest in the Tier 1 ranking. Additionally, there were 6 YHDP renewal/replacement projects submitted that will be renewed noncompetitively and there is no requirement that they be ranked. Finally, there was 1 new expansion project and 4 new projects submitted that were ranked including submissions for the DV Bonus and CoC Bonus Project.

The CoC Non-Conflict Grant Review Committee representing various stakeholder groups in the community, worked diligently to thoroughly review all projects. After reviewing all submitted applications, the committee ranked the projects according to their scores and their priority listing. This letter is to inform you that after the 2023 CoC Non-Conflict Grant Review process was completed, the Review Committee has recognized the merits of your programs and your submitted applications were recommended for funding.

- Bridges to Success, your renewal PSH application, was ranked number 6 in the renewal competition with a score
 of 169 out of 177 possible points.
- Bridges to Success, your new expansion PSH project application, was ranked number 11 in the competition with a score of 169 out of 212 possible points. This project was recommended and approved by the HHA for the full funding request and will be placed in Tier 1 when submitted to the Department of Housing and Urban Development (HUD).

HUD is the ultimate funding authority and will make the final award decisions. If you have any questions or concerns, please don't hesitate to contact me at 561-355-4779.

Kind regards,

Maria Bond

Maria Bond



From: Maria Bond

Sent: Tuesday, September 12, 2023 11:00 AM

To: Keith Kennedy

Cc: 'Dannie Matevia'; Kerri-Ann Brown; Wendy Tippett

Subject: CoC Program Competition Notification

Attachments: Final 2023 CoC Projects Accepted Rejected.pdf; Final 2023 CoC Projects Submitted.pdf;

2023 CoC Project Final Score and Ranking from Local Competition.pdf; GGI Program

Competition Notification.pdf

Good morning Keith,

We are pleased to notify you that all of the projects submitted by GGI have been recommended for full funding.

Please find attached, a formal notification summarizing the HHA recommendation of the projects that were submitted. I have also included the final HHA approved ranking and tier listing of all projects, a list of all projects accepted or rejected and a listing of all HHA approved projects that will be a part of the HUD Collaborative Application.

You can also find these documents publicly listed at the link below:

https://discover.pbcgov.org/communityservices/humanservices/Pages/CoC-Grant-Apps.aspx.

If you have any questions, please feel free to contact me.

Kind regards,

Maria Bond Homeless Program and Contract Manager Division of Human Services 810 Datura St. 2nd Floor West Palm Beach, FL 33401 561-355-4779 mbond@pbcgov.org







September 12, 2023

Keith Kennedy Chief Executive Officer Gulfstream Goodwill 1715 Tiffany Drive W West Palm Beach, FL 33407

Dear Mr. Kennedy,

Thank you for submitting renewal applications in the 2023 Continuum of Care (CoC) Program Application process. This year there were 10 renewal project submissions that were ranked. The HHA ranked the HMIS implementation project to be the highest in the Tier 1 ranking. Additionally, there were 6 YHDP renewal/replacement projects submitted that will be renewed noncompetitively and there is no requirement that they be ranked. Finally, there was 1 new expansion project and 4 new projects submitted that were ranked including submissions for the DV Bonus and CoC Bonus Project.

The CoC Non-Conflict Grant Review Committee representing various stakeholder groups in the community, worked diligently to thoroughly review all projects. After reviewing all submitted applications, the committee ranked the projects according to their scores and their priority listing. This letter is to inform you that after the 2023 CoC Non-Conflict Grant Review process was completed, the Review Committee has recognized the merits of your programs and your submitted applications were recommended for funding.

- New Avenues, your renewal PSH application, was ranked number 4 in the renewal competition with a score of 146
 out of 177 possible points. This project was recommended and approved by the HHA for the full funding request
 of \$974,412.00 when submitted to the Department of Housing and Urban Development (HUD).
- Touchdown Fact Team, your renewal YHDP SSO project application was recommended and approved for the renewal amount of \$364,992.00.
- Homerun 2 PSH YHDP your renewal YHDP PSH project application was recommended and approved for the renewal amount of \$628,968.00.

HUD is the ultimate funding authority and will make the final award decisions. If you have any questions or concerns, please don't hesitate to contact me at 561-355-4779.

Kind regards,

Maria Bond

Maria Bond



From: Maria Bond

Sent: Tuesday, September 12, 2023 11:05 AM

To: Ann Berner

Cc: Becky Walker; Linda Kane; Wendy Tippett
Subject: CoC Program Competition Notification

Attachments: Final 2023 CoC Projects Accepted Rejected.pdf; Final 2023 CoC Projects Submitted.pdf;

2023 CoC Project Final Score and Ranking from Local Competition.pdf; SEFBHN

Program Competition Notification.pdf

Good morning Ms. Berner,

We are pleased to notify you that the new project submitted by Southeast Florida Behavioral Health Network has been recommended for reduced funding.

Please find attached, a formal notification summarizing the HHA recommendation of the projects submitted. I have also included the final HHA approved ranking and tier listing of all projects, a list of all projects accepted or rejected and a listing of all HHA approved projects that will be a part of the HUD Collaborative Application.

You can also find these documents publicly listed at the link below:

https://discover.pbcgov.org/communityservices/humanservices/Pages/CoC-Grant-Apps.aspx.

If you have any questions, please feel free to contact me.

Kind regards,

Maria Bond Homeless Program and Contract Manager Division of Human Services 810 Datura St. 2nd Floor West Palm Beach, FL 33401 561-355-4779 mbond@pbcgov.org









September 12, 2023

Ann Berner Chief Executive Officer Southeast Florida Behavioral Health Network, Inc. 1070 E Indiantown Rd. #408 Jupiter, FL 33477

Dear Ms. Berner,

Thank you for submitting a new project application in the 2023 Continuum of Care (CoC) Program Application process. This year there were 10 renewal project submissions that were ranked. The HHA ranked the HMIS Implementation project to be the highest in the Tier 1 ranking. Additionally, there were 6 YHDP renewal/replacement projects submitted that will be renewed noncompetitively and there is no requirement that they be ranked. Finally, there was 1 new expansion project and 4 new projects submitted that were ranked including submissions for the DV Bonus and CoC Bonus Project.

The CoC Non-Conflict Grant Review Committee representing various stakeholder groups in the community, worked diligently to thoroughly review all projects. After reviewing all submitted applications, the committee ranked the projects according to their scores and their priority listing. This letter is to inform you that after the 2023 CoC Non-Conflict Grant Review process was completed, the Review Committee has recognized the merits of your project and your submitted application was recommended for funding.

SEFBHN PSH, your new PSH application, was ranked number 13 in the competition with a score of 179 out of 212 possible points. This project was recommended and approved by the HHA for partial funding of your request for \$1,086,808.00 when submitted to the Department of Housing and Urban Development (HUD). \$318,564.00 of funding was approved and is secure in Tier 1 and \$724,481.00 was placed in Tier 2 for a total of \$900,650.00. All Tier 2 projects will now compete nationally with other Continuum's for dollars allocated to Tier 2.

HUD is the ultimate funding authority and will make the final award decisions. If you have any questions or concerns, please don't hesitate to contact me at 561-355-4779.

Kind regards,

María Bond

Maria Bond



From: Maria Bond

Sent: Tuesday, September 12, 2023 11:08 AM

To: Diana Stanley

Cc: Wendy Tippett; Raymond Morse; Cristina Lucier, Ph.D.

Subject: CoC Program Competition Notification

Attachments: Final 2023 CoC Projects Accepted Rejected.pdf; Final 2023 CoC Projects Submitted.pdf;

2023 CoC Project Final Score and Ranking from Local Competition.pdf; FF Program

Competition Notification.pdf; TLP Program Competition Notification.pdf

Good morning Diana,

We are pleased to notify you that all of the projects submitted by The Lord's Place have been recommended for full funding.

Please find attached, a formal notification summarizing the HHA recommendation of the project that were submitted. I have also included the final HHA approved ranking and tier listing of all projects, a list of all projects accepted or rejected and a listing of all HHA approved projects that will be a part of the HUD Collaborative Application.

You can also find these documents publicly listed at the link below:

https://discover.pbcgov.org/communityservices/humanservices/Pages/CoC-Grant-Apps.aspx.

If you have any questions, please feel free to contact me.

Kind regards,

Maria Bond Homeless Program and Contract Manager Division of Human Services 810 Datura St. 2nd Floor West Palm Beach, FL 33401 561-355-4779 mbond@pbcgov.org





September 12, 2023

Diana Stanley Chief Executive Officer The Lord's Place 2808 N Australian Avenue West Palm Beach, FL 33407

Dear Mrs. Stanley,

Thank you for submitting renewal applications in the 2023 Continuum of Care (CoC) Program Application process. This year there were 10 renewal project submissions that were ranked. The HHA ranked the HMIS Implementation project to be the highest in the Tier 1 ranking. Additionally, there were 6 YHDP renewal/replacement projects submitted that will be renewed noncompetitively and there is no requirement that they be ranked. Finally, there was 1 renewal expansion grant and 4 new projects submitted that were ranked including submissions for the DV Bonus and CoC Bonus Project.

The CoC Non-Conflict Grant Review Committee representing various stakeholder groups in the community, worked diligently to thoroughly review all projects. After reviewing all submitted applications, the committee ranked the projects according to their scores and their priority listing. This letter is to inform you that after the 2023 CoC Non-Conflict Grant Review process was completed, the Review Committee has recognized the merits of your programs and your submitted applications were recommended for funding.

- Operation Home Ready III, your renewal PSH application, was ranked number 2 in the competition with a score
 of 163 out of 177 possible points. This project was recommended and approved by the HHA for the full
 funding request of \$308,066.00 when submitted to the Department of Housing and Urban Development (HUD).
- Operation Home Ready IV, your renewal PSH application, was ranked number 3 in the competition with a score
 of 158 out of 177 possible points. This project was recommended and approved by the HHA for the full
 funding request of \$331,992.00 when submitted to HUD.
- Home First, your renewal PSH application, was ranked number 5 in the competition with a score of 141 out of 177 possible points. This project was recommended and approved by the HHA for the full funding request of \$363,414.00 when submitted to HUD.
- Project Family Care, your renewal PSH application, was ranked number 8 in the competition with a score of 156 out of 177 possible points. This project was recommended and approved by the HHA for the full funding request of \$340,014.00 when submitted to HUD.
- Operation Home Ready V, your new PSH project application, was ranked number 12 in the competition with a score of 179 out of 212 possible points. This project was recommended and approved by the HHA for the full funding request of \$724,481.00 and is in Tier 1.

HUD is the ultimate funding authority and will make the final award decisions. If you have any questions or concerns, please don't hesitate to contact me at 561-355-4779.

Kind regards,

Maria Bond

Maria Bond



From: Maria Bond

Sent: Tuesday, September 12, 2023 11:14 AM

To: Shea Spencer

Cc: Donna Skees; Shaundelyn Emerson; Wendy Tippett

Subject: CoC Program Competition Notification

Attachments: Final 2023 CoC Projects Accepted Rejected.pdf; Final 2023 CoC Projects Submitted.pdf;

2023 CoC Project Final Score and Ranking from Local Competition.pdf; YWCA Program

Competition Notification.pdf

Good morning Shea,

We are pleased to notify you that the new projects submitted by the YWCA have been recommended for funding. While the DV Bonus project was recommended for the full amount of \$780,846.00, the CoC Bonus project, Persimmon Housing Initiative was recommended for a reduced amount of \$582,086.00.

Please find attached, a formal notification summarizing the HHA recommendation of the project that were submitted. I have also included the final HHA approved ranking and tier listing of all projects, a list of all projects accepted or rejected and a listing of all HHA approved projects that will be a part of the HUD Collaborative Application.

You can also find these documents publicly listed at the link below:

https://discover.pbcgov.org/communityservices/humanservices/Pages/CoC-Grant-Apps.aspx.

If you have any questions, please feel free to contact me.

Kind regards,

Maria Bond Homeless Program and Contract Manager Division of Human Services 810 Datura St. 2nd Floor West Palm Beach, FL 33401 561-355-4779

mbond@pbcgov.org

We need to stop just pulling people out of the river.

We need to go upstream and find out why they're falling in.

SERVICES

Palm Beach County COMMUNITY -Desmond Tutu

1





September 12, 2023

Shea Spencer Chief Executive Officer YWCA of Palm Beach County 1016 N Dixie Highway West Palm Beach, FL 33401

Dear Ms. Spencer,

Thank you for submitting new project applications in the 2023 Continuum of Care (CoC) Program Application process. This year there were 10 renewal project submissions that were ranked. The HHA ranked the HMIS Implementation project to be the highest in the Tier 1 ranking. Additionally, there were 6 YHDP renewal/replacement projects submitted that will be renewed noncompetitively and there is no requirement that they be ranked. Finally, there was 1 new expansion project and 4 new projects submitted that were ranked including submissions for the DV Bonus and CoC Bonus Project.

The CoC Non-Conflict Grant Review Committee representing various stakeholder groups in the community, worked diligently to thoroughly review all projects. After reviewing all submitted applications, the committee ranked the projects according to their scores and their priority listing. This letter is to inform you that after the 2023 CoC Non-Conflict Grant Review process was completed, the Review Committee has recognized the merits of your programs and your submitted applications were recommended for funding.

- YWCA Persimmon Housing Initiative, your new RRH application, was ranked number 15 in the new competition
 with a score of 168 out of 212 possible points. This project was recommended and approved by the HHA for
 reduced and partial funding of your request. \$582,086.00 was recommended out of the \$754,895.00 requested
 when submitted to the Department of Housing and Urban Development (HUD). As a new project, YWCA DV
 SAFEhouse was placed in Tier 2 which will now compete nationally with other Continuum's for dollars allocated to
 Tier 2.
- YWCA DV SAFEhouse, your DV Bonus application, was the only DV Bonus submission in the competition with a
 score of 168 out of 212 possible points. This project was recommended and approved by the HHA for full funding
 of your request. It was recommended that the YWCA apply for an additional amount of \$25,951.00 when submitted
 to HUD. There was \$780,846.00 available in the DV Bonus and the initial funding request of \$754,895.00 fell below
 the total of available. All DV Bonus projects will now compete nationally with other Continuum's for dollars
 allocated for the DV Bonus.

HUD is the ultimate funding authority and will make the final award decisions. If you have any questions or concerns, please don't hesitate to contact me at 561-355-4779.

Kind regards,

Maria Bond

Maria Bond Homeless Program and Contract Manager



From: Maria Bond

Sent: Tuesday, September 12, 2023 11:11 AM

To: Jeff Demario

Cc: Dorla Leslie; Darlene Williamson; Wendy Tippett

Subject: CoC Program Competition Notification

Attachments: Final 2023 CoC Projects Accepted Rejected.pdf; Final 2023 CoC Projects Submitted.pdf;

2023 CoC Project Final Score and Ranking from Local Competition.pdf; Vita Nova

Program Competition Notification.pdf

Good morning Jeff,

We are pleased to notify you that the renewal/replacement applications submitted by Vita Nova have been recommended for full funding.

Please find attached, a formal notification summarizing the HHA recommendation of the project that were submitted. I have also included the final HHA approved ranking and tier listing of all projects, a list of all projects accepted or rejected and a listing of all HHA approved projects that will be a part of the HUD Collaborative Application.

You can also find these documents publicly listed at the link below:

https://discover.pbcgov.org/communityservices/humanservices/Pages/CoC-Grant-Apps.aspx.

If you have any questions, please feel free to contact me.

Kind regards,

Maria Bond Homeless Program and Contract Manager Division of Human Services 810 Datura St. 2nd Floor West Palm Beach, FL 33401 561-355-4779 mbond@pbcgov.org





September 12, 2023

Jeff DeMario Chief Executive Officer Vita Nova 2724 N Australian Avenue West Palm Beach, FL 33407

Dear Mr. DeMario,

Thank you for submitting new project applications in the 2023 Continuum of Care (CoC) Program Application process. This year there were 10 renewal project submissions that were ranked. The HHA ranked the HMIS Implementation project to be the highest in the Tier 1 ranking. Additionally, there were 6 YHDP renewal/replacement projects submitted that will be renewed noncompetitively and there is no requirement that they be ranked. Finally, there was 1 new expansion project and 4 new projects submitted that were ranked including submissions for the DV Bonus and CoC Bonus Project.

The CoC Non-Conflict Grant Review Committee representing various stakeholder groups in the community, worked diligently to thoroughly review all projects. After reviewing all submitted applications, the committee ranked the projects according to their scores and their priority listing. This letter is to inform you that while your two YHDP projects were not ranked, they were approved by the HHA for the full funding request and will be included in the Collaborative Application and submitted to HUD.

- Vita Nova Diversion Replacement, your YHDP PSH replacement project was recommended and approved for the renewal amount of \$190,604.00
- Vita Nova TH-RRH, your TH-RRH renewal project was recommended and approved for the renewal amount of \$554.494.00.

HUD is the ultimate funding authority and will make the final award decisions. If you have any questions or concerns, please don't hesitate to contact me at 561-355-4779.

Kind regards,

Maria Bond

Maria Bond



Palm Beach County

Good afternoon,

As a HUD requirement, the HHA is required to publicly post the FY 2023 HUD CoC Program Competition final results. Please find below:

CoC Projects Accepted/Rejected/Reduced Final 2023 CoC Projects Submitted The CoC Project Final Score and Ranking

CoC Projects Accepted/Rejected

Agency	Program	Arecard.	Arresport	Accepted/No	
Agency	Hagan	Requested	Recommended	justed	
Falm Seach County Human Services	Hill Implementation	5 281,539.00	\$ 280,330.00	Accepted	
The Lend's Place, Inc.	Operation Home Booky III	5 305,058.00	5 308,088.00	Accepted	
Tre Lend's Place, Inc.	Operation Home Bearly IV	5 331,802.03	5 330,993.08	Accepted	
Salbáream Gosturill Industries Inc.	New Avenues	5 978,412.00	5 974,412.00	Accepted	
Trail (critis) Place, Inc.	Home First	5 369,414.00	5 350,414.08	Accepted	
hildren's Case Management Organization, Inc. dbs Families First	Bridges to Success	5 730,513.00	5 738,915.00	Accepted	
Subtres/s Case Management Organization, Inc. disa Families First	Dairiges to Success	5 264,334.00		Reported	
Augs & Parenty of the Pater Beaches, Inc.	Project SAFE E	5 202,310.00	\$ 252,181.00	Accepted	
he Lond's Place; Inc.	Project Family Case	5 340,014.00	5 140,014.00	Avegind	
SCSD (City of W78)	Enforces to interpretations	3 482,317.00	8 482,117.00	Accepted	
dopt & Family of the Falm Seather, Inc.	Connecting Youth to Opport a	5 295,533.00			
he Lend's Place, Inc.	Operation Home Booky V	5 734,480.00	5 724,483.00	Accepted	
outhouse Rehavioral Houlds Seture 6	OFFINE PLA	\$ 1,000,000.00	5 900,650.00	Accepted	Reduced
MICK of Palm Beach Counts, Inc.	YWCA DV SAFChouse Rapid B	5 75AJ805.00	5 582,086.08	Accepted	Reduced
roseproed Feelthoans Syroenss	Consystiana	5 XHL464.00		Bearing	
NECK of Palm Beach County, Inc.	YWCA DV SAFChouse Rapid N	S 75AJB95.00	5 700,046.00	Accepted	Вестельно
A/G					

Final 2023 CoC Projects Submitted





FY 2023 HUD CoC Local Co... al Results

Sent September 12th 2023 at 5:34 pm EDT

Subject FY 2023 HHA CoC Local Program New and R...

Preheader Final Competition Results

From name PBC Homeless and Housing Alliance communityservices@pbcgov.org

Reply mbond@pbcgov.org

Lists HAB (Homeless Advisory Board), HHA Advisory

Counci... Show more

Email link https://conta.cc/3ECE1ZS

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Enter up to 5 email addresses

communityservices@pbcgov.org x

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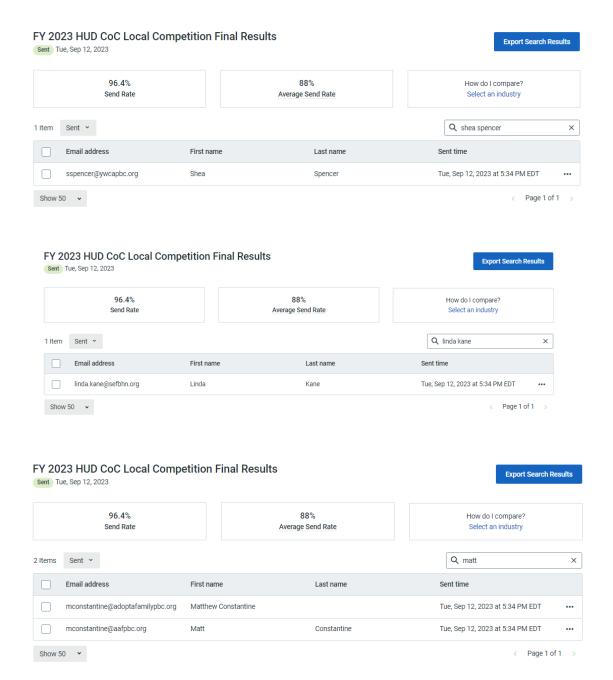
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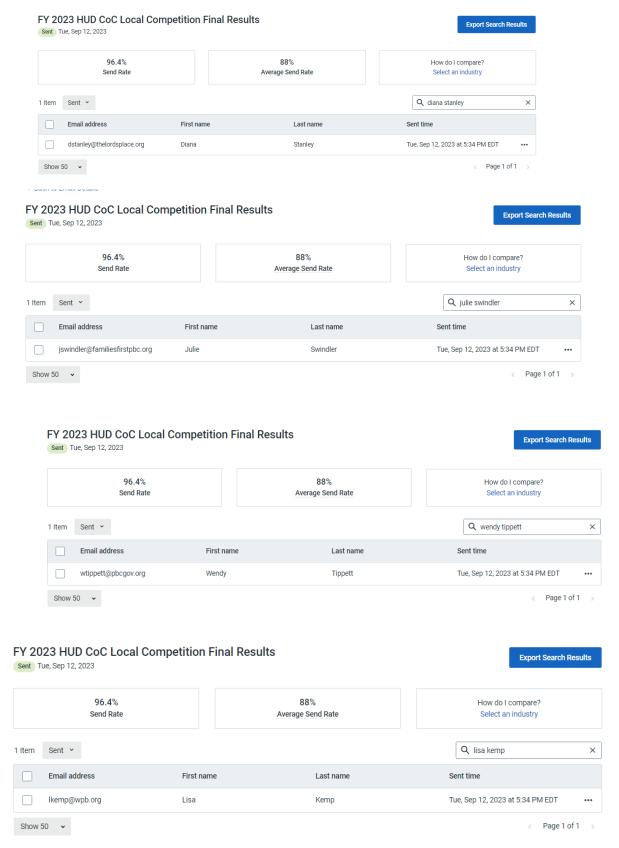
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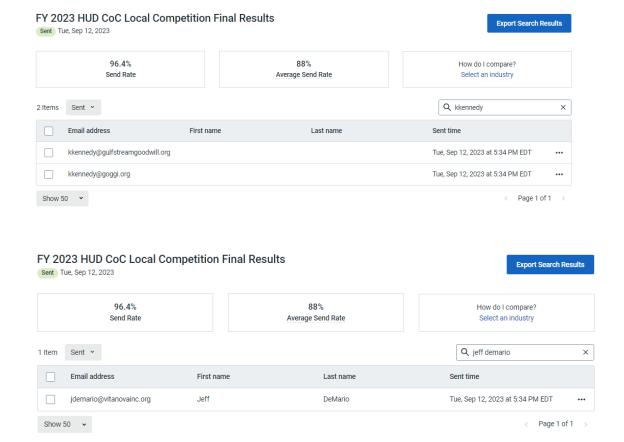














FY23 CoC Consolidated Application

Attachment: Final Project Scores for All Projects

Question 1E-5b

Cover Sheet

Final 2023 CoC Projects Submitted

Agency	Program	Rank	Score	Percentage	Possible Total	Туре	Priority	Dollar Requested	Allocated	Accepted/Rej ected	Funding Type	Tier
Palm Beach County Human Services	HMIS Implementation	1	N/A	N/A	N/A	HMIS	1	\$ 281,530.00	\$ 281,530.00	Accepted	Renewal	1
The Lord's Place, Inc.	Operation Home Ready III	2	163	92.09%	177	PSH	212	\$ 308,066.00	\$ 308,066.00	Accepted	Renewal	1
The Lord's Place, Inc.	Operation Home Ready IV	3	158	89.27%	177	PSH	212	\$ 331,992.00	\$ 331,992.00	Accepted	Renewal	1
Gulfstream Goodwill Industries Inc.	New Avenues	4	146	82.49%	177	PSH	212	\$ 974,412.00	\$ 974,412.00	Accepted	Renewal	1
The Lord's Place, Inc.	Home First	5	141	79.66%	177	PSH	212	\$ 363,414.00	\$ 363,414.00	Accepted	Renewal	1
Children's Case Management	Bridges to Success	6	169	95.48%	177	PSH	222	\$ 264,134.00	\$ 264,134.00	Accepted	Renewal	1
Adopt A Family of the Palm Beaches, Inc.	Project SAFE II	7	159	89.83%	177	PSH	2234	\$ 252,131.00	\$ 252,131.00	Accepted	Renewal	1
The Lord's Place, Inc.	Project Family Care	8	156	88.14%	177	PSH	222	\$ 340,014.00	\$ 340,014.00	Accepted	Renewal	1
PBCCSD (City of WPB)	Pathways to Independence	9	152	85.88%	177	RRH	2.212	\$ 482,117.00	\$ 482,117.00	Accepted	Renewal	1
Adopt A Family of the Palm Beaches, Inc.	Connecting Youth to Opportu	10	147	83.05%	177	RRH	2.224	\$ 295,573.00	\$ 295,573.00	Accepted	Renewal	1
									\$ 3,893,383.00			
Children's Case Management Organizatio	Bridges to Success	11	169	79.72%	212	PSH	222	\$ 475,785.00	\$ 475,785.00	Accepted	Reallocation	11
The Lord's Place, Inc.	Operation Home Ready V	12	179	84.43%	212	PSH	212	\$ 724,481.00	\$ 724,481.00	Accepted	Reallocation	1
Southeast Behavioral Health Network	SEFBHN PSH	13	148	69.81%	212	PSH	222	\$ 1,086,808.00	\$ 318,564.00	Accepted	Reallocation	1
									\$ 1,518,830.00			
Southeast Behavioral Health Network	SEFBHN PSH	13	148	70%	212	PSH	222	\$ 1,086,808.00	\$ 582,086.00	Accepted	New-Reduced CoC Bonus	Straddle 1/2
YWCA of Palm Beach County, Inc.	Persimmon	15	168	79%	212	RRH	2.223	\$754,895.00	\$582,086.00	Accepted	New Reduced CoC Bonus	2
									\$1,164,172.00			
Palm Beach County Human Services	CoC Planning Grant	N/A	N/A	N/A	N/A	Planning	N/A	\$ 415,776.00	\$ 415,776,00	Accepted	Planning-Non Compete	N/A
		•		,	,				\$ 415,776.00			1
Adopt A Family of the Palm Beaches, Inc.	YHDP-CYTO 2	N/A	N/A	N/A	N/A	RRH	N/A	\$ 298,593,00		Accepted	YHDP-Non Compete	N/A
Adopt A Family of the Palm Beaches, Inc.	YHDP-Youth Establishing Stabi	N/A	N/A	N/A	N/A	PSH	N/A	\$ 283,571.00	\$ 283,571.00	Accepted	YHDP-Non Compete	N/A
Gulfstream Goodwill Industries Inc.	Touchdown Fact Team	N/A	N/A	N/A	N/A	SSO	N/A	\$ 364,992,00	\$ 364,992,00	Accepted	YHDP-Non Compete	N/A
Gulfstream Goodwill Industries Inc.	Homerun 2 PSH YHDP	N/A	N/A	N/A	N/A	PSH	N/A	\$ 628,968.00	\$ 628,968.00	Accepted	YHDP-Non Compete	N/A
Vita Nova Village, LLC	Vita Nova Diversion Replacem	N/A	N/A	N/A	N/A	SSO	N/A	\$ 190,604.00	\$ 190,604.00	Accepted	YHDP-Non Compete Replacer	
Vita Nova Village, LLC	Vita Nova TH-RRH	N/A	N/A	N/A	N/A	TH-RRH	N/A	\$ 554.494.00	\$ 554,494.00	Accepted	YHDP-Non-Compete	N/A
Vita 140Va Village, EEC	VICE IVOVE III KKIII	IN/A	IN/A	IN/ A	IN/A	TTI-IXIXIT	IN/A	\$ 554,454.00	\$ 2,321,222.00	Accepted	mbr-Non-compete	IN/A
YWCA of Palm Beach County, Inc.	YWCA DV SAFEhouse Rapid Re-Housing	14	168	79%	212	RRH	\$2.22	\$754,895.00	\$780,846.00	Accepted	New DV Bonus	N/A
									\$780,846.00			
Annual Renewal Demand	\$ 8,315,521.00								\$3,893,383.00	Tier 1 Renewal		
Tier 1 Renewal/Reallocation	\$ 5,412,213.00								\$1,518,830.00	Tier 1 Realloca	tion - BTS	
Tier 2	\$ 582,086.00								\$582,086.00	Straddle 1/2		
Total (Tier 1 + Tier 2)	\$ 5,994,299.00								\$582,086.00			
YHDP Renewal/Replacement	\$ 2,321,222.00								\$ 415,776.00	Planning		
CoC Bonus	\$ 582,086.00								\$ 2,321,222.00	YHDP		
DV Bonus	\$ 780,846.00								\$780,846.00	DV Bonus		
Planning	\$ 415,776.00								\$10,875,075.00			
,	\$ 10,094,229.00		 	-		1		1				+

YHDP Projects are non-competitive and therefore not ranked per the FY 2023
CoC NOFO Straddle indicates project is partially funded using available Reallocation Funds and CoC Bonus Funds



FY23 CoC Consolidated Application

Attachment: FY 2023 HDX Competition Report

Question 2A-6

Cover Sheet

HDX Competition Report

PIT Count Data for FL-605 - West Palm Beach/Palm Beach County CoC

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	1510	1488	1404	1855
Emergency Shelter Total	361	343	410	563
Safe Haven Total	0	0	0	0
Transitional Housing Total	119	115	116	123
Total Sheltered Count	480	458	526	686
Total Unsheltered Count	1030	1030	878	1169

Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	241	281	248	237
Sheltered Count of Chronically Homeless Persons	21	61	58	25
Unsheltered Count of Chronically Homeless Persons	220	220	190	212

PIT Count Data for FL-605 - West Palm Beach/Palm Beach County CoC

Homeless Households with Children PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	81	78	96	120
Sheltered Count of Homeless Households with Children	78	75	87	112
Unsheltered Count of Homeless Households with Children	3	3	9	8

Homeless Veteran PIT Counts

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	181	100	102	102	139
Sheltered Count of Homeless Veterans	71	35	37	41	56
Unsheltered Count of Homeless Veterans	110	65	65	61	83

^{*}For CoCs that did not conduct an unsheltered count in 2021, 2020 data were used.

HIC Data for FL-605 - West Palm Beach/Palm Beach County CoC

HMIS Bed Coverage Rates

Project Type	Total Year- Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year- Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year- Round Beds	Total Year- Round, Current VSP Beds in an HMIS Comparable Database	Total Year- Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	693	546	575	94.96%	118	118	100.00%	664	95.82%
SH Beds	0	0	0	NA	0	0	NA	0	NA
TH Beds	178	146	146	100.00%	32	32	100.00%	178	100.00%
RRH Beds	635	585	585	100.00%	50	50	100.00%	635	100.00%
PSH Beds	1,315	1,315	1,315	100.00%	0	0	NA	1,315	100.00%
OPH Beds	116	116	116	100.00%	0	0	NA	116	100.00%
Total Beds	2,937	2,708	2,737	98.94%	200	200	100.00%	2,908	99.01%

HIC Data for FL-605 - West Palm Beach/Palm Beach County CoC

HIC Data for FL-605 - West Palm Beach/Palm Beach County CoC

Notes

In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds").

In the HIC, Current beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	503	475	509	506

Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	136	109	104	135

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	588	666	420	635

^{*}For OPH Beds, this does NOT include any beds that are Current, Non-VSP, Non-HMIS, and EHV-funded.

^{**}For OPH Beds, this does NOT include any beds that are Current, VSP, Non-HMIS, and EHV-funded.

HIC Data for FL-605 - West Palm Beach/Palm Beach County CoC

FY2022 - Performance Measurement Module (Sys PM)

Summary Report for FL-605 - West Palm Beach/Palm Beach County CoC

Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects. Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

	Universe (Persons)			Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference	
1.1 Persons in ES and SH	1905	2257	70	74	4	66	64	-2	
1.2 Persons in ES, SH, and TH	2139	2533	88	90	2	72	71	-1	

b. Due to changes in DS Element 3.17, metrics for measure (b) will not be reported in 2016.

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer to the client's entry date effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

FY2022 - Performance Measurement Module (Sys PM)

		Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference	
1.1 Persons in ES, SH, and PH (prior to "housing move in")	2197	2529	442	394	-48	177	182	5	
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	2415	2788	432	390	-42	182	184	2	

FY2022 - Performance Measurement Module (Sys PM)

Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons who Exited to a Permanent Housing	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
	Destination (2 Years Prior)	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	126	17	13%	4	3%	11	9%	32	25%
Exit was from ES	693	25	4%	37	5%	63	9%	125	18%
Exit was from TH	75	5	7%	3	4%	4	5%	12	16%
Exit was from SH	0	0		0		0		0	
Exit was from PH	850	44	5%	37	4%	60	7%	141	17%
TOTAL Returns to Homelessness	1744	91	5%	81	5%	138	8%	310	18%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

FY2022 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons		1404	
Emergency Shelter Total	343	410	67
Safe Haven Total	0	0	0
Transitional Housing Total	115	116	1
Total Sheltered Count	458	526	68
Unsheltered Count		878	

Metric 3.2 - Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

	Submitted FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	2181	2613	432
Emergency Shelter Total	1947	2337	390
Safe Haven Total		0	
Transitional Housing Total	266	342	76

FY2022 - Performance Measurement Module (Sys PM)

Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	165	217	52
Number of adults with increased earned income	15	28	13
Percentage of adults who increased earned income	9%	13%	4%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	165	217	52
Number of adults with increased non-employment cash income	64	55	-9
Percentage of adults who increased non-employment cash income	39%	25%	-14%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	165	217	52
Number of adults with increased total income	73	79	6
Percentage of adults who increased total income	44%	36%	-8%

FY2022 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	120	116	-4
Number of adults who exited with increased earned income	31	33	2
Percentage of adults who increased earned income	26%	28%	2%

Metric 4.5 – Change in non-employment cash income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	120	116	-4
Number of adults who exited with increased non-employment cash income	45	29	-16
Percentage of adults who increased non-employment cash income	38%	25%	-13%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	120	116	-4
Number of adults who exited with increased total income	62	53	-9
Percentage of adults who increased total income	52%	46%	-6%

FY2022 - Performance Measurement Module (Sys PM)

Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	1881	2237	356
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	377	611	234
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	1504	1626	122

Metric 5.2 - Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	2524	2755	231
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	633	786	153
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	1891	1969	78

FY2022 - Performance Measurement Module (Sys PM)

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in FY2022 (Oct 1, 2021 - Sept 30, 2022) reporting period.

Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	1577	1627	50
Of persons above, those who exited to temporary & some institutional destinations	410	546	136
Of the persons above, those who exited to permanent housing destinations	169	174	5
% Successful exits	37%	44%	7%

Metric 7b.1 – Change in exits to permanent housing destinations

FY2022 - Performance Measurement Module (Sys PM)

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	1611	2010	399
Of the persons above, those who exited to permanent housing destinations	913	1095	182
% Successful exits	57%	54%	-3%

Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	1167	1128	-39
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	1126	1095	-31
% Successful exits/retention	96%	97%	1%

FY2022 - SysPM Data Quality

FL-605 - West Palm Beach/Palm Beach County CoC

	All ES, SH			All TH All PSH, OPH All I		All TH			All RRH		All S	treet Outi	each		
	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022
1. Number of non- DV Beds on HIC	287	408	455	98	113	130	1220	1313	1388	540	638	378			
2. Number of HMIS Beds	287	408	455	98	113	130	1220	1313	1388	540	638	378			
3. HMIS Participation Rate from HIC (%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00			
4. Unduplicated Persons Served (HMIS)	1432	1930	2337	209	258	350	1310	1444	1459	1594	1732	1750	553	959	1555
5. Total Leavers (HMIS)	1152	1592	1899	114	152	217	351	345	284	834	934	1040	416	848	1359
6. Destination of Don't Know, Refused, or Missing (HMIS)	74	79	91	8	13	15	22	22	15	20	66	107	140	447	460
7. Destination Error Rate (%)	6.42	4.96	4.79	7.02	8.55	6.91	6.27	6.38	5.28	2.40	7.07	10.29	33.65	52.71	33.85

FY2022 - SysPM Data Quality

Submission and Count Dates for FL-605 - West Palm Beach/Palm Beach County CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2023 PIT Count	1/26/2023	

Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/10/2023	Yes
2023 HIC Count Submittal Date	4/13/2023	Yes
2022 System PM Submittal Date	2/28/2023	Yes



FY23 CoC Consolidated Application Attachment: Healthcare Formal Agreements Question 3A-2

Cover Sheet

Drug Abuse Foundation

South County Mental Health

Transpire Help

Ebb Tide

Rebel Recovery

The Recovery Research Network Foundation

Wayside House

Alternatives in Treatment



DRUG ABUSE FOUNDATION OF PALM BEACH COUNTY INC

OFFICERS

September 14, 2023

Leo H. Phillips Board Chairman

Ann Berner

Daniel Gewartowski, DDS Vice Chairman CEO/Southeast Florida Behavioral Health Network

1070 E. Indiantown Road, Suite 408

Jupiter, Florida 33477

George M. Allerton Secretary/Treasurer

Dear Ms. Berner;

DIRECTORS

William J. Wood

Lorenzo Brooks

Joseph P. Moore

Lawrence Eaton

John W. Weekes

Nancy Owens

Robert Kelly

LIFE DIRECTORS

Richard Siemens Life Director

Leon Weekes Director Emeritus Drug Abuse Foundation of Palm Beach County, Inc. commits to providing substance

use services, and recovery support services to participants in Southeast Florida Behavioral Health Network's new Permanent Supportive Housing project starting in

2024.

We will utilize funding from our annual contract of \$6,357,830.00 with SEFBHN to participants who qualify and choose to receive behavioral health services. Drug Abuse

Foundation of Palm Beach County, Inc. services include Medication Assisted
Treatment, Detox, Medical Services, Residential treatment, Outpatient, Case

Management, Care Coordination, Crisis Stabilization, Peer Support services and HIV

Early Intervention Services. Specialty programs include treatment for Pregnant women,

Mothers and Babies.

Eligibility for program participants in SEFBHN's Permanent Supportive Housing Program will be based on CoC Program fair housing requirements and will not be

restricted by the health care service provider.

Respectfully

Drug Abuse Foundation of Palm Beach County, Inc.



Alton Taylor, M.Ed

President/**E**O



A Private Not-for-Profit Organization Serving South Palm Beach County Since 1974

Name of project: SEFBHN Permanent Supportive Housing Program

South County Mental Health Center commits to providing *mental health services and recovery support* services to participants in Southeast Florida Behavioral Health Network's new Permanent Supportive Housing project starting in 2024.

We will utilize funding from our annual contract of \$14,000,000.00 with Southeast Florida Behavioral Health Network for participants in the above-named project who choose to receive behavioral health services. South County Mental Health Center's services include, Crisis Stabilization, Inpatient services, Short-Term Residential, Psychiatric services, Medication management, Outpatient, PHP/Day Treatment, Care Coordination, Peer Support, Wraparound and Targeted Case management. Specialty programs and teams include First Episode Psychosis/NAVIGATE, and Mobile Response Teams.

Eligibility for program participants in **SEFBHN's Permanent Supportive Housing Program** will be based on CoC Program fare housing requirements and will not be restricted by the health care service provider.

guth County Mental Health Center

16158 South Military Trail Delray Beach, FL 33484 9/14/2023

Date



4B. Attachments - Healthcare Formal Agreement

(Must be on letterhead of entity providing written commitment of funded services)

Name of project: SEFBHN Permanent Supportive Housing Program

Transpire Help commits to providing substance use services, to participants in Southeast Florida Behavioral Health Network's new Permanent Supportive Housing project starting in 2024.

We will utilize funding from our annual contract of \$600,000.01 with SEFBHN to participants who qualify and choose to receive behavioral health services. Transpire Help services include Assessment, Case Management, Day Treatment, Medical Services, Medication Assisted Treatment, Outpatient-Individual, Outpatient Group, Outreach, Incidental Expenses, Room and Board with Supervision Level II, Recovery Support-Individual and Recovery Support - Group. Specialty programs include treatment for the LGBTQIA community.

Eligibility for program participants in SEFBHN's Permanent Supportive Housing Program will be based on CoC Program fair housing requirements and will not be restricted by the health care service provider.

Donna Weinberger, CEO Transpire Help, Inc. 909 North Dixie Highway

West Palm Beach, FL 33401

Date

9/14/2023



September 14, 2023 SEFBHN Permanent Supportive Housing Program

Ebb Tide Treatment Center LLC commits to providing substance use services to participants in Southeast Florida Behavioral Health Network's new Permanent Supportive Housing project starting in 2024.

We will utilize funding from our annual contract of \$737,468.00 with SEFBHN to participants who qualify and choose to receive behavioral health services. Ebb Tide Treatment Center LLC services include Medication Assisted Treatment, Medical Services Room and Board with Supervision Level III, Outpatient, Day Treatment, and Case Management.

Eligibility for program participants in SEFBHN's Permanent Supportive Housing Program will be based on CoC Program fair housing requirements and will not be restricted by the health care service provider.

Tina DePaolis
Tina DePaolis, Executive/Clinical Director
Date

Ebb Tide Treatment Centers 400 Executive Center Drive, #209 West Palm Beach, FL 33401 Rebel Recovery Florida 400 N Congress Ave Ste130 West Palm Beach Fl 33401 (561) 508-8388



September 14, 2023

Name of project: SEFBHN Permanent Supportive Housing Program

Rebel Recovery Florida Inc. commits to providing *substance use services and/or recovery support services* to participants in Southeast Florida Behavioral Health Network's new Permanent Supportive Housing project starting in 2024.

We will utilize funding from our annual contract of \$1,567,685 with SEFBHN to participants who qualify and choose to receive behavioral health services. Rebel Recovery Florida Inc.'s services include Case Management, Care Coordination, and Peer Support services. Specialty programs include Recovery Community Center, Jail Program, Early Childhood Court, Family Treatment Court, COSSAP Program, Rapid Re-Housing Program, and Criminal Justice Commission Next Steps Program.

Eligibility for program participants in **SEFBHN's Permanent Supportive Housing Program** will be based on CoC Program fair housing requirements and will not be restricted by the health care service provider.

Georganne Dorney, Chief Financial Officer

Rebel Recovery Florida, Inc.

400 N. Congress Ave.

Suite 130

West Palm Beach, FL 33401

9/14/2023

Date



4B. Attachments – Healthcare Formal Agreement

Name of project: SEFBHN Permanent Supportive Housing Program

The Recovery Research Network Foundation commits to providing substance use services, mental health services and recovery support services to participants in Southeast Florida Behavioral Health Network's new Permanent Supportive Housing project starting in 2024.

We will utilize funding from our annual contract of \$3,096,011 with SEFBHN to participants who qualify and choose to receive behavioral health services. The Recovery Research Network Foundation services include Medication Assisted Treatment, Outpatient, Case Management, Psychiatric services, Peer Support services, Supported Employment and HIV services. Specialty programs include The Medication Assisted and Peer Support (MAPS) Jail Bridge program and Substance Use Disorder Call Line Assessments (SACC). SEFBHN also funds specialty team, the Forensic Multidisciplinary.

Eligibility for program participants in SEFBHN's Permanent Supportive Housing Program will be based on CoC Program fair housing requirements and will not be restricted by the health care service provider.

Lia Bigelow, Executive Officer The Recovery Research Network

110 John F Kennedy Dr. Suite 118

Atlantis, FL 33462

09/14/2023 Date



Board of Directors

September 14, 2023

To Whom It May Concern:

Kathryn I. Leonard, President

Amanda Johnson Vice President

> Jim Seaborg, Treasurer

Christopher Finley, Esq. At Large

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Lisa Hayes Jankowski

Whitney Jones

Alexandra McCall

Elizabeth Potts

Jessica Wolfe

Name of project: SEFBHN Permanent Supportive Housing Program

Wayside House commits to providing *substance use services, and/or* recovery support services to participants in Southeast Florida Behavioral Health Network's new Permanent Supportive Housing project starting in 2024.

We will utilize funding from our annual contract of \$1,466,088 with SEFBHN to participants who qualify and choose to receive behavioral health services. Wayside House's services include assessment, Medication Assisted Treatment, Residential treatment, Outpatient, Intensive Outpatient, Day Treatment, Case Management, Intervention, Medical Services, and Peer Support services. Specialty programs include treatment for women 18 years of age and older and pregnant women.

Eligibility for program participants in **SEFBHN's Permanent Supportive Housing Program** will be based on CoC Program fair housing requirements and will not be restricted by the health care service provider.

Sincerely,

Lisa G. McWhorter, MS. Chief Executive Officer

Sim & mewhorter

George S. McElroy Jr., Immediate Past President

> Perry O'Neal President Emeritus

> Phyllis A. Callaway Director Emeritus

Dr. Susan B. Anthony Co-Founder

Phyllis Michelfelder Co-Founder

Lisa McWhorter, MS, MCAP Chief Executive Officer

378 N.E. Sixth Ave. Delray Beach, Florida 33483 P: 561-278-0055 waysidehouse.net info@waysidehouse.net Contributions benefit Wayside House, Inc. a not for profit tax exempt organization that is incorporated in the State of Florida and operates under Section 501 (C) (3) of the internal revenue code. Your contribution is tax-deductible to the extent allowed by law. No goods or services have been provided in exchange for your financial donation.









4B. Attachments - Healthcare Formal Agreement

(Must be on letterhead of entity providing written commitment of funded services)

Name of project: SEFBHN Permanent Supportive Housing Program

Alternatives in Treatment dba/ Mandala Healing Center commits to providing substance use service and mental health services to participants in Southeast Florida Behavioral Health Network's new Permanent Supportive Housing project starting in 2024.

We will utilize funding from our annual contract of \$5,760,829.00 with SEFBHN to participants who qualify and choose to receive behavioral health services. Alternatives in Treatment dba/ Mandala Healing Center's services include Medication Assisted Treatment, Detox and Residential treatment.

Eligibility for program participants in SEFBHN's Permanent Supportive Housing Program will be based on CoC Program fair housing requirements and will not be restricted by the health care service provider.

Alexis Altier, Chief Executive Officer

9/14/2023

Date

Alternatives in Treatment dba/Mandala Healing Center 5410 East Avenue

West Palm Beach, FL 33407