Before Starting the CoC Application

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

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

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

1. The FY 2023 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2023 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2023 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.
Answering Multi-Part Narrative Questions
Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

Attachments
Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed–including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.
- Attachments must match the questions they are associated with–if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.
- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

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

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

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

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

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

1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	

	In the chart below for the period from May 1, 2022 to April 30, 2023:	
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted–including selecting CoC Board members, and participated in your CoC's coordinated entry system; or	
2.	select Nonexistent if the organization does not exist in your CoC's geographic area:	

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

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

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

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

(limit 2,500 characters)

1) CoC communicates transparently 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 methods & are held at a centrally located venue accessible to all (incl bus routes). INCENTIVES TO JOIN THE COC, such as free HMIS services 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 have QUARTERLY EVENTS (Job/resource Fairs, SOAR Training, etc.), incl participating and non participating organizations W/ AN INVITATION TO JOIN EXTENDED TO ORGANIZATIONS 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 (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 and culturally diverse individuals serve on their board and compliance is part of the CoC Scoring Card. CoC conducts a hybrid annual membership drive in a centrally located area targeting organizations in culturally specific communities to promote participation and equitable access to populations of black, Latino, indigenous, LGBTQ+ and persons with disabilities. A survey by our Outreach committee supplies information quarterly regarding high concentration areas of these targeted populations.

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

		Describe in the field below how your CoC:
	1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
	2.	communicated information during public meetings or other forums your CoC uses to solicit public information;
	3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
	4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

(limit 2,500 characters)

1) CoC solicits and considers 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.
3)CoC solicits and considers opinions via email with docs that can be read with assisted technology & the CoC offers interpretation or disability services upon request (i.e., ASL or large text versions of docs), meetings are held in places that are accessible for persons with disabilities.
4 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, LGBTQ, Landlord Engagement, survivors of DV, human trafficking,loss of employment and housing due to Covid-19 and, 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 protocol have become the norm rather than the exception.

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

		Describe in the field below how your CoC notified the public:
	1.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;
	2.	about how project applicants must submit their project applications–the process;
	3.	about how your CoC would determine which project applications it would submit to HUD for funding; and
	4.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats.

(limit 2,500 characters)

1) The Continuum of Care used a multi layered approach to announce the FY2023 Notice of Funding Opportunity to the public. The announcements of the competition with an invitation to all interested parties to attend the Homeless Assistance Grant Application TA Workshop and receive information on funding availability for grantees/non-grantees, i.e, organizations that have never received funding before, and the application process was posted on the CoC website (7/13/2023), the Columbus Consolidated Government Community Reinvestment website (7/18/2023), and included in the CoC biweekly newsletter (7/14/2023). Email was sent to notify CoC Members and community stakeholders reaching over 200 community members (7/17/2023). A press release was also sent to all local media outlets for further public awareness of the CoC Competition (7/18/2023) as well as being presented at the GA 505 CoC Annual Meeting (8/17/2023) which is also announced publicly to solicit new members.

2) The Continuum of Care published the 2023 Competition Process and Timeline on the Continuum of Care website, as well as during the GA 505 Continuum of Care Annual Meeting and to the attendees of the Homeless Assistance Grant Application Technical Assistance Workshop. The Competition timeline and Process delineated how the applications were to be submitted and the deadlines for such submissions. Furthermore, instructions were fully explained at the Homeless Assistance Grant Application Workshop. Links to the HUD CoC Competition page related to the Continuum of Care Competition, ESNAPS, Navigational Guides and Detailed Instructions were included in the Homeless Assistance Grant Application Technical Workshop packets sent to all attendees as well as posted to Continuum of Care website (7/28/2023).

3) The Scoring and Ranking process which the Continuum of Care would follow to determine projects included it the Consolidated Application was covered at the Homeless Assistance Grant Application Workshop. The Scoring Tool the Scoring Team would use was fully explained, as well as the Tiering Process. The Appeals Process was also fully covered.

4) 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), 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

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

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

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

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

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

18.	Hope Harbour - DV, VSP Shelter Housing	Yes

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

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

(limit 2,500 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 V.B.1.c.	

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

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	Yes
5.	Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers.	Yes

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

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

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

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

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

(limit 2,500 characters)

The CoC has a formal MOU with Enrichment Services and Muscogee County School District 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 are active in the CoC and 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 household 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 and 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. 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 and the McKinney Vento Director is an elected member of the CoC Board. The CoC Lead also serves on the Muscogee County Attendance Panel solidifying the relationship with the School District and advocating for the needs of the most vulnerable students and families.

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

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

(limit 2,500 characters)

The Columbus-Muscogee / Russell County Continuum of Care (CoC) has a well-developed overarching policy which establishes the standards for making aware individuals and families of their eligibility for educational services. This policy includes Emergency Solutions Grant (ESG) funded projects as well as CoC funded projects. 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 are informed of the eligibility for services. This includes collaborating with early childhood programs and McKinney- Vento Department and Federal Programs Department of local school districts to determine available options.

Recipients and sub-recipients may decide (and are encouraged to do so) to set standards that exceed these minimum standards.

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

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

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

1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Collaboration with Federally Funded Programs and Victim Service Providers.	
	NOFO Section V.B.1.e.	

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

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

1C-5a.	Collaboration with Federally Funded Programs and Victim Service Providers to Address Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

	Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:
1.	update CoC-wide policies; and
2.	ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors.

(limit 2,500 characters)

1) CoC regularly reviews & updates CoC wide policies to address the needs of Domestic Violence, Dating Violence, Sexual Assault, & Stalking Providers. CoC most recently updated the CoC Governance Charter's VAWA Emergency Transfer Plan to comply with the requirements under 24 CFR 5 Docket No. FR-6330-N-01 Document Number 2022-28073. The update was presented to and unanimously approved by the CoC Membership at the COC Annual Membership Meeting August 17, 2023. The collaboration between the Georgia Coalition Against Domestic Violence, Hope Harbour and the CoC is essential to ensure that policies are effective, sensitive, and responsive to the needs of domestic violence victims/survivors. The organizations work together regularly to make sure that the policies in our CoC address the needs of domestic violence victims/survivors effectively and sensitively. CoC wide policies are updated & adapted as needed to address emerging issues & changing community needs. Regular collaboration is vital for creating and maintaining CoC policies that effectively support survivors & work towards preventing domestic violence in the community.

2) Collaborating w the Georgia Coalition Against Domestic Violence, Hope Harbour & the CoC to ensure that all housing/services provided by the CoC are trauma informed & can meet the needs of survivors is crucial in creating a safe/supportive environment for those affected by DV. The CoC, Hope Harbour & GCADV organize training for local CoC providers to raise awareness re trauma-informed care. Training ensures that all members of the CoC understand the impact of trauma and how to interact with survivors in a sensitive and supportive manner. CoC, along with Hope Harbour & GCADV ensures that providers use a client center approach that empowers victims/survivors in decision-making & goal setting processes related to housing/services. Victim/Survivor input is prioritized & ensuring that victims/survivors have access to immediate support. Maintaining regular communication & meetings between the CoC & Hope Harbour allows us to address emerging issues, share best practices, & ensure that trauma-informed approaches are consistently applied. By regularly collaborating, the CoC can ensure that its housing & services are trauma- informed, victim/survivor centered, & responsive to the unique needs of survivors of domestic violence. This collaboration approach creates a safer & more supportive environment for those seeking help & recovery.

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

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

(limit 2,500 characters)

Training occurs at least semi-annually for all Community Service Providers, and annually for 211 Operators, Coordinated Entry Staff and membership of the CoC to ensure best practices are adhered to for those surviving or fleeing domestic violence, dating violence, sexual assault and stalking survivors and human trafficking.

1) The Project Staff training covered Emergency Transfer Plan for Victims of Domestic Violence, Dating Violence, Sexual Assault, Stalking and best practices for serving victims of DV. The trainings were held on February 23, 2023 and August 17, 2023 and was conducted by the Director of the local DV shelter.

2) The CoC lead (Coordinated Entry Lead) and DV Shelter Director led the training for the CoC membership, CE staff and community providers on February 23, 2023. 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 contacted 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-5c.	Implemented Safety Planning, Confidentiality Protocols in Your CoC's Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
		NOFO Section V.B.1.e.	

		Describe in the field below how your CoC's coordinated entry includes:
	1.	safety planning protocols; and
	2.	confidentiality protocols.

(limit 2,500 characters)

1) Integrating safety planning protocols in the CE process is essential to ensure that individuals experiencing homelessness, especially those who are survivors of domestic violence or other forms of trauma are provided with appropriate support and protection. During the initial screening and intake process, CE staff ask specific questions related to safety concerns. These questions are designed to identify domestic violence victims/survivors and assess their immediate safety needs. The victim/survivor is then connected with the local DV Shelter and a trained advocate creates a safety plan at this time. This assessment involves a detailed discussion on the victim/survivors safety concerns, triggers, and any immediate dangers. It also provides guidance for the safest way to escape the violent home and provides community resources to assist with these needs.

2) Confidentiality protocols are critical within our Coordinated Entry system to protect the privacy and safety of victims/survivors that are seeking housing and services. The CE staff explains the privacy and confidentiality policies to all individuals seeking assistance during the intake process. Victims/Survivors are informed of their rights regarding the sharing of personal information and must provide explicit consent for any data sharing. All personal information that is collected during the intake is securely stored and protected through a secure computer system. The computer system uses unique client identification numbers to minimize the use of personal information. When a victim/survivor identifies as a victim of DV , they are connected with an advocate at the local DV Shelter. No other agencies have access to this computer database, adding an extra level of safety and confidentiality to victims/survivors requesting services. CE staff are trained to access and share confidential information on a need-to-know basis only. CE staff are informed about the importance of maintaining strict confidentiality and respecting clients' rights to privacy. CE staff sign an agreement with the CoC stating all information gathered remains confidential.

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

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

(limit 2,500 characters)

1) The CoC and local DV Shelter use de-identified aggregate data to gather information and statistics on survivors of domestic violence while protecting the privacy and confidentiality of the individual clients. DV Shelter uses a separate database that no other agencies in the CoC have access too. The database that the DV Shelter uses is the Comparable Database which is the ClientTrack Database for domestic violence agencies. Reports are done with client ID numbers and no identifying information. This information includes the number of victims/survivors served, demographics, housing outcomes, services, and more. The CoC and DV Shelter adhere to stringent protocols and regulations to safeguard the privacy and dignity of victims/survivors of domestic violence.
2) The CoC uses the de-identified aggregate data to inform community planning efforts, allocate resources, and make data driven decisions about how to best address the needs of victims/survivors of domestic violence. The data is also used to advocate for policy changes, secure funding, and raise awareness about the specific challenges faced by victims/survivors of domestic violence.

1C-5e.	Implemented Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

	Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:
1.	whether your CoC has policies and procedures that include an emergency transfer plan;
2.	the process for individuals and families to request an emergency transfer; and
3.	the process your CoC uses to respond to individuals' and families' emergency transfer requests.

(limit 2,500 characters)

1)The CoC Emergency Transfer Plan Policies and Procedures requires that individuals and families in CoC Funded and ESG funded projects are informed of the Emergency Transfer Plan upon project enrollment. The Emergency Transfer Plan is explained to ALL individuals and families and each enrolled individual or family receive a copy of the Emergency Transfer Plan. The Emergency Transfer Plan uses the HUD 5381 template for the CoC Emergency Transfer Plan to ensure compliance and the application is uniform across ALL providers.
2)The CoC Emergency Transfer Policy states: Individuals and families requesting an emergency transfer must provide to their housing provider's office a written request for emergency transfer if; a) The individual or family fears that there is a threat of imminent harm from further violence if the individual or family was to remain in the same home or ; b) The participant provides a written statement of sexual assault that occurred at the participants residence within 90 days preceding the request for an emergency transfer.
3)The CoC process for responding to requests for Emergency Transfer is a multilayered effort to ensure the safety of individuals and families and the confidentiality of victims of violence. Project staff, with client permission, coordinates with housing providers for emergency transfer and avails individuals and families of emergency services through Victims Service Providers. Furthermore, project staff assists individuals and families in all steps of the Emergency Transfer process to include locating, securing and relocation to a new dwelling.

1C-5f.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

	Describe in the field below how your CoC:	
1.	ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within the CoC's geographic area; and	
2.	proactively identifies systemic barriers within your homeless response system that create barriers to safely house and provide services to survivors of domestic violence, dating violence, sexual assault, or stalking.	

(limit 2,500 characters)

1) The CoC ensures that survivors of DV, dating violence, sexual assault, or stalking have access to all of the housing and services available in the CoC's geographic area by directly connecting the survivor with the local DV program that offers multiple housing programs that meet the victims needs for safety and affordable housing while wrapping them in services to meet all of their needs. Victims/Survivors have safe and accessible entry points – this includes a dedicated intake process and safe, confidential spaces to meet with advocates.
2) The CoC actively engages with victims/survivors, collaborating with Hope Harbour and conducting thorough assessments of policies and practices, our CoC can identify and address systemic barriers that hinder the safe housing and support of victims/survivors of DV, dating violence, sexual assault or stalking. This proactive approach is essential for creating a more inclusive and victim/survivor centered system. These are the steps that the CoC uses to identify systemic barriers: A)Data collection on the experience of the victims/survivors is vital to identify and remove systemic barriers, this includes tracking entry points, housing outcomes, the barriers encountered, and service utilization. B)Encouraging victims/survivors to share their stories and experiences with the homeless response providers and domestic violence program. C)Consistently review existing CoC policies and procedures to identify unintentional barriers that may deter victims/survivors from seeking help or accessing housing and services. D)Provide training to housing providers on trauma informed care and practices to help them better understand the needs and experiences of victims/survivors. E) Establish a feedback system that allow victims/survivors to report any issues they encounter within the homeless response system anonymously and confidentially.

1C-5g.	Ensuring Survivors With a Range of Lived Expertise Participate in Developing CoC-Wide Policy and Programs.	
	NOFO Section V.B.1.e.	

	Describe in the field below how your CoC:	
1.	ensured survivors with a range of lived expertise are involved in the development of your CoC-wide policy and programs; and	
2.	accounted for the unique and complex needs of survivors.	

(limit 2,500 characters)

1) By actively involving victims/survivors with diverse lived experience in the development of polices and procedures, our CoC created policies and procedures that are more responsive, equitable, and trauma-informed. This collaborative approach not only empowers victims/survivors but also helps build a more effective and inclusive homeless response system. A comprehensive group of stakeholders, to include local DV shelter and victims/survivors of domestic violence was involved in the design of our CoC's policies and procedures. This helps ensure that the system will be effective and manageable for those who are experiencing homelessness, at risk of becoming homeless and for the housing and service providers tasked with meeting their needs.

2) By actively involving victims/survivors with diverse lived experience in the development of polices and procedures, our CoC created policies and procedures that are more responsive, equitable, and trauma-informed. This collaborative approach not only empowers victims/survivors but also helps build a more effective and inclusive homeless response system that accounts for the unique complex needs of survivors. In January 2023 before the PIT count a Lived experience committee was formed including current and prior persons with lived expertise in many areas of DV, Homelessness, Substance Abuse and Mental Illness. This committee was invaluable to our PIT count and has committed to staying together and participating in monthly meetings in the above mentioned areas and participates in developing CoC wide Policies and Programs. This committee consist of a diverse group of individuals from the streets, local DV shelter, local substance abuse and mental health shelters.

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

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

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

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

(limit 2,500 characters)

1) The Continuum of Care regularly reviews and updates as necessary the CoC-wide Anti Discrimination Policy to ensure compliance with Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity Rule and the Equal Access in Accordance with and Individual's Gender Identity in Community Planning and Development Programs Rule based on stakeholder feedback through community forums, community wide stakeholder surveys as well as review of equal access as exhibited through Coordinated Entry and Access System.
2) Annually the Continuum of Care trains the Continuum of Care Membership of the CoC wide Anti-discrimination Policy. Training is provided collectively as well as with Technical Assistance for organizations to ensure consistency with CoC wide anti-discrimination policy. Submission of the organization Anti-Discrimination Policy is a requirement for NOFO Project applicants.
3) The CoC regularly reviews for equal access in compliance with the CoC wide anti-discrimination policy through analyzing Coordinated Entry and Access System referrals. 4)Technical Assistance is provided to organizations if non-compliance is exhibited. Technical Assistance includes but is not limited to review of Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity Rule and the Equal Access in Accordance with and Individual's Gender Identity in Community Planning and Development Programs Rule along with the CoC wide Anti-Discrimination Policy. Organization leadership as well as front line staff are involved in the Technical Assistance to ensure organization wide understanding and compliance going forward.

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

You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.
Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with–if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Housing Authority of Columbus, Georgia	11%	Yes-HCV	Yes
Phenix City Housing Authority	1%	Yes-HCV	No

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

Describe in the field below:

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

(limit 2,500 characters)

BOTH PHAs IN THE GOEGRAPHICAL AREA HAVE HOMELESS PREFERENCES.
1) The Continuum of Care works closely the Housing Authority of Columbus, Georgia and the Phenix City Housing Authority (both PHAs in the CoC geographical area) on maintaining and enhancing homeless preferences. Both PHAs have standing positions on the CoC board to ensure on going collaboration and coordination. The CoC , through the Coordinated Entry and Access System serves as the access point for Housing Choice Voucher programs for the PHAs to include but not limited to Moving to Work HCV, Emergency Housing Vouchers and Second Chance Voucher Program. The CoC regularly participates in the review and revisions of the PHAs Administrative Plan.
2) N/A

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

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

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

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section V.B.1.g.	

In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process:

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	No
3.	Housing Choice Voucher (HCV)	Yes
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	Yes

	6.	Non-Elderly Disabled (NED) Vouchers	No
	7.	Public Housing	Yes
	8.	Other Units from PHAs:	

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

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	No
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV).	
	NOFO Section V.B.1.g.	

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

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

Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.	

PHA
Housing Authority
Phenix City Housi...

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

Name of PHA: Housing Authority

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

Name of PHA: Phenix City Housing Authority

1D. Coordination and Engagement Cont'd

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

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

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

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

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

1D-2.	Housing First–Lowering Barriers to Entry.	
	NOFO Section V.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 2023 CoC Program Competition.	9
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 2023 CoC Program Competition that have adopted the Housing First approach.	9
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

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

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

(limit 2,500 characters)

1) In addition to evaluation of all project admission packets, online applications and criteria of CoC and ESG projects on an annual basis, Coordinated Entry Referrals to aforementioned projects are evaluated monthly.
2) Referral acceptance, rejection and length of time from referral to project contact with client, enrollment and move in date are 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.
3) CoC mandated all projects within the continuum to operate under the same Housing First guidelines as projects within the competition. Semi-annual checks are done with all projects by requesting copies of policies and procedures of documented housing first project and by reviewing the project admission packets for compliance.

	1D-3.	Street Outreach--Scope.	
		NOFO Section V.B.1.j.	

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

(limit 2,500 characters)

1) The two street outreach team's efforts to ensure identification and engagement of all persons experiencing unsheltered homelessness take multipronged approach. 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. The outreach team regularly coordinates with those most likely to encounter the unsheltered homeless: law enforcement, healthcare workers, business owners/staff, homeless service providers, YMCA staff, Parks and Recreation staff and those with lived experience.

2)100 % of the geographical area is covered by the Street Outreach efforts. Outreach teams uses an 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.

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

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

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

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

		HIC Longitudinal HMIS Data	2022	2023
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	286	509

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

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

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

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

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

(limit 2,500 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. 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
2)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 Providers, and uninsured and underinsured Healthcare clinic are all active members of the CoC. Project Staff attends the monthly meetings including, but not limited to, Substance Abuse Treatment Project and Mental Health Project staff.
3)The CoC regularly provides CoC funded projects with information to promote project staff certification and requires CoC project staff to have a minimum of one certified staff member per organization.

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

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

(limit 2,500 characters)

The Continuum of Care is leading the community's efforts to increase the capacity for Non Congregate Shelter. The CoC lead began the efforts to increase Non Congregate Shelter March 2020. The mitigation of the spread of infectious diseases, protecting the highly vulnerable and decreasing the number of those experiencing unsheltered homelessness drives the efforts of the community. Through connecting community service providers with funding sources to include but not limited to local foundations and philanthropic organizations, Community Development Block Grant CV, and ESG CV the availability of non congregate shelter in the CoC has increased.

ID-8.	Partnerships with Public Health Agencies–Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section V.B.1.o.	

	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:	
1.	develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and	
2.	prevent infectious disease outbreaks among people experiencing homelessness.	

(limit 2,500 characters)

1)The Continuum of Care has regular and ongoing collaboration with State and Local Public Health agencies to respond to and prevent infectious disease outbreaks among those experiencing homelessness. Policies and procedures have been developed in collaboration with Public Health officials include, but are not limited to, symptoms screening by all providers, quarantine and isolation access and procedures, testing and vaccinations.
2) Public Health agencies in collaboration with the Continuum of Care made all services available to those experiencing homelessness at locations frequented by those experiencing homelessness to maximize accessibility and mitigate community spread of infectious diseases. The Continuum of Care Lead also serves on the Region I Emergency Preparedness Coalition led by the State Public Health Agency.

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section V.B.1.o.	

	Describe in the field below how your CoC:
1.	shared information related to public health measures and homelessness, and
2.	facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.

(limit 2,500 characters)

1) Information from Public Health is included in the Continuum of Care's biweekly newsletter to service providers and community stakeholders. Doing so, allows for dissemination of information from Public Health related to ongoing and emergent public health measures and homelessness.
2) Public Health officials attend and actively participate in the Continuum of Care's monthly Housing Navigation and COVID Response Meetings. Public Health officials regularly share with the Continuum of Care information regarding active spread of infectious disease as well as testing and vaccination availability. Public shelter, street outreach and housing providers have an ongoing collaboration regarding the mitigation of spread of infectious diseases to include but not limited to best practices as well as the distribution of supplies to community service providers and program participants.

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

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

(limit 2,500 characters)

1) CoC Geographic Area: The GA505 CoC NO Wrong Door is the local 211 information and referral system along with online intake form on the CoC website. These encompass 100 % of the Muscogee and Russell County CoC Geographical area. Outreach teams work the geographical area weekly and conduct assessment onsite to reduce the burden of system access for participants. Also, as part of the Outreach team members place 211/Online Intake flyers in stores, churches & any known location for homeless individuals and families. Billboards are also a tool used to help obtain full geographic coverage. The flyers also state that if in 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/Online intake flyers in the CoC Geographic Area. To 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.

2) The Continuum of Care's Coordinated Entry System utilizes a standardized assessment process and assessment tool that is an abbreviated version of the VI-SPDAT. Each participant is assessed for household type and level of vulnerability, to ensure equitable and efficient access and referral to housing and mainstream resources. Prioritization is given to the unsheltered and/or those meeting the Category 1 of HUD's definition of homelessness, and also takes into consideration length of time homeless, disability status(chronic) and other vulnerabilities of the participant. Case conferencing to ensure appropriate matches, referrals and placement is also utilized to assist participants in accessing mainstream services and housing. Household vulnerability and participant preferences are paramount in the Coordinated Entry System process.

3) To ensure a participant friendly and equitably accessible system the Continuum of Care requires that 10% of those participating in the Coordinated Entry System receive follow up regarding their Coordinated Entry experience. Additionally, the Continuum of Care hosts community forums to receive feedback from those experiencing homelessness on system strengths and weaknesses.

	1D-9a.	Program Participant-Centered Approach to Centralized or Coordinated Entry.	
		NOFO Section V.B.1.p.	

		Describe in the field below how your CoC's coordinated entry system:
	1.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;
	2.	prioritizes people most in need of assistance;
	3.	ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and
	4.	takes steps to reduce burdens on people using coordinated entry.

(limit 2,500 characters)

1) Intensive training and ongoing continuing education of 211 intake operators of client's obvious needs, operators uncover unexpressed needs of clients and thus are able to make referrals up to and including housing needs and need for coordinated entry intake. The training coupled with the Online intake on the CoC website make available access to those least likely to apply for homeless assistance in absence of Special Outreach. Additionally, the Continuum of Care's relationship with local governments, law enforcement, CDBG/HOME/ESG jurisdictions, early childhood programs, school districts, mental/physical health providers, business leaders and community stakeholders increases participation and access to those who those least likely to apply for homeless assistance.

2) Prioritization of homelessness is given to the unsheltered and/or those meeting the Category 1 of HUD's definition and also takes into consideration length of time homeless, disability status(chronic) and other vulnerabilities of the participant in alignment with the Continuum of Care's Coordinated Entry System prioritization protocol.

3) The Continuum of Care's Coordinated Entry System is designed and implemented to ensure access to permanent housing in a timely and efficient manner with emphasis on participant choice. Coordinated Entry procedures are in place to ensure that all participants accessing the system have referrals(based on coordinated entry matrix or client preference) initiated within 3 business days and that receiving homeless service providers also initiate contact with the participant within 3 business days. Open referrals are reviewed with homeless service providers monthly to ensure process compliance and to ensure timely access for participants.

4) In order to reduce the burden of access for participants, the Continuum of Care's Coordinated Entry system is available for access to participants via phone, online, outreach and/or at service providers with trained assessors to reduce any burden.

1D-9b.	Informing Program Participant about Rights and Remedies through Centralized or Coordinated Entry–Reporting Violations.	
	NOFO Section V.B.1.p.	

	Describe in the field below how your CoC through its centralized or coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC's geographic area and ensures it reaches all persons experiencing homelessness;	
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and	
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.	

(limit 2,500 characters)

1)The CoC Coordinated Entry system is actively marketed to those experiencing homelessness as well as to those who serve those experiencing homelessness through, a) Street Outreach that covers the entire geographic area of the CoC, b) regularly scheduled on sites at service provider locations, c) public postings of how to access Coordinated Entry to include but not limited to postings at all service providers in the CoC geographical area, access points at all public libraries, access points Parks and Recreation facilities, and signs posted in areas of perceived encampments when no one was present during Outreach activities.

2)Coordinated Entry informs program participants of their rights to appeal or deny referrals from Coordinated Entry as well as their rights to Equal Access and Fair Housing under federal, state, and local fair housing and civil rights laws at Coordinated Entry enrollment. Participants are informed of how to contact CoC/Coordinated Entry Lead with concerns regarding violations Equal Access or Fair Housing under federal, state, and local fair housing and civil rights laws.

3)The CoC/Coordinated Entry Lead informs the Certifying Jurisdiction of any programs with any conditions or actions that impede fair housing choice for current or prospective program participants through on going communication (bi monthly board meetings as the certifying jurisdiction serves on the CoC Board) and during the Emergency Solutions Grant and Continuum of Care Competition

1D-10.	Advancing Racial Equity in Homelessness–Conducting Assessment.	
	NOFO Section V.B.1.q.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	09/09/2021

1D-10a.	Process for Analyzing Racial Disparities–Identified Racial Disparities in Provision or Outcomes of Homeless Assistance.	
	NOFO Section V.B.1.q.	

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

(limit 2,500 characters)

1)The Home for Good / United Way of Chattahoochee (on behalf of the Columbus-Muscogee/Russell County Continuum of Care) contracted with Homebase to perform a gaps analysis of the Columbus-Muscogee/Russell County Continuum of Care. Homebase is a national technical assistance provider supporting efforts to prevent and end homelessness. The analysis evaluated the current system incl. shelter & housing programs & identified possible gaps. This report includes recommendations, if possible, designed to improve overall homeless system. There are also opportunities to build upon current efforts to better (and more equitably) meet the needs of people experiencing homelessness across the continuum of care. OVERVIEW OF THE GA 505 : Outlined the structure and regions of the CoC as well as locations of Coordinated Entry Access points and the geographic locations of resources. ACCESS TO THE HOMELESS SYSTEM OF CARE: Who is accessing the system, how long it takes and whether system access is equitable. Progression through the System and Project Type Access: Length of time homeless in the system and the equability of project type access and experience. OUTCOMES OF EXITS AND RETURNS TO HOMELESSNESS: Charting equitable outcomes across demographics and household types. Recommendations based on the DATA analyses
2)The analysis included quantitative data review and analysis. Data Source: Point-In-Time Count (PIT); Homeless Inventory Count (HIC); Longitudinal Systems Analysis Data (also called Stella); System Performance Measures Data was analyzed independently for trends then data sources were compared to each other to confirm, change, or contradict findings and if possible, national data trends were used in place of CoC baselines and benchmarks to identify where the CoC might focus on improvements. Special attention was given to exits destinations, returns to homelessness, household type and race. However, because the sample sizes of people identifying as Latino and races other than Black or White were too small, the use of quantitative comparison was unwise with small sample sizes. No client-level-data were used in this analysis. Rather, easily attainable reports were used to set a foundation for the Columbus Muscogee/Russell County CoC to conduct similar analyses in the future with little complication. However, to confirm trends and findings, client-level- data analysis is needed.

1D-10b.	Implemented Strategies that Address Racial Disparities.	
	NOFO Section V.B.1.q.	

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

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	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 actively attends and participates in activities with organizations whose target audience are those of different races and ethnicity who have a higher rate of homelessness along with publishing articles in ethnic publications	Yes

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

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

(limit 2,500 characters)

The Continuum of Care has taken a multi-pronged approach to assisting homeless service providers to address disparities in the provision or outcomes or homeless services. Starting with Coordinated Entry, the CoC and homeless Service providers begin the analysis of service provision and outcomes to evaluate for and to address disparities. Utilizing a needs-based Referral Matrix, referrals are made efficiently and in a culturally sensitive and unbiased manner. Service providers with prerequisites to enrollment have been completely eradicated from the CoC. Through several years of continued emphasis on equitable access and evaluation of project level system performance, providers have become more intentional about the elimination of disparities. The CoC and Service Providers partner with community agencies to mitigate, reduce or eliminate barriers the lead to disparities in access and/or outcomes. Some of these partners include but are not limited to Muscogee County School District, Russell County School District, Phenix City School District, MCSD Attendance Panel, Community Schools United, Resilient Chattahoochee Valley, The Basics, Goodwill Industries, Vocational Rehab, Columbus Ambulatory Outpatient Clinic, MercyMed, Valley Healthcare, GA Dept of Labor, Dept Family and Children Services, Social Security, Dept Behavioral Health and more.Through these and many more partnerships in the community involving CoC members and non CoC members, the community has built a systematic response to meet the needs of the community members. Moreover, organizational and/or project level System Performance Measures have become standard measures for which all local funders evaluate for access and/or outcomes disparities.

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

Describe in the field below:

	1.	the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and
	2.	the tools your CoC uses.

(limit 2,500 characters)

1) The Continuum Care CoC continues its systematic evaluation of the provision of services and outcomes of each project/organization within the Continuum of Care for COC utilizing HMIS data. Continuum of Care, Organization and Project level data for Emergency Solutions Grant (ESG) funded and Continuum of Care Funded Projects is evaluated for disparities. The base line for analysis is the Continuum of Care 2021 Equity Gaps Analysis. The Equity Gaps Analysis was conducted by HomeBase, an independent national technical assistance provider. The Gaps Analysis analyzed for disparities in access and outcomes in the Muscogee/Russell Continuum of Care.

Items being tracked for progress in the reduction/ elimination of disparities include; Length of Time Homeless Before Entering the System, Overall System Access, Equity in System Access Across Household Types and Demographics, Project Type Access, Exits to Permanent Housing by Demographic and Subpopulation Types, and Returns to Homelessness by Demographics and Subpopulation Types.

2) The CoC uses HMIS data and reports to include;   System Performance Measures, Data Quality Reports, Active Client Lists, and APRs.

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

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

(limit 2,500 characters)

The Continuum of Care has consistently engaged those with lived experience in the operations, leadership and decision-making processes of the Continuum.The Continuum seeks participation of those with lived experience in a myriad of ways to include, active follow up engagement with those who have exited to permanent housing, community forums (announced on social media, CoC Biweekly Newsletter, flyers posted at Service Providers locations and in areas frequented by those experiencing homelessness) and through Outreach Teams soliciting participation. The CoC has a Lived Experienced Committee developed January 2023 that participates in outreach efforts and provides feedback and input in decision making. The Continuum of Care has representation of those with lived experience on the board. These representatives are sought for Board Participation for their unique insight due to their experience with having severe barriers to access. The Continuum of Care has Full Time Staff member, with unsheltered lived experience with Severe Barriers, within the last seven years. Additionally, those with lived experience regularly assist in Outreach activities to those who are reluctant to engage in services. These participants offer a unique perspective to those who have been reluctant to engage and offer a "real life " perspective.

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

You must upload the Letter Signed by Working Group attachment to the 4B. Attachments Screen.
Enter in the chart below the number of people with lived experience who currently participate in your CoC under the four 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 in the decisionmaking processes related to addressing homelessness.	24	8
2.	Participate on CoC committees, subcommittees, or workgroups.	12	7
3.	Included in the development or revision of your CoC's local competition rating factors.	12	4
4.	Included in the development or revision of your CoC's coordinated entry process.	12	4

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

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

(limit 2,500 characters)

The Continuum of Care and member organizations strategically focus on professional development and employment opportunities for individuals with lived experience. This is just one of the focus areas of the CoC Mainstream and Outcomes Committee along with the Performance and Outcomes committee of the CoC. Collaborations with Employment Services and Training organizations such as Goodwill of the Southern Rivers, Better Work Columbus, Work Source Georgia, Briggs and Associates and WIOA have made available both professional development and employment opportunities for those with lived experience of homelessness. The opportunities are offered through employment partners to those with lived experience of homelessness and are done so in a client centered manner. Client's needs, abilities, goals and preferences are the items on which the plan is developed for those with lived experience. The opportunities for professional development and employment opportunities include job in all sectors of the workforce. The CoC and COC partners have developed several career training opportunities for those with lived experience. One of these is, Construction Ready. Graduates of the 20 day training program have skills and credentials to get a good paying job in in the construction industry. Construction Ready is a compliment to the Electrician Apprenticeship Training which was the first of such programs in the area targeted at those with lived experience. The 4 week program is taught by a group of local electricians (and is a model adopted by IBEW) in collaboration with CoC providers and Goodwill of the Southern Rivers. Upon completion of the training, participants are guaranteed interview(s) with local electrical contractors. Participants also receive the tools and clothing and safety items needed to begin work at no cost to the participant. More than 80% of those who graduated the program obtained full time employment immediately upon completion of training. The Metra Bus Operator Recruitment & Training program is the newest such opportunity coming on board for those with live experience of homelessness. The program will allow those previously unconsidered for employment (due to past involvement with the judicial system) to be trained and have access to employment with the Columbus Consolidated Government.

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

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

(limit 2,500 characters)

1)The Continuum of Care has routinely sought the input of those with lived experience, current and past participants. Input and insights gathered through a number of ways to include, 90 and 180 day post discharge follow up, surveys conducted at service providers locations and randomly selected follow up calls of at least 10 % of those seeking access to CoC providers and services through 211 and/or Coordinated Entry. In recent years the Continuum of Care lead began holding regularly scheduled community forums. These forums are accessible in person or virtually so as to increase participation from a cross section of community members. The in-person sessions take place at homeless service providers so as to increase participation of those with lived experience. The forums are advertised and marketed for weeks prior via flyers, social media and personal invite of those with lived experience by CoC homeless service provider staff.   Each forum is followed by a survey to evaluate efficacy of system, set priorities, designate target populations and program/project needs assessment.

2) The forums are followed up with a community wide surveys to gather feedback on; community priorities, target populations, challenges to service, etc. Thes are available on the Continuum of Caree website, via QR code on flyers located at homeless service providers, paper surveys at service providers throughout the geographical area and with the assistance of homeless service provider staff if needed.

3) The Continuum of Care has made great strides in addressing challenges raised by those with lived experience. The Continuum of Care' On line Intake for 211 is just one example of a response to a challenge raised by those with lived experience. Phone Access challenges have been minimized with the easy to access online intake. Additionally, educational challenges for families with school aged children were mitigated through enhanced collaboration with local school districts, transportation, on site enrollment (parent(s) no longer have to go to school district's "Central Office" to enroll children) access to school supplies and uniforms. Also, all local library locations have staff trained and access points in place to assist those with lived experience in accessing Coordinated Entry.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section V.B.1.t.	

	Describe in the field below at least 2 steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC's geographic area regarding the following:
1.	reforming zoning and land use policies to permit more housing development; and
2.	reducing regulatory barriers to housing development.

(limit 2,500 characters)

1) The Continuum of Care continues to work with local governments in developing plans for addressing affordable housing supply concerns. the CoC lead convened a meeting of all government planning depts in the geographical area in on March 8 2023. The attendees discussed; a)what is the need and how do we assess it b) How does our consolidated plan address the needs c) standardization of planning and codes across the CoC geographical Area.   On August 18, 2023, the CoC also embarked on a Housing Market Needs Assessment Initiative in collaboration with Georgia Tech. The Assessment will look at needs and the barriers to development and make recommendations for removing barriers to development and reforming zoning and land use.

2) Having had success with proposing and getting granted changes to building codes (size requirement for a unit within the city limits) The Continuum of Care is further seeking from all local governments in the geographical area to allow for more density in housing development and regulatory changes to allow for Accessory Dwelling Units.

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

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

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

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

1.	Enter your CoC's local competition submission deadline date for New Project applicants to submit their project applications to your CoC–meaning the date your CoC published the deadline.	07/13/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC's local competition–meaning the date your CoC published the deadline.	07/13/2023

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e.	

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

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

5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes
6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	Yes

1E-2a.	Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., and 2.d.	

You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.
Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	205
2.	How many renewal projects did your CoC submit?	9
3.	What renewal project type did most applicants use?	PH-RRH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section V.B.2.d.	

Describe in the field below:	
1.	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
4.	considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.

(limit 2,500 characters)

The GA 505 Review and Ranking Process was built around the HUD Project Rating and Ranking Tool. The tool required the use of HMIS data to include; System Performance Measures, and Annual Performance Reports.
1) The HMIS Annual Performance Report Question 23a & 23b were reviewed and analyzed to evaluate the percentage of clients successfully moving into or retaining permanent housing.
2) The HMIS System Performance Measures Questions 22b and 22c were analyzed to determine the average number of days from Project Entry to Residential Move-in for each Permanent Housing project or the average Length of Time in Project for Transitional Projects.
3) The HMIS Annual Performance Report APR Q13a2 were reviewed and analyzed to determine those projects whose enrollees had more than one disability at time of enrollment. The CoC asserts that those with multiple disabilities / co occurring conditions are more vulnerable than those one or less disabilities. evaluated HMIS Client Barriers Report and awarded more points to projects that had higher rates of enrollment of those with Severe Barriers (at least 2 barriers as reported by client enrollment), for example: <25 % have severe barriers = 0 points; 75-99 % have severe barriers= 5 points on project score card.
4) In addition to increased points for those with more than one disability, the CoC Review and Ranking Tool also gave additional points for those projects who had a higher percentages of enrollees who had zero income at entry. Even more points can be gained for projects who had a higher percentage of enrollees who came from a prior location noted as "place not meant for human habitation". This layering of points for those who are most vulnerable and with highest barriers incentivizes serving the hardest to serve populations that could result in lower performance by balancing the possible loss of points for poor performance.

	1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.	
		NOFO Section V.B.2.e.	

		Describe in the field below:
	1.	how your CoC used the input from persons of different races and ethnicities, particularly those over-represented in the local homelessness population, to determine the rating factors used to review project applications;
	2.	how your CoC included persons of different races and ethnicities, particularly those over-represented in the local homelessness population in the review, selection, and ranking process; and
	3.	how your CoC rated and ranked projects based on the degree to which their project has identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.

(limit 2,500 characters)

1) The Continuum of Care seeks input from a cross section of the community stakeholders, PARTICULARLY those who are over represented in the local homeless population, in the Review and Ranking Process. The input from our community forums and surveys set the priorities for our community and the HUD Project Rating and Ranking Tool was customize to meet the objectives and priorities of the community.   Of those providing feedback over 26 % of those contributing were those with lived experience and over 38% were those who are over represented in the homeless population.
2) The Application Committee Scoring Sub Committee was representative of a complete cross section of the community which the CoC serves to include those over represented in the homeless population. The Scoring Sub Committee was 50% those who are over represented in the homeless population.
3) The CoC Project Rating and Ranking Tool was designed so that projects who serve those with the highest barriers, traditionally those of marginalize populations and those over represented id the demographic makeup of the homeless population, have points awarded to off set the possible lower than average performance due to serving the hardest to serve populations.

1E-4.	Reallocation–Reviewing Performance of Existing Projects.	
	NOFO Section V.B.2.f.	

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

(limit 2,500 characters)

1)The Continuum of Care reallocation process has drastically change with the introduction of the new CoC Project Rating and Ranking Tool. The CoC considers involuntary reallocation as appropriate and as necessary per results of Continuum of Care Corrective Action Threshold cycle or beginning with this NOFO Cycle, a renewal project fails to meet the minimum threshold requirements per the CoC Project Rating and Ranking Tool. Applicants who do not meet CoC Threshold as established by the Project Rating and Ranking Tool for inclusion in the rating. The project would be notified that they will not be included and their grant allowance per the GIW will be reallocated. At the conclusion of this NOFO Cycle, the CoC Application Committee, Scoring Sub-Committee, and CoC Project Leads will establish a scoring threshold for upcoming NOFO.   Project below the threshold for 1 NOFO will have to comply with monitoring of improvement as follows: Month 1&2 - APR and HMIS data quality reports collected. Consumer satisfaction survey distributed. Month 3-Data analyzed and scored. Month 4 -Providers notified of scores. Month 5-6-Corrective Action Plans prepared and monitored monthly by Application Committte and Performance and Outcomes Committee of the CoC.
2)Based on the current CoC Involuntary Reallocation Process, there were no projects identified for reallocation.
3) The Continuum of Care did not reallocate any projects in the 2023 Continuum of Care Competition.
4) Based on the current CoC Involuntary Reallocation Process, there were no projects identified for reallocation.

1E-4a.	Reallocation Between FY 2018 and FY 2023.	
	NOFO Section V.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023?	No

1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	No
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	No
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	No
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/11/2023

1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project accepted or rejected status; 4. Project Rank–if accepted; 5. Requested Funding Amounts; and 6. Reallocated funds.	Yes

1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or partner's website–which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	

You must enter a date in question 1E-5c.

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

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	

You must enter a date in question 1E-5d.

2A. Homeless Management Information System (HMIS) Implementation

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

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

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

	Enter the name of the HMIS Vendor your CoC is currently using.	ClientTrack

2A-2.	HMIS Implementation Coverage Area.	
	Not Scored–For Information Only	

	Select from dropdown menu your CoC's HMIS coverage area.	Single CoC

2A-3.	HIC Data Submission in HDX.	
	NOFO Section V.B.3.a.	

	Enter the date your CoC submitted its 2023 HIC data into HDX.	08/01/2023

2A-4.	Comparable Database for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

	In the field below:	
1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases;	
2.	state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database–compliant with the FY 2022 HMIS Data Standards; and	

3.	state whether your CoC's HMIS is compliant with the FY 2022 HMIS Data Standards.

(limit 2,500 characters)

1) Data is given semi-annually to the HMIS Lead to review and compare to our local HMIS system for accuracy. The VSP regularly submits de-identified System Performance Measures, de-identified HMIS Active Client Lists as well as de-identified HUD Data Quality Reports to the CoC and HMIS Lead for all VSP projects Any updates to HMIS Data Standards are given to the local VSP and discussed in detail so accurate updates can be made. The 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) Our DV provider is using a HUD-compliant comparable database compliant with the FY2022 HMIS Data Standards.
3) Our CoC's HMIS is compliant with the FY 2022 HMIS Data Standards.

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

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

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	313	43	163	60.37%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	46	0	46	100.00%
4. Rapid Re-Housing (RRH) beds	509	231	278	100.00%
5. Permanent Supportive Housing (PSH) beds	215	0	155	72.09%
6. Other Permanent Housing (OPH) beds	97	0	0	0.00%

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

	For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:
1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,500 characters)

1)The Emergency Shelter Bed Coverage: The bed coverage less than 85 % on the night of the Point in Time Count includes two Emergency Shelters operated by a local Rescue Mission which has for decades been averse to HMIS utilization.   With a leadership change this year both Emergency Shelters began using HMIS on August 8, 2023 thus the bed coverage concerns have been already resolved. Permanent Supportive Housing bed coverage is below 85 % due to Stewart Community Home's decision to no longer participate in HMIS and CoC, ESG and United Way Funding due to the requirement to comply with Equal Access.

2) PSH- The former PSH project is being reviewed to evaluate continued inclusion in HIC ....if homelessness is no longer a requirement for enrollment at PSH the project will be removed from Housing Inventory Count in upcoming reporting cycle.

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

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 p.m. EST?	Yes

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

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

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

2B-1.	PIT Count Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC conducted its 2023 PIT count.	01/23/2023

2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/25/2023

2B-3.	PIT Count–Effectively Counting Youth in Your CoC's Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

	Describe in the field below how your CoC:	
1.	engaged unaccompanied youth and youth serving organizations in your CoC's most recent PIT count planning process;	
2.	worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC's most recent PIT count planning process; and	
3.	included youth experiencing homelessness as counters during your CoC's most recent unsheltered PIT count.	

(limit 2,500 characters)

1) The Continuum of Care solicits participation of a wide variety of community stakeholders, including those who serve homeless youth. Participation of those who serve homeless youth include, but is not limited to, Muscogee County School District, Russell County School District, Enrichment Services Program,DV providers, healthcare providers, Community Service Board, faith based community members, Next Step providers (for youth aging out of foster care), local government, Family and Children Services, law enforcement and post secondary education providers.
2) The Continuum of Care worked with homeless youth in making them aware of the count and soliciting their assistance in informing those like them experiencing homelessness that the Point in Time Count is important to evaluate not only Numbers but to evaluate needs and to avail homeless youth of available services and permanent housing.
3) The CoC had six homeless youth help with the actual PIT count and guide us into the locations where other homeless youth were most likely staying. Four of the six youth had participated in prior PIT counts and were invaluable in recruiting new youth volunteers for this count. The CoC alongside funded programs, surveyed currently sheltered youth (unable to physically participate in the PIT count) for locations that unsheltered youth were during their time of homelessness and several areas were identified and youth were counted.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	

		In the field below:
	1.	describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;
	2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and
	3.	describe how the changes affected your CoC's PIT count results; or
	4.	state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2023.

(limit 2,500 characters)

NOT APPLICABLE- NO CHANGES MADE- COMPLETE COUNT CONDUCTED

2C. System Performance

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

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

2C-1.	Reduction in the Number of First Time Homeless–Risk Factors Your CoC Uses.	
	NOFO Section V.B.5.b.	

	In the field below:
1.	describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;
2.	describe your CoC's strategies to address individuals and families at risk of becoming homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time

(limit 2,500 characters)

1) 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) The CoC has incorporated prevention & diversion as part of our culture to prevent individuals and families from becoming 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 from becoming FTH. This collaborative process has increased inter-agency referrals to prevent FTH, improved discharge planning, improved eviction prevention, increased safe and affordable housing.

3) The Homeless Prevention Team of the Performance and Outcomes Committee is responsible for overseeing the strategy.

2C-1a.	Impact of Displaced Persons on Number of First Time Homeless.	
	NOFO Section V.B.5.b	

	Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:

1.	natural disasters?	No
2.	having recently arrived in your CoCs' geographic area?	No

2C-2.	Length of Time Homeless–CoC's Strategy to Reduce.	
	NOFO Section V.B.5.c.	

	In the field below:
1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
2.	describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.

(limit 2,500 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 Housing Navigation Team is responsible for overseeing this strategy

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

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

(limit 2,500 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 and developed 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 continuously mindful of 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 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 2 landlord conferences 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) 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.

3) The Housing Navigation Team is responsible for overseeing this strategy.

2C-4.	Returns to Homelessness—CoC's Strategy to Reduce Rate.	
	NOFO Section V.B.5.e.	

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

(limit 2,500 characters)

1) The CoC Homeless Prevention Team utilizes our HMIS and our CE 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 and reporting findings quarterly to the CoC Board of Directors.

2C-5.	Increasing Employment Cash Income—CoC's Strategy.	
	NOFO Section V.B.5.f.	

	In the field below:
1.	describe your CoC's strategy to access employment cash sources;
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income; and
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.

(limit 2,500 characters)

1) (a)The Earned Income Tax Credit - Recognizing the EITC's potential economic benefit to both families &communities, organizations within the CoC provide supporting services, such as free tax preparation, to facilitate receipt of the credit. (b)Workforce development &training -Workforce development programs, such as our Bus Operator Training and Recruitment, Electrical Apprentice training along with a myriad of other client needs based programs through partnerships with Goodwill Industries, BetterWork Columbus, and Briggs and Associates(supportive employment) 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) 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. CoC has MoU's with Goodwill, DOL and BetterWork Columbus to give priority to CoC clients for job placement. Partnerships with many organizations, such as Goodwill, job readiness, training, employment search assistance & skills development are in place to help CoC clients.
3) Home for Good and Mainstream & Outreach Committee is responsible in overseeing this strategy

2C-5a.	Increasing Non-employment Cash Income–CoC's Strategy	
	NOFO Section V.B.5.f.	

		In the field below:
	1.	describe your CoC's strategy to access non-employment cash income; and
	2.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.

(limit 2,500 characters)

1) The 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. 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 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.
2) Home for Good and Mainstream & Outreach Committee is responsible in overseeing this strategy

3A. Coordination with Housing and Healthcare

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

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

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	No

3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	No

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

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

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

3B. New Projects With Rehabilitation/New Construction Costs

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

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

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

	Is your CoC requesting funding for any new project application requesting $200,000 or more in funding for housing rehabilitation or new construction?	No

3B-2.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.B.1.s.	

		If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:
	1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and
	2.	HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.

(limit 2,500 characters)

Not applicable

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

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

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

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

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

3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

	You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.
	If you answered yes to question 3C-1, describe in the field below:
1.	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and
2.	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.

(limit 2,500 characters)

Not applicable

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

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

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

4A-1.	New DV Bonus Project Applications.	
	NOFO Section I.B.3.I.	

	Did your CoC submit one or more new project applications for DV Bonus Funding?	No
Applicant Name		
This list contains no items		

4B. Attachments Screen For All Application Questions

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

	1.	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.
	2.	You must upload an attachment for each document listed where 'Required?' is 'Yes'.
	3.	We prefer that you use PDF files, though other file types are supported–please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.
	4.	Attachments must match the questions they are associated with.
	5.	Only upload documents responsive to the questions posed–including other material slows down the review process, which ultimately slows down the funding process.
	6.	If you cannot read the attachment, it is likely we cannot read it either.
		. We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).
		. We must be able to read everything you want us to consider in any attachment.
	7.	After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.
	8.	Only use the "Other" attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No		
1D-11a. Letter Signed by Working Group	Yes		
1D-2a. Housing First Evaluation	Yes		
1E-1. Web Posting of Local Competition Deadline	Yes		
1E-2. Local Competition Scoring Tool	Yes		
1E-2a. Scored Forms for One Project	Yes		
1E-5. Notification of Projects Rejected-Reduced	Yes		
1E-5a. Notification of Projects Accepted	Yes		
1E-5b. Local Competition Selection Results	Yes		
1E-5c. Web Posting–CoC-Approved Consolidated Application	Yes		

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

Attachment Details

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Submission Summary

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

Page	Last Updated
1A. CoC Identification	07/31/2023
1B. Inclusive Structure	09/20/2023
1C. Coordination and Engagement	09/21/2023
1D. Coordination and Engagement Cont'd	09/20/2023
1E. Project Review/Ranking	Please Complete
2A. HMIS Implementation	09/21/2023
2B. Point-in-Time (PIT) Count	09/19/2023
2C. System Performance	09/20/2023
3A. Coordination with Housing and Healthcare	09/19/2023
3B. Rehabilitation/New Construction Costs	09/19/2023
3C. Serving Homeless Under Other Federal Statutes	09/19/2023

4A. DV Bonus Project Applicants	09/19/2023
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required