Before Starting the CoC Application

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

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

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

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

Your CoC Must Approve the Consolidated Application before You Submit It

- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2021 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

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

Attachments

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

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

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

desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition

- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

- 24 CFR part 578

1A-1. CoC Name and Number: GA-505 - Columbus-Muscogee/Russell County

CoC

1A-2. Collaborative Applicant Name: United Way of the Chattahoochee Valley

1A-3. CoC Designation: CA

1A-4. HMIS Lead: United Way of the Chattahoochee Valley

1B. Coordination and Engagement–Inclusive Structure and Participation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
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- 24 CFK part 578

1B-1.	Inclusive Structure and Participation-Participation in Coordinated Entry.
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.n., and VII.B.1.p.
	In the chart below for the period from May 1, 2020 to April 30, 2021:
1.	In the chart below for the period from May 1, 2020 to April 30, 2021: 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

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

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

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

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

(limit 2,000 characters)

1)CoC communicates the opportunity to join on a continual basis. CoC events & calendars are posted on the websites of the CoC, United Way of CV, and City of Columbus, sent via email blast & on social media outlets. The COC HAS A MINIMUM OF 2 MEMBERSHIP DRIVES PER YEAR. The drives are widely publicized using aforementioned & are held at a centrally located venue accessible to all (incl bus routes). INCENTIVES TO JOIN THE COC, such as free HMIS services, etc. are offered to entice attendance. Additionally, those who are determined to have assisted or provided services to the homeless population, as determined by client intakes, all are PERSONALLY INVITED TO JOIN THE COC. The Committees of the CoC has QUARTERLY EVENTS (Job/resource Fairs, SOAR Training, etc.), incl participating and non-participating organizations W/ AN INVITATION TO JOIN EXTENDED TO ORGANIZAITONS AND EVENT PARTICIPANTS. At least quarterly, CoC lead addresses Civic/Professional organizations to encourage CoC participation & membership.

2)CoC communicates via email with docs that can be read with assisted technology & the CoC offers interpretation or disability services upon request

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(i.e., ASL or large text versions of docs). Info from handouts presented orally as well as visually & the CoC website is reviewed against Website Content Accessibility Guidelines (WCAG).

3)Homeless/formerly homeless are invited at least quarterly to attend centrally located, accessible committee meetings and provide feedback. If needed, transportation is provided by service providers. CoC funded agencies are required to have homeless serve on their board.

4) CoC conducts a hybrid annual membership drive in a centrally located area targeting organizations in culturally specific communities to promote participation and equitable access. Equity Gap Analysis was performed by an independent firm to address any communication barriers and solutions to make sure everyone has the same opportunity to join and have input.

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

3. took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

(limit 2,000 characters)

information; and

- 1)We solicit and consider opinions at CoC meetings, CoC Chair meetings, outreach events, SSVF Community Planning meetings, Hospital Association meetings, Home for Good Board meetings, Landlord Meetings, Monthly Homeless Coalition meetings, United Way Meetings, Service provider Board meetings, through the CoC website, Homeless Resource Network meetings and social media, as well as client level surveys.
- 2)CoC meetings are open forums/discussions to solicit, consider and address new opinions. We conduct exercises on topics such as CES, HMIS, Housing First, SPM, underserved populations, protected classes, fair & equal opportunity housing, racial equity, and local GAPS analysis. (attached)
- 3)At these meetings we compile/consider all opinions to better evaluate and develop new strategies and action plans to prevent and end homelessness. CoC grantees and HMIS enrolled agencies conduct exit interviews soliciting ideas from program participants. The CoC Board of Directors receive the input/feedback from the Committee Chairs on a quarterly basis & directly from attendees in the meetings, consider it and use it to formulate policy and new initiatives. Based on feedback shared in open, public mtgs about gaps and needs w/in the CoC, Ad Hoc Committees for key subpopulations were formed for women/children, Landlord Engagement, survivors of DV, human trafficking, loss of employment and housing due to Covid-19, loss of housing due to mental illness/substance abuse. As a result, Landlord's have become more engaged in a proactive to tenant/landlord/provider approach meeting housing and other needs for members of our community. Furthermore, case management best practices portocal have become the nor rather than the exception.

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

(limit 2,000 characters)

- 1.CoC announced 2021 NOFO via CoC Website Cities' Websites, United Way Website, Email Listserv 8/18/2021 (>104 mostly non-CoC funded) & social media 8/19/2021. The listserv includes individuals/organizations/unfunded agencies.
- 2.All interested parties were invited to attend 9-7-21 Bidders' Conference to receive information on funding availability for grantees and non-grantees, i.e., organizations that have never received funding before, and the application process. INCREASE in-person and virtual attendance indicates invite was widespread.
- 3.CoC Announced on 8/27/2021 via email, posted 8/27/2021 on website w/ invite to Bidders Conference on 9/7/2021 explaining the application process. Documents containing, a Local CoC Competition timeline, explanation of CoC, competitions, funding availability, how to apply, priorities, scoring, appeals, cert of consistency, financial docs required, and project application FAQs. were distributed via in person, email and website posting.
- 4.The CoC uses an approved, published Review and Rank process for all project applicant(s) (New/Renewal). This process was clearly explained and publicly posted date. The review and rank process in no way gives preference to renewal vs new applicants. Renewal project scoring focused on project performance (HSG outcomes, services, utilization), alignment with HUD/local priorities (HF/CH priority). One NEW project applied, and is included in the 2021 Competitive Application. The application is a DV BONUS applicant. 5.All meeting sites are ADA accessible; interpretation or disability services are available upon request to participate in meetings (e.g., sign language interpretation, large text versions of handouts), meeting materials are presented in advance, information on handouts is presented orally as well as visually, the CoC website is reviewed against Website Content Accessibility Guidelines (WCAG).

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition

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- 24 CFŘ part 578

1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section VII.B.1.b.	
	In the chart below:	

1. select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or

2. select Nonexistent if the organization does not exist within your CoC's geographic area.

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

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

(limit 2,000 characters)

- 1.CoC is not an entitlement jurisdiction for ESG. The CoC coordinates with both states, Alabama and Georgia for approval/coordination of ESG awards. The CoC in both states leads/coordinates closely with their work & that of local ESG projects. States require local providers operating in local jurisdictions to coordinate with the CoC re: application opportunities, funding, performance & local CoC priorities. CoC Priority Feedback and provider participation in local CoC was provided to Dept Community Affairs ESG for consideration in ESG funding decisions. Moreover, the CoC lead served as the ESG CV regional contact for evaluation of needs of those experiencing or at risk of homelessness as a result of COVID 19.
- 2.The CoC's Performance and Outcomes Committee measures all HMIS participating programs including CoC & ESG, using System Performance Measures quarterly, while the CoC's HMIS committee measures data quality of all HMIS participating programs, including CoC & ESG, monthly. HMIS data driven analysis allows for equitable and fair analysis of program performance and quality based on quantifiable data.
- 3.Both Muscogee and Russell Counties Consolidated Plan jurisdictions involve CoC in review of Consolidated Plans. The CoC provided all PIT & HIC data to both the states & local jurisdictions (Muscogee/Russell).
- 4. The CoC also provided data from the CoC HMIS (occupancy rates, bed counts/length of stay) to Consolidated Plan liaisons for Muscogee/Russell for updated Consolidated Plans.

1C-3.	Ensuring Families are not Separated.	
	NOFO Section VII.B.1.c.	
		_
	Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate family members regardless of each family member's self-reported gender:	

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

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3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
	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
	Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers.	Yes
6.	Other. (limit 150 characters)	

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

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

(limit 2,000 characters)

1&3. The McKinney Vento Department of the Muscogee County School District and Governmental Program Department of the Russell County School District (covering entire geographical area of the CoC) are active members of the CoC membership Youth and LEA regularly attend monthly Housing Navigation Meetings and the CoC is invited to present at and attend meetings hosted by Youth and LEA providers to insure that while the Youth and LEA programs are meeting the educational needs of families and youth they know how to connect the youth and families with CoC for permanent housing. 2&4&5&6 The CoC has a formal MOU with Enrichment Services, Muscogee County School District and Liaison to ensure programs provide homeless children with prioritized access, services in their current location & flexibility on enrollment requirements. The McKinney Vento Department of the Muscogee County School District and Governmental Program Department of the Russell County School District have liaisons in place to work with service providers to ensure that every homeless child and youth has access to the same free, appropriate public education provided to other children and youths consistent with the McKinney-Vento Act. Enrichment Services Head Start regularly participates in Housing Navigation Monthly meetings in order to fully inform case managers of rules, changes and available services for youth educational opportunities. The CoC requires all current & new CoC projects to appoint a staff person to act as the point of contact & coordinate education services. The role includes connecting w/school district liaison upon student enrollment, referring children to early head start & 4K programs, encouraging home visit evaluation for younger kids, ensuring families have access to literacy resources & mentoring programs, ensuring families are aware of their education rights & opportunities available to them. Designated staff ensure that an MOU is in place to formalize the partnership between the agency & school district.

1C-4a. CoC Collaboration Related to Children and Youth-Education Families Experiencing Homelessness about Eligibility.	and	
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NOFO Section VII.B.1.d.

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

(limit 2,000 characters)

The Columbus-Muscogee / Russell County Continuum of Care (CoC) has had a well developed Overarching Continuum of Care Policies & Written Standards process since Sept 2017. This sets the standards for providing assistance using McKinney- Vento Homeless Assistance funds. Included is the Emergency Solutions Grant (ESG) program, and programs funded through the CoC. Funded recipients and sub-recipients shall comply with the minimum written standards for providing assistance as established by the CoC. Recipients and sub-recipients may decide (and are encouraged to do so) to set standards that exceed these minimum standards.

1.Educational Assurances

CoC expects providers to collaborate with local education authorities to assist in the identification of individuals and families who become or remain homeless and these families should be informed of the eligibility for services. This includes collaborating with early childhood programs or school districts to determine available options.

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

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

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

You must select a response for elements 1 through 9 in question 1C-4b.

1C-5. Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors-Annual		
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Training-Best Practices.

NOFO Section VII.B.1.e.

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

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

(limit 2,000 characters)

(1) Training occurs at least annually for all Community Service Providers, 211 Operators, Coordinated Entry Staff and membership of the CoC to ensure best practices are adhered to for those surviving or fleeing domestic violence. The 2019 training covered Emergency Transfer Plan for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking and best practices for serving victims of DV on August 8, 2019. (2)The CoC lead (Coordinated Entry Lead) led the training for the CoC membership and community providers on August 8, 2019. Prior to the training date, all instructional material was reviewed by and approved by Victim Service Provider. To ensure safety and Confidentiality, Coordinated Entry System contact by Domestic Violence victims are routed to Victim Service Providers. Clients are made aware of services and/or housing that are available from both Victim Service Providers and non-Victim Service Providers. Client Choice is always honored. For all providers, any disclosure of DV status and sharing of client data requires informed client consent.

1C-5a. Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors-Using De-identified Aggregate Data.

NOFO Section VII.B.1.e.

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

(limit 2,000 characters)

The CoC works directly with the local Domestic Violence providers to assess the scope of community needs related to domestic violence, dating violence, sexual assault, and stalking. Through the assessment of aggregate data, we are keenly aware that those seeking assistance for needs related domestic violence, dating violence, sexual assault, and stalking are increasing in the local area. Data pulled from the HMIS DV Comparable database, shows an increased need for housing/services for DV victims in the Muscogee/Russell counties area. The info from the Comparable database provides the local DV program with the numbers of victims that were turned away because of lack of shelter and number of victims requesting services. One of the most requested service for DV victims is to find safe affordable housing. The information from the Comparable database is pulled monthly and used to evaluate the effectiveness of the DV program and if/when additional funding is needed for housing of DV victims. DV victims have a better chance at moving forward to a life free from violence w the assistance of a RRH program. The RRH program

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removes barriers and allows the victim time to get on their feet to become self-sufficient. From the Georgia Commission on Family Violence 2018 Fatality Review and the numbers reported from the Columbus Police Department. The CoC used the following data to assess the Domestic Violence need in the Muscogee County area: in 2017- 5 DV related deaths; in 2018- 6 DV related deaths and in 2019-6 DV related deaths. In 2020 & 2021-5 DV related deaths. Muscogee County is ranked 2nd outside of Metro Atlanta in DV related deaths.

In 2020 the local DV shelter provided 405 women and children with emergency shelter, 1,412 victims received support services and legal advocacy through the outreach program and 2,054 victims called the local crisis line. Since the beginning of 2021, the local DV shelter has provided 256 women and children with emergency shelter.

1C-5b.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Coordinated Assessment–Safety, Planning, and Confidentiality Protocols.	
	NOFO Section VII.B.1.e.	
		-
	Describe in the field below how your CoC's coordinated entry system protocols incorporate trauma- informed, victim-centered approaches while maximizing client choice for housing and services that:	
1.	prioritize safety;	
2.	use emergency transfer plan; and	
3.	ensure confidentiality.]

(limit 2,000 characters)

CoC's CE P&P were developed in consultation w/ VSPs to prioritize client safety, using a confidential process to ensure survivor's name known only to assessing VSP. VSP & Non-VSP access point staff are trained in trauma informed care, victim-centered services, safety planning to address immediate safety needs, administering the CE assessment/confidential by-name list, privacy & confidentiality.

All victims of domestic violence are immediately informed of Domestic Violence dedicated providers and shelter to serve any immediate safety concerns.

(1)CoC coordinates housing services with shelters to ensure safe options and CHOICE for victims. CoC collaborates with AdHoC Domestic Violence committee, Victim Service Providers and local law enforcement to address any issues regarding safe transfer of victims. Clients are made aware of services and/or housing that are available from both VSP and non-VSP providers. Client CHOICE is always honored.

(2)All Victim Service Providers and CoC projects are Low Barrier Housing projects with wrap around services to include access to Mental Health services and Child Care services. CoC has adopted Violence Against Women Reauthorization Act of 2013: Implementation in HUD Housing Program. This includes the Violence Against Women Reauthorization- Emergency Transfer Plan (ETP) for Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking. The ETP addresses trauma -informed care and victim – centered services such as: confidentiality, timing, availability, safety, security, trustworthiness, choice, empowerment and collaboration. All of these areas are

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taken into consideration when dealing with DV victims. This plan was developed along side CoC VSP board member and local VSPs.

3)For all providers, any disclosure of Domestic Violence status to a referral agency requires informed consent.

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

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

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

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

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2020 who were experiencing homelessness at entry	General or Limited	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Housing Authority of Columbus Georgia		Yes-HCV	Yes
Phenix City Housing Authority		Yes-HCV	No

You must enter information for at least 1 row in question 1C-7.

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.
	NOFO Section VII.B.1.g.
	Describe in the field below:
1.	steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference–if your CoC only has one PHA within its geographic area, you may respond for the one; or
2.	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

(limit 2,000 characters)

ALL PHAS IN THE COC'S GEOGRAPHIC AREA HAVE A HOMELESS

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ADMISSION PREFERENCE.(1) The CoC has a long history of coordinating with the PHA's which includes the adoption of a Homeless Admission Preference within its Administrative Plan, set-aside HCV vouchers and utilization of the CE for all homeless project based housing projects. The preference includes applicants who experience homelessness, displacement or are at risk of homelessness or displacement. Executive Directors from all PHAs in the CoC's geographic area serve in CoC leadership positions. PHA staff members serve as members of CoC Committees to include Mainstream and Outreach, Housing Navigators and Performance and Outcomes. CoC staff meets with one PHA monthly re HCV. PHAs collaboration with CoC has and continues to solidify community wide response to homelessness.

1C-7b.	Moving	g On Strategy with Affordable Housing Providers.		
	Not Sc	ored–For Information Only		
	Select your re	yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that ecipients use to move program participants to other subsidized housing:		
	1.	Multifamily assisted housing owners		No
	2.	РНА		Yes
	3.	Low Income Tax Credit (LIHTC) developments		Yes
	4.	Local low-income housing programs		Yes
		Other (limit 150 characters)		
	5.			
1C-7c.	Includi	ng PHA-Funded Units in Your CoC's Coordinated Entry System.		
	NOFO	Section VII.B.1.g.		
Does vour	CoC in	clude PHA-funded units in the CoC's coordinated entry process?	N	
		oraco i in initiada anta ni tilo 000 3 cooraniatea entry process:		
1C-7c.1.	Method	d for Including PHA-Funded Units in Your CoC's Coordinated Entry System.		
	NOFO	Section VII.B.1.g.		
	If you s	selected yes in question 1C-7c., describe in the field below:		
1.	how yo	our CoC includes the units in its Coordinated Entry process; and		
2.	whethe	er your CoC's practices are formalized in written agreements with the PHA, e.g., MOUs.		
	(lir	mit 2,000 characters)	ı	

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1C-7d. Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.

NOFO Section VII.B.1.g.

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Applicant: Columbus-Muscogee / Russell County CoC
Project: GA-505 CoC Registration FY 2021

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

1C-7d.1. CoC and PHA Joint Application–Experience–Benefits.

NOFO Section VII.B.1.g.

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

1. the type of joint project applied for;
2. whether the application was approved; and

(limit 2,000 characters)

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

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

1C-7e.1. Coordinating with PHA(s) to Administer Emergency Housing Voucher (EHV) Program–List of PHAs with MOUs.

Not Scored–For Information Only

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

Yes

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

3. how your CoC and families experiencing homelessness benefited from the coordination.

PHA

Housing Authority...

Phenix City Housi...

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

Name of PHA: Housing Authority of Columbus Georgia

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

Name of PHA: Phenix City Housing Authority

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

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

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

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

1C-9.	Housing First-Lowering Barriers to Entry.	
	NOFO Section VII.B.1.i.	
1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition.	
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition that have adopted the Housing First approach.	
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2021 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

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

(limit 2,000 characters)

In addition to evaluation of admission packet and criteria of CoC and ESG projects on an annual basis, Coordinated Entry Referrals to aforementioned projects are evaluated monthly. Referral acceptance, rejection and length of time from referral to project contact with client, enrollment and move in date is

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evaluated for programmatic prioritization and rapid placement. Programmatic statistics are reviewed during Monthly Housing Navigation/Case Conferencing Meeting. Training of HMIS documentation of contacts/enrollments/rejections is reiterated each month. Non Compliance with Housing First principles of CoC is referred to project Executive Director for evaluation and corrective action. Technical assistance is provided to projects to promote the continued implementation of Housing First principles across the Continuum. Technical Assistance includes but is not limited to access to Mainstream Services to address barriers and client needs.

1C-9b.	Housing First-Veterans.	
	Not Scored–For Information Only	
	CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly permanent housing using a Housing First approach?	Yes
		•
1C-10.	Street Outreach-Scope.	
	NOFO Section VII.B.1.j.	
		_
	Describe in the field below:	
1.	your CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;	
2.	whether your CoC's Street Outreach covers 100 percent of the CoC's geographic area;	
3.	how often your CoC conducts street outreach; and	
4.	how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.	

(limit 2,000 characters)

- 1. The 2 street outreach team's efforts to ensure identification and engagement of all persons experiencing unsheltered homelessness take multi-pronged approach. 1a) Locations, days and times are coordinated to reach greater geographic area and avoid same day of the week, same time and same team. Outreach efforts take place at times when the unsheltered homeless are more likely to be in the encampments such as before sunrise and at dusk. 1b) The outreach team regularly coordinates with those most likely to encounter the unsheltered homeless: law enforcement, healthcare, business owners/staff, homeless service providers, YMCA, parks and recreation and those with lived experience.
- 2.100 % of the geographical area is covered by the Street Outreach efforts. Outreach teams use on line app to track GPS coordinates of each outreach effort to ensure complete coverage of geographical area.
- 3. Street Outreach is conducted at least twice weekly by each team at different times.
- 4. Those with lived experience serve as peer mentors on the outreach team to those who are the most resistant to enrollment and intervention. Peer mentors are trained on confidentiality and Housing First Principles. Peer mentors are valuable members of the team in bridging the gap between provider and those experiencing unsheltered homelessness.

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1C-11.	Criminalization of Homelessness.
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NOFO Section VII.B.1.k.

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

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

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

	2020	2021
Enter the total number of RRH beds available to serve all populations as reported in the HIC-only enter bed data for projects that have an inventory type of "Current."	94	212

1C-13. Mainstream Benefits and Other Assistance-Healthcare-Enrollment/Effective Utilization.

NOFO Section VII.B.1.m.

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

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

1C-13a. Mainstream Benefits and Other Assistance-Information and Training.	
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NOFO Section VII.B.1.m

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

|--|

Applicant: Columbus-Muscogee / Russell County CoC

Project: GA-505 CoC Registration FY 2021

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

(limit 2,000 characters)

1)Monthly Housing Navigation/Case Conference meetings attended by CoC funded projects include at least quarterly regular training from agencies/programs providing Mainstream resources. CoC funded projects are instructed on assisting client on access to Mainstream Resources.

Agencies/programs providing instruction include but are not limited to: DFACS, SOAR program specialists, PHAs, Department of Behavioral Health and Developmental Disabilities, Opioid Addiction/Overdose Prevention specialists, healthcare providers, vocational rehabilitation and public health

2)The CoC publishes a biweekly newsletter with distribution to all CoC funded projects, CoC members, local governmental agencies, and community stakeholders. Information regarding access to Mainstream Benefits including but not limited to all updates from COVID-19 Resource Digest for Homeless Providers

3)The CoC regularly communicates and publishes enrollment criteria and procedures for enrollment with local healthcare organizations to all CoC funded projects. Enrollment instruction, eligibility requirements for healthcare access is routinely discussed during Monthly Housing Navigation/Case Conference Meetings. Healthcare providers including Federally Qualified Healthcare Centers, Regional Indigent Healthcare Provider and uninsured and underinsured Healthcare clinic are all active members of the CoC 4)The CoC regularly provides CoC funded projects with information to assist in client access and use Medicaid and other Mainstream benefits to include aforementioned healthcare providers and the use of Georgia Gateway for Medicaid enrollment.

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

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

(limit 2,000 characters)

1)CoC Geographic Area: The GA505 CoC NO Wrong Door is the local 211 information and referral system. The local 211 not only encompasses Muscogee and Russell Counties areas, but rather a nine-county region, thus coverage of the entire CoC has been met. Outreach teams work these areas weekly and as part of the outreach they place 211 Flyers in stores, churches and any known location for homeless individuals and families. Billboards are also a tool used to help obtain full geographic coverage. The 211 Flyers also

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state that if danger or a victim of DV or human trafficking to call 911 and our local authorities have a plan in place on what to do. Local authorities also distribute our 211 flyers throughout the geographic area.

2)Coordinated Outreach: Outreach Teams include members of the community PATH Team (Projects for Assistance in Transition from Homelessness) from regional Mental Health and Substance Abuse programs of Community Service Board. Furthermore, too ensure all people are able to receive assistance in the absence of special outreach, 211 operators can be accessed using Georgia Relay TDD for the disabled. For those with Limited English Proficiency, 211 also utilizes the services of Language Line. If outreach team member locates a person needing assistance with limited ways of reaching services (or experiencing disabilities) the outreach team makes the call with the person needing the services.

- 3) Prioritization: Prioritization is given to those experiencing un-sheltered homelessness. Further factors in prioritization are length of time homeless, disability status (chronic), and vulnerability of the client. Standardized assessment is an abbreviated version of the vi-spdat.
- 4) The Coordinated Entry Matrix of projects expedites appropriate referrals and prioritization ensuring timely access for the most vulnerable.

1C-15.	Promoting Racial Equity in Homelessness-Assessing Racial Disparities.	
	NOFO Section VII.B.1.o.	
Did your Co	C conduct an assessment of whether disparities in the provision or outcome of homeless assistance	Yes
	n the last 3 years?	
1C-15	a. Racial Disparities Assessment Results.	
	NOFO Section VII.B.1.o.	

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

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

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

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

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

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

(limit 2,000 characters)

The CoC commissioned an independent Continuum of Care Gap Analysis to review of all HMIS participating projects. The report including analysis of access, enrollment and positive outcomes for all clients active in HMIS. The report revealed no disparity in access, however, a disparity in length of time to access permanent housing did reveal disparities in race and those with disabilities. While the initial report was a system level analysis, the Performance and Outcome Committee of the Continuum of Care as embarked on a project level analysis. The Committee will work with all projects in the analysis. Projects identified as high performers serving people of different races and ethnicities will serve as a base line for all homeless service providers. Technical assistance will be provided to those projects scoring under "base-line". Technical assistance will include but not be limited to 1:1 mentoring of project staff to ensure equity for ALL. Moreover, the CoC required each project applying for funding in the 2021 Competition to submit information on if and how

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the project has analyzed the project for racial disparities.

1C-16. Persons with Lived Experience–Active CoC Participation.

NOFO Section VII.B.1.p.

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

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

1C-17. Promoting Volunteerism and Community Service.

NOFO Section VII.B.1.r.

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

The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.	Yes
The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery, data entry).	Yes
The CoC works with organizations to create volunteer opportunities for program participants.	Yes
The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	Yes
Provider organizations within the CoC have incentives for employment and/or volunteerism.	Yes
Other:(limit 500 characters)	
	homelessness with education and job training opportunities. The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery, data entry). The CoC works with organizations to create volunteer opportunities for program participants. The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials). Provider organizations within the CoC have incentives for employment and/or volunteerism.

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

 Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition

- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

24 CFR part 578

Safety Protocols Implemented to Address Immediate Needs of People Experiencing Unsheltered, Congregate Emergency Shelter, Transitional Housing Homelessness.	
NOFO Section VII.B.1.q.	
	_
Describe in the field below protocols your CoC implemented during the COVID-19 pandemic to address immediate safety needs for individuals and families living in:	
	7

1. unsheltered situations;

2. congregate emergency shelters; and

3. transitional housing.

(limit 2,000 characters)

The continuum of care communicated and implemented safety protocols for all experiencing homeless through the COVID 19 pandemic. Efforts taken by the Continuum of Care to insure the meeting of immediate needs and safety included but are not limited to: 1)Street outreach team regularly deployed to encampments to distribute information on safety, testing, and vaccinations, and to provide hygiene supplies and food. The CoC also coordinated with city officials to ensure 24/7 access to public restrooms in areas frequented by people experiencing homelessness as well as information and access to shelter. 2) The CoC in collaboration with local Coronavirus Relief Fund facilitated funding for staffing and operational costs to operate COVID-19 protocol compliant shelter when faith-based shelter closed for operation within days of the local stay at home order. 3) The CoC assisted transitional housing projects to secure funding and resources to decompress housing locations to mitigate exposures, and allow for meeting immediate needs of clients. TH units were added to ensure client and public safety. CoC served as the conduit of information, providing nearly daily updates to projects and clients, and access to supplies and protocols for meeting the needs of those experiencing homeless.

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

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

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(limit 2,000 characters)

In responding to COVID-19, the Continuum of Care has enhanced the relationships between public health authorities, local governmental officials, Federal Emergency Management Agency, supportive service providers i.e. food bank, utilities, hospitals, philanthropic organizations, and homeless service providers to respond to future public health emergencies through early intervention. The Continuum of Care participated in the daily then weekly Coronavirus Community Call from March 2020 through March 2021 as the representative for homeless services providers and those experiencing homelessness. As a result, the Continuum of Care has been designated the lead for the local Community Organizations Active in Disaster (COAD). The COAD has been active has previously focused on responding to natural disasters but is now expanding their scope to include ALL public health emergencies.

1D-3.	CoC Coordination to Distribute ESG Cares Act (ESG-CV) Funds.
	NOFO Section VII.B.1.q
	Describe in the field below how your CoC coordinated with ESG-CV recipients to distribute funds to address:
1.	safety measures;
2.	housing assistance;
3.	eviction prevention;
4.	healthcare supplies; and
5.	sanitary supplies.

(limit 2,000 characters)

The Continuum of Care was designated by the Georgia Dept of Community Affairs as the regional implementation agent for ESG CV funds. The CoC solicited and obtained sub grantee partnerships throughout the Continuum to meet the needs of those experiencing homelessness. 1) The Continuum regularly published and distributed information on safety measures to all projects and participants within and beyond the geographical area. ESG CV funds were allocated for the provision of sanitation and hygiene supplies throughout the CoC. 2) The CoC implemented enhanced access to housing assistance through the implementation of Non congregate shelter and Rapid Rehousing through ESG CV. 3) Throughout the COVID 19 pandemic, the CoC worked with projects throughout the geographical area to facilitate homelessness prevention, hosting landlord engagement activities to inform them of the availability of prevention funds. Upon the expiration of the CDC eviction moratorium, the CoC fully implemented an ESG CV-funded prevention program. 4) The CoC, through Outreach teams, provided healthcare supplies to those experiencing homeless utilizing funds form ESG CV and other funds at homeless provider locations and encampments.5) Utilizing ESG CV and other funds the CoC coordinated the procurement and distribution of sanitation supplies including sanitizers, masks and antibacterial wipes 3 times weekly to homeless service providers and clients throughout the geographical area.

1D-4.	1D-4. CoC Coordination with Mainstream Health.			
	NOFO Section VII.B.1.q.			
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Describe in the field below how your CoC coordinated with mainstream health (e.g., local and state agencies, hospitals) during the COVID-19 pandemic to:	
1.	decrease the spread of COVID-19; and
2.	ensure safety measures were implemented (e.g., social distancing, hand washing/sanitizing, masks).

(limit 2,000 characters)

The CoC coordinated efforts throughout the geographical with Mainstream Health. 1)The Continuum of Care assisted in the design and the implementation of testing programs for those experiencing homelessness. The CoC further operated an isolation and quarantine facility for those experiencing homelessness in conjunction with mainstream health providers and public health. The Continuum of Care also served as point of contact for all regional hospitals to provide shelter to the COIVD 19 positive discharges for access to shelter. 2) The CoC worked with local public health officials regarding implemented safety measures to include review of information provided to homeless service providers and those experiencing homelessness. Furthermore, public health officials inspected and approved the Isolation and Quarantine facility operations and protocol to ensure all appropriate safety measures were in place and being followed by homeless service provider and the mainstream health provider involved in the Isolation and Quarantine facility.

1D-5.	Communicating Information to Homeless Service Providers.
	NOFO Section VII.B.1.q.
	Describe in the field below how your CoC communicated information to homeless service providers during the COVID-19 pandemic on:
1.	safety measures;
2.	changing local restrictions; and
3.	vaccine implementation.

(limit 2,000 characters)

The Continuum of Care served the entire geographical region in communicating information regularly throughout the COVID 19 Pandemic.

1&2) The CoC communicated changes and updates to Safety Measures and the Changes in Local Restrictions to Service Providers, nearly daily through Coronavirus Community Ccall and email list along with weekly newsletter updates. 3)The CoC communicated availability of vaccines and eligibility requirements to Homeless Service Providers through regular emails to listserv of over 104 CoC members, media outlets to include (print and, television), and social media, the CoC newsletter as well as the Housing Navigation and monthly COVID response meetings. The CoC coordinated with public health officials and homeless service providers to set up vaccination clinics at homeless service provider locations.

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

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

(limit 2,000 characters)

The Continuum of Care worked with local Public Health Authorities throughout the COVID 19 pandemic regarding vaccination protocols through nearly daily contact. The CoC utilized a variety of tools to identify location of those eligible for vaccination including HMIS COVID 19 Screening Tool, HMIS data on Chronic Health Conditions and Client Age per local protocol. Homeless service providers throughout the geographical area engaged clients regarding their eligibility to participate in vaccinations. These efforts included Outreach to the unsheltered.

1D-7. Addressing Possible Increases in Domestic Violence.

NOFO Section VII.B.1.e.

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

(limit 2,000 characters)

The Continuum of Care worked with Victim Service providers throughout the COVID 19 Pandemic to meet the needs of the expected increase in Domestic Violence calls. The Continuum of Care assisted the Victim Service Providers in obtaining cleaning and sanitation supplies. Ten Emergency Shelter units were added to meet the increased needs and to mitigate spread. The Continuum of Care also implemented increased access to Coordinated Entry through untraceable on line app to allow for immediate referral to Victim Service providers. The Coordinated Entry Team trained VSP and non VPS providers, healthcare providers, law enforcement and community advocates on the use of the 24/7 anonymous app as part of the app implementation. The app has been fully integrated in Coordinated Entry and will be continue to be an essential access point. The app accounts for approximately 50% of all coordinated entry intakes.

1D-8. Adjusting Centralized or Coordinated Entry System.

NOFO Section VII.B.1.n.

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

(limit 2,000 characters)

The Continuum of Care increased Coordinated entry personnel by 100 % through CDBG CV funding, in order to, meet the needs of the increase in as a result of COVID 19. The Continuum of Care further implemented, throughout the geographical area, that all clients obtaining services from homeless service providers complete coordinated entry intake with the assistance of homeless

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service providers, regardless of housing situation. Doing so, allowed for clients to receive referral and access to Community Resources to include but limited to Emergency Shelter, Isolation and Quarantine, Vaccination, Testing, Rapid Rehousing, Prevention and Mainstream Resources. The Continuum of Care also implemented on line intake for Coordinated entry to increase access.

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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

- 24 CFK part 578

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

	Enter the date your CoC published the 30-day submission deadline for project applications for your CoC's local competition.	09/07/2021
	Enter the date your CoC publicly posted its local scoring and rating criteria, including point values, in advance of the local review and ranking process.	09/13/2021

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

NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.

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

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

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

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

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

(limit 2,000 characters)

The Continuum of Care Review and Ranking Tool included scoring criteria based on severity of needs and those with the most vulnerabilities that included those in emergency shelter and the unsheltered, as well as those with severe barriers such as, Chronically Homeless, Families, DV Victims and Veterans. The Continuum of Care Review and Ranking Tool is designed in such a way that projects are equally measured on access for the hardest to serve with the performance of projects.

Access based on Continuum of Care priorities and vulnerabilities is equally balance by project performance throughout the Review and Tool.

1E-3.	Promoting Racial Equity in the Local Review and Ranking Process.	

NOFO Section VII.B.2.e.

Describe in the field below how your CoC:

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

(limit 2,000 characters)

- 1)The Continuum of Care actively engaged those with lived experience to include those over represented in the development a of the review and rank process with which the projects would be scored. One of those involved is, a Continuum of Care board member with lived experience and one is a person with lived experience who was unsheltered with a child.
- 2)The Scoring (review and rank) Committee was comprised of participants of a cross section of demographics with 75 % of the committee represented by non white participants.3) Each project was required to submit documentation of It and how their project promotes racial equity in all aspects of their project.

1E-4.	Reallocation–Reviewing Performance of Existing Projects. We use the response to this question as a
	factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.

NOFO Section VII.B.2.f.

Describe	:	41	4:-1-	L - I
Describe	ın	TNE	TIPIN	DEIOW:

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;

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2.	whether your CoC identified any projects through this process during your local competition this year;
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year;
	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable; and
5.	how your CoC communicated the reallocation process to project applicants.

(limit 2,000 characters)

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1)CoC has a written process for Voluntary reallocation (VR)& Involuntary reallocation (IR)CoC considers IR as appropriate & necessary per results of CoC Corrective Action Threshold cycle. At the conclusion of each NOFA project scoring cycle,CoC will establish a threshold & of project scoring (Project Applicant Performance Score Card & Site Review Score Card). PA who do not meet threshold will be notified to improve scores. Those not meeting threshold the next year will be required to submit a plan of correction. If remaining in 'plan of correction' status in the next year's renewal evaluation, they will not be able to submit new applications.

Those not meeting threshold for 2 consecutive years will be reviewed for possible IR. CoC-funded project will be evaluated based on HMIS data; SPM related to retention of housing for 12 months, reducing returns to homelessness & increasing income & employment.

- 2) The CoC identified that Shelter + Care once again fell at the bottom of tier 1 in the local review/rank for the 2md competition in a row.
- 3) Due to unusual/unprecedented events of 2020, the Board determined that IR would only take place if there was grossly underperforming project & S+C did not meet the threshold of a grossly underperforming. The CoC and project leadership are already discussing project improvement strategies.
- 4) The CoC recognized that all projects were in very unusually difficult position since March 2020 due to COVID 19 thus IR for this competition was waived except when meeting the definition of grossly underperforming.
- 5)The R-process was communicated via HFG &UW Websites, via list serve to HUD funded agencies. The email is sent out via email prior to scoring, is discussed at the Bidder's conference and is discussed quarterly through the Performance and Outcome reports to each agency. The CoC meets w/ each project, audits records & discusses perform. issues and/or concerns. Scoring sheet is given to each project director & discussed at length

1E-4a.	Reallocation Between FY 2016 and FY 2021. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.		
	NOFO Section VII.B.2.f.		
d your C	CoC cumulatively reallocate at least 20 percent of its ARD between FY 2016 and FY 2021?	No	
1E-5.	Projects Rejected/Reduced-Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen if You Select Yes.		
1E-5.			
1E-5.	Screen if You Select Yes.		

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Project:	Project: GA-505 CoC Registration FY 2021 COC_R	
2.	If you selected yes, enter the date your CoC notified applicants that their project applications were be rejected or reduced, in writing, outside of e-snaps.	ing
1E-5a.	Projects Accepted-Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.g.	
	late your CoC notified project applicants that their project applications were accepted and ranked on tl enewal Priority Listings in writing, outside of e-snaps.	he 10/21/2021
1E-6.	Web Posting of CoC-Approved Consolidated Application. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.g.	
included: 1. the CoC	late your CoC's Consolidated Application was posted on the CoC's website or affiliate's website–which Application; Listings; and	n
	cts accepted, ranked where required, or rejected.	

GA-505

Applicant: Columbus-Muscogee / Russell County CoC

You must enter a date in question 1E-6.

2A. Homeless Management Information System (HMIS) Implementation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition

- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

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2A-1.	HMIS Vendor.		
	Not Scored–For Information Only		
nter the n	ame of the HMIS Vendor your CoC is currently using.	ack	
2A-2.	HMIS Implementation Coverage Area.		
	Not Scored–For Information Only		
elect fron	n dropdown menu your CoC's HMIS coverage area.	Single	CoC
2A-3.	HIC Data Submission in HDX.		
2A-3.	HIC Data Submission in HDX. NOFO Section VII.B.3.a.		
nter the d	ate your CoC submitted its 2021 HIC data into HDX.	05/12/202	1
		•	
2A-4.	HMIS Implementation-Comparable Database for DV.		
	NOFO Section VII.B.3.b.		
	Describe in the field below actions your CoC and HMIS Lead have taken to ensure DV housing and se providers in your CoC:	ervice	
1.	1. have a comparable database that collects the same data elements required in the HUD-published 2020 HMIS Data Standards; and		
2.	submit de-identified aggregated system performance measures data for each project in the comparability database to your CoC and HMIS lead.	ole	
	(limit 2,000 characters)		

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1)VSP in the geographical area is also a recipient of ESG funds thus must utilize DV Comparable database. Furthermore, VSP provides CoC de-identified aggregated data reports from Comparable Database for inclusion in HIC reporting each year.

2)The VSP regularly submits de-identified System Performance Measures, deidentified HMIS Active Client Lists as well as de-identified HUD Data Quality Reports to the CoC and HMIS Lead for all VSP projects

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

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

Project Type	Total Beds 2021 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	200	43	90	57.32%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	54	0	54	100.00%
4. Rapid Re-Housing (RRH) beds	212	125	87	100.00%
5. Permanent Supportive Housing	212	0	164	77.36%
6. Other Permanent Housing (OPH)	28	0	28	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 VII.B.3.c.	

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

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

(limit 2,000 characters)

1a) ES-CoC continues to work diligently working towards the increase of bed coverage percentage through discussions with funding sources of non-HMIS participating Emergency Shelters. CoC has shown ESs the benefits by using data from PIT counts. CoC has been able to inform/educate shelter providers of their clients' participation in HMIS through services provided by other agencies, allowing the agencies to see duplication of services between providers. Participation would lead to a better use of community resources thus allowing providers to serve more individuals and families ultimately shortening length of time homeless. We will continue to reach out to ESs providing the impact their lack of participation is making on the community and will inform them this will become a more wide-spread discussion with the city and future funders if compliance is not considered. The non HMIS participating ESs are faith based that have expressed concerns of governmental overreach. The CoC continues to work with the boards and non CoC funders of the ESs on benefits of HMIS.

1b)PSH: Since the submission of HIC data the VA has been trained on HMIS

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and we continue to work with them on the full utilization of HMIS for their PSH HUD-VASH project. CoC full expects full HMIS implementation within the next quarter.

2)The CoC will continue engaging faith based ES regarding HMIS implementation emphasizing that HMIS participation does not interfere with faith based mission and that client level data is protected and only de-identified aggregate data is used for reporting. The CoC will continue to work with VA on full implementation of HMIS for HUD VASH.

2A-5b.	Bed Coverage Rate in Comparable Databases.		
	NOFO Section VII.B.3.c.		
Enter the p	ercentage of beds covered in comparable databases in your CoC's geographic area.		100.00%
2A-5b.	1. Partial Credit for Bed Coverage Rates at or Below 84.99 for Question 2A-5b.		
	NOFO Section VII.B.3.c.		
			_
	If the bed coverage rate entered in question 2A-5b. is 84.99 percent or less, describe in the field below:		
	1. steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent; and		
	2. how your CoC will implement the steps described to increase bed coverage to at least 85 percent.		

(limit 2,000 characters)

1a) ES-CoC continues to work diligently working towards the increase of bed coverage percentage through discussions with funding sources of non-HMIS participating Emergency Shelters. CoC has shown ESs the benefits by using data from PIT counts. CoC has been able to inform/educate shelter providers of their clients' participation in HMIS through services provided by other agencies, allowing the agencies to see duplication of services between providers. Participation would lead to a better use of community resources thus allowing providers to serve more individuals and families ultimately shortening length of time homeless. We will continue to reach out to ESs providing the impact their lack of participation is making on the community and will inform them this will become a more wide-spread discussion with the city and future funders if compliance is not considered. The non HMIS participating ESs are faith based that have expressed concerns of governmental overreach. The CoC continues to work with the boards and non CoC funders of the ESs on benefits of HMIS.

1b)PSH: Since the submission of HIC data the VA has been trained on HMIS and we continue to work with them on the full utilization of HMIS for their PSH HUD-VASH project. CoC full expects full HMIS implementation within the next quarter.

2)The CoC will continue engaging faith based ES regarding HMIS implementation emphasizing that HMIS participation does not interfere with faith based mission and that client level data is protected and only de-identified aggregate data is used for reporting. The CoC will continue to work with VA on full implementation of HMIS for HUD VASH.

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

Yes

Did your CoC submit LSA data to HUD in HDX 2.0 by January 15, 2021, 8 p.m. EST?

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program

Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

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2B-1.	Sheltered and Unsheltered PIT Count-Commitment for Calendar Year 2022		
	NOFO Section VII.B.4.b.		
oes your	CoC commit to conducting a sheltered and unsheltered PIT count in Calendar Year 2022?	Ye	es
		'	
		,	
2B-2.	Unsheltered Youth PIT Count–Commitment for Calendar Year 2022.		
2B-2.		•	
2B-2.	Unsheltered Youth PIT Count–Commitment for Calendar Year 2022. NOFO Section VII.B.4.b.		

2C. System Performance

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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

- 24 CFR part 578

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

(limit 2,000 characters)

- 1) The PROCESS THE CoC USES TO DETERMINE RISK FACTORS: The CoC uses a collaborative process through our CES-211 as a prescreening tool collecting predefined criteria, income, homeless status, ability to sustain housing after services are administered, to name a few. This prescreening helps determine if someone is eligible for Homeless Prevention services. The prescreening report captures our First Time Homeless (FTH) population more effectively using the predefined criteria and links them to Mainstream resources which include; federal entitlements, food or emergency utility/rental assistance, transitional housing, housing subsidies.
- (2)STRATEGIES TO PREVENT FIRST TIME HOMELESSNESS: The CoC has incorporated prevention & diversion as part of our culture to prevent First Time Homeless. The CoC strategy for prevention & diversion includes, quarterly meetings, quarterly with utility providers, Homeless Prevention Team of the Performance and Outcomes Committee, Landlords, Outreach Teams, RRH programs, Goodwill Job Training, CES Committee & Service Providers and Coordinated Entry Committee/Admin. The program is designed to stabilize individuals and families in their existing homes, shorten the amount of time that individuals and families stay in shelters and assist individuals and families with securing affordable housing. This collaborative process allows for addressing the causes of FTH with interventions such as payment of rent or security deposits, utility bills, housing location, employment services, counseling, outreach, follow-up and case management to prevent households

counseling, outreach, follow-up and case management to prevent households from becoming FTH. This collaborative process has increased interagency referrals to prevent FTH, improved discharge planning, improved eviction prevention, increased safe and affordable housing.

(3) RESPONSIBLE FOR OVERSEEING STRATEGIES: Homeless Prevention

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Team of the Performance and Outcomes Committee is responsible for overseeing the strategy.

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

(limit 2,000 characters)

(1) The CoC facilitates monthly case conferencing with an emphasis on those with the

longest LOTH. In the CES-211 LOTH is a priority for placement. The Housing Navigation Team (HNT) has put a special focus on Encampments being data is showing in many cases LOTH is directly reflected with the encampment setting. Directing the encampments to CES-211 for services and shelter has given positive results.

(2)Through outreach teams, provider intakes and the CES, homeless individuals and families are identified and a By Name List (BNL) is created, the CoC and all providers (to include the outreach teams) have real time data which measures LOTH & those with the highest barriers to housing. The HNT is part of the monthly case conferencing. The HNT and providers across the continuum actively engage those on the list to strategically reduce the LOTH for all. CES staff makes regular inquiry of HNT and housing service providers regarding clients on BNL to help reduce LOTH through access to permanent housing.

3)The HNT is responsible for overseeing this strategy.

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

(limit 2,000 characters)

(1) To continue to increase the rate of exiting to permanent housing, the CoC is working with Emergency Shelters, Rapid Rehousing and Transitional Housing providers to incorporate a Housing Stability Plan (HSP)to follow clients throughout their journey of housing. Our model of coordinated service delivery provides wraparound services for specific homeless issues, such as family, dv, chronic & youth homelessness. Our plan is to continue work with providers to enhance & expand these services to be more Housing First and readily available with little to no barriers for services such as mental health, employment and CM when an individual/family is ready to exit. The Housing

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Navigators Team (HNT)consists of community leaders, CA, ES, RRH, TH, PSH members & other service providers working closely with landlords to provide more affordable PH that is available without barriers such as, felony, bad credit, etc. Over the past 12mths the HNT conducted numerous landlord engagement activities and many informal "talks" to increase the rate of placement in available/affordable PH. The HNT conducted training for cm's to assist them in wraparound services & monitoring of the Housing Stability Plan.

- (2) The Housing Navigation Team is responsible for overseeing this strategy. (3) CoC uses the HSP for these clients as well. In the HSP, intensive case management, eviction prevention programs, helping clients engage in meaningful activities (volunteerism/peer opportunities) education and employment assistance and connection to stabilizing sources of income, all are areas that the cm's work with the client to incorporate in their daily lives. The CoC also implemented the Moving Forward/Move On strategy to all PH housing providers. The Moving Forward Strategy identifies individuals/families that have reached a point to exit to other non-funded PH destinations to free up existing funded PH beds.
- (4) The Housing Navigation Team is responsible for overseeing this strategy.

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

(limit 2,000 characters)

- (1)The CoC Homeless Prevention Team utilizes our HMIS and our CES systems to assess the characteristics of households who return to homelessness. Assessments include information from substance abuse, to mental/physical health conditions, length of time homeless, family or individual, and income. These are common factors that have been identified and may influence return to homelessness
- (2) The CoC implemented a comprehensive Homeless Prevention strategy to effectively identify, assess, and prevent individuals and families from becoming homeless, and to divert those experiencing a housing crisis from homelessness. The strategy is a multi-faceted approach to maximize & leverage existing resources, evaluate & possibly modify policies that govern existing prevention resources to allow greater flexibility, prioritize the most vulnerable populations and to work with Homeless Prevention Team (HPT) to better identify potential client returns. Adequate discharge planning and continued follow up is an integral piece of the Case Manager portfolio of all CoC programs to help identify common factors of who returns to homelessness. Case Managers ensure all exiting to PH have been linked to wraparound services such as mainstream benefits and counseling, along with appropriate services to increase and sustain income. Regular and Continued contact with those who exited to PH is also required of all CoC programs for a minimum of 1 year. All funded agencies follow the Housing First Strategy ensuring that homelessness does not result due to compliance requirements.
- (3) The Homeless Prevention Team is responsible for overseeing RTH strategy

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and reporting findings quarterly to the CoC Board of Directors.

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

(limit 2,000 characters)

1) STRATEGIES TO INCR EI: (a) The Earned Income Tax Credit - Recognizing the EITC's potential economic benefit to both families &communities. organizations within the CoC provide sup. serv, such as free tax preparation, to facilitate receipt of the credit. (b) Workforce development & training - Workforce development programs, such as our Moving to Work allows individuals to compete in the job market by gaining or strengthening the skills necessary to obtain & maintain a job & to advance at their current workplace or to secure a better job elsewhere. (c)Credit Repair & Debit Reduction - help individuals improve their credit history & score, which is used by lenders, landlords, & increasingly by employers, to assess one's worthiness for credit, an apartment, or job. The CoC has a list of non-funded & funded providers that work with CoC clients to help them improve credit history (score) & reduce debt. Career counseling, resume building, job training, vocational training, partnerships w/employers are also avail to clients to improve emp. income by numerous providers that participate in our CES. 2)STRATEGIES TO INCREASE ACCESS TO E: CoC program-funded projects are required to attend resource fairs, job fairs & work closely with the Mainstream & Outreach Com. to enhance relationships w/employment training services such as Goodwill, DOL and Dept. of Rehab. Projects have case managers/life skill managers to provide assistance to individuals/families to promote job skills/assist w/job searches, transportation, volunteer opportunities to develop skills, and career counseling.3)STRATEGIES TO PARTNER W/ MAINSTREAM EMP ORGS TO INCR CASH INCOME: CoC has MoU's with Moving to Work & DOL to give priority to CoC clients for job placement. Partnerships with many organizations, such as Goodwill, re job readiness, training, empl search assistance &skills development are in place to help CoC clients. 4) Home for Good and M&O Committee is responsible in overseeing this strategy.

2C-5a.	Increasing Employment Cash Income–Workforce Development–Education–Training.
	NOFO Section VII.B.5.f.
	Describe in the field below how your CoC:
1.	promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and
2	is working with public and private organizations to provide meaningful education and training, on-the-job training, internships, and employment opportunities for program participants.

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(limit 2,000 characters)

1)Increasing employment through access to employers to include staffing agencies is carried out by the The Mainstream and Outreach Committee of the Continuum of Care. The Committee regularly hosts job fairs, outreach to private employers and employment agencies and are partnering with staffing agencies. The following agencies work with the CoC: Goodwill, Phenix City Housing Authority, Changing Faces Within, New Horizons, Waffle House, Healthcare Staffing, Anthem Col. Consol. Govt, Col Housing Authority, Parks and Rec. Water Works, Alatrade, Col. Technical College, Dream Live Prosper, Amerigroup, Piedmont Medical, AFLAC, Sakom, Surge, Metro Transit, W.T. Miller, United Way, School District, DOL, Care Source, A better Peach State, CVCC, FAVOR, Dept. of Human Services, WellCare, Oneda, Hughston Clinic, DOL (VA services).

2) CoC is working with many agencies listed above and partnering with Wade Cleaners and Goodwill with written agreements to provide education and training, on the job training, internships and many employment opportunities to PSH residents. Barriers such as bad credit, criminal history, etc. are being waived and no longer a barrier for employment.

2C-5b.	Increasing Non-employment Cash Income.
	NOFO Section VII.B.5.f.
	Describe in the field below:
1.	your CoC's strategy to increase non-employment cash income;
2.	your CoC's strategy to increase access to non-employment cash sources; and
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.

(limit 2,000 characters)

1) STRATEGIES TO INCR Non-ECI: The CoC are addressing many of the common reasons for the underutilization of benefits that fall in the non-ECI status such as long and cumbersome application processes, fear of nonacceptance,

lack of eligibility requirements to name a few. We have case managers that help clients who are homeless & at-risk w/ applying for disability benefits, e.g. SSI/SSDI, using SOAR model. Further, the CoC has a veteran employment services collaborative that assists veterans with applying for and increasing veteran benefits. Training through different service providers to case managers have added increasing client's non-employment cash income as a top priority within the continuum. The CoC looks at this area and addresses it during the annual audit of the funded agencies. The Performance and Outcomes Committee works with agencies that do not have client non-ECI to develop a plan to assist them in obtaining training, contacts, etc. needed to benefit clients in increasing the income.

2)STRATEGIES TO INCREASE ACCESS TO Non ECI: Projects have case managers/life skill managers to provide assistance to individuals/families in filling out applications, or information on what is available to them for their specific need. In cases where eligibility may be a barrier for mainstream benefits, staff works with medical/mental health providers to provide assessments and assistance in service coordination to provide documentation of disability for SSDI benefits. Bi-Monthly Mainstream and Outreach meetings

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between providers, such as SS, VA, Case Managers from funded and nonfunded agencies, etc. help in connecting names/people to service providers. Knowledge is shared monthly to help benefit clients
3) Home for Good and Mainstream & Outreach Committee is responsible in overseeing this strategy

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program

- FY 2021 CoC Application Detailed Instructions-essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

- 24 CFK part 578

FY2021 CoC Application

3A-1.	New PH-PSH/PH-RRH Project-Leveraging Housing Resources.	
	NOFO Section VII.B.6.a.	
your Co hich are omelessr	C applying for a new PSH or RRH project(s) that uses housing subsidies or subsidized housing units not funded through the CoC or ESG Programs to help individuals and families experiencing ness?	No
3A-1a.	New PH-PSH/PH-RRH Project-Leveraging Housing Commitment. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.6.a.	
	Select yes or no in the chart below to indicate the organization(s) that provided the subsidies or subsidized housing units for the proposed new PH-PSH or PH-RRH project(s).	
	Delicate consultations	N ₂
	Private organizations State or local government	No No
	Public Housing Agencies, including use of a set aside or limited preference	No
	Faith-based organizations	No
	Federal programs other than the CoC or ESG Programs	No
	F	
	New PSH/RRH Project–Leveraging Healthcare Resources.	
3A-2.	NOFO Section VII.B.6.b.	
3A-2.		

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	Formal Written Agreements-Value of Commitment-Project Restrictions. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.6.b.	

Did your CoC obtain a formal written agreement that includes: (a) the project name; (b) value of the commitment; and (c) specific dates that healthcare resources will be provided (e.g., 1-year, term of grant, etc.)?	No
Is project eligibility for program participants in the new PH-PSH or PH-RRH project based on CoC Program fair housing requirements and not restricted by the health care service provider?	No

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

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

Project Name	Project Type	Rank Number	Leverage Type	
This list contains no items				

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program

- FY 2021 CoC Application Detailed Instructions-essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

- 24 CFK part 578

3B-1.	Rehabilitation/New Construction Costs-New Projects.	
	NOFO Section VII.B.1.r.	
your Co habilitati	C requesting funding for any new project application requesting \$200,000 or more in funding for housing on or new construction?	No
3B-2.	Rehabilitation/New Construction Costs-New Projects.	
	NOFO Section VII.B.1.s.	
	If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:	
	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and	
1.	Cooling of the reading and orban person phone rect of 1000 (12 cloter retay, and	

(limit 2,000 characters)

N/A

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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

- 24 CFK part 578

20.4	Designation CCO/TU/Leint TU and DU DDU Company Designate to Coming Designations	
36-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section VII.C.	
	C requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to lies with children or youth experiencing homelessness as defined by other Federal statutes?)
3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.C.	
	If you answered yes to question 3C-1, describe in the field below:]
1.	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and	
	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.	1

(limit 2,000 characters)

N/A

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Applicant: Columbus-Muscogee / Russell County CoC

Project: GA-505 CoC Registration FY 2021

GA-505 COC_REG_2021_182099

4A. DV Bonus Application

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program

- FY 2021 CoC Application Detailed Instructions-essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload

 - 24 CFR part 578

4A-1.	New D	V Bonus Project Applications.		
	NOFO	Section II.B.11.e.		
d your C	oC sub	mit one or more new project applications for DV Bonus Funding?		Yes
4A-1a.	DV Bo	nus Project Types.		
	NOFO	Section II.B.11.		
	Select its FY	yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your Co 2021 Priority Listing.	oC included in	
		Project Type		
	1.	SSO Coordinated Entry	No	
		DU DDU or Joint TU/DDU Component	Yes	
	2.	PH-RRH or Joint TH/RRH Component		

4A-2.	Number of Domestic Violence Survivors in Your CoC's Geo	graphic Area.		
1	NOFO Section II.B.11.			
1.	Enter the number of survivors that need housing or service	ces:		15,869
2.	Enter the number of survivors your CoC is currently servi	ng:		3,871
3.	Unmet Need:			11,998
			•	
4A-2a.	Calculating Local Need for New DV Projects.			
1	NOFO Section II.B.11.			
_				_
	Describe in the field below:			
	FY2021 CoC Application	Page 48	1	1/09/2021

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

(limit 2,000 characters)

1 The number of survivors that need services is based on the statistic of 1 in 4 women and 1 in 7 men will experience physical violence by an intimate partner at some point in their lifetime and the statistics that only 1-4 victims report to police or reach out for help. Based on the most recent census for the counties that the CoC serves there is a potential for 63,475 victims of domestic violence, a quarter of those would be 15,869 (this is the 1 in 4 that report). The total number of survivors (3,871)receiving services is based on the number of clients receiving services from Hope Harbour.

2 The data source for the above information is statistics from the Georgia Coalition Against Domestic Violence, the Census, and the Caseworthy Database used by all state certified shelters in the state of Georgia.

3 One of the reasons that the CoC is unable to meet the needs of all of the survivors is because only a 4th of all victims of domestic violence even reach out to get help and often when they do reach out to get help they do not reach out to the local domestic violence program. They tend to reach out to friends, family, and other local faith based organizations before reaching out to the local domestic violence program or law enforcement. Victims face many barriers to asking for help; these include self-blame, shame and embarrassment, prior negative experiences of help-seeking, fear of the consequences of disclosure, economic dependency on the abuser, and lack of awareness about formal support services related to domestic violence.

4A-4. New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects—Project Applicant Information.

NOFO Section II.B.11.

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

Applicant Name ---

FY2021 CoC Application

COC_REG_2021_182099

GA-505

Project: GA-505 CoC Registration FY 2021

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

4A-4.	New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects—Project Applicant Information—Rate of Housing Placement and Rate of Housing Retention—Project Applicant Experience.	
	NOFO Section II.B.11.	
	Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2021 Priority Listing:	
1. Appli	icant Name	
2. Rate	of Housing Placement of DV Survivors-Percentage	
3. Rate	of Housing Retention of DV Survivors-Percentage	
4A-4a.	You must enter a response for elements 1 through 3 in question 4A-4. Calculating the Rate of Housing Placement and the Rate of Housing Retention—Project Applicant	
	Experience.	
	NOFO Section II.B.11.	
	Describe in the field below:	
1.	how the project applicant calculated the rate of housing placement and rate of housing retention reported in question 4A-4; and	
2.	the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects).	
	(limit 1,000 characters)	
4A-4b.	Providing Housing to DV Survivor–Project Applicant Experience.	
	NOFO Section II.B.11.	
	Describe in the field below how the project applicant:	
1.	ensured DV survivors experiencing homelessness were assisted to quickly move into safe affordable housing;	
2.	prioritized survivors-you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.;	
3. connected survivors to supportive services; and		
4.	moved clients from assisted housing to housing they could sustain–address housing stability after the housing subsidy ends.	
	(limit 2,000 characters)	
	(mint 2,000 Gharacters)	
4A-4c.	Ensuring DV Survivor Safety-Project Applicant Experience.	

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

(limit 5,000 characters)

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

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

(limit 2,000 characters)

A-4d. Trauma-Informed, Victim-Centered Approaches–Project Applicant Experience. NOFO Section II.B.11. Describe in the field below examples of the project applicant's experience in using trauma-informed, victim-centered approaches to meet needs of DV survivors in each of the following areas:
Describe in the field below examples of the project applicant's experience in using trauma-informed,
Describe in the field below examples of the project applicant's experience in using trauma-informed, victim-centered approaches to meet needs of DV survivors in each of the following areas:
Describe in the field below examples of the project applicant's experience in using trauma-informed, victim-centered approaches to meet needs of DV survivors in each of the following areas:
prioritizing program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;
2. establishing and maintaining an environment of agency and mutual respect, e.g., the project does not u punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3. providing program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma;
4. emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;

5. centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;

6. providing opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and

(limit 5,000 characters)

7. offering support for parenting, e.g., parenting classes, childcare.

4A-4e.	4A-4e. Meeting Service Needs of DV Survivors-Project Applicant Experience.	
	NOFO Section II.B.11.	
	Describe in the field below:	
1.	supportive services the project applicant provided to domestic violence survivors experiencing homelessness while quickly moving them into permanent housing and addressing their safety needs; and	

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2. provide examples of how the project applicant provided the supportive services to domestic violence survivors.

(limit 5,000 characters)

A-4f.	Trauma-Informed, Victim-Centered Approaches-New Project Implementation.
	NOFO Section II.B.11.
	Provide examples in the field below of how the new project will:
1.	prioritize program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;
2.	establish and maintain an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma;
4.	place emphasis on program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;
6.	provide opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for parenting, e.g., parenting classes, childcare.

(limit 5,000 characters)

4B. Attachments Screen For All Application Questions

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

Attachments must match the questions they are associated with.

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

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

Document Type	Required?	Document Description	Date Attached
1C-14. CE Assessment Tool	Yes	1 C 4 Standardize	11/02/2021
1C-7. PHA Homeless Preference	No	1 C 7 Homeless Pr	11/01/2021
1C-7. PHA Moving On Preference	No	1 C 7 Moving On P	11/01/2021
1E-1. Local Competition Announcement	Yes	1 E 1 Local Compe	11/02/2021
1E-2. Project Review and Selection Process	Yes	Project review an	11/09/2021
1E-5. Public Posting–Projects Rejected-Reduced	Yes	PROJECTS REDUCED	11/09/2021
1E-5a. Public Posting–Projects Accepted	Yes	PUBLIC POSTING	11/09/2021
1E-6. Web Posting–CoC- Approved Consolidated Application	Yes	PUBLIC POSTING CO	11/09/2021
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		

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Attachment Details

Document Description: 1 C 4 Standardized Assessment Tool

Attachment Details

Document Description: 1 C 7 Homeless Preference

Attachment Details

Document Description: 1 C 7 Moving On Preference

Attachment Details

Document Description: 1 E 1 Local Competition

Attachment Details

Document Description: Project review and Selection

Attachment Details

Document Description: PROJECTS REDUCED OR REJECTED

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Attachment Details

Document Description: PUBLIC POSTING - PROJECTS ACCEPTED

Attachment Details

Document Description: PUBLIC POSTING CONSOLIDATED

APPLICATION

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

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Submission Summary

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

1A. CoC Identification 09/13/2021
1B. Inclusive Structure 11/08/2021
1C. Coordination Please Complete
1C. Coordination continued 11/08/2021
1D. Addressing COVID-19 11/09/2021
1E. Project Review/Ranking Please Complete
2A. HMIS Implementation 10/26/2021
2B. Point-in-Time (PIT) Count 10/18/2021
2C. System Performance 10/26/2021
3A. Housing/Healthcare Bonus Points 10/19/2021
3B. Rehabilitation/New Construction Costs 09/13/2021

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3C. Serving Homeless Under Other Federal 09/13/2021

Statutes

4A. DV Bonus Application Please Complete

4B. Attachments Screen 11/09/2021

Submission Summary No Input Required

Notes:

4A. DV Bonus Application list contains 1 incomplete item.

GA 505 Contiunuum of Care

2021 CoC NOFO

ATTACHMENT 1.

2021 COC CONSOLIDATED APPLICATION:

EVIDENCE OF THE COC'S STANDARD ASSESSMENT 1C-14

Table o	Table of Contents				
1.	Proof of Standardized Intake2-4	4			
2.	Proof of Standardized Assessment for Prioritization5-9)			

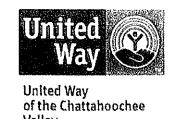
Things to know about your housing intake

- If you do not want to or cannot fill out the attached form, you may call 211 or 706-405-4775 and a call agent will assist you.
- Answering yes or no to any question, or refusing to answer any question, does
 not automatically qualify or disqualify you for services; however, answering
 completely helps us identify the best program for your needs.
- The information you provide will be shared with agencies that may be able to help. Why is it important that we share this information?
 - To better assess your needs and the needs of others in your community, as well as what services are available to you.
 - To track whether your needs, and the needs of others in your community, were actually met.
 - To improve the quality of care and service for homeless individuals and families.
- Completing this form is not a promise or guarantee of future housing.
- What are the next steps?
 - Your intake will be assessed by close of business the following business day and sent to programs that may be able to assist you with your housing needs.
 - o If you have provided a cell phone number, please make sure the voicemail is set up so we can leave messages for you if we can't reach you
 - You should be contacted by an agency representative by the close of business on the 3rd business day.
 - If you have not been contacted by an agency by the close of business on the 5th business day, please call 211 or 706-405-4775.
 - Please keep this sheet for your records

Date of Intake:	_/	_ 3 rd Business Day:	_/	5 th Business Day:_	
	(C	alls will not be returned o	n weeken	ds or holidays)	







FULL	NAME:
DATE	OF BIRTH/LAST FOUR OF SSN **-***
CONT	ΓACT NUMBER: () EMAIL:
What'	s the best time of day to contact you? MORNING AFTERNOON
If we d	can't contact you by phone, what's the best place to find you?
auton	rering YES or NO or refusing to answer any of the following questions neither natically qualifies nor disqualifies you for a program; it simply helps us identify the best ram to meet your needs.
1.	Where did you sleep last night?
2.	Have you (and/or your spouse) ever served in the Military (Active Duty, Guard or Reserves)? YES NO
	If so, are you eligible for VA Benefits? YES NO
3.	Is this your first experience with homelessness? YES NO
4.	How long have you been homeless THIS TIME?
5.	How many times have you been homeless in the past 3 years? • How many months total in the past 3 years have you been homeless?
6.	Do you have a source of income? YESNO • If yes, what is your approximate income \$ per MONTH
7.	Do you have a mental or physical disability? YES NO
8.	Have you ever been diagnosed with a mental illness? YES NO
9.	Do you have now or ever had a substance abuse issue? YES NO • If Yes, do you have an active substance abuse issue? YES NO
10	Are you a victim of Domestic Violence? YES NO
11	 Do you have a spouse/partner or other family members with you? YES NO If Yes, how many family members are with you? How many are under the age of 18?

12. Do you currently have Health Insurance? YES NO
13. What is your employment status? Disabled Employed Full Time Part Time Temp/Day Labor Unemployed Student (employed) Student (unemployed) Maternity Leave Retired Self-employed
14. Do you receive any type of assistance? Circle as many as apply
Child Support Food Stamps Foster Care Supplement General Assistance
Medicaid Medicare Peachcare Pension Retirement Section 8
Social Security/SSI/SSD TANF Unemployment Veteran's Benefits
WIC Worker's Compensation None Other:
By signing below, I give my permission for this information to be shared with agencies that may be able to assist me in locating and obtaining transitional and/or permanent housing.
Signature Date
FOR AGENCY USE ONLY
Intake Date/
3 rd Business Day/
5 th Business Day/
Staff Initials
Contact # Client ID

Vulnerability Index (VI) and Service Prioritization Decision Assistance Tool (SPDAT)

OrgCode Consulting Inc. and Community Solutions are the authors of the VI-SPDAT and F-VI- SPDAT. ClientTrack Inc. is licensed to include these tools within ClientTrack. The terms of this license require that users must be trained on the use and implementation of the tool by OrgCode Consulting, Inc. or an approved and certified trainer of Licensor. It is not permissible to alter the wording or scoring of the VI-SPDAT or F-VI-SPDAT forms without permission and written consent from Community Solutions and/or Org Consulting, Inc.

Administration						
	Client ID: 419151					
Interviewer Name:	Tammie Redding		Ager	ncy:	Team Sta	ff
Date/Time:	* 10/27/2021🗎 12:0	04 PM			Volumoor	
Enrollment:	10/27/2021 - Coord System	dinated Entry	Inter	view Location:		
Assessment Contact Type:	* Phone		Asse Loca	ssment tion:	Option not in the li	ist
Basic Information						
Name:		Parler.				
Nickname:						
In what language do you f express yourself?	eel best able to				Soc Sec No:	255 95 2664
Age at Assessment:		25	Birthdate:	02/03/1996	Has Consented to Participate?	✓ Yes No
IF THE PERSON IS 60 YE SCORE: 0	EARS OF AGE OR O	LDER, THEN S	SCORE 1.			
A. History of Housing & Ho	omelessness					
1. Where do you sleep mo (check one):	ost frequently?		Transitional	1.77	Safe Haven 🗸 Ou	utdoors
IF THE PERSON ANSWE THEN SCORE 1. SCORE: 1	RS ANYTHING OTH	ER THAN "SHE	ELTER", "TE	RANSITIONAL	_ HOUSING",OR "SAF	E HAVEN",
2. How long has it been si				0		
permanent stable housing # of Months:	? # or Years:			3		
3. In the last three years, have you been homeless?				3		
IF THE PERSON HAS EXI AND/OR 4+ EPISODES O SCORE: 0				ARS OF HOM	ELESSNESS,	
B. Risks						
4. In the past six months, Ia) Received health care atb) Taken an ambulance to	t an emergency depa					1 0

c) Been hospitalized as an inpatient?			3	0
d) Used a crisis service, including sexual ass and suicide prevention hotlines?	ault crisis,	ment	al health crisis, family/intimate violence, distress centers	0
e) Talked to police because you witnessed a because the police told you that you must me			victim of a crime, or the alleged perpetrator of a crime or	0
f) Stayed one or more nights in a holding cel longer stay for a more serious offence, or an			hether that was a short-term stay like the drunk tank, a n?	0
IF THE TOTAL NUMBER OF INTERACTION SCORE:	S EQUALS	3 4 OI	R MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE	
5. Have you been attacked or beaten up since becoming homeless?	Yes	~	No	
6. Have you threatened to or tried to harm yourself or anyone else in the last year?	Yes	~	No	
IF "YES" TO ANY OF THE ABOVE, THEN SO SCORE:	CORE 1 FC)R RI	SK OF HARM.	
7. Do you have any legal stuff going on				
right now that may result in you being locked up, having to pay fines, or that	Yes	~	No	
make it more difficult to rent a place to live?	100			
			· · · · · · · · · · · · · · · · · · ·	
IF "YES," THEN SCORE 1 FOR LEGAL ISSU SCORE:	JES.		77 C 1 Trings	
O				
8. Does anybody force or trick you to do things that you do not want to do?	Yes	✓	No	
9. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that?	Yes	~	No	
IF "YES" TO ANY OF THE ABOVE, THEN SO SCORE:	CORE 1 FO	R RI	SK OF EXPLOITATION.	
C. Socialization & Daily Functioning				
10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?	✓ Yes	N	0	
11.Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?	✓ Yes		o Refused	
IF "YES" TO QUESTION 10 OR "NO" TO QU SCORE: 1	ESTION 11	, THI	N SCORE 1 FOR MONEY MANAGEMENT.	
12.Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?	Yes	✓ N	Refused	
IF "NO," THEN SCORE 1 FOR MEANINGFU SCORE: 1	L DAILY AC	CTIVI	ΓY.	
13.Are you currently able to take care of	Yes	✓ N	Refused	

basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? IF "NO," THEN SCORE 1 FOR SELF-CARE. SCORE: 1 14.Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive Yes V No relationship, or because family or friends caused you to become evicted? IF "YES." THEN SCORE 1 FOR SOCIAL RELATIONSHIPS. SCORE: D. Wellness 15. Have you ever had to leave an apartment, shelter program, or other place Yes V No you were staying because of your physical health? 16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or Yes ✓ No heart? 17. If there was space available in a program that specifically assists people Yes V No Client Refused that live with HIV or AIDS, would that be of interest to you? 18. Do you have any physical disabilities that would limit the type of housing you Yes V No could access, or would make it hard to live independently because you'd need help? 19. When you are sick or not feeling well. ✓ Yes No. do you avoid getting help? 20.FOR FEMALE RESPONDENTS ONLY: Yes V No Are you currently pregnant? IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH. SCORE: 1 21. Has your drinking or drug use led you to being kicked out of an apartment or Yes ✓ No program where you were staying in the past? 22. Will drinking or drug use make it difficult for you to stay housed or afford your Yes V No housing? IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE USE. SCORE: 23. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of: a) A mental health issue or concern? ✓ Yes No. b) A past head injury? Yes V No c) A learning disability, developmental ✓ No Yes disability, or other impairment? 24.Do you have any mental health or brain Yes ✓ No

```
issues that would make it hard for you to
live independently because you'd need
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALTH.
SCORE:
IF THE RESPONENT SCORED 1 FOR PHYSICAL HEALTH AND 1 FOR SUBSTANCE USE AND 1 FOR MENTAL HEALTH,
SCORE 1 FOR TRI-MORBIDITY.
SCORE:
25. Are there any medications that a doctor
said you should be taking that, for
                                          Yes V No
whatever reason, you are not taking?
26.Are there any medications like
painkillers that you don't take the way the
                                          Yes V No
doctor prescribed or where you sell the
medication?
IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS.
SCORE:
0
27.YES OR NO: Has your current period
of homelessness been caused by an
experience of emotional, physical,
                                          ✓ Yes No
psychological, sexual, or other type of
abuse, or by any other trauma you have
experienced?
IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.
SCORE:
1
                                 Prescreen
                                                           7
                                 Total:
PRE-SURVEY:
                                                                 0
A. HISTORY:
                                                                 1
                                                                 0
B. RISK:
C. SOCIALIZATION & DAILY
                                                                 3
FUNCTIONS:
                                                                 3
D. WELLNESS:
PRE-SCREEN TOTAL:
                                                                 7
SCORING SECTION
SECTION
SCORE
Results
PRE-SURVEY
Score
Recomendation
A. HISTORY OF HOUSING & HOMELESSNESS
0-3
No housing intervention
B. RISK
0
4-7
An assessment for Rapid Re-Housing
C. SOCIALIZATION & DAILY FUNCTIONS
8+
An assessment for Permanent Supportive Housing/Housing First
D. WELLNESS
```

11/1/21, 6:40 PM	Printable Version
3 Grand Total 7 Follow-Up Questions	
On a regular day, where is it easiest to find you and what time o to do so?	f day is easiest
When?	Mornings Afternoon Evening Night
Is there a phone number and/or email where someone can get i or leave a message?	n touch with you
Phone:	
Email:	
Photo Permission:	Yes No
Prioritization Status:	* Placed on prioritization list
Restriction:	* Restrict to MOU/InfoRelease

View Request Log

GA 505	Continuum	of Care
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2021 CoC NOFO

ATTACHMENT 2.

2021 CoC Consolidated Application: PHA Administration Plan, Homeless Preference 1C-7

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4. Order of Preference

Housing Choice Voucher Program

The HACG will offer the following preferences for the Housing Choice Voucher Program:

First Priority Families of federally declared disasters who are eligible for the

program.

Second Priority Families who are considered to be displaced if they are required to

vacate housing as a result of federal, state, or local government action related to code enforcement, public improvement, or

development programs.

Third Priority Families who are residing in a qualified census tract that is in a

proposed redevelopment area.

No family will receive a higher ranking by qualifying for more than one preference. Based upon the above preferences, all families with First Priority will be offered housing before any families with Second Priority and Second Priority families will be offered housing before any families with Third Priority. The date and time of application will be utilized to determine the sequence within the above prescribed preferences.

Home for Good Homeless Program

The HACG will establish a separate waiting list preference for persons meeting the criteria under The Americans with Disabilities Act Settlement Agreement between the U. S. Department of Justice and the State of Georgia in order to assist the Department of Behavioral Health and Development Disabilities (DBHDD). This preference may be limited to a specific number of vouchers and vouchers may be either tenant-based or project-based.

This preference extends a priority to people with persistent mental illness who are chronically homeless and meet the criteria defined in the Authority's Moving to Work Demonstration Program Annual Plan. The date and time of application will be utilized to determine the sequence within this special program preference.

Arbor Pointe

The HACG will establish a separate waiting list preference for Arbor Pointe and families who are or will be receiving supportive services who are otherwise eligible will receive preference over all other applicants. The date and time of application will be utilized to determine the sequence within this special program preference.

5. Selecting Applicants from the Waiting List

Applicants will be selected from the Waiting List according to date and time of application, regardless of family size. If there is insufficient funding available to assist the family at the top of the list, the HACG will not admit any other applicant until funding is available for the first applicant. Families will only be offered vouchers in the waiting list sequence.

THE HOUSING AUTHORITY OF COLUMBUS, GEORGIA SECTION 8 HOUSING CHOICE VOUCHER PROGRAM

SINGLE ROOM OCCUPANCY PROGRAM

Introduction

In accordance with HUD regulation, the Authority is permitted to provide voucher assistance to units of single room occupancy. A single room occupancy (SRO) unit provides combined living and sleeping space for the individual use of the occupant; however, requires the occupant to share sanitary and/or food preparation facilities with others. Generally, the provisions for the eligibility and occupancy in the tenant based program apply to SRO units as detailed in this Administrative Plan with the exceptions and clarifications below provided.

Occupancy and Leasing

The occupancy of an SRO unit is limited to a single person. There will be a separate lease and HAP contract for each assisted person and the standard form of HAP contract is used.

The payment standard for an SRO unit is 75 percent of the Authority's zero bedroom (efficiency) payment standard. For a person residing in an SRO unit in an exception area, the payment standard is 75 percent of the HUD-approved zero bedroom exception payment standard amount. The utility allowance for an occupant of an SRO unit is 75 percent of the zero bedroom utility allowance for the building type.

Housing Quality Standards

The housing quality standards of the tenant-based voucher program (24 CFR Part 982.401) apply to SRO housing; however, the standards in this section apply in place of those for sanitary facilities, food preparation and refuse disposal, and space and security in place of those for food service and refuse disposal, space and security, and thermal environment. Sanitary facilities and space and security characteristics must meet local code standards for SRO housing. In the absence of applicable local code standards for SRO housing, the following standards apply.

Sanitary Facilities

At least one flush toilet that can be used in privacy, lavatory basin, and bathtub or shower, in proper operating condition, must be supplied for each six persons or fewer residing in the SRO housing.

If SRO units are leased only to males, flush urinals may be substituted for not more than one-half the required number of flush toilets. However, there must be at least one flush toilet in the building.

Every lavatory basin and bathtub or shower must be supplied at all times with an adequate quantity of hot and cold running water.

All of these facilities must be in proper operating condition, and must be adequate for personal cleanliness and the disposal of human waste. The facilities must utilize an approvable public or private disposal system.

Sanitary facilities must be reasonably accessible from a common hall or passageway to all persons sharing them. These facilities may not be located more than one floor above or below the SRO unit. Sanitary facilities may not be located below grade unless the SRO units are located on that level.

Space and security

No more than one person may reside in an SRO unit.

An SRO unit must contain at least one hundred ten square feet of floor space.

An SRO unit must contain at least four square feet of closet space for each resident (with an unobstructed height of at least five feet). If there is less closet space, space equal to the amount of the deficiency must be subtracted from the area of the habitable room space when determining the amount of floor space in the SRO unit. The SRO unit must contain at least one hundred ten square feet of remaining floor space after subtracting the amount of the deficiency in minimum closet space.

Exterior doors and windows accessible from outside an SRO unit must be lockable.

Access

Access doors to an SRO unit must have locks for privacy in proper operating condition.

An SRO unit must have immediate access to two or more approved means of exit, appropriately marked, leading to safe and open space at ground level, and any means of exit required by State and local law.

The resident must be able to access an SRO unit without passing through any other unit.

Sprinkler system

A sprinkler system that protects all major spaces, hard-wired smoke detectors, and such other fire and safety improvements as State or local law may require must be installed in each building. The term "major spaces" means hallways, large common areas, and other areas specified in local fire, building, or safety codes.

- child care, debts, household items, etc. and what the source of income is for these expenses.
- k. The HA's applications for admission HCV shall indicate for each application the date and time of receipt; applicant's race and ethnicity; determination by the HA as to eligibility of the applicant; when eligible, the bedroom size(s) for which eligible; preference, if any.

7.6 The Preference System:

- 7.6.1 **An admission preference:** An admission preference does not guarantee admission. Preferences establish the order of placement on the waiting list. Every applicant must still meet the HA's Selection Criteria before being offered a voucher.
- 7.6.2 **Verification of Preferences:** At the time of application, initial determinations of an applicant's entitlement to a preference may be made on the basis of an applicant's certification of their qualification for that preference. Before selection is made, this qualification must be verified.
- 7.6.3 **Preference (up front):** The following preference is available to qualifying families at this time:
 - **Catastrophic/Involuntary Displacement** or displaced by any governmental action, which is defined in this plan; Points 6
 - Veteran Preference: Head, spouse, co-head or sole member is an active member of the United States Armed Forces, a United States Veteran or a surviving spouse of a United States Veteran. Points 5
 - **Homeless Veterans Preference**: In order to address the problem of homelessness among Veterans, PCHA will establish a preference for veterans, where the head, spouse, cohead or sole member is a veteran of the United States military. Points 4
 - Working preference. The preferences are for families that qualify for the working preference at the time that they are selected from the Waiting List. To meet the preference, Working Family Preference is given if the head of household, spouse, co-head, or sole member of the household is employed at least 20 hours a week (consecutively) for the 6 months prior to eligibility, self-employed or is elderly or disabled. Points 3

Rev 6-1-2019 Page 20

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ATTACHMENT 3.

2021 CoC Consolidated Application: PHA Administration Plan, Moving On Preference 1C-7

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Moving Forward Strategy

Background:

The GA-505 (Muscogee/Russell Counties) CoC has developed a Moving on Strategy, in our continuum referred to as a Moving Forward Strategy (MFS). Originally written and implemented as a pilot strategy in 2011 by The House of T.I.M.E. (HOT). The HOT had 14 PSH beds within the CoC at the time. After developing the strategy, implementing the pilot and reviewing the results, the CoC has extended the Strategy to all PSH programs in the CoC area.

Overview of PSH and the Moving Forward Strategy:

Permanent supportive housing (PSH) is long-term, community-based housing combined with supportive services, for homeless persons with disabilities. PSH offers an opportunity for long-term stability and recovery. Because it is permanent housing, there are no time limits on length-of-stay. Over time, however, the needs and preferences of supportive housing tenants may change. After a period of stability in PSH, some people who live in site-based PSH no longer need the level of support that is available there. Some would like to move on to other housing that offers better access to jobs, family, or other social connections, or perhaps the opportunity to live in a different neighborhood. Some formerly homeless people live in scattered-site PSH, using tenant-based rental assistance from the HCV or the Shelter Plus Care program. For these subsidized tenants, "moving forward" from PSH may mean that the household no longer receives the same types or intensity of supportive services and may use a different type of rent subsidy, without moving to a different apartment. When people can "move forward" or "graduate" from PSH, this creates turnover that allows existing PSH to serve more chronically homeless people.

Purpose:

To implement a Moving Forward Strategy (MFS) that allows tenants to move from permanent supportive housing into another stable housing opportunity, thus, creating availability in existing PSH to be used to serve persons with a disabling condition and experiencing chronic homelessness.

Our goal is to improve communities by addressing existing and future needs of the most disadvantaged.

Moving Forward Strategy GA- 505 (Muscogee/Russell Counties) Continuum of Care

The Strategy:

- CoC Lead, Independent Service Provider and PHA review Permanent Housing Treatment Plans on all tenants and identify tenants that qualify to Move Forward.
- Tenants are notified of the qualification decision and only on a volunteer basis is the strategy to move the tenant forward implemented.
- Individual Service Providers help tenant with new housing location whether it be independent of continued housing services or through PHA.
- Identify barriers to tenants moving from PSH to other stable housing opportunities
 - o Create strategies to address and possibly element these barriers by making sure all housing providers us a Housing First Approach
- Identify the Service Providers willing to continue services for clients that need less intensive services but are in need of some support.
 - o The availability of ongoing support when needed is important because, even for "successful" PSH residents, progress can be uneven, health or mental health conditions can recur or worsen, or people can relapse with substance abuse problems.
- Continue to Identify Housing providers through the Housing Navigation Team to setaside units in affordable housing developments to provide opportunities for tenants to move on from PSH.
- Collaborate with PHA's to use tenant-based Housing Choice Vouchers for people who
 have achieved stability in site-based PSH. PHAs would provide rental assistance that
 would allow these tenants to move out of PSH and into housing that meets changing
 needs and preferences and no longer require the same level of supportive services. By
 following the Opening Doors Strategy households with incomes that are too low to pay
 for housing within the local community without ongoing assistance, can now move from
 PSH.
 - o The Columbus Housing Authority has launched a program for persons living in PSH who no longer need intensive services and want to move to other affordable housing in the community. Applicants with stable housing histories can move on to other housing using a Housing Choice Voucher. When program participant's move out of PSH, the units they vacate must be housing first and target the most vulnerable as described by the CoC.
 - O PHA has preference in place for households moving from PSH.
 - o PHA streamlines processes and places eligible households/individuals.
- Target "older" PSH beds that may not have been targeted to the most vulnerable and when the moving forward strategy allows, free up this existing inventory for individuals with the highest service needs, those who have been homeless for the longest time, and/or those with the greatest vulnerabilities.
 - o CoC helps through the 211 system in filling PSH beds with CH people.
- Moving Forward Committee (MFC) includes PHAs, supportive housing providers, CoC lead, member from the Housing Navigation Team and Local Landlords working continuously to identify a By-Name Waiting list of possible tenants to move from PSH Units.
 - o MFC Plays a significant role in reducing homelessness by determining local housing needs through their comprehensive plans, removing regulatory and legal barriers to the development of affordable and supportive housing, and fostering community support for permanent housing for the homeless. Addressing the lack of affordable housing limiting the ability to end homelessness by limiting its ability to move people from shelters to permanent housing.



October 26, 2021

To Whom it May Concern:

Home for Good, a program of the United Way of the Chattahoochee Valley has been the coordinating agency for the Housing Authority of Columbus Georgia's Moving to Work Rapid Rehousing Program since 2013. The Moving to Work Program serves the chronically homeless, veterans and those who no longer need permanent supportive housing but who will return to homelessness without the assistance provided and required by the Moving to Work Rapid Rehousing Program.

Sincerely,

John Casteel

Chief Assisted Housing Officer

GA 505 Contiunuum of Care

2021 CoC NOFO

ATTACHMENT 4.

2021 COC CONSOLIDATED APPLICATION: Local CoC Competition— Announcement, Established Deadline, Applicant Notifications, CONSOLIDATED APPLICATION POSTING 1E-1

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	Proof of CoC Competition announcement website Proof of CoC Competition announcement listserv Proof of local competition announcement Proof of local competition deadline posting Proof of informing projects of scoring criteria-email Proof of notification of projects to be included/tiering outside of E SNAPs Proof of posting of projects to be included/tiering-website

Attachment details FY 2021 Continuum of Care (CoC) Program Competition **Update – August 19, 2021** Our Local Competition Process Timeline will be issued next week The Notice of Funding Opportunity (NOFO) for the Fiscal Year (FY) 2021 Continuum of Care (CoC) Program Competition (NOFO) is available on <u>Grants gov</u> and the <u>Funding Opportunities</u> page on HUD's website. Submission Deadline: Tuesday, November 16, 2021 at 8:09 PM EST One report for Collaborative Applicants with UFA designation and includes the available UFA Costs amount Detailed Instructions CoC Application CoC Priority Listing Project Applications – all Navigational Guides Accessing the Project Application New Project Application Renewal Project Application UFA Costs Project Application Planning Costs Project Application o CoC Priority Listing Additional guidance including Frequently Asked Questions (FAQs) and remaining Navigational Guides will be posted to the CoC Program Competition page within the next two weeks. Questions regarding the FY 2021 CoC Program Competition process must be submitted to CoCNOFO@hud.gov. Questions related to e-snaps functionality (e.g., password lockout, access to user's application account, updating Applicant Profile) must be submitted to e-snaps@hud.gov. If you are aware or suspect that the Collaborative Applicant or project applicant for your CoC is not currently receiving these listsery messages, please forward the following link so the Collaborative Applicant or project applicant can register tuses insist' messages, peace to varie the toloring into our connective Applicance to police applicant carregates to receive listerer messages as this is the only form HUD uses to communicate CoC Program information to the public: SNAPS Competitions, specifically for Competition related messages; and SNAPS Program information, general information regarding SNAPS programs. We hope that you will want to continue receiving information from HUD. We safeguard our lists and do not rent, sell, or permit the use of our lists by others, at any time, for any reason. <u>HUD COVID-19 Resources and Fact Sheets</u> If you wish to be added or removed from this mail list, please <u>go here</u> and follow the instructions to either subscribe or

August 20, 2021

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ile name: nofa-announcment-for-newsletter-no ile type: application/pdf iploaded on: August 20, 2021 ile size: 263 KB	d-email.pdf		
Title	nofa announcment for newsletter nd email		
Caption			
Description			
Uploaded By	Lauren Lynn		
File URL:			
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Fw: FY 2021 CoC Program Competition Now Open

Pat Frey <pat@unitedwayofthecv.org>

Wed 8/18/2021 4:36 PM

To: Lisa Walters < lwalters@columbushousing.org >; Glenville Challenger < gchallenger@gwisr.org >; jlowman@phenixcityal.us <jlowman@phenixcityal.us>; Pat Frey <pat@unitedwayofthecv.org>; Curtis Lockette <clockette@columbusga.org>; margalena remington <mremington@feedingthevalley.org>; louierobinson@me.com <louierobinson@ME.com>; Lynn Sanders <Isanders@pchousing.org>; Beaty, Venita A. CAVHCS <Venita.Beaty@va.gov>; gajrodgers@aol.com <gajrodgers@aol.com> Bcc: crccenter@aol.com <crccenter@aol.com>; theplummerhome@gmail.com <theplummerhome@gmail.com>; bettyeb711@gmail.com <bettyeb711@gmail.com>; Holli Browder <hbrowder@columbusga.org>; M Brown <fjbrown1944@yahoo.com>; 2bassociates@mail.com <2bassociates@mail.com>; Latarsha Brown <lbrown@nhbh.org>; burns.brenda@columbusga.org <burns.brenda@columbusga.org>; Katie Byers <outreach@sasphs.net>; mbcambridge@hotmail.com <mbcambridge@hotmail.com>; Virginia Cartwright <vcartwright@nhbh.org>; John Casteel <icasteel@columbushousing.org>; Tiffany Cole <tchouseoftime@aol.com>; ceo@urbanleaguegc.org <ceo@urbanleaguegc.org>; demeka.daniels@cv.edu <demeka.daniels@cv.edu>; michael.david@uss.salvationarmy.org <michael.david@uss.salvationarmy.org>; Leroy Davis <leroyjr56@hotmail.com>; jody.dillard@dcs.ga.gov <jody.dillard@dcs.ga.gov>; liz <liz@homelessresourcenetwork.org>; Babbs Douglas <bdouglas14@knology.net>

From: HUD Exchange Mailing List <news@hudexchange.info>

Sent: Wednesday, August 18, 2021 4:14 PM **To:** Pat Frey <pat@unitedwayofthecv.org>

Subject: FY 2021 CoC Program Competition Now Open

[EXTERNAL MESSAGE]

Home Programs Resources Training

FY 2021 CoC Program Competition Now Open

This information was originally distributed via HUD.gov. HUD Exchange is redistributing the information for awareness.

The Notice of Funding Opportunity (NOFO) for the Fiscal Year (FY) 2021 Continuum of Care (CoC) Program Competition has been posted on <u>Grants.gov</u> and will be available on the HUD.gov <u>Funding Opportunities page</u> later today.

Availability in e-snaps

The CoC Application, CoC Priority Listing, and Project Applications will be available in <u>esnaps</u> no later than Thursday, August 19, 2021. Collaborative Applicants and project applicants will be able to access the applications to review, update, and enter required information for the application process.

Resources are available on the HUD.gov <u>CoC Program Competition page</u> and the HUD Exchange <u>e-snaps</u> Resources <u>page</u>.

Collaborative Applicants

- The CoC Application and CoC Priority Listing, which include all project applications
 that will be submitted to HUD, are separate submissions in e-snaps. Collaborative
 Applicants must submit both parts of the CoC Consolidated Application by the
 application submission deadline for HUD to consider the CoC Consolidated
 Application to be complete.
- There are six Project Listings in the CoC Priority Listing; however, only the New and Renewal Project Listings require unique rank numbers. The remaining four Project Listings only require Collaborative Applicants to accept or reject project applications.
- The CoC Competition Report that includes data reported in the Homelessness Data Exchange (HDX) is available for use by Collaborative Applicants to complete portions of the FY 2021 CoC Application.

Project Applicants

Project applicants renewing projects can choose to import information from the
project's FY 2019 renewal project application. This option is **not** available for
projects renewing in *e-snaps* for the first time. Importing must occur during the
funding opportunity registration step in *e-snaps* and is only available if you submitted
a renewal project application in the FY 2019 CoC Program Competition. Imported

responses must be carefully reviewed to ensure accuracy.

- Project applicants renewing a project for the first time in e-snaps will not be able to import information from a previous application. These applicants must complete the entire renewal project application. This situation includes projects that renewed for the first time and were awarded renewal funds under the FY 2020 CoC Program Non-Competitive Funding Notice.
- New project applications must be completed in full and in accordance with the new project application components permitted in this year's Competition.
- Youth Homelessness Demonstration Program (YHDP) replacement project applications must be completed in full and in accordance with the YHDP replacement project application process outlined in the NOFO.
- CoC planning and Unified Funding Agency (UFA) Costs applications will only be reviewed if submitted by the CoC's designated Collaborative Applicant identified in the CoC Applicant Profile in e-snaps.
- Dedicated Homeless Management Information System (HMIS) projects (renewal and new) can only be submitted by the CoC's designated HMIS Lead as identified in the CoC Applicant Profile in e-snaps.

Resources

New resources will be posted on the HUD.gov <u>CoC Program Competition page</u> between today, August 18, 2021 and Monday, August 23, 2021, including:

- FY 2021 CoC Estimated Annual Renewal Demand (ARD) Report
- Detailed instructions for the CoC Application, CoC Priority Listing, and all Project Application types
- Navigational guides for the New, Renewal, CoC Planning, and UFA Costs Project Applications, as well as the CoC Priority Listing

Additional guidance will be posted to the CoC Program Competition page within the next two weeks.

Resources currently available on the HUD Exchange <u>e-snaps</u> Resources <u>page</u> include:

- e-snaps 101 Toolkit
- e-snaps 201 Toolkit

Questions?

Questions about the CoC Program Competition must be submitted to the appropriate HUD.gov email address, as follows:

- cocnofo@hud.gov for questions about the NOFO, competition, and applications.
- e-snaps@hud.gov for questions about e-snaps technical issues, including creating
 an individual user profile, lockouts/password resets, requesting access to a CoC's or
 project applicant's e-snaps account, navigating e-snaps, updating the Applicant
 Profile, identifying the funding opportunity, creating a project, and accessing the
 application on the Submissions screen.

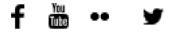
Note: Questions about policy and program implementation should continue to be submitted to the HUD Exchange <u>Ask A Question (AAQ) portal</u>. In Step 2 of the question submission process, select "CoC Program" from the "My question is related to" drop down list. Do not submit Competition questions or questions about *e-snaps* to the CoC Program AAQ.

SNAPS Mailing List Subscription

SNAPS is now using two different listservs to communicate competition and program updates:

- Subscribe to the HUD.gov listserv for information developed by HUD/SNAPS
 regarding the CoC program, ESG program, YHDP, Notices of Funding Opportunity
 (NOFOs) developed by SNAPS, and any other information related to SNAPS
 programs and the work to end homelessness.
 - Sign up for SNAPS Competition Information
 - Sign up for SNAPS Program Information
- Subscribe to the HUD Exchange listserv for information and guidance produced by HUD technical assistance providers regarding SNAPS programs.
 - Sign up for HUD Exchange updates

SNAPS grantees and interested stakeholders should consider subscribing both to the HUD Exchange mailing list and HUD.gov mailing lists. Please communicate this information to your homeless organizations, local government contacts, and other interested stakeholders.



Visit the HUD Exchange at https://www.hudexchange.info

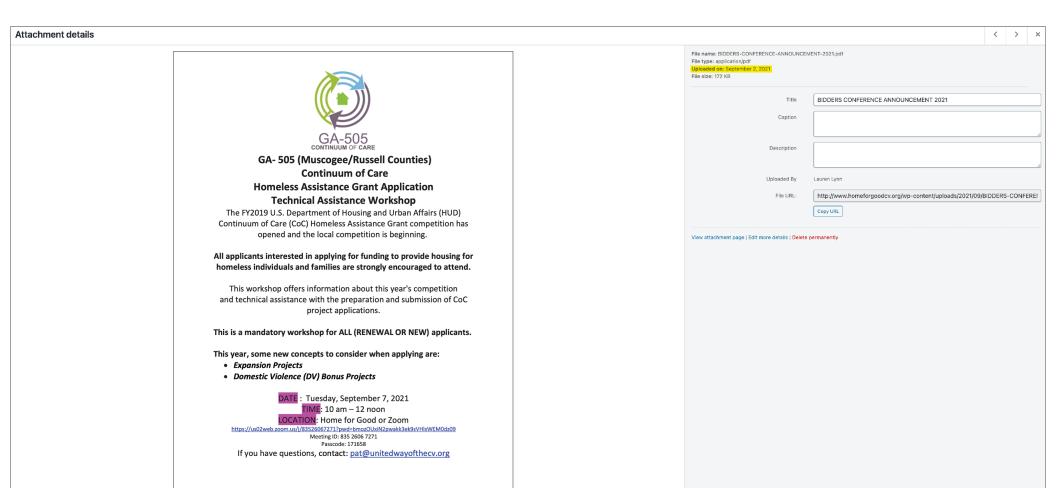
Forward to a Friend | Update Subscription | Unsubscribe from the List

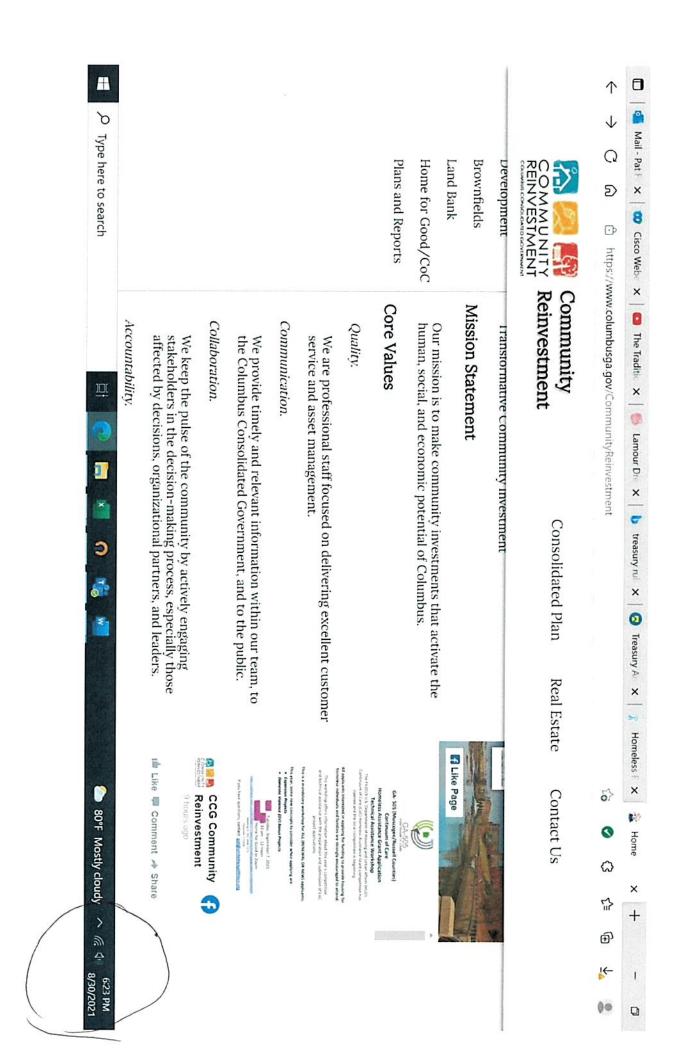
This email was sent to <u>pat@unitedwayofthecv.org</u> by <u>news@hudexchange.info</u>. Do not reply to this message. Contact the HUD Exchange at <u>info@hudexchange.info</u>.

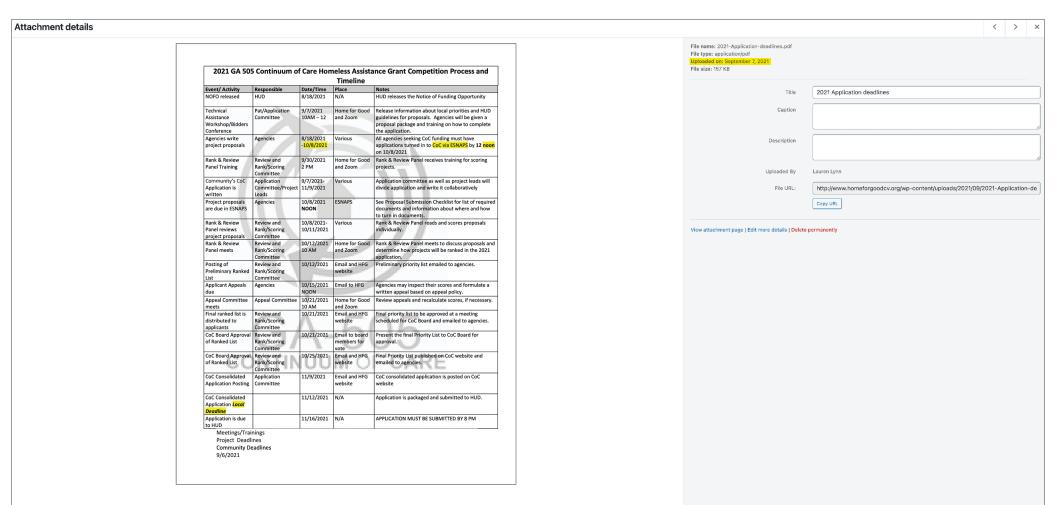
Update Profile/Email Address | Instant removal with SafeUnsubscribe TM | Privacy Policy | About Us

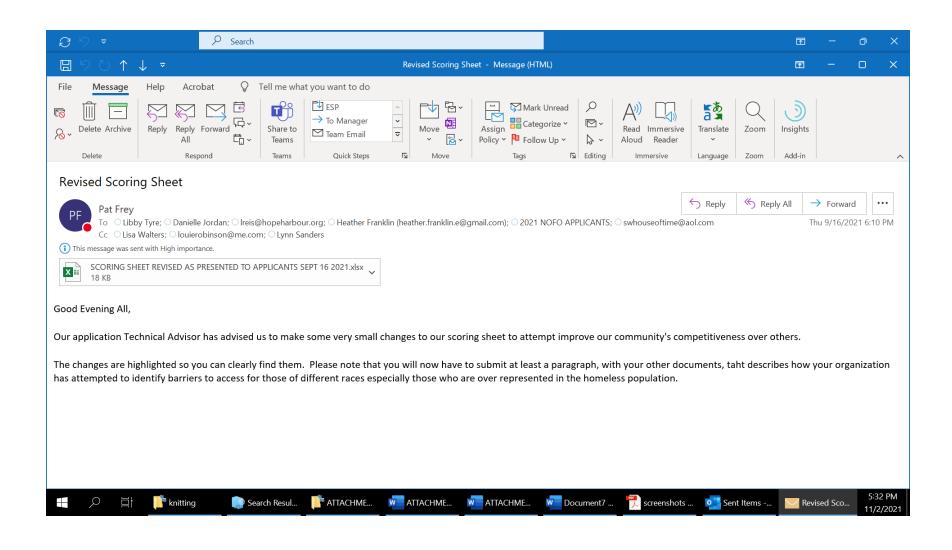
HUD Exchange | ICF | 9300 Lee Highway | Fairfax | VA | 22031

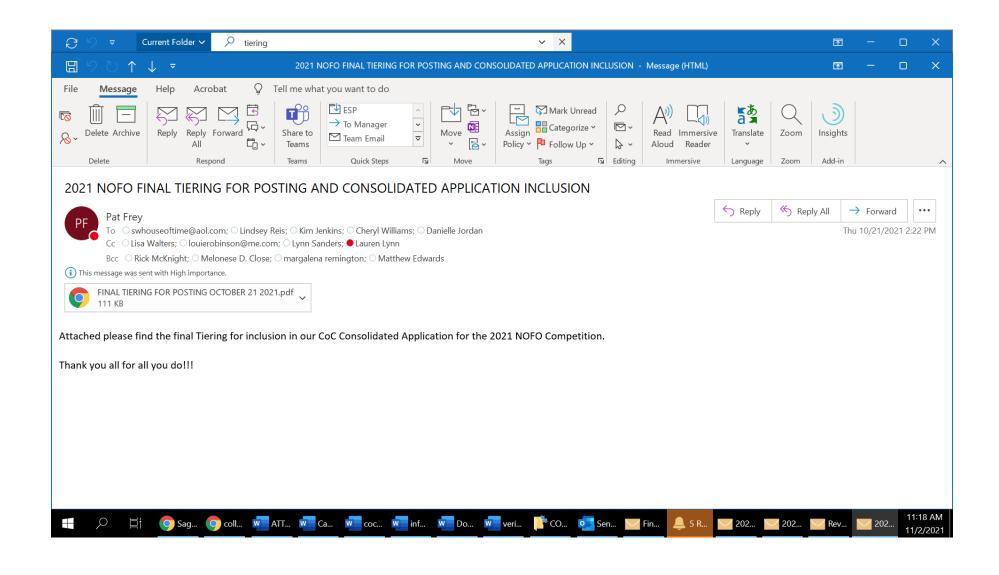
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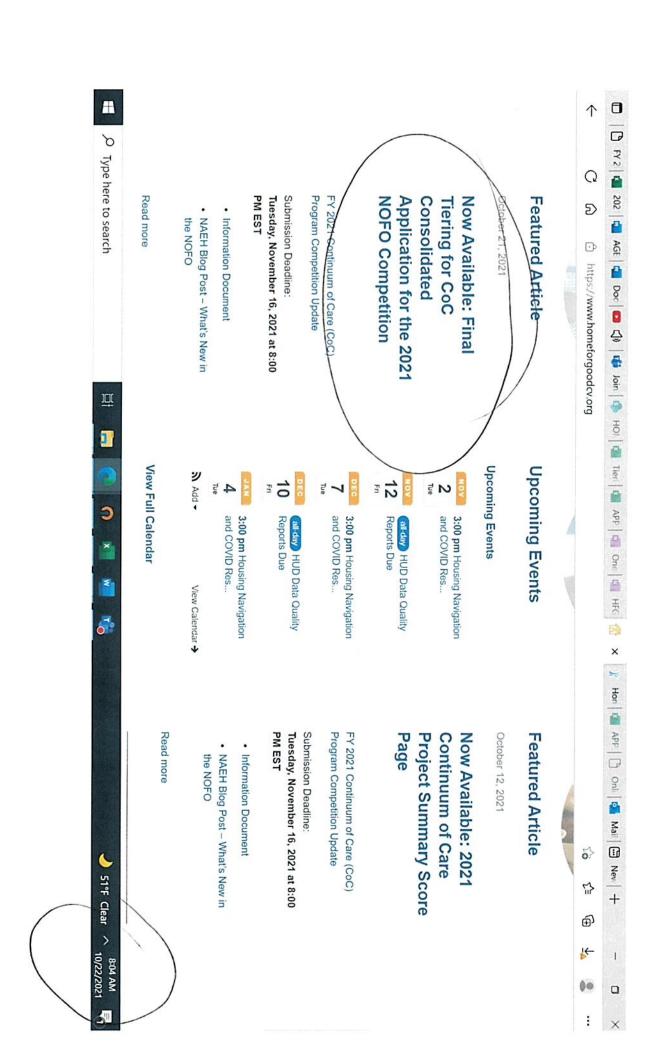












GA 505 Contiunuum of Care

2021 CoC NOFO

ATTACHMENT 5.

2021 COC CONSOLIDATED APPLICATION: Local CoC Competition—Project Review and Selection Process 1E-2

Table o	of Contents	
1.	Local Scoring Tool	2-4
2.	RRH & PSH Project Score Sheets	5-16
3	Final Ranked List with Project Scores	17

Continuum of Care Project Scoring Sheet

Agency Name: Open Door Cor	nmunity House, Inc.		
Program Name: Welcome	e Home		_
Application Review	Points	Agency Score	Rick
Project Description Is the project description complete and For DV service providers, does the prog promote client safety using trauma info	ram design	: No	2
Priorities Does the proposed project align with H moving clients from streets or emergen into permanent housing as demonstrat (DV- Comparable Dbase)	ocy shelters 0 pts = ed through HMIS?		28% 0
Target Populations What percentage of the people served from the following target population gr barriers such as 1: Chronically Homeles 3) DV Victims 4) Veterans as demonsta (Projects submitted by victim service providers will be evaluated using de-ide from a comparable database)	roups with severe 3 pts = 1 pts = rated with HMIS Data 0 pts =	75-99% 50-74% 25-49%	7
Housing Stability What percentage of those exiting proje Housing retain permanent housing for 3 demonstrated through System Perform (Projects submitted by victim service pro evaluated using de-identified aggregated database as housing stability is an obj	12 months as 5 pts = ance Measures? 3 pts = oviders will be 0 pts = e data from a comparable fective measure of increased s	75-99% 50-74% 25-49% less than 25%	100%
Housing First Is this a Housing First Project as exhibite and procedures? Projects must send complete intake with application for ranking and research.	d by policies 10 pts = 0 pts = e packet to be included		0
Coordinated Entry At least 90% of CES referrals are answer the GA 505 CES Guidelines. N/A for	•		NO 0

Occupancy/Served What is your average occupancy % over the past year (PSH/TH)? % of those served vs projections on last years application (RRH) (monthly % is acceptable for those without full year grant accessibility)	7 pts = 100% 5 pts =75-99% 3 pts = 50-74% 2 pts = 25-49% 0 pts = less than 25%	77%
Proposed Project Budget The budgets are calculated accurately with appropriate line items, including cash match amounts.	5 pts = Yes 3 pts = Yes/No 0 pts = No	5
Audit/Financial Information Does the project sponsor have any unresolved financial audit findings or issues with the IRS 990 form? (i.e. operating in the red in excess, unexplained amounts, etc.) Project applicants must submit YTD Financials, most recent 990. For organizations receiving more than \$100,000 in charitable donations or grants, your most recent independent audit must be included. (990 or audit cannot be dated prior to June 1, 2020.)	Yes, significant findings = -5 pts Yes, internal control issues = -3 pts Yes, minor findings being addressed = -2 pts No = 0 pts	-2
Ready to Proceed How soon will the project house its first client? Timeline for housing clients would be from the date of sign grant agreement to the date when housing assistance begin for first client.	•	3
Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match must be included in the packet		5
Income Growth What percentage of clients have an increase of income as demonstrated through System Performance Measure 4.1 & 4.4 (DV Comparable Dbase)	15 pts = 100% 10 pts = 75-99% 7 pts = 50-74% 3 pts = 25-49% 0 pts = less than 25%	25%
Returns to homelessness Has project shown a decrease in returns to homeless among those exited to permanent housing as measured by System Performance Measures 2a and 2b? (DV Comparable)	0 pts = No	NO CHANG
<u>Data Quality</u> Does the project's HUD Data Quality report reflect an overa error rate less than 5%?	5 pts = Yes 0 pts = No	YES 5

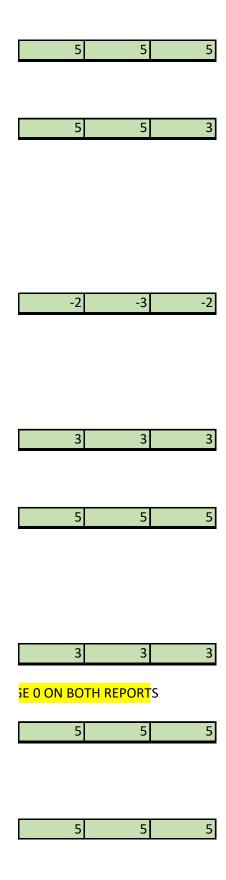
Does the project's SPM data show Changes in Earned Incom5 pts = Yes as exhibited in Measures 4.1 & 4.4? Opts = No Change in earned income directly correlates with access to employment services HIC Participation 5 pts = Yes VES Did the agency participate in the 2021 Housing Inventory and Point in Time Count and have a utilization rate of 5 pts = N/A 5 pts = N/A 5 pts = Yes Project Equity Analysis Describe how this project has identified any barriers to participation by persons of different races and ethnicities, particularly those over-represented in the local homeless population and how you have or will take steps to eleminate the identified barriers? Opts = No 10 pts = No 10 pts =	Employment Services			YES
Change in earned income directly correlates with access to employment services HIC Participation Did the agency participate in the 2021 Housing Inventory 0 pts = No and Point in Time Count and have a utilization rate of 5 pts = N/A 5 at least 85 %? Project Equity Analysis Project Equity Analysis Describe how this project has identified any barriers to 0 pts = No participation by persons of different races and ethnicities, particularly those over-represented in the local homeless population and how you have or will take steps to eleminate the identified barriers? Does the agency participate in the HMIS for the CoC? 0 pts = No Coc Participation Does the agency participate in CoC by attending CoC meetings 0 pts = No during the calendar year 2020? Did agency have a representative on at least 1 CoC Committ 3 pts = Yes in 2020 as exhibited by attendance of at least 50% at 0 pts = No said committee meetings?				
HIC Participation Did the agency participate in the 2021 Housing Inventory and Point in Time Count and have a utilization rate of at least 85 %? Project Equity Analysis Describe how this project has identified any barriers to a participation by persons of different races and ethnicities, particularly those over-represented in the local homeless population and how you have or will take steps to eleminate the identified barriers? Does the agency participate in the HMIS for the CoC? Opts = No TES OCC Participation Spts = Yes YES Occ Participation 3 pts = Yes Did the agency participate in CoC by attending CoC meetings Opts = No 3 during the calendar year 2020? Did agency have a representative on at least 1 CoC Committ 3 pts = Yes in 2020 as exhibited by attendance of at least 50% at Opts = No said committee meetings?		0 pts = 110		5
Did the agency participate in the 2021 Housing Inventory opts = No and Point in Time Count and have a utilization rate of 5 pts = N/A at least 85 %? Project Equity Analysis 5 pts = Yes Describe how this project has identified any barriers to 0 pts = No participation by persons of different races and ethnicities, particularly those over-represented in the local homeless population and how you have or will take steps to eleminate the identified barriers? Does the agency participate in the HMIS for the CoC? 0 pts = No 5 (comparable database for DV providers) CoC Participation 3 pts = Yes YES Did the agency participate in CoC by attending CoC meetings 0 pts = No 3 during the calendar year 2020? Did agency have a representative on at least 1 CoC Committ 3 pts = Yes in 2020 as exhibited by attendance of at least 50% at 0 pts = No said committee meetings? 3 pts = Yes YES O pts = No 3 3	employment services			
Did the agency participate in the 2021 Housing Inventory and Point in Time Count and have a utilization rate of 5 pts = No 5 pts = N/A 5 st least 85 %? Project Equity Analysis 5 pts = Yes Describe how this project has identified any barriers to 0 pts = No participation by persons of different races and ethnicities, particularly those over-represented in the local homeless population and how you have or will take steps to eleminate the identified barriers? 0 HMIS Participation 5 pts = Yes 7 yes Does the agency participate in the HMIS for the CoC? 0 pts = No 5 (comparable database for DV providers) CoC Participation 3 pts = Yes 7 yes Did the agency participate in CoC by attending CoC meetings 0 pts = No 3 during the calendar year 2020? Did agency have a representative on at least 1 CoC Committ 3 pts = Yes 7 yes in 2020 as exhibited by attendance of at least 50% at 0 pts = No 3 and 1 yes = No 3 and 2020 as exhibited by attendance of at least 50% at 0 pts = No 3 and 2020 as exhibited by attendance of at least 50% at 3 and 2020 as exhibited by attendance of at least 50% at 3 and 2020 as exhibited by attendance of at least 50% at 3 and 2020 as exhibited by attendance of at least 50% at 3 and 2020 as exhibited by attendance of at least 50% at 3 and 2020 as exhibited by attendance of at least 50% at 2020 as exhibited by attendance of at least 50% at 3 and 2020 as exhibited by attendance of at least 50% at 2020 as exhibited by attendance of at least 50% at 2020 as exhibited by attendance of at least 50% at 2020 as exhibited by attendance of at least 50% at 2020 as exhibited by attendance of at least 50% at 2020 as exhibited by attendance of at least 50% at 2020 as exhibited by attendance of at least 50% at 2020 as exhibited by attendance of at least 50% at 2020 as exhibited by attendance of at least 50% at 2020 as exhibited by attendance of at least 50% at 2020 as exhibited by attendance of at least 50% at 2020 as exhibited by attendance of at least 50% at 2020 as exhibited by attendance of at least 50% at 2020	IIIC Participation	Forta Van		VEC
and Point in Time Count and have a utilization rate of at least 85 %? Project Equity Analysis Describe how this project has identified any barriers to participation by persons of different races and ethnicities, particularly those over-represented in the local homeless population and how you have or will take steps to eleminate the identified barriers? Does the agency participate in the HMIS for the CoC? Opts = No Spread YES Does the agency participate in the HMIS for the CoC? Opts = No Society and the agency participate in CoC by attending CoC meetings opts = No during the calendar year 2020? Did agency have a representative on at least 1 CoC Committ 3 pts = Yes in 2020 as exhibited by attendance of at least 50% at said committee meetings? 3 pts = Yes YES YES YES YES YES YES 3	- 	=		TES
Project Equity Analysis Describe how this project has identified any barriers to 0 pts = No participation by persons of different races and ethnicities, particularly those over-represented in the local homeless population and how you have or will take steps to eleminate the identified barriers? Does the agency participate in the HMIS for the CoC? 0 pts = No CoC Participation 3 pts = Yes YES Did the agency participate in CoC by attending CoC meetings 0 pts = No during the calendar year 2020? Did agency have a representative on at least 1 CoC Committ 3 pts = Yes in 2020 as exhibited by attendance of at least 50% at 0 pts = No said committee meetings? 3 pts = Yes YES YES YES YES 3		•		5
Project Equity Analysis Describe how this project has identified any barriers to 0 pts = No participation by persons of different races and ethnicities, particularly those over-represented in the local homeless population and how you have or will take steps to eleminate the identified barriers? MMIS Participation		- P. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		3
Describe how this project has identified any barriers to 0 pts = No participation by persons of different races and ethnicities, particularly those over-represented in the local homeless population and how you have or will take steps to eleminate the identified barriers? MMIS Participation				
participation by persons of different races and ethnicities, particularly those over-represented in the local homeless population and how you have or will take steps to eleminate the identified barriers? Description Spts = Yes VES Does the agency participate in the HMIS for the CoC? (comparable database for DV providers) CoC Participation 3 pts = Yes Did the agency participate in CoC by attending CoC meetings 0 pts = No during the calendar year 2020? Did agency have a representative on at least 1 CoC Committ 3 pts = Yes in 2020 as exhibited by attendance of at least 50% at Opts = No 3 3 3	Project Equity Analysis	5 pts = Yes		
particularly those over-represented in the local homeless population and how you have or will take steps to eleminate the identified barriers? HMIS Participation		0 pts = No		
you have or will take steps to eleminate the identified barriers? HMIS Participation				
HMIS Participation Does the agency participate in the HMIS for the CoC? Opts = No (comparable database for DV providers) CoC Participation 3 pts = Yes Did the agency participate in CoC by attending CoC meetings Opts = No during the calendar year 2020? Did agency have a representative on at least 1 CoC Committ 3 pts = Yes in 2020 as exhibited by attendance of at least 50% at Spts = Yes Opts = No 3 YES YES YES Opts = No 3 3				
Does the agency participate in the HMIS for the CoC? 0 pts = No (comparable database for DV providers) CoC Participation 3 pts = Yes Did the agency participate in CoC by attending CoC meetings 0 pts = No during the calendar year 2020? Did agency have a representative on at least 1 CoC Committ 3 pts = Yes in 2020 as exhibited by attendance of at least 50% at 0 pts = No said committee meetings?	you have or will take steps to eleminate the identified barri	ers?		0
Does the agency participate in the HMIS for the CoC? 0 pts = No (comparable database for DV providers) CoC Participation 3 pts = Yes Did the agency participate in CoC by attending CoC meetings 0 pts = No during the calendar year 2020? Did agency have a representative on at least 1 CoC Committ 3 pts = Yes in 2020 as exhibited by attendance of at least 50% at 0 pts = No said committee meetings?	HMIS Participation	5 pts = Yes		YES
CoC Participation 3 pts = Yes Did the agency participate in CoC by attending CoC meetings 0 pts = No during the calendar year 2020? Did agency have a representative on at least 1 CoC Committ 3 pts = Yes in 2020 as exhibited by attendance of at least 50% at 0 pts = No said committee meetings?		0 pts = No		5
Did the agency participate in CoC by attending CoC meetings 0 pts = No during the calendar year 2020? Did agency have a representative on at least 1 CoC Committ 3 pts = Yes in 2020 as exhibited by attendance of at least 50% at 0 pts = No said committee meetings?	(comparable database for DV providers)			
Did the agency participate in CoC by attending CoC meetings 0 pts = No during the calendar year 2020? Did agency have a representative on at least 1 CoC Committ 3 pts = Yes in 2020 as exhibited by attendance of at least 50% at 0 pts = No said committee meetings?				
Did agency have a representative on at least 1 CoC Committ 3 pts = Yes in 2020 as exhibited by attendance of at least 50% at 0 pts = No said committee meetings?		•		YES
Did agency have a representative on at least 1 CoC Committ 3 pts = Yes in 2020 as exhibited by attendance of at least 50% at 0 pts = No said committee meetings?		gs 0 pts = No		3
in 2020 as exhibited by attendance of at least 50% at said committee meetings? O pts = No 3	during the calendar year 2020?			
in 2020 as exhibited by attendance of at least 50% at said committee meetings? O pts = No 3	Did agency have a representative on at least 1 CoC Commi	tt 3 pts = Yes		YES
		-		
<u>Total</u> 63.25 64	said committee meetings?			3
10tal 63.25 64	Total		62.25	64
	Total		63.25	64
9/6/2021			9/6/2021	
REVISED 9/13/2021		REVISED		

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2021 Continuum of Care Project Scoring Sheet

Agency Name: Georgia Housing and Finance Authority New Horizons CSB S+CR ²rogram Name: **Application Review Points Agency Score** Rick **Project Description 2** pts = Yes **0** pts = No Is the project description complete and accurate? For DV service providers, does the program design promote client safety using trauma informed victim centered protocol. **Priorities** 71% Does the proposed project align with HUD priorities of **5 pts** = Yes **0** pts = No moving clients from streets or emergency shelters into permanent housing as demonstrated through HMIS? (DV- Comparable Dbase) (>90 of clients directly from streets or shelter) **Target Populations** 7 pts = 100%76% What percentage of the people served by the project are **5 pts** =75-99% **3 pts** = 50-74% from the following target population groups with severe barriers such as 1: Chronically Homeless 2) Families **1 pts =** 25-49% 3) DV Victims 4) Veterans as demonstarated with HMIS Data 0 pts = less than 25% 5 (Projects submitted by victim service providers will be evaluated using de-identified aggregate data from a comparable database) **Housing Stability 10 pts** = 100% 100% 7 pts =75-99% What percentage of those exiting project to Permanent **5 pts** = 50-74% Housing retain permanent housing for 12 months as demonstrated through System Performance Measures? 3 pts = 25-49%**0 pts =** less than 25% (Projects submitted by victim service providers will be evaluated using de-identified aggregate data from a comparable database as housing stability is an objective measure of increased safety for 10 households who have experienced Domestic Violence.) **Housing First** Is this a Housing First Project as exhibitd by policies **10 pts =** Yes and procedures? 0 pts = No 10 Projects must send complete intake packet to be included with application for ranking and review **Coordinated Entry** NO **5** pts = Yes At least 90% of CES referrals are answered in compliance wit 0 pts = No the GA 505 CES Guidelines. N/A for DV projects

Occupancy/Served	7 pts = 100%	49
What is your average occupancy % over the past year (PSH/TH)?	5 pts =75-99%	SERVED
% of those served vs projections on last years application (RRH)	3 pts = 50-74%	
(monthly % is acceptable for those without full year grant	2 pts = 25-49%	
accessibility)	0 pts = less than 25%	
		5
Proposed Project Budget	5 pts = Yes	
The budgets are calculated accurately with appropriate	3 pts = Yes/No	
line items, including cash match amounts.	0 pts = No	3
Andia/Pinancial Information	v · ·•	
Audit/Financial Information	Yes, significant	
Does the project sponsor have any unresolved financial	findings = -5 pts	
audit findings or issues with the IRS 990 form? (i.e.	Yes, internal control	
operating in the red in excess, unexplained amounts, etc.)	issues = -3 pts	
Project applicants must submit YTD Financials, most	Yes, minor findings	
recent 990. For organizations receiving more than \$100,000 in charitable donations or grants, your most	being addressed = -2	
recent independent audit must be included. (990 or audit	pts	
cannot be dated prior to June 1, 2020.)	No = 0 pts	0
Deadute Duncand		
Ready to Proceed		
How soon will the project house its first client?	3 pts =within 3 months	
Timeline for housing clients would be from the date of sign	n: 1 pts = 4-6 months	
	•	
grant agreement to the date when housing assistance begin	•	
grant agreement to the date when housing assistance begin for first client.	•	3
for first client.	ns 0 pts = 7 months or	3
for first client. Match Donations	ns 0 pts = 7 months or more	3
for first client. Match Donations Do match letters sufficiently document the required match	ns 0 pts = 7 months or more 5 pts = Yes	3
for first client. Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match	ns 0 pts = 7 months or more 5 pts = Yes	0
for first client. Match Donations Do match letters sufficiently document the required match	ns 0 pts = 7 months or more 5 pts = Yes	0
for first client. Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match must be included in the packet	of pts = 7 months or more 5 pts = Yes h 0 pts = No	0
for first client. Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match must be included in the packet Income Growth	5 pts = 7 months or more 5 pts = Yes h 0 pts = No 15 pts = 100%	0 0%
for first client. Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match must be included in the packet Income Growth What percentage of clients have an increase of income	15 pts = 7 months or more 5 pts = Yes h 0 pts = No 15 pts = 100% 10 pts = 75-99%	0
for first client. Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match must be included in the packet Income Growth What percentage of clients have an increase of income as demonstrated through System Performance Measure	15 pts = 7 months or more 5 pts = Yes h 0 pts = No 15 pts = 100% 10 pts = 75-99% 7 pts = 50-74%	0 0%
for first client. Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match must be included in the packet Income Growth What percentage of clients have an increase of income	5 pts = 7 months or more 5 pts = Yes h 0 pts = No 15 pts = 100% 10 pts = 75-99% 7 pts = 50-74% 3 pts = 25- 49%	0 0%
for first client. Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match must be included in the packet Income Growth What percentage of clients have an increase of income as demonstrated through System Performance Measure	15 pts = 7 months or more 5 pts = Yes h 0 pts = No 15 pts = 100% 10 pts = 75-99% 7 pts = 50-74%	0 0%
Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match must be included in the packet Income Growth What percentage of clients have an increase of income as demonstrated through System Performance Measure 4.1 & 4.4 (DV Comparable Dbase)	5 pts = 7 months or more 5 pts = Yes h 0 pts = No 15 pts = 100% 10 pts = 75-99% 7 pts = 50-74% 3 pts = 25- 49%	0
Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match must be included in the packet Income Growth What percentage of clients have an increase of income as demonstrated through System Performance Measure 4.1 & 4.4 (DV Comparable Dbase) Returns to homelessness	5 pts = 7 months or more 5 pts = Yes h 0 pts = No 15 pts = 100% 10 pts = 75-99% 7 pts = 50-74% 3 pts = 25-49% 0 pts = less than 25%	0 0%
for first client. Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match must be included in the packet Income Growth What percentage of clients have an increase of income as demonstrated through System Performance Measure 4.1 & 4.4 (DV Comparable Dbase) Returns to homelessness Has project shown a decrease in returns to homeless amon	5 pts = 7 months or more 5 pts = Yes h 0 pts = No 15 pts = 100% 10 pts = 75-99% 7 pts = 50-74% 3 pts = 25-49% 0 pts = less than 25%	0 no change
for first client. Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match must be included in the packet Income Growth What percentage of clients have an increase of income as demonstrated through System Performance Measure 4.1 & 4.4 (DV Comparable Dbase) Returns to homelessness Has project shown a decrease in returns to homeless amon those exited to permanent housing as measured by	5 pts = Yes h 0 pts = No 15 pts = No 15 pts = 100% 10 pts = 75-99% 7 pts = 50-74% 3 pts = 25-49% 0 pts = less than 25% g 5 pts = Yes 0 pts = No	0
for first client. Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match must be included in the packet Income Growth What percentage of clients have an increase of income as demonstrated through System Performance Measure 4.1 & 4.4 (DV Comparable Dbase) Returns to homelessness Has project shown a decrease in returns to homeless amon	5 pts = Yes h 0 pts = No 15 pts = No 15 pts = 100% 10 pts = 75-99% 7 pts = 50-74% 3 pts = 25-49% 0 pts = less than 25% g 5 pts = Yes 0 pts = No	0 no change
Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match must be included in the packet Income Growth What percentage of clients have an increase of income as demonstrated through System Performance Measure 4.1 & 4.4 (DV Comparable Dbase) Returns to homelessness Has project shown a decrease in returns to homeless amon those exited to permanent housing as measured by System Performance Measures 2a and 2b? (DV Comparable)	5 pts = Yes h 0 pts = No 15 pts = No 15 pts = 100% 10 pts = 75-99% 7 pts = 50-74% 3 pts = 25-49% 0 pts = less than 25% g 5 pts = Yes 0 pts = No	0 no change
Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match must be included in the packet Income Growth What percentage of clients have an increase of income as demonstrated through System Performance Measure 4.1 & 4.4 (DV Comparable Dbase) Returns to homelessness Has project shown a decrease in returns to homeless amon those exited to permanent housing as measured by System Performance Measures 2a and 2b? (DV Comparable Data Quality	5 pts = Yes h 0 pts = 100% 15 pts = 100% 10 pts = 75-99% 7 pts = 50-74% 3 pts = 25-49% 0 pts = less than 25% g 5 pts = Yes 0 pts = No e Dbase)	no change
Match Donations Do match letters sufficiently document the required match for the project type? Match letter and verification of match must be included in the packet Income Growth What percentage of clients have an increase of income as demonstrated through System Performance Measure 4.1 & 4.4 (DV Comparable Dbase) Returns to homelessness Has project shown a decrease in returns to homeless amon those exited to permanent housing as measured by System Performance Measures 2a and 2b? (DV Comparable)	5 pts = Yes h 0 pts = 100% 15 pts = 100% 10 pts = 75-99% 7 pts = 50-74% 3 pts = 25-49% 0 pts = less than 25% g 5 pts = Yes 0 pts = No e Dbase)	no change

Employment Services			NO
Does the project's SPM data show Changes in Earned Incom			
as exhibited in Measures 4.1 & 4.4?	0 pts = No		
Change in earned income directly correlates with access to			0
employment services			
HIC Participation	5 pts = Yes		YES
Did the agency participate in the 2021 Housing Inventory	0 pts = No		
and Point in Time Count and have a utilization rate of	5 pts = N/A		5
at least 85 %?			
Project Equity Analysis	5 pts = Yes		
Describe how this project has identified any barriers to	0 pts = No		
participation by persons of different races and ethnicities,			
particularly those over-represented in the local homeless p			
you have or will take steps to eleminate the identified barri	ers?		0
LIBAIC Deuticinestina	- . v		VEC
HMIS Participation	5 pts = Yes		YES
Does the agency participate in the HMIS for the CoC?	0 pts = No		5
(comparable database for DV providers)			
CoC Participation	3 pts = Yes		YES
Did the agency participate in CoC by attending CoC meeting	gs 0 pts = No		3
during the calendar year 2020?			
Did agency have a representative on at least 1 CoC Commi	tt 3 pts = Yes		YES
in 2020 as exhibited by attendance of at least 50% at	0 pts = No		
said committee meetings?			3
<u>Total</u>		59	59
		0/6/2021	
	DEVICED	9/6/2021	
	REVISED	9/13/2021	

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PROJECTEI % SERVED COMPARED TO PROJECTION

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CHECKED EMPLOYMENT STATUS JUST TO BE SURE

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2021 Continuum of Care Project Summary Score Page

Agency	<u>Project</u>	Raw Score	<u>Percentage</u>
New Horizons	Shelter Plus Care	59	53.64%
House of Time	House of Time	73.5	66.82%
House of Time/HTH	Homeless to a Home	83	75.45%
Open Door	Welcome Home	63.25	57.50%
Hope Harbour	DV RRH Project	87.75	79.77%
House of Time	Moving Home	93	84.55%
Hope Harbour	DV RRH Project 2	87.75	79.77%
Hope Harbour	DV RRH New Project	86.5	78.64%

Continuum of Care Project Scoring Sheet

Program Name:			
Application Review	Points	Agency Sco	ore
Project Description		2 pts = Yes	
s the project description complete and accurat		0 pts = No	2
For DV service providers, does the program des	_		
promote client safety using trauma informed v	victim centered protoco	ol.	
Priorities_			
Does the proposed project align with HUD prior	rities of	5 pts = Yes	
moving clients from streets or emergency shelt	ers	0 pts = No	5
nto permanent housing as demonstrated throu	ıgh HMIS?	(>90 of clients directly	from streets or shelter
DV- Comparable Dbase)			
Target Populations		7 pts = 100%	
What percentage of the people served by the p	roject are from the	5 pts =75-99%	
following target population groups with severe	barriers such as 1) Ch	rı 3 pts = 50-74%	
2) Families 3) DV Victims 4) Veterans as demons	starated with HMIS Dat	ta 1 pts = 25-49%	
Projects submitted by victim service providers v	will be	0 pts = less than 25%	7
evaluated using de-identified aggregate data fr	om a comparable		
database)			
Housing Stability		10 pts = 100%	
What percentage of those exiting project to Per	rmanent	7 pts =75-99%	
Housing retain permanent housing for 12 mont	hs as demonstrated	5 pts = 50-74%	
hrough System Performance Measures?		3 pts = 25-49%	
Projects submitted by victim service providers v	will be	0 pts = less than 25%	
evaluated using de-identified aggregate data fr	om a comparable		
database as housing stability is an objective m	neasure of increased sa	fety for households	
who have experienced Domestic Violence.)			10
Housing First			
s this a Housing First Project as exhibitd by poli	icies and procedures?	10 pts = Yes	
Projects must send complete intake packe	t to be included	0 pts = No	10
		5 pts = Yes	
Coordinated Entry			5
		0 pts = No	
Coordinated Entry		0 pts = No	
Coordinated Entry 505 CES guidelines		0 pts = No 7 pts = 100%	
Coordinated Entry 505 CES guidelines N/A FOR DV Occupancy/Served	st year (PSH/TH)?	•	
Coordinated Entry 105 CES guidelines 1/A FOR DV Occupancy/Served What is your average occupancy % over the pas		7 pts = 100%	
Coordinated Entry 505 CES guidelines N/A FOR DV	s application (RRH)	7 pts = 100% 5 pts =75-99%	
Coordinated Entry 505 CES guidelines N/A FOR DV Cocupancy/Served What is your average occupancy % over the pas 6 of those served vs to projections on last years	s application (RRH)	7 pts = 100% 5 pts =75-99% 3 pts = 50-74%	

Proposed Project Budget The budgets are calculated accurately with appropriate line items, including cash match amounts.	5 pts = Yes 3 pts = Yes/No 0 pts = No	5
Audit/Financial Information Does the project sponsor have any unresolved financial audit findings or issues with the IRS 990 form? (i.e. operating in the red in excess, unexplained amounts, etc.) Project applicants must submit YTD Financials, most recent 990. For organizations receiving more than \$100,000 in charitable donations or grants, your most recent independent audit must be included. (990 or audit cannot be dated prior to June 1, 2020.)	Yes, significant findings = -5 pts Yes, internal control issues = -3 pts Yes, minor findings being addressed = -2 pts No = 0 pts	0
Ready to Proceed How soon will the project house its first client? Timeline for housing clients would be from the date of signed grant agreement to date housing assistance begins for first client.	3 pts =within 3 months 1 pts = 4-6 months 0 pts = 7 months or more	3
Match Donations Do match letters sufficiently document the required must be included in packet.	5 pts = Yes 0 pts = No	5
Income Growth What percentage of clients have an increase of income as demonstrated by through System Performance Measure 4.1 & 4.4 (DV Comparable Dbase)	15 pts = 100% 10 pts = 75-99% 7 pts = 50-74% 3 pts = 25-49% 0 pts = less than 25%	15
Returns to homelessness exited to permanent housing as measured by System Performance Measure 2 a &2b (DV Comparable D-base)	5 pts = Yes 0 pts = No	5
Data Quality Does the project's HUD Data Quality report reflect an overall error rat less than 5%?	e 5 pts = Yes 0 pts = No	5
Employment Services Does the project's SPM data show Changes in Earned Income as exhibited in Measures 4.1 & 4.4 Change in earned income directly correlates with access to employment services	5 pts = Yes 0 pts = No <i>n</i> ı	5
HIC Participation Did the agency participate in the 2021 Housing Inventory and Point in Time Count and have a utilizaiton rate of at least 85 %?	5 pts = Yes 0 pts = No 5 pts = N/A	5

Project Equity Analysis	5 pts = Yes	
Describe how this project has identified any barriers to participation	on by 0 pts = No	
of different races and ethnicities , particularly those over-represen	nted i	
local homeless population and how you have or will take steps to	o eliminate	
the identified barriers?		<u>5</u>
HMIS Participation	5 pts = Yes	
Does the agency participate in the HMIS for the CoC?	0 pts = No	5
(comparable database for DV providers)		
CoC Participation	3 pts = Yes	
Did the agency participate in CoC by attending CoC meetings	0 pts = No	3
in during the calendar year 2020?		
Did agency have a representative on at least 1 CoC Committee in	2020 3 pts = Yes	
as exhibited by attendance of at least 50% at said committee mee	tings 0 pts = No	
		3
<u>Total</u>		110
		9/6/2021
	DEV/ISED	• •
	REVISED	9/13/2021

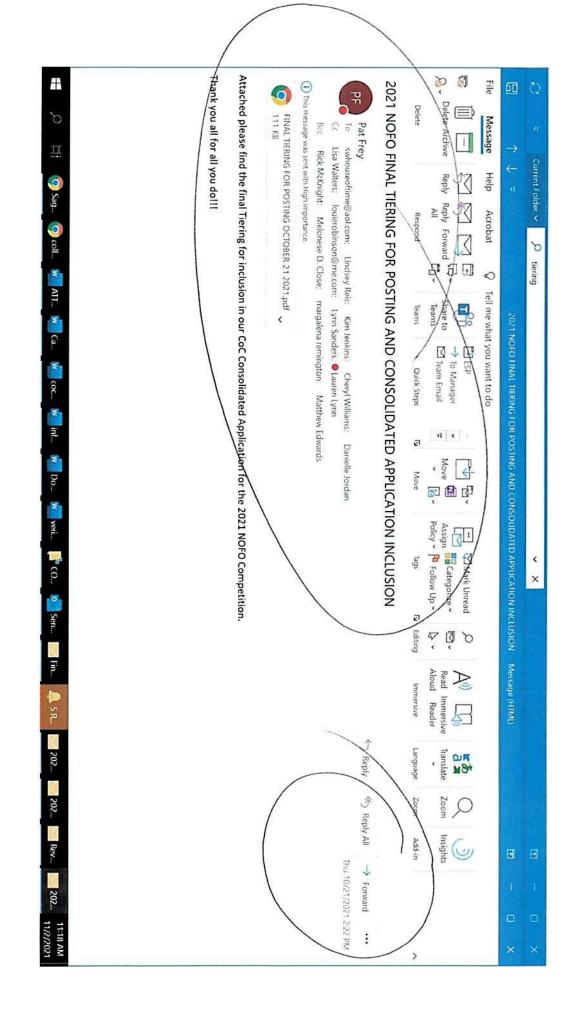
GA 505 Contiunuum of Care

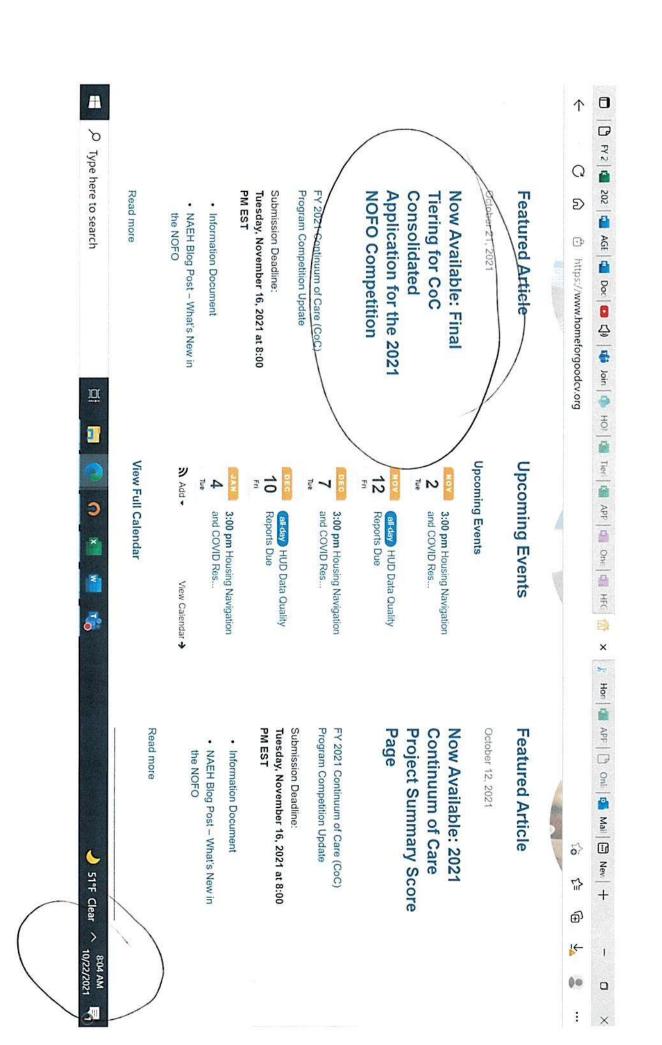
2021 CoC NOFO

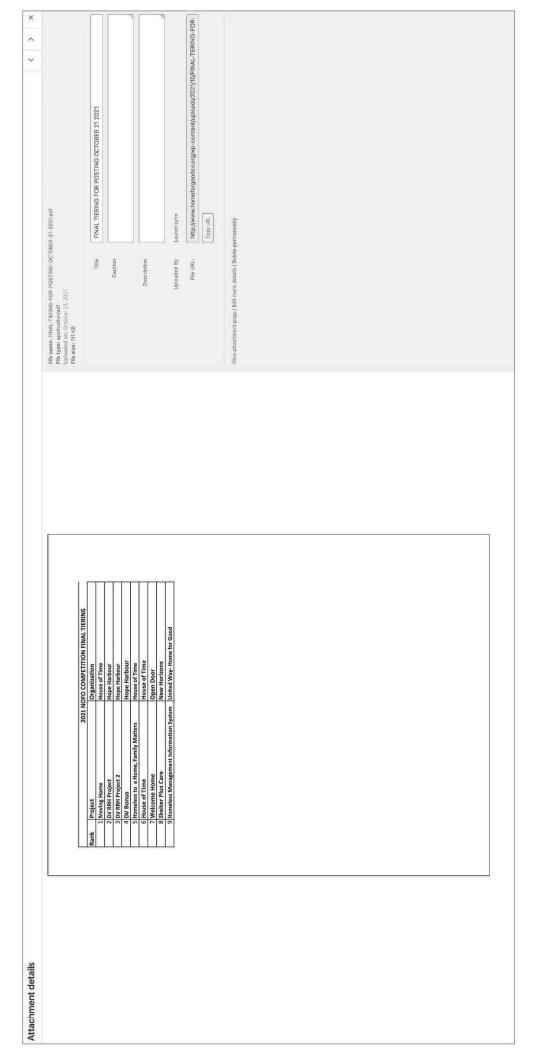
ATTACHMENT 6.

2021 COC CONSOLIDATED APPLICATION: Local CoC Competition—Public Posting -Projects Rejected-Reduced *1E-5*

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1.	Project notification of inclusion outside of E SNAPS2	
2.	Final Tiering Website Posting3-4	







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ATTACHMENT 7.

2021 COC CONSOLIDATED APPLICATION: Local CoC Competition—Public Posting -Projects Accepted *1E-5A*

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1.	Project notification of inclusion outside of E SNAPS2	
2.	Final Tiering Website Posting3-4	

