# **Before Starting the CoC Application**

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

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

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

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

Your CoC Must Approve the Consolidated Application before You Submit It

- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2023 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

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

#### Attachments

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

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

appeal HÚD's funding determination.

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

# 1A. Continuum of Care (CoC) Identification

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

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

**1A-1. CoC Name and Number:** MI-504 - Pontiac, Royal Oak/Oakland County

CoC

**1A-2. Collaborative Applicant Name:** Alliance for Housing Oakland County Continuum

of Care

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Alliance for Housing

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

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

- 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;
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- Section 3 Resources;
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- 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	No	Yes
2.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
3.	Disability Advocates	Yes	Yes	Yes
4.	Disability Service Organizations	Yes	Yes	Yes
5.	EMS/Crisis Response Team(s)	Yes	No	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	No	Yes
11.	LGBTQ+ Service Organizations	Yes	No	Yes
12.	Local Government Staff/Officials	Yes	Yes	Yes
13.	Local Jail(s)	Yes	No	Yes
14.	Mental Health Service Organizations	Yes	Yes	Yes
15.	Mental Illness Advocates	Yes	Yes	Yes

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16.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
17.	Organizations led by and serving LGBTQ+ persons	Yes	No	Yes
18.	Organizations led by and serving people with disabilities	Yes	No	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	No
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	No	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	No	No
29.	State Domestic Violence Coalition	Yes	No	No
30.	State Sexual Assault Coalition	No	No	No
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.				
35.				

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

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

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 The CoC's invitation process is transparent by being provided annually via public announcements on the listsery, which has over 400 members, in person at community meetings, personal invitations, and also encourages partner agencies to invite clients/former clients, new staff volunteers, individuals withs disabilities and stakeholders to join the CoC. The CoC provides information about membership criteria, how interested organizations can join, and benefits of becoming a member. The members can join via the CoC website or through the mail. CoC staff is also able to assist when needed for applying for membership. 2. The CoC ensures effective communication and access for persons with disabilities by having an "Accessibility Menu" on the CoC website that has features that can change the layout of the website such as bigger text, dyslexia friendly, changing the saturation, text spaces, larger cursor, line height and text height. The CoC's website is designed to make applying for membership more accessible to anyone that is interested including those with disabilities. People are able to complete the membership form and pay online and accommodations are made for anyone needing assistance completing the form. The CoC has the ability to wave membership dues to encourage membership. 3. The CoC has specifically reached out and invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity to participate in CoC meetings and join our membership. Specifically, the CoC has hosted sessions with the community, COC focused on understanding language and concepts, transforming our work to be viewed through a racial equity lens, reviewing inequities across systems state and local government, political leadership, education, justice system, healthcare, law enforcement) & Racial equity statement. People with lived experience join us offering their input, and are also compensated for their time. CoC currently hosting listening session with staff and those with lived expertise for feedback. The CoC's board president is also from an organization that focuses on serving people with disabilities.

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

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1 CoC solicits and considers opinions form a broad array of organizations and individuals that have knowledge of homelessness or an interest in preventing and ending homelessness by having CoC staff go to county meetings to gather and provide feedback, hosting public events/trainings& workshops(including virtual) inviting providers, residents and organizations who have interest in working directly with homelessness.CoC also hosts a 'Face to Face' Centralized Registry Meeting in which gives opportunity to have community discussion with different providers in the room at the same time. Organizations also have an opportunity to provide agenda topics that they would like to discuss with the group.CoC brings up different topics that we can discuss together and reach a consensus. 2. CoC communicates info during public meetings, such as the General membership, which has an in person and virtual option, or Board meetings where public comment is always an agenda topic for individuals or groups to speak to the Alliance board about information they would like the share. At the CoC General Membership meeting, there is typically a guest speaker that presents about their program and how their services can help with preventing/ending homelessness. This gives the opportunity to connect more organizations to the coordinated entry system and make it stronger and a more seamless process for program participants. Additionally, at the General Membership meeting there is a 'round table' session where agencies and community members may brin any input or issues to the group to have a discussion with each other and work together. 3. The CoC ensures effective communication and access for persons with disabilities are able to provide feedback providing client satisfaction surveys for program participants to fill out online, or if needed by phone. Questions include asking about how they feel about the services they received, if they were satisfied with their provider, how quickly they were housed, how comfortable they feel in their neighborhood, in their home, how helpful staff has been, relationship with staff, what suggestions they would give to the agency. 4. The CoC takes information gathered at public meetings to address improvements by taking the suggestions back to CoC committees to, such as creating a Landlord Lunch & Learn event to bring landlords together and discuss Housing Vouchers and programs to hopefully gain more partnerships with Landlords.

1B <del>-4</del> .	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.	

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1. The CoC considers project applications from organizations that have not previously received program funding before by putting out RFPs on the CoC public website and the listsery, which has over 400 members and is open to the public. 2. The CoC posts the notice & application materials, along with the prioritization process and renewal process to the CoC website, CoC Listsery, and directly emails current subgrantees. Additionally the CoC posts a timeline with important dates including when renewal scoring application, esnaps applications are due to the CoC and when the ranking scores will be posted to the public. For new projects, the RFP that is posted details how to make a submission.3 CoC determines which project applications are submitted to HUD through a very transparent process. Non- HUD funded board members are asked to participate in a review process for renewals as well as review all proposals from any organization new or current for Bonus funding, that same group along with CoC staff meet for a full day to review, have presentations from the agencies about project applications, check scoring and discuss renewal and new projects, community need, project scoring, and current performance or comparable performance to look at potential new grantees. All of those pieces together is how project applications are determined to be submitted to HUD.4.CoC ensures effective communication & access for persons with disabilities by utilizing accessible meeting spaces, sending out information electronically for initial review, time given for those to review at their own needed pace and available for additional 1 on 1 discussion if needed.

# 1C. Coordination and Engagement

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

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

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

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

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

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

## (limit 2,500 characters)

1.CoC consults with the following ESG recipients, MSHDA (state) & Oakland County (local Govt) in the planning and allocation of ESG funds. The CoC provides detailed information of community need and the request to align funding to best serve individuals experiencing homelessness or those at imminent risk of homelessness. OC govt. attends the COC's annual retreat to get input from homeless service providers as well as COC staff provides written and in person comment during the public comment period during OC's annual planning process. CoC staff attends the annual MSHDA homeless summit as well as provides written and in person comment during open comment periods.2.CoC participates in evaluating and reporting performance of ESG recipients as the COC is the HMIS lead, HMIS data is reviewed to evaluate and provide performance based feedback to the recipient and sub recipients. COC, as the fiduciary also monitors MSHDA/ESG grantees for around process, performance, spending, and file reviews. CoC data gathered through CAPER reports to aid in decision making as well as strategic planning and service implementation 3. The CoC provided PIT/HIC data to the Consolidated plan and director of the HOME and ESG funds. Any other independent jurisdictions are also provided this information 4.CoC meets regularly and provides data and input for any and all updates for the Consolidated plan jurisdictions and is always available via email or phone to answer questions or provide data and feedback. COC ED is on the OC govt Citizen Advisory Committee and reviews the con and annual action plan as well as provides data and input.

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:	

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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.	No

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)

CoC has a strong partnership with the local education providers. Oakland Schools (OS) the LEA, is the consortium lead for all Oakland County school districts. They are represented at both the CoC GM meetings as well as a reserved seat on the CoC board, as noted in by-laws. Services are exclusively geared toward children and youth, Oakland Schools is dependent on the relationship with the consortium and its members to secure and coordinate necessary services outside of the educational focus of the McKinney-Vento grant for Homeless Children and Youth. Oakland Schools is involved with making sure that pertinent information is funneled from the CoC to school districts and homeless families. OS has printed materials(posters and flyers) that are provided to CoC members that can be posted and/or distributed to families that may qualify for McKinney-Vento services. CoC members also contact school district liaisons and/or Oakland Schools directly to help link families to school services. The CoC sent out a contact list of all the liaisons within the county to the community along with a referral for agencies to utilize. All COC projects have a identified student homeless liaisons staff so they can be immediately connected with homeless school services OS also maintains a toll free 800 number for homeless youth and families to call to be connected to the program for help in maintaining students in school and facilitating their coordination with partner agencies.

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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)

COC member agencies provide direct referral of students experiencing homelessness to both the Oakland Schools Homeless Student Education Coordinator and/or the Homeless Liaison in the local school district. Oakland County Homeless Student Education Services works directly with the 28 local school districts and the 23 Public School Academies to supply them with written and electronic materials to assist staff in the process of the identification and service of homeless children and youth. This information is posted in the school buildings in the form of posters and electronically on a multitude of sites for staff and parents. A homeless liaison is named in each of the districts and academies to serve as point person to coordinate homeless student identification and service. This person receives training and support from the ISD on a continual basis in addition to being supplied with materials to be posted in the school offices and buildings to direct the staff and student body to someone who can help if they know of a student, or are a student themselves, experiencing homelessness. Additionally, regular presentations are made to consortium groups where there is district staff representation, such as school social workers, counselors, bus drivers, lunchroom aides, and front office staff. Coordination with truancy and attendance staff, administration, and transportation is also key to ensuring district personnel are familiar with the McKinney-Vento Law and the associated reporting responsibilities. Local liaisons are trained to coordinate services with CoC partners, and also rely on the ISD for guidance in navigating the array of services available in each of the districts. A strong data collection system is in place to track the identification and reporting of all identified homeless children and youth, and is managed by the ISD in coordination with Michigan Department of Education. Additionally, Oakland Schools has received American Recovery Act funding to hire 1.5 more FTEs for the next year. These positions will work with the COC and other community partners to increase awareness, identification, and service coordination for homeless students and youth throughout the county.

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:

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

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

NOFO Section V.B.1.e.

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

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

1C-5a.	C-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.

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COC collaborates with HAVEN the DV provider in Oakland County. 1. HAVEN leadership is on the COC board, which reviews and approves COC/ESG polices and updates, before final approval at the general membership meeting. Other HAVEN staff are also involved in committees and work with COC to review COC/ESG related policies. For COC policies and procedures the COC relies on HAVEN to to ensure that the approach are trauma informs and utilize client choice. 2. COC ensures housing and services provided in COC are trauma informed and can meet the needs of survivors by working with CE to assist in the access of any COC resource and make sure they are added to the housing registry/by name list in a confidential way. CAT 4 may access specific DV services or any COC resources they are eligible for. HAVEN also participates in the weekly housing registry meeting to advocate and connect those in DV shelter and or referrals. The partnership allows the COC to offer trauma-informed approach throughout the referral, CM, housing process.

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.	
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	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).	

1&2. CoC partners with the DV shelter, HAVEN, which follows the Family Justice Center model. This model has been identified as a best practice the field of intimate partner violence and prevention services by the US Department of Justice. The documented and published outcomes in the Family Justice Center model have included: reduced homicides, increased victim safety, increased autonomy and employment for victims, reduce fear and anxiety for victims and their children, increased efficiency and coordination among service providers, and reduced recantation and minimization by victims. Staff frequently solicits feedback from clients to ensure their programs continue to provide quality services and meet clients' stated needs. The most recent client survey revealed that over 95% of clients reported feeling safe from their abuser during their stay at DV shelter, receiving information about the dynamics of abuse, creating a personal safety plan, completing individualized goals, and increasing awareness of resources available to them. Staff are required to go through 40 hours of initial training, another 40 of on boarding and minimum of 12 hours training yearly focused on Domestic/ sexual violence, trauma and addressing systemic barriers. All staff are required to complete a 24-hour Core Skills and Values Training which introduces staff to the dynamics of gender-based violence, root causes, and DV shelters empowerment model. All direct project staff are required to complete New Service Provider Training offered by the MI Coalition to End Domestic and Sexual Violence. Additional training is required for CES staff that are inclusive of marginalized identities, so staff receive mandatory ongoing training through bimonthly staff meetings and periodic special trainings in areas specific to marginalized populations. This includes but is not limited to, BIPOC individuals, people of diverse sexual orientation, gender identity and expression (SOGIE), individuals with disabilities, and immigrants.

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.	

1.CoC CES policy to prioritize safety and planning protocols for current or fleeing survivors by an emergency transfer plan it adapts services to their unique circumstances through victim-centered practices, trauma informed care, participant choice, & confidentiality. The DV shelter, HAVEN integrates safety and safety planning in to every step of its programming. Clients who call the 24/7 Emergency and Support line are assessed using an evidence-based risk assessment tool to determine if they are at high risk of injury or death due to their situation. Additionally, CoCs CES staff screening process is designed to allow participants to go to any access point. Regardless of its dedicated population, clients will be linked to the appropriate resources. This process assures that participants can be served at all access points. If unable to meet at an access point, screening can be done via phone or agency staff can work with the client to meet w/ them at a location that is safe & accessible. No access point will deny a person who has or is a victim of DV, dating violence, sexual assault &stalking. Rather, the assessment will be completed, linkage will occur &services will be provided with safety considerations for the participant in mind. Lead DV shelter HAVEN connects potential participants w/CoC through agencies doing outreach at the shelter and/or by asking the participant if they would like to sign an ROI. If the participant doesn't want their info shared then they will be given the resources info so they can contact them. The DV shelter helps to create safety plans for all DV households even if a shelter bed is unavailable. Survivors identified as Cat.4 are given priority status for entry, including time needed to become self-sufficient. All info is locked& confidential, emails are encrypted, computers are shut down and systems are logged out of that have personal information. Specifically at the DV shelter, they follow strict confidentially standards required by the MDHHS Division of Victim Services. Clients may opt to use their names or, if preferred, an anonymous identification number to be entered into HAVEN's CaseStream data base. HAVEN does not use HMIS to track clients. Clients in Bizstream have full informed consent on how their information is shared.

1C-5d.	Used De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below:	
1.	the de-identified aggregate data source(s) your CoC used for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and	
2.	how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.	
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1.COC uses de-identified HMIS and DV data from a comparable database (Biz Stream), crisis call center numbers, OC arrest reports and online data from the DOJ online domestic and sexual assault data resource center. All agencies within the CoC have a Public Privacy Notice that is posted and visible to clients in locations where information is collected. This is to ensure transparency between agency and client in regards to the purpose of data collection, and client rights. Also, each agency is required to have a Privacy Policy that includes specific protections for clients with increased privacy risks. For example, a client can choose to be entered under an Un-Named Record Protocol where identifying information is not recorded in the System and the record is located through a randomly generated number. All HMIS data, whether entered as an un-named record or not, is only publicly released in anonymous aggregate formats. Additionally, to protect the privacy of the individuals whose information is stored in the system, data is not publicly released if characteristics of an individual can be inferred due to small sample sizes. The CoC works in collaboration with HAVEN, the lead organization in DV services, to collect data on persons who are homeless or if they are fleeing/fled domestic violence. In addition to HMIS, HAVEN obtains data from (CaseStream) comparable to HMIS but is specifically designed for DV, abuse, and shelter organizations. 2. In some cases, HAVEN shares general data with HMIS and assists the county with audits to more accurately reflect data on survivors of domestic violence. In this case, HMIS does not have access to client names or identifying information. However, the CoC can utilize anonymized demographic information to help effectively adapt services to meet the need of domestic violence survivors. HAVEN also shares such information with federal, state, and provide funders so that funders can more effectively develop policy and funding initiatives that support domestic violence survivors in need of housing.

# &nbsp

	1
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. Yes, the CoC has policies and procedures that include an emergency transfer plan. The CoC follows the recommended VAWA emergency transfer steps from HUD. 2. The process for an emergency transfer request is as follows: first there needs to be established proof that there is a need for an emergency transfer. This might involve documentation from local police departments and assistance from a PPO advocate, as well as conducting a Danger Assessment. This is to show that there is a safety concern in the case we need to advocate for a family/ individuals to go to an alternative space. 3. If eligible, the plan in put into effect and staff works with the client to get them out of immediate danger.

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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 survivor of domestic violence, dating violence, sexual assault or stalking have access to all of the housing and service available in the geographic area through a number of strategies. Survivors are able to access services through coordinated entry and domestic violence resources. HAVEN, the DV provides in the community is very involved in shaping COC policies, procedures and advocating for services. HAVEN is present at the housing/by name list meetings to ensure that category 4 or other survivors that might not be present through the HARA/ CE process (having a no wrong door approach) are connecting to the housing/ by name list registry and any and all housing resources not just DV specific. This ensures that survivors are prioritized along with other participants. 2. Staff proactively provide resources prior to intake, at intake and as applicable throughout the duration of working the clients. This includes resources for crisis services, childcare, transpiration, mental health services, physical health resources, and more. It is understood that each person's trauma may present differently at various stages of the housing search process and staff works with clients to address their concerns before they disclose them. Staff also use the information that is already in the system to avoid re-traumatizing or having to share their personal experiences again. Staff also use a 'self-certification' form as needed when assisting those who are survivors of domestic violence. Additionally, the DV Shelter HAVEN, has a fundamental approach to addressing and preventing domestic violence by ongoing engagement with survivors themselves at events held throughout the community. Through these partnerships with individuals and other organizations, resources are shared and information about survivor experiences assist identifying the barriers that are most encountered as they look for housing and other services.

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

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 DV survivors, like all program participants provide feedback during routine surveys and case notes. These are reviewed and taken into consideration like other feedback. The CoC also works with the DV Shelter, HAVEN in facilitating feedback from survivors, in which the CoC uses to develop CoC-wide policies. Specifically for the CoC's DV shelter, frequent surveys are sent out and checkins are done. Reaching out to marginalized communities is done via their Prevention Education programming and they are constantly asking their clients about existing services gaps. DV shelter periodically distributes surveys and recruits focus groups to obtain feedback that shapes future programming. DV provider has a Youth Advisory Board that is a youth-led board composted of 20 diverse individuals ages 14-20 who have a passion to advocate for the mission to end intimate partner violence and sexual assault. Through feedback from surveys and focus groups, CoC found that a majority of survivors reported housing as their top priority, so they partnered with another organization to create a transitional housing program funded by Office on Violence Against Women. 2. DV survivors have the ability to provide anonymously feedback to case workers to provide input on program policies and procedure that help strengthen service delivery, especially for DV survivors. Staff takes into consideration the unique needs of DV survivors during the intake process. where staff ask for specific preferences (name, gender, language preferences) and obtain any releases of information needed to work on behalf of the participant. This informs staff of any unique and complex needs, and allows staff to meet these needs moving forward. CoC works directly with any interested individual with lived experience we recruited housed individuals with a wide range of expertise including survivors to train, discuss safety concerns and how compensation is offered (\$50 per hour).

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	Yes
1	families receive supportive services, shelter, and housing free from discrimination?	
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
	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;	

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

### (limit 2,500 characters)

1.The CoC is working with their partner, Affirmations, the local LGBTQ+ Community Center/ LGBTQ+ Service provider to bring a CoC wide training that will include foundational information about building inclusivity and discussion around trauma informed practices. Through this training, the CoC will updated the CoC-wide anti discrimination policy where needed, to ensure it's most up-to date version is well versed in best practices/language. 2-3.COC engages with community partners including housing and shelter participated in a county blueprint to end homelessness as well as racial equity work to ensure at the project level anti-discrimination polices are in place and shared throughout projects for consistency, this is shared and reviewed with COC. Information is sent out to providers to stay compliant with the equal access final rule as well as the gender identity final rule. COC works with a local LGBTQ+ service provider to offer trainings and share resources. COC process for evaluating compliance with the COC anti-discrimination policy, funded projects are monitored yearly, participant feedback via survey and listening sessions are offered to gain participant feedback and discuss any issues. COC offers contact information for any appeals or participant concerns regarding projects. 4. COC process for addressing noncompliance with antidiscrimination policies for projects/agencies if there is a potentially discrimination will meet with the agency, review the the COC policy, federal policies and depending on the situation may not fund the agency again. If the provider fails to respond and adjust they could potentially lose funding or have funds reallocated.

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

NOFO Section V.B.1.a.

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?
MSHDA		72%	Yes-HCV	Yes

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

Describe in the field below:

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

### (limit 2,500 characters)

1.CoC works directly with the largest PHA, MSHDA, they have a homeless preference and agencies populate waitlist with homeless HH's.CoC continues to reach out to all PHA's to discuss the importance of a homeless preference within their polices. As well as invites them to attend our annual retreat and to become CoC members. Second largest PHA states it will consider as a pilot but has yet to move that forward. Provided LOS to MSHDA and reached out to PHA to do the same for PSH preference for moving on vouchers. COC provides MSHDA homeless community data, explain agencies services that can be offered to HH's. CoC works formally with the Detroit PHA to coordinate EHV an advocates for homeless individuals. HARA coordinated with all PHA's, when they open up their waiting lists to inform everyone how to apply. 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.	РНА	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:

Emergency Housing Vouchers (EHV)	Yes
2. Family Unification Program (FUP)	No
3. Housing Choice Voucher (HCV)	Yes
4. HUD-Veterans Affairs Supportive Housing	g (HUD-VASH) Yes
5. Mainstream Vouchers	Yes
6. Non-Elderly Disabled (NED) Vouchers	No
7. Public Housing	Yes
<u>.</u>	

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8. Other Units from PHAs:
SHU
Yes

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)?

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

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?

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?

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

Detroit Housing C...

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

Name of PHA: Detroit Housing Commission

# 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;

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

NOFO Section V.B.1.i.

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

1D-1.	Discharge Planning Coordination.		
	NOFO Section V.B.1.h.		
	Select yes or no in the chart below to indicate whether your CoC actively coordinates systems of care listed to ensure persons who have resided in them longer than 90 da discharged directly to the streets, emergency shelters, or other homeless assistance	ays are not	
1. Foster Care		Yes	
2. Health Care		Yes	
		Yes	
3. Mental Health Care			
Mental Health Care     Correctional Facilities		Yes	
4. Correctional Facilities	Housing First–Lowering Barriers to Entry.	Yes	
4. Correctional Facilities	Housing First–Lowering Barriers to Entry.  NOFO Section V.B.1.i.	Yes	
4. Correctional Facilities  1D-2.  1. Entertier		pordinated	20
4. Correctional Facilities  1D-2.  1. Entent Pro 2. Entent ententent entententent ententententententententententententente	NOFO Section V.B.1.i.  er the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-cory, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023	pordinated CoC	20

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

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	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 CoC regularly evaluates projects to ensure those that commit to a HF approach are prioritizing rapid placement and ensuring PH are not requiring service participation or preconditions by monitoring client files yearly, attending weekly prioritization meetings and discussions around PH placement and ensuring if the conversation eludes to any specific requirements to entry or services they are addressed and resolved immediately. The CoC also asks for client participation survey results and has has focus groups to listen to client experiences. 2. COC Outcomes Committee reviews the System Performance Measures in HDX (Measure 1) to evaluate length of time homeless. At the agency level, HMIS agency admins submit monthly data quality reports to look at the LOT homeless, as well. Data elements in questions 22c and 22e of the CoC APR both look at how long it takes to house clients – 22c from project start to move-in, meaning once the client has been assigned to an agency until move in &22e from approximate date homeless (most recent episode) to movein. These elements are measured in days & agency admins review the data to monitor how long it is taking for clients to get housed &make adjustments where they can. Question 22c was used for scoring criteria, with a target for full points using the average, which was 13 days or less. Bc that was the average, some projects achieved full points, but others were still able to achieve points with it being a tiered question. Some projects saw higher LOT homeless anywhere between 30-90 days because of factors such as some clients needing to have warrants cleared, utility arrearages paid, poor credit history, failed inspections, high FMR's, obtaining of eligibility documents, landlords who no longer accept vouchers and long housing searches due to the general lack of available units. The CoC has agencies complete a HF Checklist yearly. It is allows as assessment of whether what degree programs are employing HF. CoC also has a housing first policy that each partner abides by. The policy explains that there are no preconditions to receive housing and no requirement to participate in services. The only requirements for program participation are eligibility factors (homeless status, income etc) COC staff facilitates the housing registry/BNL to maintain HF principles. The the CE system, the CoC and community partners place an emphasis on move the most vulnerable in our community into permanent housing as quickly as possible.

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

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# (limit 2,500 characters)

1. The CoC's PATH Street Outreach ensures all persons experiencing unsheltered homelessness are identified and engaged by coordinating with Street Medicine Teams, MDHHS, Harm Reduction Services, and Community Mental Health to ensure individuals are receiving wrap around services, including meeting individuals where they are at, while experiencing homelessness on the street or place not meant for human habitation. Screenings, assessments and referrals are done face to face and resources are provided to the individual(s) on spot. Providing basic need items and bus tickets to ensure individuals are able to make appointments, employment, and housing searching. The HARA calls when an individual is facing unsheltered homelessness, the PATH street outreach team provides case management and assists with linking individuals to resources and services needed. Outreach locations focus on those hotspots areas identified through the PIT. community needs, outreach canvassing, referrals from community partners. The HARA calls when an individual is facing unsheltered homelessness, the PATH street outreach team provides case management and assists with linking individuals to resources and services needed. There is also a PATH Calendar posted on the CoC website that highlights where the PATH team will be canvassing in community. Community members can reach out to the PATH team to provide recommendations on places to cavass. This calendar is also shared at bimonthly CoC meetings. 2. COC street outreach covers 100% of CoC's geographic area. 3 and 4. COC conducts street outreach 3-4 times a week during the week. S.O is tailored to individuals who may not have access to phones, transportation and provide housing screenings, assessments and referrals on the spot, meeting individual(s) where they are, tailoring outreach 1-2 times a month on weekends. 2-3 times a month for evening outreach, this helps S.O efforts to engage with those least likely to request assistance.

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	No
4.	Implemented community wide plans	Yes	Yes
5.	Other:(limit 500 characters)		

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

	HIC Longitudinal HMIS Data	2022	2023
Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	126	181

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

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

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

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

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 CoC works to provide up to date information in mainstream resources by working collaboratively with a network of agencies including representation of mainstream resources such as Michigan Works, Medicaid MRS and MDHHS. Case Managers assist clients with applying, updating and reviewing benefits on MI Bridges. CoC agencies who implement various housing programs including PSH, are charged with the task of leveraging mainstream benefits throughout the application, leasing & housed program phases. For example, every RRH &PSH household also applies for emergency housing assistance through the State Emergency Relief (SER) program implemented by MDHHS. 2. COC coordinates with local FQHC and community health and substance abuse providers at the COC board level as well as direct collaboration with COC and partner agencies to have the resources to link participants to services. 3. The CoC works with the PATH Outreach team and community SOAR providers to promote SSI/SSDI Outreach, Access and Recovery (SOAR) .Additionally, The PATH Outreach team is SOAR certified. The SOAR Specialist has conducted trainings in the community to share information on how to refer, referral application and information about SOAR, including how someone could become SOAR certified. The SOAR Specialist provides assistance to service providers across the COC.

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 COC is working to increase its capacity for Non-congregate shelter in multiple ways. First, a current project is utilizing a building that was Transitional housing (moved TH to scattered site) and is able to separate individuals and families into their own space for shelter but this is a small number of units, 26 total. Through MSHDA APR and Oakland County ARP RFP's have gone out in our community. The adult shelter, Family shelter, winter warming center and DV shelter have all applied for funding to expand, improve or renovate to create up to an additional 100+ Non-congregate shelter units for Oakland County. The ED of the CoC is on the committee that is reviewing stakeholder applications for this funding. Some of these units will be new buildings or rehabbing current locations to make congregate shelter into a non-congregate shelter with sperate bathrooms and rooms.

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.	

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### (limit 2,500 characters)

1.CoC staff regularly has check in meetings with the board to coordinate services in an effective safe way to ensure front line staff and members of the community were protected. The CoC provided community discussions and permanent changes were made to CES with intention to give agencies flexibility to lower barriers in order to respond to infectious disease outbreaks, while ensuring the safety of staff and households they serve and expedite moving clients into housing as quickly as possible. CoC updated the referral process for shelter and congregate care. This was a focal point for many of our community conversations as we wanted to make the process safe and seamless as possible. CoC participated in HUD Office hours to learn more about what HUD recommends and what other communities across the nation were implementing, then shared that information with the community. Public Health nurses also provided information to shelters with topics such as how to properly hand wash and how to wear PPE correctly. 2. COC and partners followed CDC protocols and ensured our shelters which normally operated under congregate settings, to have hoteling available to place individuals that were exposed or tested positive for COVID. CoC also used United Way funds to assist in getting PPE for our Street Outreach Team and the individuals they engage with that are unsheltered, we also provided PPE to shelters. We provided testing kits on the night of PIT for teams to utilize if an individual wanted to go to shelter and a mobile vaccine unit as well. Additionally, two public health nurse staff attend the CoC by name list calls weekly who will provide updates when necessarily along sharing different health resources with our community partnership.

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

#### (limit 2,500 characters)

1.CoC shares informational videos from FQHC to our community that discusses, vaccine concerns, potential outbreaks, and equips PATH Outreach with this information to share to those experiencing unsheltered homelessness. A flyer about vaccines and any needed information has been created and can be easily updated as needed. We also discuss with the community co-morbidity factors with potential infectious diseases. COC also provided email updates to community partners to quickly share information related to public health/homelessness.2. CoC ED worked in collaboration with the local FQHC and local health department to organize vaccine clinics, testing and information for frontline staff, shelter guests and high risk community members. COC/ health department is also able to provide PPE if needed to the Street Outreach team, for themselves and also the individuals they engage with that are unsheltered. Shelters were also given PPE and a new process for providing services. Shelters utilized hoteling and we are moving non-congregate shelter discussions and plans forward too. Case managers can provide some services remotely via the phone or email when necessary.

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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 has a no wrong door approach with coordinated entry to ensure 100% of the geographic area is covered. CoC has a Coordinated Services Agreement/ Client ROI which allows agencies to better coordinate services for those in need of housing related assistance. The agreement assists in locating clients to link with services, verify occasions of homelessness and referrals. The no wrong door approach ensure that all agencies within the CoC respond to the Individual's stated &assessed needs through either direct services or linkage to other appropriate programs. The initial screening can be done via phone or web form to eliminate barrier, such as transportation. This is standard process across the CoC, especially at the HARA/ Housing Resource Center. The CoC's PATH Outreach team also conducts street outreach over the entire county. This provides access to those least likely to apply. 2.CoC uses a phased approach of assessment: this process has integrated housing first principles focusing on rapidly housing clients without precondition to services. The initial screen includes a VISPDAT for those that are literally homeless. After screened and are potentially eligible for a program, a face to face assessment occurs, accommodations are made to meet the person if there are barriers. More detailed information is collect at this time including housing/homeless history, barriers, goals, preferences. This assessment supports the evaluation of the clients vulnerability and prioritization of assistance using the full SPDAT. This process will assist in the prioritization of housing those with the highest needs first. 3.CoC staff hosts the Centralized Housing Registry meeting weekly, this meeting focuses on providing equitable and consistent access to all potential program participants seeking permanent supportive housing in our local community. Many of our discussions about the CoC Coordinated Entry process take place on this call as most, if not all of our providers are present. We continuously have discussion about the threshold for eligibility and also CES process to ensure everyone is aware of the community process. Agencies also send out a survey for all housing clients that is reviewed at a CoC level at our Outcomes Committee which is held monthly. COC also is a point of contact for participants to reach out to and COC reaches out for listening sessions and formal focus groups to those who have participated in CES to receive feedback to update and or make changes.

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:	

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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;
	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)

 COC works to reach those least likely to apply in absence of Special Outreach by reviewing community content, websites, flyers and updates as needed, working to provide targeted material. COC is also working on a web based app to utilize technology to assist in connecting people in need of assistance quickly, provide real time funding availability. CoC hosts open general membership meetings and has a listsery that reaches, via email hundreds of agencies and individuals .2.CoC utilizes the Centralized Housing Registry to aid in prioritization people in most need of assistance. COC has developed a centralized intake process with prioritization standards, and to provide continued implementation and oversight of the disposition process. Referrals that are populated on the registry contain information that is compiled from a basic screening which can include self-reporting from the individual household related to their demographics, including history of homelessness and disability. As HUD&the community are emphasizing the goal to end chronic homelessness, we include a certification of chronic homelessness as applicable. In addition all potential participants must meet a minimum of Cat I Homelessness for permanent supportive housing; Category 1 &4 for RRH programs. CoC also adhere to HUDs recommended order of priority & the certification will include where the person is experiencing homelessness (streets, shelter, place not meant for habitation, etc.) We a utilize prioritization tool score ranked from highest scare (highest need) to lowest score (less need).3.CoC consistently reviews data such as length of time to housed and meets with partners to remove barriers when possible, HMIS assessments happen real time and when eligible, pulled and placed on housing registry weekly4. CoC reduces burdens on people using coordinated entry by ensuring everyone has access to services, resources and institutions that are critical to obtaining quality education, employment, healthcare and social wellbeing and fulfillment. Some specific examples include providing videos on the CoC website pertaining the process of how to fill out an HCV application, providing a brochure that explains the housing programs, CMs traveling to meet clients to fill out paperwork, CoC has an accessibility menu to allow more people the ability to obtain information.

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

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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 affirmatively markets housing and services provided within the CoC's geographic area and ensures that it reaches all persons experiencing homelessness by utilizing the street outreach team to ensure all persons throughout the area are reached as well as posting information on multiple different platforms including websites, newsletters and listservs and hosting in person events, such as our HARA offering homebuyer education classes, a rent right program and financial education. The CoC also includes the fair housing logo on outreach materials. 2. All agencies including the CoC post the Equal Housing Opportunity law to the public which states states that it would be illegal to the agency to discriminate against any person because of race, color religion, sex, handicap, familial status or national origin. Agencies also post information about the HUD Equal Access rule provide facts and insight about protections for the LGBTQ+ community. Case managers also inform program participants of their rights as well as what their grievance process is so the client is aware of what opportunities they have. The CoC also hosted a fair housing training open to landlords and agency staff to learn about the fair housing laws and how to apply them. 3.In regards to reporting any conditions or actions that impede fair housing choice for current or prospective program participants, CoC agencies will work with the program participant with reporting the incident to Michigan Fair Housing or HUD. Then the agency will carefully document the incident. Additionally, if the relationship is built up with the agency and the landlord, a discussion will take place and the agency will inform the landlord to education them on their practices to hopefully resolve the barrier.

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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.	04/18/2023
1D-	10a. Process for Analyzing Racial Disparities–Identified Racial Disparities in Provision or Outcomes of Homeless Assistance.	
	NOFO Section V.B.1.q.	
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		_
	Describe in the field below:	]
	Describe in the field below:  1. your CoC's process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance; and	

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2. what racial disparities your CoC identified in the provision or outcomes of homeless assistance.

### (limit 2,500 characters)

 Our CoC's process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance is by analyzing our county's census data, as well as, utilizing a core demographic report from our state's HMIS Data Warehouse both providing an overview of our homeless population broken down by race and ethnicity. 2. Racial disparities the CoC identified in the provision or outcomes of homeless assistance are individuals and families identifying as Black and Brown continue to be overrepresented in homeless assistance compared to the general Oakland County population. Black people made up 59% of persons served in 2022 despite making up only 13% of the OC population. All other races are underrepresented in homeless assistance. White people made up 69% of OC but only 32% of persons served; Asians are 8% of OC but only 0.7% of persons served. American Indian/Alaskans made up less than 1% of the population in OC and account for 0.61% of persons served. Native Hawaiian/Pacific Islanders made up less than 1% of the population in OC and account for 0.35% of persons served and Multi-racial persons made up 5% of the population in OC and 8% of persons served. When comparing the overall racial and ethnic population distributions in OC to the HMIS Data Warehouse data, the greatest disparities exist among those identifying as Black and Brown households.

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.		

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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)

COC has continued to work w community partners to coordinated efforts to address racial disparities within our coordinated entry system. Our overall goal is to learn how we can achieve equitable results around the experience of people going through our response system/coordinated entry system and getting to more housing stability C4 presented us with a structure called Equitable Results Framework, in which we went through the steps of data landscaping, future visioning, root cause Analysis, strategies, action steps, &evaluate and refine strategies which leads to equitable outcomes. After identifying specific populations and gaps/ barriers within our current system our next step was developing strategic action plans to aid inbreaking down the root causes of the inequities in our system that lead to poverty and homelessness. The identified root causes are the following: Availability of housing units, Affordability of housing with the needed number of rooms, Geographic restrictions, Lack of security deposits for utilities and 1st month's rent, Credit scores are screening out tools, Lack of application fees, No transportation to get to apartment viewing, Landlords who violate fair housing, Income discrimination, Landlord participation, cultural competency, Voucher holder perception. After identifying the root causes we went on to develop strategies to work on overcoming the root causes of inequities in our system. For example: Strategy #1 Increase Housing Inventory: Landlord Strategy: Increase the number of landlords who will work with the Coordinated Entry System and who will accept vouchers. The community came up with the following ideas in order to develop the number 1strategy: Recruit landlords from all areas of the county, develop a landlord Lunch n Learn/Meet and Greet, work w MSHDA to update the Landlord database, celebrate participating landlords, create a Landlord Ambassador program, explore master leasing with landlords, incentivize landlords with Service MOUs (where applicable) and work with the County to utilize ARPA dollars w more targeted housing investments. When looking at leavers COC &agencies review data to see whether race is again showing a disparity and how to reduce return to homelessness if there want a positive housing destination.COC held a focus group and listening session w varying races to hear participant feedback and identify disparities to address in homeless CES. Feedback from this focus group was incorporated into final action plan

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.

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# (limit 2,500 characters)

1. To measure progress on preventing or eliminating disparities the CoC is working to put into action the recommendations from our work with C4 and our community as a whole in order to develop a Project Plan to maintain sustainability. Additionally, the CoC Outcomes Committee reviews data trends to ensure they are going in the right direction, and if not there is decision on how the CoC can go about changing that trend/what is causing that trend to happen. 2. The tool used is our Project Plan will focus on intake, referral, housing pulls, shelter intakes to ensure processes are done in an equitable manner. This will be an on-going practice for the CoC, as inclusivity and equitability is not a state to be achieved but a practice that must be continually implemented, reviewed, revised and implemented again. CoC also utilizes a registry/ byname list is to prioritize those with known disparities. CoC does bimonthly reports that are presented by HMIS at our General membership meeting focusing on Veterans, chronically homeless persons and families. The CoC is also working with the state to find an alternative measure to the SPDAT that will be more trauma informed and also doesn't continue racial inequities within triaging.

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.

COC works with partner agencies who have the relationships with current and past homeless services/housing participants, through this effort the COC's staff has been able to better to build off those relationships, if there is a participant that wasn't particularly happy with their services we also want to reach out to them to have them involved in creating a revised/better process, all input positive or negative is welcomed. COC pays \$50.00 per hour for any contracted staff that have lived experience and offers a variety of ways to receive compensation, i.e visa gift card or check. COC has a current board member that has lived experience so they are in a leadership/decision making role within the COC. COC reached out to housed individuals to conduct a virtual survey to gain feedback around process as we are working to move to add a web based app to target those who are comfortable and able to use this type of connecting to CES. We want those with lived experience to be a part of the creation from start to finish in this project. We will also hold a listening session with those with lived experience in our community and shelters to hear about their experience in obtaining shelter and connecting to housing. With the feedback and responses from the listening session the CoC will be looking into specific policies that are based on shelter stay/length of time in shelter, as it was reported that the current timeframe of 90 days is not long enough for individuals and families to find housing or employment, even with small extensions. The CoC will be looking into different benchmark criteria for extended stays at shelters as well. Another observation was that there needs to be more intentional connections made for individuals/families. Meaning, getting to know the individual skills and strengths and connecting them to employment with that type of skill set and aid in setting up appointments for employment opportunities and providing transportation to get to the appointment. The CoC is also considering having a designated point of contact that will be able to help individuals with creating connections to employment and housing instead of just providing multiple phone numbers for different resources. Those ideas came out of direct input from those with lived experience to assist in decisions made to update process in our CES.

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.	6	0
2.	Participate on CoC committees, subcommittees, or workgroups.	6	6
3.	Included in the development or revision of your CoC's local competition rating factors.	1	0
4.	Included in the development or revision of your CoC's coordinated entry process.	6	6

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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 CoC sent our a survey link to those housed with COC/HCV projects to get feed back on the full scope of homelessness to housed. We were able to engage 10 people interested in being more active with our Lived Experience Cohort. Through that we were able to truly engage with 4 so far. The COC is able to offer stipends for this work or their expertise at a rate of \$50 per hour and usually has that participation at least quarterly. More actively right now as are engaging in the addition to our CES process by working to add technology (web based app development) and want input and offer decision making power through the entire development Member organizations have several methods for providing professional development and employment opportunities to people with lived experience. One of the PSH/RRH/TH providers includes "lived experience with homelessness" as a preferred qualification on all of their job postings. This helps encourage people with experience to share that experience and prioritizes qualified applicants with lived experience over qualified applications without lived experience. They also recruit current and past program participants to agency, board committees and task forces. They compensate them for their time at a rate of \$75/month to prepare for monthly meetings and participate in meetings. While in the programs, the agency's staff work with people currently experiencing or recovering from homelessness in securing employment opportunities. This takes the form of employment coaching through their Center for Working Families program. The CoC recently applied for an MI Impact grant, which purposes is to plan and coordinate services for specific targeted low income/ ALICE zips codes in our county to help with job connections, readiness and skills.

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.	

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1 &2. CoC routinely gathers feedback from people experiencing homelessness and people who have received assistance through the CoC or ESG program by sending out follow up surveys, agencies also send out follow up assistance needed/check in surveys every 180 days. COC also has set up a third party listening sessions so current/past participants can freely express their thoughts and experience around accessing homeless/housing services, specifically targeting singles and families in shelter through our ESG programs. CoC Outcomes Committee consistently goes through the follow up surveys ensuring that questions are still applicable with what the goals are of the CoC. 3. Steps the CoC has taken to address challenges from the surveys and listen sessions to focuses on opportunities for growth and development with partner agencies as well as in community outcomes to identify trends and gaps in services to address the community needs. We are hopeful that the development of a web based app will also add to the tools in our community for connection to services.

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 &2.In the last 12 months the COC has meet with elected and non-elected officials to discuss the need to increase the affordable housing supply, discussing zoning and regulatory barriers to housing developments. COC has been able to work with other non-profit housing development partners to assist OC government to create a Housing Trust Fund, at this time the fund will hold 10 million dollars for gap funding for LIHTC projects. COC has also provided a document called "Community Solutions to Solve Oakland County's Housing Affordability Shortage Suggested Policies & Practices to Pursue and Support" with direct links to opportunities for officials to review and advocate for change, i.e zoning etc. COC submits comments on all open public comment activities around this topic and shares that information to partner agencies to express their needs/concerns too. COC has also met with an OC City Mayor to discuss the importance of offering Payment in Lieu of Taxes for developments as this is not something that administration is currently doing.

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Yes

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# 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

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11	E-1. Web Posting of Your CoC's Local Competition Deadline—Advance Public Notice.	
	NOFO Section V.B.2.a. and 2.g.	
	You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.	
1.	Enter your CoC's local competition submission deadline date for New Project applicants to submit their	07/21/2023
2.	project applications to your CoC–meaning the date your CoC published the deadline.  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.	07/21/2023
11	E-2. Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.  NOFO Section V.B.2.a. 2.b. 2.c. 2.d. and 2.e.	
	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
	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
	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
		t

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

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5.	Use	ed data from comparable databases to score projects submitted by victim service providers.	No	
6.	rep	ovided points for projects based on the degree the projects identified any barriers to participation g., lack of outreach) faced by persons of different races and ethnicities, particularly those over- oresented in the local homelessness population, and has taken or will take steps to eliminate the ntified barriers.	No	
1E	E-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.	Wh	nat were the maximum number of points available for the renewal project form(s)?		172
2.	Hov	w many renewal projects did your CoC submit?		18
3.	Wh	nat renewal project type did most applicants use?	PH-PSH	
1E	E-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		

 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.

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1.CoC analyzed data regarding each project that has successfully housed program participants in permanent housing by requiring the agencies to run a CoC APR report for each of their projects. Considering ranking for PSH projects, COC used the report's measure, "Length of Days from Project Start to Housing Move-in" to obtain the average length of time to housing for each project. The CoC goal is 13 days for PSH and 39 days for RRH. It is a tiered question and several projects scored well and continue to make improvements to achieve the goal. Participants are given the opportunity to complete an HCV application; the CoC has seen a significant increase in the number of voucher pulls which has resulted in successfully housing program participants sooner than in previous years. The CoC uses housing navigators to help expedite the housing search as well as grow relationships with landlords so landlords fully understand the programs which leads to the successful housing of participants. The CoC analyzed data regarding how long it takes to house people in permanent housing by having agencies run and submit a monthly CoC APR where the HMIS Agency Admins review related elements to evaluate how long it is taking to house people in permanent housing. CoC facilitates a monthly HMIS Agency Admin meeting where specific elements are reviewed and CoC provides guidance for improvement where needed. CoC advises agencies to run supplemental reports, e.g a LOS report to look at how long the people are in project. If a person is in ES for an extended length of time, it may be because the person was housed, but not exited 3.4 The CoC considered the specific severity of needs& vulnerabilities experienced by clients that could prevent rapid placement in PH/ ability to maintain PH when the CoC ranked/selected projects by prioritizing PSH projects. The CoC ranking committee recognizes that projects that serve chronically homeless individuals/families may have lower scores than those that do not, as they tend to have more barriers to housing that can slow down the rapid placement into a project. An example from our ranking committee: one of our PSH Renewals scored lower than a RRH renewal but the Ranking committee decided to rank the PSH project higher because of population served and the ongoing rental/leasing assistance provided.

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

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1.2. The CoC used input from persons of different races and ethnicities, particularly those over-represented in the local homeless population, to determine the rating factors used to review projects by starting with a diverse rating/ranking committee. This committee consists of people from different races and and backgrounds, and lived experience. The CoC ranking process is discussion based and data driven, as this allows members to provide as much input as they would like, along with providing suggestions for the next competition. The data doesn't always tell the full/equitable story therefore committee discussion and input from persons of different races and experiences help to balance those over-represented in the homeless system. For new and renewal projects the CoC specifically asks for the description of the proposed project with a detail of activities included for CE regarding steps that will be taken to ensure traditionally marginalized populations ( such as racial and ethnic minorities, persons with disabilities and LGBTQ+) are addressed. Knowing what agencies have in place to assist these individuals, helps with the review and ranking process. For if they are taking the steps to identify and work on barriers that marginalized populations face, the committee sees that as a higher ranking project that a project that does not have specific steps or practices' 3. Within the local competition application, the CoC specifically asks agencies what steps they take to reduce burdens/barriers on potential participants to access Coordinated Entry. Based on the agency's answer to that question, as well as how they describe their process within the presentation they give to the rating/ranking reviews committee - the committee discusses the efficiency of the agency's ability to reach those over represented in the local homeless population.

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

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1. The CoC's reallocation process takes into consideration the CoC yearly monitoring outcomes, HMIS performance/data quality, financial performance, score in the local Competition, community needs and serving those with the most need. Then through discussion with the ranking committee, the CoC decides if lower performing projects should be reallocated or if an action plan should be set in place for the agency to work with the CoC in improve their performance through out the new year. If a lower performing project like PSH projects or a TH project. CoC works to keep them within our community to ensure those populations are served and no beds are lost. 2. The CoC did identify low performing projects through the process described in element 1. 3. The CoC did not reallocate any low performing projects during the local competition. 4. The CoC did not reallocate low preforming projects this year as the CoC is focusing on optimizing the use of existing resources to improve the program performance of the lower performing projects. Many scores were impacted by use of HC Vouchers and participants choosing that over the programs they qualified for. The CoC has already set up an action plan for a sub-grantee to monitor compliance during this upcoming year to ensure they are improving their work to address homelessness. The PSH provider will continue to work with the CoC to improve outcomes or the project can be reallocated next funding round, CoC would then work with TA so current participants would not be impacted in this ongoing project.

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
1	E-5. Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	
1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	Yes
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	No
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	08/31/2023

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1E-5a		
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	
ran	Inter the date your CoC notified project applicants that their project applications were accepted and niked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified plicants on various dates, enter the latest date of any notification. For example, if you notified plicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	08/30/2023
1E-5b	b. 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.	
1. 1 2. 1 3. 1 4. 1 5. 1	pes your attachment include: Project Names; Project Scores; Project accepted or rejected status; Project Rank-if accepted; Requested Funding Amounts; and	Yes
	Reallocated funds.  Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program	
	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.  NOFO Section V.B.2.g. and 24 CFR 578.95.	-
1E-5c	<ul> <li>Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.</li> <li>NOFO Section V.B.2.g. and 24 CFR 578.95.</li> <li>You must upload the Web Posting—CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.</li> </ul>	
1E-5c	<ul> <li>Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.</li> <li>NOFO Section V.B.2.g. and 24 CFR 578.95.</li> <li>You must upload the Web Posting—CoC-Approved Consolidated Application attachment to the 4B.</li> </ul>	09/26/2023
1E-5c	c. 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.  Iter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or rtner's website—which included: the CoC Application: and	
1E-5c	c. 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.  Iter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or rtner's website—which included: the CoC Application; and Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	
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.  Iter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or rtner's website—which included: the CoC Application; and Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.  1E-5d. Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	

# 2A. Homeless Management Information System (HMIS) Implementation

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

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

2A-1.	HMIS Vendor.		
	Not Scored–For Information Only		
Ente	er the name of the HMIS Vendor your CoC is o	surrently using.	WellSky
2A-2.	HMIS Implementation Coverage Area.		
	Not Scored–For Information Only		
Sele	ect from dropdown menu your CoC's HMIS cov	/erage area	Single CoC
Oci	eet nom dropdown mend your ood a riving cov	relage alea.	Olligic COC
2A-3.	HIC Data Submission in HDX.		
	NOFO Section V.B.3.a.		
Ente	er the date your CoC submitted its 2023 HIC date	ata into HDX.	04/20/2023
	0	1111101	161
2A-4.	Comparable Database for DV Providers–CoC Data Submission by Victim Service Providers	and HMIS Lead Supporting Data Coll	lection and
	NOFO Section V.B.3.b.		
	In the field below:		
1.	describe actions your CoC and HMIS Lead ha providers in your CoC collect data in HMIS co	ave taken to ensure DV housing and s mparable databases;	ervice
2.	state whether DV housing and service provide comparable database–compliant with the FY	ers in your CoC are using a HUD-com 2022 HMIS Data Standards; and	pliant
EV/000	22 0-0 Anniiti	D 44	00/00/000

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

#### (limit 2,500 characters)

1. Actions that the CoC and HMIS Lead have taken to ensure that DV housing/service providers collect data in a comparable database are through communication and collaboration with partners. The CoC has one DV provider (shelter) which uses a comparable database product, CaseStream from the vendor BizStream. The HMIS Lead communicates with the DV shelter's Quality Assurance and Administration Director who ensures that they are in contact with their vendor and that their database is using the latest version. The director reports that the database is compliant with the FY 2022 HMIS Data Standards based on the latest programming specifications found at a link on the HUD Exchange. The director also reports that they communicate with their vendor regularly to ensure they stay in compliance and that BizStream has been very helpful regarding HMIS compatibility.

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	248	52	140	71.43%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	96	0	82	85.42%
4. Rapid Re-Housing (RRH) beds	181	0	181	100.00%
5. Permanent Supportive Housing (PSH) beds	625	0	544	87.04%
6. Other Permanent Housing (OPH) beds	312	0	217	69.55%

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.

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- 1.For Emergency Shelter beds, steps the CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent are reaching out to non-participating HMIS potential partners also working to end homelessness and educate them on the importance of becoming an HMIS participating partner which in turn would increase Emergency Shelter beds in our community. The CoC does have potential partners who have expressed interest in becoming an HMIS participating partner, however, the HMIS state Joint Governance Committee is working to update all of the administrative QSOBAA's and related documents needed to bring on new partners.
- 2. For Emergency Shelter beds, the steps the CoC will implement to increase bed coverage to at least 85 percent are through strong community partnerships; speaking at our general membership meetings, which are attended by participating and non-participating community members working to end homelessness and explain the benefits of becoming an HMIS participating partner, as well as becoming a CoC partner. There will be a sign-up sheet provided during the general membership meeting to collect contact information for those interested in becoming HMIS participating partners allowing the CoC to follow up after the meeting. CoC will follow up by sending out an HMIS agency onboarding form to obtain the details for their plans for using HIMS and then schedule a meeting to review and further explain the process.
- 1.For OPH beds, the steps the CoC will take to increase bed coverage to at least 85 percent are, that there are agencies within the CoC that have received funding for their LIHTC/SHU unit applications to continue to develop OPH housing in our community and the initial planning process has begun.
- 2.For OPH beds, the steps the CoC will implement to increase bed coverage to at least 85 percent are that once those housing projects are built and ready for move-in the CoC will ensure that they are HMIS participating beds which will increase the bed coverage rate within the CoC.

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.	

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

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

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

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

(limit 2,500 characters)

FY2023 CoC Application

- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section V.B.4.a	
Ent	er the date your CoC conducted its 2023 PIT count.	01/30/2023
2B-2	PIT Count Data-HDX Submission Date.	
	NOFO Section V.B.4.a	
	1101 0 0004511 11.5.11.4	
I		
Ent	er the date your CoC submitted its 2023 PIT count data in HDX.	04/20/2023
2B-3.	PIT Count–Effectively Counting Youth in Your CoC's Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	
	Describe in the field below how your CoC:	
1.	engaged unaccompanied youth and youth serving organizations in your CoC's most recent PIT count planning process;	
2.	worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC's most recent PIT count planning process; and	
3.	included youth experiencing homelessness as counters during your CoC's most recent unsheltered PIT count.	

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- 1. CoC engaged stakeholders that serve homeless youth by working with a provider who serves youth from ages 10-24 in their Youth Basic Center Shelter, and their two Transitional Housing Programs for youth, A Step Forward (ASF) and Graduated Apartment Program (GAP) and 24 hour Crisis line that goes to the Youth Basic Center Shelter. This provider actively participates in the PIT count every year.
- 2. CoC works with unaccompanied youth, youth serving organizations and other providers to identify locations where homeless youth are most likely to be identified during CoC's most recent PIT count planning process. When the maps are generated they include locations such as college campuses, 24-hour grocery stores, coffee houses (e.g. Starbucks), the local bus station and other locations identified by the CoC's street outreach teams.
- 3. Youth experiencing homelessness were contacted by a youth provider, who were over the age of 18 to participate as counters, but were unable to participate on the night of the unsheltered PIT count due to scheduling conflicts, therefore no homeless youth experiencing homelessness participated as counters in the CoC's most recent unsheltered count.

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.	

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1. For HMIS participating agencies, no changes were made to the sheltered PIT count implementation in data quality. This year, in methodology, CoC reached out to a known non-HMIS participating community shelter provider and supplied the data collection instructions and forms as well as, trained them on the data collection process. CoC also included the Domestic Violence Transitional Housing program in the sheltered count.

- 2. For HMIS unsheltered PIT count implementation CoC made the following data quality changes. The CoC enhanced the HMIS data collection forms training by conducting on-site "mini-trainings." Also, due to the weather and date change of CoC's PIT count, some volunteers were unable to participate. Therefore, CoC combined maps and assigned more experienced team leaders to those areas.
- 3. The changes for the sheltered count affected the CoC's PIT count results by identifying additional sheltered homeless persons in the CoC. The changes for the unsheltered count affected CoC's PIT count results by increasing the number of unsheltered persons encountered.

## 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

- 1.CoC determines risk factors using a number of processes to identify first time homelessness, including consulting with foster care, eviction prevention, foreclosure prevention, Oakland school's homeless liaison, PATH outreach, and MDHHS court services for individuals/families, including families with children that may be facing eviction.
- 2. CoC addresses individuals and families at risk of becoming homeless for the first time by offering transportation, such as, bus tickets, increasing affordable housing through landlord outreach and prevention services, early intake hours, and integration of MDHHS staff to the overall intake process ensuring efficiency and that full-service needs are met. CoC also works with communities in Oakland County to develop locally-centered prevention strategies that suit residents' needs. CoC implemented two new homeless prevention programs (Housing Stability Services and Homeless Prevention Program) aimed at stabilizing individuals who are at-risk of homelessness and/or facing eviction.
- 3.As the CoC lead, the Alliance for Housing is responsible for overseeing, managing and regular reviews of this process and its outcomes to reduce/end individuals/families experiencing homelessness for the first time.

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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.	

- 1.CoC has implemented strategies to reduce the LOT individuals and families remain homeless which include: increased case management, CoC project wide housing first practices, MDHHS same day denial to speed the process along, landlord outreach, as well as fee waiver for birth certificate and SOS expedited ID, and supporting development of affordable housing. Additionally, the CoC is applying for the SSO-CE grant to help identify and alleviate stopgaps in the process of reducing the length of time individuals and families remain homeless.
- 2. CoC identifies and houses individuals and families with the longest length-of-time homeless through weekly housing registry meetings by prioritizing using the following criteria: homeless start date, sheltered or unsheltered, VI-SPDAT, referral date. Additionally the CoC takes into consideration CPS involvement, aging out of foster care and domestic violence status.
- 3. As the CoC lead, the Alliance for Housing is responsible for overseeing the strategies to reduce the length of time individuals and families remain homeless.

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)

- CoC's strategy to increase the rate that individuals in ES/TH/RRH exit to permanent housing is by increasing case management, providing emergency housing assistance in our shelter programs and having everyone complete an HCP/HPV application at entry. Additionally, each ES, TH or RRH project works together by participating in a virtual (weekly) and face to face (monthly) housing prioritization meeting and building landlord relationships. CoC utilizes Moving Up, HCV and EHV vouchers provided by our public housing agencies (PHA) and use a length of time in project as well as a matrix to assist in the placement process to move households into permanent housing. The matrix ensures that households qualify for the correct permanent housing subsidy (voucher) including a review of any income and other eligibility requirements, as well as, ensuring that the unit they are in qualifies for the voucher/permanent housing subsidy requirement. Case management is key to achieving permanent housing; CoC case managers work with individuals to increase income, make connections to healthcare/supportive services as well as address any barriers the individual may be facing and help with identifying ways to break down those barriers.
- 2. CoC's strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing (PSH)or exit to permanent housing destinations includes using termination only as a last resort once all other options have been exhausted, strong relationships with supportive services, landlord liaisons, case management assistance and income supports to maintain client housing. Those who leave PSH are able to maintain connections to supportive services. CoC's goal is to assist individuals through bringing awareness to the services and supports that are available in their community to create a sustainable living environment. PSH households also have the ability to transition to Housing Choice Vouchers (HCV) to be secure financially and maintain their housing when the support services are no longer needed.
- 3.As the CoC lead, the Alliance for Housing is responsible for overseeing these strategies to increase the rate that individuals and families exit to or retain permanent housing.

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.	

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- 1. CoC's strategy to identify individuals and families who return to homelessness is by conducting a 60, 90 and 180-day client follow up survey to determine their housing status. If it is determined that they are in need of housing support, CoC's strong community partnerships with the HARA, MDHHS, shelters and the PATH Outreach team would allow them through the use of HMIS to determine a return to homelessness and connect them with services, such as community mental health, SOAR counseling and/or employment supports. A shelter referral will be made if needed. Individuals would be added back onto the housing prioritization registry which in turn links them to service providers and original housing providers.
- 2. The strategy that the CoC will use to reduce the rate of additional returns to homelessness include: using the information from the 60, 90 and 180-day follow up the CoC will increase engagement to reduce risk factors so they do not return to homelessness. CoC also discusses returns to homeless at the monthly Outcomes meeting and follows up with housing providers to reengage, look at extending RRH timeframes when needed and continues to connect households to long term subsidies if needed. The connection to employment and the relationship with the local MIWORKS! has been invaluable to connect those to employment to reduce returns to homelessness.
- 3. As the CoC lead, the Alliance for Housing is responsible for overseeing these strategies to reduce the rate of individuals/families return to homelessness.

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

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Project: MI-504 CoC Registration FY2023 COC\_REG\_2023\_204483

1. The CoC's strategy to access employment cash sources; is to partner with employment organizations such as Michigan Rehabilitation Services, Michigan Works!, Michigan Department of Health and Human Services, various flexible employers, vocational services, veteran employment services, and other similar organizations. CoC's housing partners refer participants working toward increasing their employment cash sources to the agencies listed above helping them gain the expertise and skills they will need to obtain employment.

- 2. CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income through partnerships that help to eliminate employment barriers such as expungement, criminal backgrounds, inability to obtain vital documents, lack of transportation, and limited childcare. Agency case management staff work with program participants to develop goals, and provide referrals to partner organizations and other resources that can help them achieve their goals. The CoC works with funded agencies to share best practices with one another and help agency staff navigate resources. While increasing cash income is often a participant goal, it is not required for participants to gain access to the programs per Housing First policies.
- 3.As the CoC lead, the Alliance for Housing is responsible for overseeing these strategies to increase income from employment.

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.	

- 1. The CoC's strategy to increase non-employment cash income is to link those eligible with a SOAR case manager to assist in the completion of paperwork and collecting documents to obtain Social Security Income (SSI). Community partners work in conjunction with AmeriCorps employment specialists to increase access to non-employment cash sources for individuals. The CoC also provides a streamlined process with MDHHS to non-employment cash income, such as SNAP, cash assistance and childcare assistance. All case managers are trained annually to assist participants working to increase non-employment cash income, as well as, timely and accurate reporting within the Homeless Management Information System (HMIS).
- 2. As the CoC lead, the Alliance for Housing is responsible for overseeing the strategy to increase nonemployment cash income.

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## 3A. Coordination with Housing and Healthcare

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

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

3A-	-1. New P	New PH-PSH/PH-RRH Project-Leveraging Housing Resources.			
	NOFO Section V.B.6.a.				
	You mu Screen	ust upload the Housing Leveraging Co	mmitment attachment to the 4B. Attack	nments	
h	ousing uni	applying for a new PH-PSH or PH-RF ts which are not funded through the Cog homelessness?	RH project that uses housing subsidies oC or ESG Programs to help individual	or subsidized ls and families	Yes
3A-	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.			nents 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 Name Project Type Rank Number Leverage			Leverage 1	Гуре
DV Rapid Rehousin PH-RRH 21 Housing					

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## 3A-3. List of Projects.

1. What is the name of the new project? DV Rapid Rehousing Bonus

2. Enter the Unique Entity Identifier (UEI): KPK3G4MH1JE6

3. Select the new project type: PH-RRH

4. Enter the rank number of the project on your 21 CoC's Priority Listing:

5. Select the type of leverage: Housing

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

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

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

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

(limit 2,500 characters)

N/A

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

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

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

		1
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.	
		-
proje	our CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component ects to serve families with children or youth experiencing homelessness as defined by other eral statutes?	No
3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	
	You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.	
	If you answered yes to question 3C-1, describe in the field below:	
	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)

N/A

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# 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?		Yes
<b>4A</b> -1	a. DV Bonus Project Types.		
	NOFO Section I.B.3.I.		
	Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2023 Priority Listing.		
		_	
F	Project Type		
1. 5	SO Coordinated Entry	No	
2. F	PH-RRH or Joint TH and PH-RRH Component	Yes	
You mu	ust click "Save" after selecting Yes for element 1 SSO Coordinated	Entry	
	to view questions 4A-2, 4A-2a. and 4A-2b.	• •	

4A-3.	Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area.	n
	NOFO Section I.B.3.I.(1)(c)	
1.	Enter the number of survivors that need housing or services:	358
2.	Enter the number of survivors your CoC is currently serving:	253
3.	Unmet Need:	105

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

1.2. The data for the number of households served was collected by measuring the number of people currently housed in Oakland County Continuum of Care programs who identified as being a DV survivor/actively fleeing DV (using HMIS). The unmet need was determined through the number of people identifying as a DV survivor/actively fleeing DV on the Continuum of Care's registry. The total number of survivors in need of housing was determined by adding the two numbers together. 3. This is an undercount of the need because those who haven't yet engaged with the Continuum of Care (CoC) or CoC partner organizations are not reported. An underlying issue for unment need is the lack of housing and program slots. The proposed new RRH DV will help provide new housing and case management support that will help provide additional housing as well as help those fleeing domestic violence find safe and appropriate housing as quickly as possible.

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

#### **Applicant Name**

Community Housing...

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

4A-3b. Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.

NOFO Section II.B.11.e.(1)(d)

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

1.	Applicant Name	Community Housing Network, Inc
2.	Project Name	Oakland Rapid Rehousing DV
3.	Project Rank on the Priority Listing	21
4.	Unique Entity Identifier (UEI)	KPK3G4MH1JE6
5.	Amount Requested	\$609,127
6.	Rate of Housing Placement of DV Survivors–Percentage	69%
7.	Rate of Housing Retention of DV Survivors–Percentage	90%

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

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

1. how the project applicant calculated both rates;

2. whether the rates accounts for exits to safe housing destinations; and

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

#### (limit 1,500 characters)

Information based on general RRH data.

- 1. For rate of housing placement, rate was calculated as those who entered program and were able to secure housing (positive housing destination). For housing retention rate was calculated by those who obtained housing through a program who were either still in the program or had exited to a positive housing destination.
- 2. Exits to safe housing were not accounted for in this calculation. However, exits to positive housing destination was used and CHN staff are trained to work with DV survivors to find safe housing destinations. This data was just not reported in the report used.
- 3. CHN used HMIS APR data to compile this information.

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

1.2.CHN works w community partners including other CoC members to provide a variety of supportive service assistance including: short to medium-term rental assistance, housing relocation&stabilization services such as security/ utility deposits, utilities payments, moving cost assistance&financial literacy/credit improvement coaching. Eligibility will be limited to individuals & families w/ a history of DV. The RRH DV project will expedite housing stability for those impacted by DV; we will have greater capacity to move these families into safe, stable housing while also providing case management resources for mental health services&access to other resources depending on individual family needs. These additional supportive services will allow for faster removal of barriers that survivors of DV face as they work toward gaining self-sufficiency &independence while seeking to further their education, gain employment&become self-sufficient. 3.4.HUD funded RRH services are integrated into existing CHN services & the CES to provide a comprehensive array of services that provide assistance for both the short term & longer terms services & supports as applicable. All callers & referrals are provided with screening for all community programs as part of the CES. As appropriate, referrals will receive additional in-depth screening for RRH & a face-to-face meeting will be scheduled. An in-depth housing assessment as well as a housing plan to highlight both short-term/ long-term goals to achieve housing self-sufficiency& financial assistance (up to24mons.) for RRH will be developed. In all cases RRH rental assistance will only be provided on a "but for" basis – but for this assistance the individual or household would remain homeless. CHN will work with the household to identify housing that will meet long-term needs&examine sustainability beyond the timeframe that rental assistance can be provided. All identified units will go through a rent reasonable test, review of lease & an HQS inspection. The program will focus on moving families to housing as quickly as possible & achieving stability in that housing with monthly CM while participating in the program to establish housing goals&develop a plan for stability. 5CHN works w/ other mainstream resources&community programs to identify & leverage resources & utility deposits/arrearages.Often clients are "transferred" from the RRH to longer-term PSH/HCV programs to meet longer term needs for sustainability.

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

1.CHN staff proactively provide resources prior to intake, at intake, and as applicable throughout the duration of working with participants. This includes resources for crisis services, childcare, transportation, mental health services, physical health resources, and more. We understand that each person's trauma may present differently at various stages of the housing search process and we work with participants to address their concerns before they disclose them. CHN staff also use the information that is already in the system to avoid retraumatizing or having to share their personal experiences again. CHN staff use "self-certification" forms as needed when assisting those who are survivors of domestic violence, too. 2.3. During intake for programs, we use the Brown & Stanley Safety Planning document to create a plan unique to each participant. CHN also has a VAWA Emergency Transfer Plan in place for any participants that need to move while in a unit due to domestic violence. This plan follows HUD's quidance on confidentiality and emergency transfer plans to best serve our participants experiencing domestic violence. When notified of a participant need for an emergency transfer, CHN uses the HUD Emergency Transfer form (HUD 5383) that the case manager completes on behalf of the program participant. CHN's team then works to get the participant transferred to a new unit as quickly as possible. The participant's file is then secured in a separate file location and their HMIS request to lock the profile is sent (if participant did not previously request a locked profile). 4.5.CHN provides at least annual Trauma Informed Care trainings using Relias to track who has taken the training. CHN staff are also trained in conducting the Danger Assessment training to understand the lethality of a persons situation. CHN staff also are trained in field safety, motivational interviewing, and attend a variety of trainings that discuss the effects of trauma on a person to best serve our participants

5. taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.

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

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

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Program benchmarks and outcome measures will be established in alignment with HUD goals, strategies, and project priorities. CHN has 22 years of experience in tracking specific, relevant, and measurable performance outcomes in previous HUD and non-HUD grants. Cumulative measures, based on HUD's policy priorities, Alliance for Housing performance measures and project priorities, will be assessed, evaluated, and reported to the Alliance for Housing. The goal is for all Oakland County residents to have a safe place to call home, and a living situation that is sustainable for the long-term. With this in mind, the housing goal is to transition residents from housing crisis to long term stability by moving members to a voucher, permanent supportive housing or private sector housing. Safety of DV survivors is especially important and CHN will use both HMIS based data and program participant feedback to identify areas of improvement and possible solutions to better ensure DV survivor safety.

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

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1.CHN is committed to utilizing the Housing First approach. This practice ensures participants are not screened out of service participation based on income, substance abuse use/history, criminal record or DV history. 2.The participants served by CHN directly benefit from the investment in Trauma Informed Care through its integration into the organizational culture, personal approach and quality of service delivery. Through a comprehensive organizational change effort, CHN has evolved from trauma awareness to a trauma informed agency. Since 2019, CHN has determined specific organizational needs and developed a plan with trauma-informed care domains. The developed plan included a comprehensive training curriculum whereas staff receive ongoing development on techniques and skills toward trauma-informed service provision, ACEs study and its impact, and ways to provide support services in a trauma-informed method. 3. The trauma informed capacity building training gives staff a different framework - different from a traditional deficitbased model of care (what is wrong with you and how can we fix it?) to an empathetic, supportive, compassionate approach (what happened to you and how can you move on from there?). Training content includes harm reduction, motivational interviewing, person centered practice in services for persons experiencing homelessness and those with disabilities - all of which are recognized as national evidence based best practices by SAMHSA. Other specific areas of training for direct line staff includes compassion fatigue, selfcare, setting boundaries in a helping relationship, putting philosophy into practice, building trusting relationships, tools for working with individuals impacted by trauma and supervisory support. These training topics and others are followed in subsequent sessions with time for staff reflection, which will allow for discussion on the content, questions on the method, modeling the skills and ways to integrate the content in everyday practice. 4. CHN's housing case management utilizes a Client Centered Approach, a person-centered, strength-based approach that identifies participant's strengths, goals and measure the level of their desire and motivation to change. The goal of CHN's supportive services is to help participants identify and achieve their goals and meet their needs through access to a variety of CHN and community resources. 5 Case management addresses the physical, psychological, and social needs of the person with the ultimate goal of assisting them in maintaining housing. Case management is an ongoing process throughout the participant's stay in CHN housing programs. The services provided to each tenant will be unique to their specific goals and needs.6.7 CHN provides services in the homes of individuals, at CHN office, or in public community spaces, depending on the needs of the individual. CHN provides individualized support services to residents based on their goals and identified service needs.

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

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

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

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This project proposes leveraging many mainstream resources and services. In addition to obtaining leveraging from OCHN Core providers, other local service providers such as The Furniture Bank of Southeast Michigan, OLHSA, SOS, Lighthouse of Michigan, the Oakland County Health Division, the Baldwin Center, Hope Hospitality and Warming Center, and the CHN HRC, ESG, and PATH programs, CHN will coordinate with mainstream resources, such as Medicaid from the Affordable Care Act, Medicare, TANF, Food Stamps, Social Security Income, and the Veteran's Administration. CHN will further develop its partnership with organizations serving people fleeing domestic violence including Common Ground and HAVEN. Through partnership with these organizations, and with the additional funds provided through the DV-RRH bonus program, CHN will provide complete wrap around services to meet the unique needs of each family fleeing domestic violence. The partnerships will reduce the trauma that this experience causes by providing seamless transfers between emergency housing and Rapid ReHousing.

1A-3a	Plan for Trauma-Informed, Victim-Centered Practices for New PH-RRH and Joint TH and PH-
4A-09.	RRH Component DV Bonus Projects.
	NOFO Section I.B.3.I.(1)(e)
	Describe in the field below examples of how the new project(s) will:
1.	prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2.	establish and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasize program participants' strengths-for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivordefined goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

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1.2.3.4. The proposed RRH program will focus on addressing the issue of housing first in a safe place. The program will provide households with additional options and resources to address other underlying causes of homelessness as well as provide additional referrals/outreach for specific needs relating to domestic violence. Participation in all supportive services is voluntary and driven by participants. 5.CHN is invested in building a race equity culture within the organization and externally with the partners, stakeholders, and communities it serves. CHN collects and analyzes data regarding community disparities and equity. Data is key to understanding the impact that inequity is having on local communities and prioritizing policies that will be most beneficial in addressing the disparities. .CHN addresses racial disparities by building affordable housing developments in high opportunity areas with employment, educational, healthcare, and other resources, or public transportation access to these resources, and by developing site amenities and providing on site services based on engagement with both residents of existing developments and neighborhood residents. 6.7.CHN continually develops partnerships and linkages to community partners that help ensure culturally appropriate programming, develop trust with communities, provide outreach to communities underserved, and ensure everyone has access to high quality services with minimal barriers.

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

#### (limit 2,500 characters)

1 .2.Consistent with all programs at Community Housing Network, CHN surveys program participants and collects casenotes from program participants (including Domestic Violence Survivors) results are compiled and then reviewed by the department leadership and data staff to analyze program satisfaction and effectiveness. Comments are utilized to make changes in program design as well to provide constructive input to staff as applicable. When gaps are noted, the team uses this to problem-solve and develop change in policies and procedures, as well as identification of needed leveraged resources to improve program implementation. CHN involves participants or former participants (including Domestic Violence Survivors) in all our activities including Board of Directors members and staff who are eligible to be peers, based on their own personal journey. CHN also coordinates multiple advisory councils that are made up of program participants, CHN staff and community members. The roles of active/former participants include:

**Board Member** 

Consumer Advisory Council Member Housing Resource Center Coordinator

DV survivors also have the ability to provide anonymous feedback to case workers to provide input on program policies and procedures that help strengthen service delivery, especially for DV survivors.

|--|

# 4B. Attachments Screen For All Application Questions

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

	1				
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.	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.				
6.					
	. We must be able to displaying the time and time).	o read the date and I date of the public	ead the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot ate of the public posting using your desktop calendar; screenshot of a webpage that indicates date and ead everything you want us to consider in any attachment.		
	. We must be able t	o read everything y			
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" at	ttachment 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	PHA Homeless Pref	09/19/2023	
1C-7. PHA Moving On Preference		No	PHA Moving On Pre	09/19/2023	
1D-11a. Letter Signed by Working Group		Yes	Letter Signed by	09/21/2023	
1D-2a. Housing First Evaluation		Yes	Housing First Eva	09/14/2023	
1E-1. Web Posting of Local Competition Deadline		Yes	Web Posting of Lo	09/19/2023	
1E-2. Local Competition Scoring Tool		Yes	Local Competition	09/14/2023	
1E-2a. Scored Forms for One Project		Yes	Scored Forms for	09/25/2023	
1E-5. Notification of Projects Rejected-Reduced		Yes	Notification of P	09/15/2023	
1E-5a. Notification of Projects Accepted		Yes	Notification of P	09/15/2023	
1E-5b. Local Competition Selection Results		Yes	Local Competition	09/15/2023	
1E-5c. Web Posting–CoC- Approved Consolidated Application		Yes	Web Posting-CoC-A	09/26/2023	

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1E-5d. Notification of CoC- Approved Consolidated Application	Yes	Notification of C	09/26/2023
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	FY 2023 HDX Compe	09/15/2023
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin	09/21/2023
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		
Other	No		

### **Attachment Details**

**Document Description:** PHA Homeless Preference

### **Attachment Details**

**Document Description:** PHA Moving On Preference

## **Attachment Details**

**Document Description:** Letter Signed by Working Group

## **Attachment Details**

**Document Description:** Housing First Evaluation

## **Attachment Details**

**Document Description:** Web Posting of Local Competition Deadline

## **Attachment Details**

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**Document Description:** Local Competition Scoring Tool

### **Attachment Details**

**Document Description:** Scored Forms for One Project

## **Attachment Details**

**Document Description:** Notification of Projects Rejected-Reduced

## **Attachment Details**

**Document Description:** Notification of Projects Accepted.

## **Attachment Details**

**Document Description:** Local Competition Selection Results

## **Attachment Details**

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

Application

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## **Attachment Details**

**Document Description:** Notification of CoC-Approved Consolidated

Application

### **Attachment Details**

Document Description: FY 2023 HDX Competition Report MI-504

## **Attachment Details**

**Document Description:** Housing Leveraging Commitments

## **Attachment Details**

**Document Description:** 

### **Attachment Details**

**Document Description:** 

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### **Attachment Details**

**Document Description:** 

### **Submission Summary**

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

Page	Last Updated
1A. CoC Identification	08/01/2023
1B. Inclusive Structure	09/25/2023
1C. Coordination and Engagement	09/25/2023
1D. Coordination and Engagement Cont'd	09/25/2023
1E. Project Review/Ranking	09/25/2023
2A. HMIS Implementation	09/25/2023
2B. Point-in-Time (PIT) Count	09/20/2023
2C. System Performance	09/20/2023
3A. Coordination with Housing and Healthcare	09/21/2023
3B. Rehabilitation/New Construction Costs	09/14/2023
3C. Serving Homeless Under Other Federal Statutes	09/14/2023

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4A. DV Bonus Project Applicants 09/25/2023

4B. Attachments Screen 09/26/2023

Submission Summary No Input Required

# ATTACHMENT A FY 2022-23 ANNUAL PHA PLAN FOR HCV ONLY PHAS MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY (MSHDA) (MI-901)

#### **B. Plan Elements**

#### **B.1 Revision of PHA Plan Elements:**

Statement of Housing Needs and Strategy for Addressing Housing Needs

MSHDA is dedicated to serving the needs of the homeless, very low and extremely low-income Michigan residents. This is demonstrated in its administration of the Housing Choice Voucher Program via the on-going efforts:

- designating a homeless preference for county HCV waiting lists.
- designating a disabled preference for county HCV waiting lists.
- commitment to the Michigan Campaign to End Homelessness.
- working with partner agencies serving the elderly, families with disabilities, households of various races and ethnic groups.
- working with Continuum of Care groups across the State of Michigan.
- exceeding federal income targeting requirements by establishing that 80% of new admissions must be extremely low-income families and up to 20% of new admissions must be very low-income families.
- administering the HCV VASH Program in partnership with four VA medical facility sites across the State of Michigan (Battle Creek, Detroit, Saginaw, and Iron Mountain).
- administering Non-Elderly Disabled (NED) vouchers.
- administering the Affordable Assisted Housing Program (AAHP), in Macomb and Oakland Counties, which combines an HCV with the Michigan Medicaid Waiver to provide housing as an alternative to nursing home care.
- expanding the 2014-2015 Moving-Up Pilot that partners with the Michigan Department of Community Health (MDCH) and provides a resource for previously homeless populations utilizing Permanent Supportive Housing; MSHDA has committed over 600 vouchers for this pilot program.
- leveraging 100 vouchers with the Section 811 Project Rental Assistance Program.
- creating a State Innovation Model (SIM) Pilot Program that partners with the Michigan Department of Health and Human Services (MDHHS) to provide housing and supportive services to citizens that have very high utilization levels of emergency departments and emergency services that are also experiencing homelessness. MSHDA has committed up to 200 vouchers for this pilot program, which also includes Frequency Utilizers Systems Engagement (FUSE) programs.
- administering nearly 5,000 Project-Based Vouchers in over 200 developments across the state.
- offering a PBV waiting list preference in select PBV properties for Chronically Homeless, United States Veterans, Homeless Frequent Emergency Department Users with Care Needs, Highly Vulnerable Populations and Supportive Housing Populations.
- implementing a recertification of homelessness at the time of PBV waiting list draw, to ensure the applicant still meets the definition of homelessness.
- administrating more than 1,200 Project-Based Vouchers via the Rental Assistance Demonstration (RAD) in 22 properties across the state.
- administering over 180 Project-Vouchers as a result of public housing or multifamily properties converting to new assistance under HUD's At-Risk and Streamline Voluntary Conversions.
- continuing outreach efforts to find affordable and good quality units for voucher holders.
- identifying when to open and close county waiting lists to maintain up to date lists.
- implementing biennial HQS inspections for HCV housing units.
- administering an initiative in partnership with the Michigan Department of Corrections (MDOC) to enhance housing opportunities for persons exiting correctional facilities. MSHDA has allocated up to 200 vouchers for returning citizens that need long-term rental assistance.
- administering the Mainstream Voucher Program. The program provides voucher assistance to nonelderly and disabled households, with a preference granted to those experiencing homelessness, atrisk of homelessness, congregate housing facilities or at-risk of congregate housing placement. MSHDA was awarded 99 vouchers from HUD for this program. An additional 30 Mainstream Vouchers were awarded by HUD via the CARES Act funding.

- administering the Family Unification Program (FUP) in collaboration with the MDHHS. The program
  provides voucher assistance to FUP-eligible families and FUP-eligible youth experiencing housing
  barriers. MSHDA was awarded 81 vouchers from HUD for this program.
- administering Emergency Housing Vouchers (EHV). MSHDA was awarded EHVs and associated service funding from HUD and entered into MOUs with local CoCs and/or Planning Bodies for applicant referrals and delivery of service funding to mitigate barriers to obtain housing.

#### Deconcentration and Other policies that Govern Eligibility, Selection and Admissions

MSHDA promotes deconcentration of poverty and promotes income mixing in all areas by educating applicants at the time of their briefing on these issues.

Waiting lists exist for all 83 Michigan counties and are opened or closed as necessary. Applications are taken electronically. As of November 23, 2021, there are 28,960 applicants on the waiting lists. Of these, 25,567 are extremely low income; 2,582 are very low income; and 811 are low income. Families with children make up 45% of waiting list applicants; 9% are elderly and 18% are disabled.

MSHDA has a homeless preference and applications are taken from homeless families and added to the homeless preference waiting list when certified. A disability preference is given for those applicants where the head of household, co-head or spouse are disabled. Verification of disability is obtained upon selection from the waiting list.

A county residency preference is given for those applicants who either live or work in the county and can prove residency through a verified current address or verification from an employer. A Michigan residency preference is given for those applicants who either live or work in the state of Michigan and can prove residency through a verified current address or verification from an employer.

PBV applicants must apply through the Lead Agency/HARA or property management staff. Referrals are sent directly to the MSHDA contracted Housing Agent for placement on the PBV Waiting List.

#### Financial Resources

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2019 grants)		
a) Public Housing Operating Fund	Not applicable	
b) Public Housing Capital Fund	Not applicable	
c) Annual Contributions for Section 8 Tenant-	\$219,487,162	Section 8 Eligible
Based Assistance		expenses
d) Community Development Block Grant (CDBG)	Not applicable	
e) HOME	Not applicable	
Other Federal Grants (list below)		
FSS Program	\$ 1,178,500	FSS Program
Sec 811 Program	\$ 5,516,950	Sec 811 PRA Program
2. Prior Year Federal Grants (unobligated funds only) (list below)	None	
3. Public Housing Dwelling Rental Income	Not applicable	
4. Other income (list below)	None	
5. Non-federal sources (list below)	None	
Total resources	\$226,182,612	

#### Rent Determination:

MSHDA will continue to have a \$50 Minimum Total Tenant Payment (TTP). If the MSHDA HCV budget is significantly increased, the minimum TTP amount may be adjusted downward.

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#### Homeownership:

MSHDA will continue administering its Section 8 Homeownership Program entitled the *Key to Own* Homeownership Program which has been operating since March 2004. The MSHDA *Key to Own* Homeownership Program has no set limits on the maximum number of participants. Currently, MSHDA has over 1,200 participants in the *Key to Own* Homeownership Program who are working on program requirements, i.e., credit scores, finding employment, debt reduction, etc. Since the program's inception, 624 MSHDA HCV participants have become homeowners.

#### Safety and Crime Prevention:

The MSHDA Office of Rental Assistance and Homeless Solutions (RAHS) is committed to the implementation of the VAWA of 2013. MSHDA will continue to undertake actions to meet this requirement in the administration of the Housing Choice Voucher (HCV) Program.

MSHDA's contracted Housing Agents participate in local Continuum of Care meetings and use those contacts and others known to them through the Family Self-Sufficiency Program to assist survivors of domestic violence (including dating violence, sexual assault, or stalking) and their children when cases are made known to them.

Many of the agencies participating in the Continuum of Care groups provide temporary housing/shelter to survivors of domestic violence and their children. MSHDA staff and Housing Agents work with the partnering Continuum of Care service agencies and partnering Housing Assessment and Resource Agencies (HARAs) to find resources for domestic violence survivors, and children and adult victims of dating violence, sexual assault, or stalking to make sure the family can maintain their housing assistance.

MSHDA provides the Notice of Occupancy Rights under VAWA (HUD 5380) and the Certification of Domestic Violence, Dating Violence, Sexual Assault, or Stalking (HUD 5382) when a family is denied admission to the program, when a family is admitted to the program and when the family is terminated from the program. In addition, MSHDA has created an Emergency Move Plan for HCV and PBV participants and provides the Emergency Transfer Request for Certain Victims of Domestic Violence, Dating Violence, Sexual Assault and Stalking (HUD 5383) upon request.

#### D. Affirmatively Furthering Fair Housing (AFFH)

#### **D.1 Affirmatively Further Fair Housing**

The following strategies and actions were employed by MSHDA to achieve fair housing goals:

#### Strategy/Action #1:

Conduct Education and Testing to Reduce the incidence of Housing Discrimination: In partnership with local fair housing centers, MSHDA is providing training to landlords, local units of government, property managers, MSHDA staff, the general public, and other housing partners in fair housing law and practice to reduce the incidence of housing discrimination in Michigan. Fair housing centers are conducting fair housing testing on MSHDA-financed multifamily housing complexes and Housing Choice Voucher properties to evaluate compliance with state and federal law concerning protected classes. Fair housing centers provide guidance and assistance to housing providers with fair housing concerns. MSHDA is providing virtual educational opportunities to MSHDA customers and the public to bring greater awareness to rights under the

Fair Housing Act. Some of the topics covered include but are not limited to Criminal Records, Sexual Harassment, National Origin Discrimination, and Religious Discrimination.

#### Strategy/Action #2:

Increase access to housing for disadvantaged populations: Assists 28,000 low-income families with rent subsidies through MSHDA's HCV Program. The program includes a homeless preference and a disability preference to move individuals into safe, decent, and stable housing. The HUD VASH program administered by MSHDA combines the HCV rental assistance for homeless veterans with case management and clinical services provided by the Department of Veteran Affairs (VA). The Mainstream Voucher Program provides rental assistance to families that consist of a non-elderly person with disabilities. The voucher assistance provides the housing stability that many individuals desperately need, and the Department of Health and Human Services (DHHS) and the Housing Assessment and Resource Agencies (HARA) provide support services based on the individual's needs and affiliated program. The Family Unification Program (FUP) provides rental assistance to FUP-eligible families and youth. The rental assistance provides relief from housing barriers and the local Continuum of Care (CoC) and DHHS agencies provide supportive services to promote housing stability and self-sufficiency. The Emergency Housing Vouchers (EHVs) provide rental assistance for individuals and families who are homeless, at-risk of homelessness, recently homeless, and survivors of domestic violence, dating violence, sexual assault, stalking and human trafficking. The service funding that accompanies the EHVs is utilized by the COCs and Local Planning Bodies to identify and mitigate barriers that these families may face in the renting a unit with an EHV.

Disseminate fair housing rights materials including information related to sexual harassment to approximately 28,000 households receiving assistance through MSHDA's Housing Choice Voucher Program. Additionally, distributes fair housing materials to approximately 9,000 landlords participating in the HCV Program.

#### Strategy/Action #3

Bring greater awareness to fair housing rights: MSHDA's Housing Education Program (HEP) partners with 35 Housing Counseling Agencies throughout Michigan which employs counselors and educators who hold HUD and other National Certifications to deliver individual counseling and educational classes in the following key areas: Homebuyer Education, Pre-Purchase Individual Counseling, Mortgage Default and Delinquency (Foreclosure) Counseling, Financial Literacy Group Education, Individual Budget and Credit Counseling, Rental Housing Education and Counseling, Disaster Relief Housing Counseling and Homeless Individual Counseling. Within each of these service types include Fair Housing training and individual client support with any Fair Housing concerns or possible violations. Housing Counselors are required to be HUD Certified and actively employed by a HUD approved 501c3 organization. Counselors are also required to receive ongoing professional development training to ensure they are delivering the most current information to the clients they serve, especially surrounding fair housing laws. MSHDA HEP is dedicated to Fair Housing and both our team as well as our agencies have deep working relationships with the Fair Housing offices throughout Michigan in the delivery of AFFH trainings and client referrals.: Regularly sponsor fair housing events hosted by local fair housing centers to support and expand fair housing efforts in training, awareness, testing, etc. to tackle impediments to fair housing choice. Incorporate fair housing training into existing regional meetings, conferences, and workshops with housing partners.

#### Strategy/Action #4

**Fair Housing Information on MSHDA Website and Outreach efforts:** Fair housing rights and complaint filing information on MSHDA's website to connect users to local and national fair housing resources. Local units of government, nonprofit organizations, and other organizations funded with state or federal resources through MSHDA prominently place fair housing posters and information for the public to view and are required to affirmatively further fair housing.

#### Strategy/Action #5

**Enhance Access to Homeless Prevention Services:** Employ the Coordinator for Michigan's Campaign to End Homelessness (MCTEH) and maintain the website (https://www.michigan.gov/mcteh) that provides pertinent information related to programming, workshops/training, and initiatives to assist regional and

community providers in serving individuals and families experiencing homelessness and those at risk of homelessness. Work closely with the MCTEH partners to host an annual Summit on Ending Homelessness to create content that addresses the needs and interest of individuals and providers involved in various levels of policy, funding, and homeless service delivery development throughout the entire state.

# ATTACHMENT A FY 2022-23 ANNUAL PHA PLAN FOR HCV ONLY PHAS MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY (MSHDA) (MI-901)

#### **B. Plan Elements**

#### **B.1 Revision of PHA Plan Elements:**

Statement of Housing Needs and Strategy for Addressing Housing Needs

MSHDA is dedicated to serving the needs of the homeless, very low and extremely low-income Michigan residents. This is demonstrated in its administration of the Housing Choice Voucher Program via the on-going efforts:

- designating a homeless preference for county HCV waiting lists.
- designating a disabled preference for county HCV waiting lists.
- commitment to the Michigan Campaign to End Homelessness.
- working with partner agencies serving the elderly, families with disabilities, households of various races and ethnic groups.
- working with Continuum of Care groups across the State of Michigan.
- exceeding federal income targeting requirements by establishing that 80% of new admissions must be extremely low-income families and up to 20% of new admissions must be very low-income families.
- administering the HCV VASH Program in partnership with four VA medical facility sites across the State of Michigan (Battle Creek, Detroit, Saginaw, and Iron Mountain).
- administering Non-Elderly Disabled (NED) vouchers.
- administering the Affordable Assisted Housing Program (AAHP), in Macomb and Oakland Counties, which combines an HCV with the Michigan Medicaid Waiver to provide housing as an alternative to nursing home care.
- expanding the 2014-2015 Moving-Up Pilot that partners with the Michigan Department of Community Health (MDCH) and provides a resource for previously homeless populations utilizing Permanent Supportive Housing; MSHDA has committed over 600 vouchers for this pilot program.
- leveraging 100 vouchers with the Section 811 Project Rental Assistance Program.
- creating a State Innovation Model (SIM) Pilot Program that partners with the Michigan Department of Health and Human Services (MDHHS) to provide housing and supportive services to citizens that have very high utilization levels of emergency departments and emergency services that are also experiencing homelessness. MSHDA has committed up to 200 vouchers for this pilot program, which also includes Frequency Utilizers Systems Engagement (FUSE) programs.
- administering nearly 5,000 Project-Based Vouchers in over 200 developments across the state.
- offering a PBV waiting list preference in select PBV properties for Chronically Homeless, United States Veterans, Homeless Frequent Emergency Department Users with Care Needs, Highly Vulnerable Populations and Supportive Housing Populations.
- implementing a recertification of homelessness at the time of PBV waiting list draw, to ensure the applicant still meets the definition of homelessness.
- administrating more than 1,200 Project-Based Vouchers via the Rental Assistance Demonstration (RAD) in 22 properties across the state.
- administering over 180 Project-Vouchers as a result of public housing or multifamily properties converting to new assistance under HUD's At-Risk and Streamline Voluntary Conversions.
- continuing outreach efforts to find affordable and good quality units for voucher holders.
- identifying when to open and close county waiting lists to maintain up to date lists.
- implementing biennial HQS inspections for HCV housing units.
- administering an initiative in partnership with the Michigan Department of Corrections (MDOC) to enhance housing opportunities for persons exiting correctional facilities. MSHDA has allocated up to 200 vouchers for returning citizens that need long-term rental assistance.
- administering the Mainstream Voucher Program. The program provides voucher assistance to nonelderly and disabled households, with a preference granted to those experiencing homelessness, atrisk of homelessness, congregate housing facilities or at-risk of congregate housing placement. MSHDA was awarded 99 vouchers from HUD for this program. An additional 30 Mainstream Vouchers were awarded by HUD via the CARES Act funding.

- administering the Family Unification Program (FUP) in collaboration with the MDHHS. The program
  provides voucher assistance to FUP-eligible families and FUP-eligible youth experiencing housing
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## Housing First Checklist: Assessing Projects and Systems for a Housing First Orientation

Instructions: Please complete checklist per project type. For example, if you have two permanent supportive housing (PSH) projects, one rapid rehousing (RRH) project and one transitional housing (TH) project you will need to complete this document once for PSH, once for RRH and once for TH.

document once for PSH, once for RRH and once for TH.
Please fill in the following:
Project type:
Permanent Supportive Housing
Person completing document:
Marc Craig
Docussigned by:    Colf-238EDDD98F2F94BBC   Signature   Signature
President
Title
08/09/2023
Date



## Housing First Checklist: Assessing Projects and Systems for a Housing First Orientation

Housing First is a proven approach, applicable across all elements of systems for ending homelessness, in which people experiencing homelessness are connected to permanent housing swiftly and with few to no treatment preconditions, behavioral contingencies, or other barriers. It is based on overwhelming evidence that people experiencing homelessness can achieve stability in permanent housing if provided with the appropriate level of services. Study after study has shown that Housing First yields higher housing retention rates, drives significant reductions in the use of costly crisis services and institutions, and helps people achieve better health and social outcomes.<sup>1</sup>

This checklist was designed to help you make a quick assessment of whether and to what degree housing programs — and entire systems — are employing a Housing First approach. Robust tools and instruments are available elsewhere to quantitatively measure program quality and fidelity to Housing First. This tool is not meant to take the place of those more rigorous assessments, but is intended to help Continuums of Care, individual housing and services providers, funders, and other stakeholders to communicate about, and quickly assess, alignment with key Housing First approaches.

#### Core Elements of Housing First at the Program/Project Level

For your homelessness service system to work the most efficiently and effectively, individual programs must embrace a Housing First approach. This portion of the checklist can help you assess the extent to which your local programs are implementing Housing First. You can use this tool for trainings or planning sessions, during a site visit or program audit, as a guide when reviewing funding applications, or for many other uses.

- X Access to programs is not contingent on sobriety, minimum income requirements, lack of a criminal record, completion of treatment, participation in services, or other unnecessary conditions.
- X Programs or projects do everything possible not to reject an individual or family on the basis of poor credit or financial history, poor or lack of rental history, minor criminal convictions, or behaviors that are interpreted as indicating a lack of "housing readiness."
- X People with disabilities are offered clear opportunities to request reasonable accommodations within applications and screening processes and during tenancy, and building and apartment units include special physical features that accommodate disabilities.

## **Quick Screen: Does Your Project Use Housing First Principles?**

- 1) Are applicants allowed to enter the program without income?
- 2) Are applicants allowed to enter the program even if they aren't "clean and sober" or "treatment compliant"?
- 3) Are applicants allowed to enter the program even if they have criminal justice system involvement?
- 4) Are service and treatment plans voluntary, such that tenants cannot be evicted for not following through?

Programs or projects that cannot serve someone work through the coordinated entry process to ensure that those individuals or families have access to housing and services elsewhere. Housing and service goals and plans are highly tenant-driven. Supportive services emphasize engagement and problem-solving over therapeutic goals. Participation in services or compliance with service plans are not conditions of tenancy, but are reviewed with tenants and regularly offered as a resource to tenants. Services are informed by a harm-reduction philosophy that recognizes that drug and alcohol use and addiction are a part of some tenants' lives. Tenants are engaged in non-judgmental communication regarding drug and alcohol use and are offered education regarding how to avoid risky behaviors and engage in safer practices. Substance use in and of itself, without other lease violations, is not considered a reason for eviction. Tenants in supportive housing are given reasonable flexibility in paying their share of rent on time and offered special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements. Every effort is made to provide a tenant the opportunity to transfer from one housing situation, program, or project to another if a tenancy is in jeopardy. Whenever possible, eviction back into homelessness is avoided. Core Elements of Housing First at the Community Level Housing First should be adopted across your community's entire homelessness response system, including outreach and emergency shelter, short-term interventions like rapid re-housing, and longer-term interventions like supportive housing. You can use this part of the checklist to assess the extent to which your community has adopted a system-wide Housing First orientation, as well as guide further dialogue and progress. Your community has a coordinated system that offers a unified, streamlined, and user-friendly communitywide coordinated entry process to quickly assess and match people experiencing homelessness to the most appropriate housing and services, including rapid re-housing, supportive housing, and/or other housing interventions. Emergency shelter, street outreach, and other parts of your crisis response system implement and promote low barriers to entry or service and quickly identify people experiencing homelessness, provide access to safety, make service connections, and partner directly with housing providers to rapidly connect individuals and families to permanent housing. Outreach and other crisis response teams are coordinated, trained, and have the ability to engage and quickly connect people experiencing homelessness to the local coordinated entry process in order to apply for and obtain permanent housing. X | Your community has a data-driven approach to prioritizing housing assistance, whether through analysis of the shared community assessment and vulnerability indices, system performance measures from the

Homeless Management Information System, data on utilization of crisis services, and/or data from other

systems that work with people experiencing homelessness or housing instability, such as hospitals and the criminal justice system.

- X Housing providers and owners accept referrals directly from the coordinated entry processes and work to house people as quickly as possible, using standardized application and screening processes and removing restrictive criteria as much as possible.
- X Policymakers, funders, and providers conduct joint planning to develop and align resources to increase the availability of affordable and supportive housing and to ensure that a range of options and mainstream services are available to maximize housing choice among people experiencing homelessness.
- X Mainstream systems, including social, health, and behavioral health services, benefit and entitlement programs, and other essential services have policies in place that do not inhibit implementation of a Housing First approach. For instance, eligibility and screening policies for benefit and entitlement programs or housing do not require treatment completion or sobriety.
- X Staff in positions across the entire housing and services system are trained in and actively employ evidence-based practices for client/tenant engagement, such as motivational interviewing, client-centered counseling, critical time interventions, and trauma-informed care.

#### **Additional Resources**

- Implementing Housing First in Supportive Housing (USICH, 2014) discusses supportive housing and Housing First as tools for ending chronic homelessness and helping people with disabilities live independently in the community.
- Webinar: Core Principles of Housing First and Rapid Re-Housing (USICH, 2014) describes the core
  components of the Housing First approach and the rapid re-housing model and how both work together
  to help end homelessness.
- <u>Four Clarifications about Housing First</u> (USICH, 2014) clarifies some common misperceptions about Housing First.
- It's Time We Talked the Walk on Housing First (USICH, 2015) advances our thinking on Housing First.
- Housing First in Permanent Supportive Housing (HUD, 2014) provides an overview of the principles and core components of the Housing First model.
- <u>Permanent Supportive Housing Evidence-Based Practices KIT</u> (SAMHSA, 2010) outlines the essential components of supportive housing, along with fidelity scales and scoresheets.

United States Interagency Council on Homelessness

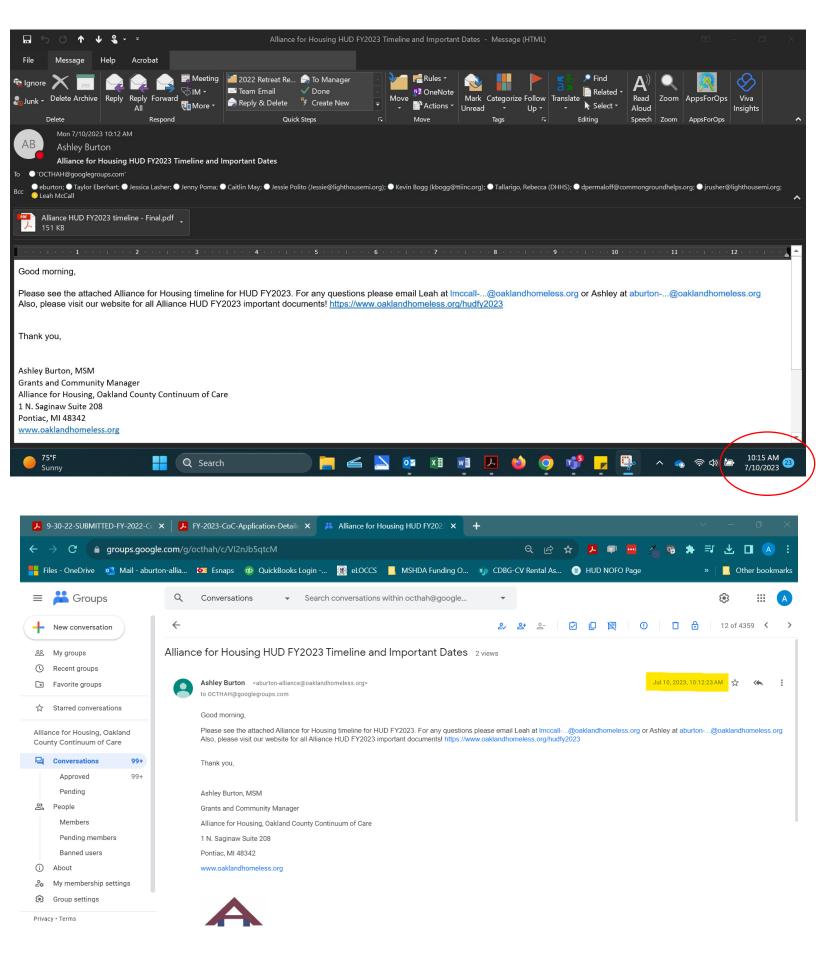
<sup>&</sup>lt;sup>1</sup> Lipton, F.R. et. al. (2000). "Tenure in supportive housing for homeless persons with severe mental illness," Psychiatric Services 51(4): 479-486. M. Larimer, D. Malone, M. Garner, et al. "Health Care and Public Service Use and Costs Before and After Provision of Housing for Chronically Homeless Persons with Severe Alcohol Problems." *Journal of the American Medical Association*, April 1, 2009, pp. 1349-1357. Massachusetts Housing and Shelter Alliance. (2007). "Home and Healthy for Good: A Statewide Pilot Housing First Program." Boston.

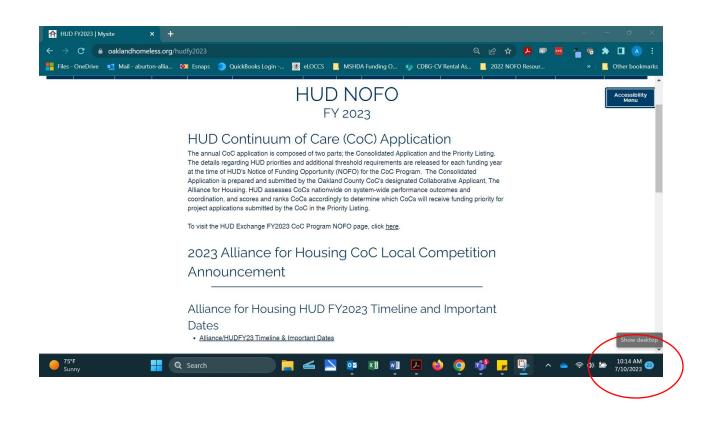


#### Alliance for Housing HUD FY2023 Timeline and Important Dates

The Notice of Funding Opportunity (NOFO) for FY2023 funding portion of the FY2023 Continuum of Care (CoC) Program competition has been released. The Alliance for Housing of Oakland County is the HUD-approved Collaborative Applicant for the FY2023 Continuum of Care Application. In this role, the Alliance for Housing is responsible for leading and managing the decision-making and application process for the FY2023 HUD Continuum of Care Homeless Assistance Funding application for projects seeking both renewal and new HUD funding.

- **Friday, July 21, 2023** Alliance for Housing 2023 Application and Scoring document issued to the community via listserve and the Alliance for Housing's website: <a href="https://www.oaklandhomeless.org/hudfy2023">https://www.oaklandhomeless.org/hudfy2023</a>
- **Friday, July 28, 2023 -** Alliance for Housing issues RFP for New HUD Bonus and New DV Bonus applications via listserve and Alliance for Housing's website: https://www.oaklandhomeless.org/hudfy2023
- Friday August 11, 2023 –New HUD Bonus and New DV Bonus concept paper(s) due to Ashley Burton by 5:00 PM via email <a href="mailto:aburton-alliance@oaklandhomeless.org">aburton-alliance@oaklandhomeless.org</a>
- Wednesday August 16, 2023:
  - Alliance for Housing 2023 Renewal Application and Scoring document are due via email to Ashley Burton <u>aburton-alliance@oaklandhomeless.org</u> by 5:00 PM.
  - HUD Renewal applications completed in ESNAPS by 5:00 PM. Provide the Alliance for Housing a PDF copy to Ashley Burton by 5:00 PM via email aburton-alliance@oaklandhomeless.org
- Tuesday, August 29, 2023- Alliance for Housing Prioritization Committee ranking meeting at the Oakland County Executive Building - 2100 Pontiac Lake Rd, Waterford Twp, MI 48328, Waterford Room in the Conference Center. Potential grantee/agency presentations will be held in person or Zoom if preferred.
- Wednesday, August 30, 2023 Alliance for Housing will provide priority and ranking of projects via listserve and on the Alliance for Housing website <a href="https://www.oaklandhomeless.org/hudfy2023">https://www.oaklandhomeless.org/hudfy2023</a> by 5:00 PM
- Monday, September 11, 2023 New HUD Bonus and New DV Bonus applications due in ESNAPS by 5:00 PM. Provide the Alliance for Housing a PDF copy to Ashley Burton by 5:00 PM via email aburton-alliance@oaklandhomeless.org
- Monday September 18, 2023 Grantee/agency revisions completed in ESNAPS (if
  revisions are needed, you will be notified via email). Confirmation of revisions completed
  sent via email to Ashley Burton, aburton-alliance@oaklandhomeless.org
- Wednesday, September 27, 2023- Alliance for Housing will complete and submit the CoC HUD consolidated application via ESNAPS
- Thursday, September 28, 2023 by 8:00 PM- HUD deadline for CoC applications submitted in ESNAPS







## The Alliance for Housing 2023 Renewal Application and Scoring Continuum of Care Program Competition

The Alliance for Housing developed a renewal process to determine if Permanent Housing, Transitional Housing and Rapid Rehousing projects are performing in accordance with HUD requirements and CoC expectations. This year, grants will be renewable under the CoC Program Competition as set forth in 24 CFR 578.33 to continue ongoing leasing operating, rental assistance, HMIS, and project administration costs. Projects are eligible for renewal if they are currently in operation and have a signed grant agreement with HUD expiring between January 1, 2023 and December 31, 2023. Renewal grants will be limited to 1 year of funding.

Annually, the Alliance for Housing reviews these projects and provides guidance for renewal project funding. Scoring guidelines are listed within this document to determine if agencies comply with renewal criteria and meet the required threshold. The Alliance for Housing will provide explanations for projects that are rejected.

The deadline for submitting this scoring application and supplemental information (attachments) is due **Wednesday**, **August 16**, **2023 by 5PM** to the Grants and Community Manager via email (acuniberti-alliance@oaklandhomeless.org). Applicants that do not meet this deadline may be subject to funding reallocation or loss of funding.

The Alliance for Housing Prioritization Committee will meet, review and provide priority and ranking of projects on **Tuesday**, **August 29**, **2023** During this meeting applicants will have an opportunity to talk about their application and answer any questions the committee may have. Zoom information will be sent to the applicants if requested. The priority ranking (tier 1 tier 2 and bonus) will be sent out via listserve and posted on the Alliance for Housing Website on **Wednesday**, **August 30**, **2023**.

The deadline for submitting all project renewal applications in ESNAPS as well as submitting an email pdf copy of the ESNAPS application to the Alliance for Housing, Grants and Community Manager (<a href="mailto:acuniberti-alliance@oaklandhomeless.org">acuniberti-alliance@oaklandhomeless.org</a>) is Wednesday, August 16, 2023.

#### Ranking

In alignment with the 2023 CoC Program NOFO, existing projects will not be automatically renewed during the FY 2023 competition. As stated in the FY 2023 NOFO, projects will be divided into two tiers, wherein Tier 1 applicants will have funding priority over Tier 2. Tier 1 applicants will be prioritized by their ranking score, HUD/CoC determined high priority projects (Chronically Homeless, Youth, Veteran, and Families with Children), high performance, and meeting the needs and gaps as identified by the CoC. The CoC will review system performance measures related to the projects.

Based on guidelines set forth by HUD, ranking will also be prioritized for projects in

#### the following order:

Renewal/new projects.

- a. HMIS
- b. PSH
- c. RRH
- d. TH
- e. New projects created through bonus (ranking of bonus application priority TBD by Alliance Board/Prioritization committee)

Refer to 2023 Notice of Funding Opportunity (NOFO) for the Continuum of Care Program Competition for a more detailed description of applicant updates.

The FY2023 CoC planning grant will not be ranked per the NOFO therefore will not be tiered.

This renewal application is for your last fully completed HUD grant.

#### **Renewal Project Threshold Score**

Renewal projects are scored on 7 components: Financial performance, consumer satisfaction, CoC participation, coordinated services/connection to services program performance, HMIS compliance an Point in Time participation. The threshold for renewal is 65%. Projects below this threshold may not be eligible for refunding and will be offered technical assistance to improve project performance for future applicability.

The Alliance for Housing reserves the right to make decisions on which projects should receive funding and/or the amount awarded based upon recommendations of the Prioritization Committee and the Alliance for Housing Board of Directors.

## Any applications submitted after Wednesday, August, 16, 2023 5PM will lose 10 points.

**Renewal Project Scoring Overview** 

ATTACHMENT 1		Points
#1 Financial Performance 14		14
#2 Consumer Satisfaction {		8
#3 CoC Participation 6		6
#4 Coordinated Services/Connection to services 20		20
ATTACHMENT 2		
#5	Program Performance	85
#6	#6 HMIS Compliance 34	
ATTACHMENT 3		
#7 Point in Time Participation 5		5
Total Points Possible 172		172

## Threshold: All Projects must score 65% (112 points) or higher to be eligible for renewed funding.

Agency Name:	
Grant Name:	
Grant Type (PSH/RRH/TH):	
Grant Number:	
Component #1	Financial Performance 14 Points

Financial performance is measured by the extent to which each project has expended its budgeted grant during the last project year fully completed.

Applicants are responsible for submitting information from the Electronic Line of

Credit Control System (ELOCCS) from your HUD representative, and financial performance evidence from an Independent Auditor Report.

Renewal projects must draw project funds, at a minimum, on a quarterly basis. Instances where drawdown is delayed or not serving participants may result in the project not being funded in the FY2023 CoC Program Competition.

## A. What percentage of your project's grant funding has been expended during the most recently completed year?

#### B. How often has your project completed a drawdown from ELOCCS?

- 98% grant funding expensed: 10 points
- 97% 0% grant funding expensed: 0 points
- Evidence of drawdown of funds at least quarterly: 4 point
  - Please provide:
    - Electronic Line of Credit Control System (ELOCCS print out from draws)
    - Evidence of drawdown of funds at least quarterly

Projects expending less than 100% of their grant are required to provide a written explanation. Depending on explanation, the Alliance for Housing will determine whether to target follow-up technical assistance or to deem the project ineligible.

#### Component #2 Consumer Satisfaction- 8 Points

Projects will be scored on their submission of the following items:

Category	Points Possible
A. Provide a copy of your client satisfaction/feedback form or survey.	2
B. Survey Results	2
C. Project enhancement or change via feedback narrative	2
D. Current or past program participants with lived expertise involvement in decision-making or other role within the organization	2
TOTAL	8

#### A. Who do you give your survey to, leavers and/or stayers?

Submission of form/survey w/ explanation of those surveyed: 2 point No submission: 0 point

#### B. Please send the results of your participant feedback survey.

Provided survey results: 2 Points

No submission: 0 points

## C. In what way(s) does your agency use your survey results to enhance your project(s)?

Narrative with examples: 2 points

Narrative: 1 Point

No narrative or example: 0 points

- D. Describe how your organization incorporates the input and experience of person's with Lived Experience in your organization structure, decision making and quality improvement efforts, which may include, but not limited to, activities such as:
  - Representation on the organizations Board of Director's or other decision-making board
  - Client / Consumer Advisory Board
  - Emphasis on hiring person's with Lived Experience
  - Use of Peer Mentors that provide feedback
  - Satisfaction surveys / comment cards

Provides narrative with specific examples: 2 points

Provides narrative: 1 point No narrative provided: 0 points

## Component #3: Continuum of Care Participation 6 Points

An agency's participation is measured by the number of Continuum of Care meetings attended during 2021-2023.

Agency's Participation in the CoC Meetings (applies to only one category)	Possible Points
A. Agency participation on at least one CoC committee	1
B. General membership attendance/Annual retreat	3
C. Organization represented at 5 or more meetings	2
Total:	6

A. Does your agency participate in at least one CoC committee, and, if so, which one (s)?

Yes: participated: 1 point

No: 0 points

B. How many CoC general membership meetings including the Annual Retreat was your organization represented at in the last fiscal year? Last fiscal year is 10.1.21 - 9.30.22 (Meeting dates include: 11.3.21, 1.5.22, 3.2.22, 5.11.22, 7.6.22, 9.7.22)

Participated in all 6 meetings: 3 point

Participated in less than 6 meetings: 1 point

No: 0 points

C. Was the organization represented at five or more Alliance meetings (GM, board, committee or workgroup)? If yes, please list meeting title.

Yes: participated in 5 or more: 2 points

Less than 5: 0 points

#### Component #4: Coordinated Services/Connection to services 20 Points

Category	<b>Points Possible</b>
A. Reducing burdens/ CE	2
B. Connection to mainstream community-based resources	2
C. Data usage for positive outcomes	2
D. Employment services/training 2	
E. Connection to mainstream health resources 2	
F. Ensuring families are not separated	2
G. Increased services for domestic violence survivors 4	
H. LGBTQ+ needs	2
I. Lived Experience	2
Total:	20

#### A. What steps does your agency take to reduce burdens on potential participants access Coordinated Entry?

Narrative provides specific action steps your agency has put in place: 2 points

Narrative provided: 1 point

No narrative: 0 points

B. Please describe the mainstream and other community-based resources and partnerships your agency has to sustain permanent exits from the program (ex: job training, life skills, treating substance abuse, etc.).

Narrative provides specific examples: 2 Points

Narrative provided: 1 point No narrative: 0 points

C. Does your agency use data and evidence to measure impact of homelessness programs on positive outcomes, recovery, self-sufficiency, and reducing homelessness?

Narrative provides specific examples: 2 Points

Narrative provided: 1 point No narrative: 0 points

D. Does your agency work with local employment agencies and employers for training and employment opportunities for participants in project?

Narrative provides specific examples: 2 Points

Narrative provided: 1 point No narrative: 0 points

E. How does your agency connect participants to mainstream health (e.g., local and state health agencies, hospitals)?

Narrative provides specific examples: 2 Points

Narrative provided: 1 point No narrative: 0 points

F. How does your agency ensure sure families are not separated?

Please demonstrated how your agency does not deny admission to or separate family members when they enter housing, including serving all family members together and in accordance with each family member's self-reported sexual orientation and gender identity.

Narrative provides specific examples: 2 points

Narrative provided: 1 point No narrative: 0 points

G. Please identify your agencies current efforts in increase access to housing and services defined as safe by survivors of domestic violence, dating violence, sexual assault and stalking. What types of survivor-centered practices have been adopted that maximize client choice while maintaining safety and confidentiality?

Narrative provides specific examples: 4 points

Narrative provided: 1 point

No narrative: 0 pints

H. Describe how your agency/project helps address the needs of LGBTQ+, transgender, gender non-conforming, and non-binary individuals and families including privacy, respect, safety, and access regardless of gender identity or sexual orientation in projects.

Narrative provides specific examples: 2 points

Narrative provided: 1 point

No narrative: 0 points

I. Describe at least one change your agency has made to your project over the past year in response to the input received from individuals with lived expertise. This change could have been made within the project that receives CoC funding or another homeless projects within your agency.

Narrative provides specific examples: 2 points

Narrative provided: 1 point No narrative provided: 0 points

#### **Appeals Process**

An appeals process will be available for renewal projects that do not pass the scoring threshold (65% or 112 points).

All appeals will be reviewed by a group established by the Alliance for Housing Board of Directors and Project Review Committee. Members of the Appeals Committee will not have any projects that receive HUD CoC Homeless Assistance Program funding.

- Appeals must to be submitted in writing via email to <a href="mailto:lmccall-alliance@oaklandhomeless.org">lmccall-alliance@oaklandhomeless.org</a>. Address all appeals to the Appeals Committee/prioritization committee and submit the following details: the issue being appealed, the argument for overturning the score, and evidence to support the argument. Please ensure that your appeal is concise and includes appropriate detail to process the review. Changes made to the project after application will not be considered.
- The appeal must be received by the close of the business day within 5 business days of the communication of denial of eligibility to submit for funding. Submission must be received in a type written format (with attachments if appropriate) electronically.
- The decisions of the Appeal/Prioritization Committee are final.
- Applicants that are rejected may also appeal directly to HUD by submitting a Solo Application prior to the deadline per the 2023 NOFO.

Attac	nment Cnecklist:	
	HMIS Reports- Run report for 7/1/2022 - 6/30 • CoC - APR (canned report)	)/2023
	SAGE	
	<ul> <li>Most recently completed CoC APR</li> </ul>	
	Line of Credit Control System (ELOCCS print o  • Evidence of drawdown of funds at least	,
	Financial Performance Evidence from an Indep	•
	Copy of consumer survey	
		it has read, reviewed and
	compliance with the FY2023 NOFO as well	
	<u>uct</u> that complies with the requirements of ded on HUD's website.	Z CFK part 200 and IS
Pleas	se sign and date below.	

#### 1. Length of Stay (Days) - From Project entry to Housing Move-in (RRH,PSH)

RRH	PSH	Points
0-39 days	0-13 days	20
40-82 days	14-28 days	15
83-125 days	29-43 days	10
126-168 days	44-58 days	5
169+	59+	0

#### Length of Participation in Days (TH)

TH	Points
0-210 days	20
211-421 days	15
422-632 days	10
633-843 days	5
844+	0

#### 2. Exits to Permanent Housing

RRH	RRH PSH TH		Points	
90-100%	90-100%	90-100%	25	
80-89%	80-89%	80-89%	20	
70-79%	70-79%	70-79%	15	
60-69%	60-69%	60-69%	10	
0-59%	0-59%	0-59%	5	

#### 3. and 4. New or Increased Earned Income and Non-Employment Income (20 possible total points)

5 points given for meeting listed factor/goal for each. This is not a tiered question. The factor/goal is based on the average of all of the project types for the measure.

3A.	Factor/Goal	Points
	8% +	5
	< 8%	0

3B.	Factor/Goal	Points
	8% +	5
	< 8%	0

#### 5. Project Effectiveness

#### A. Health Insurance

RRH/PSH/TH	Points		
85-100%	10		
70-84%	8		
55-69%	6		
0-54%	0		

#### **Cost Effectiveness**

В.

RRH	Points
<\$2500	10
\$2500-\$3000	8
\$3000+	0

PSH	Points
<\$6000	10
\$6000-\$6500	8
\$6500-\$7000	6
\$7000-\$7500	4
\$7500-\$8000	2
\$8000+	0

TH	Points
<\$5300	10
\$5300-\$5800	8
5800+	0

#### Component # 6: HMIS Compliance

#### 1. HMIS Operation

Α	Points	1 point awarded per data
>98%	1	element
<98%	0	

В	Points	С	Points
Yes	4	Yes	2
No	0	No	0

#### 2. Data Quality

Α	В	C	D	Points
Yes	Yes	Yes	Yes	2
No	No	No	No	0

E	F	G	Н	Points
5% or less	5% or less	5% or less	5% or less	1
>5%	>5%	>5%	>5%	0

1 point awarded per data element

## Component # 5: Program Performance 85 points

Performance will be evaluated and scored using data from a variety of sources. Comments are added to each box to describe where you can find the element. Cells highlighted in grey will autocalculate. Only answer the questions relevant to the specific project type for each renewal. It is recommended to complete this application in Excel and save as PDF for submission.

Reports need to be run	for <b>7/1/2022 to 6/30/2023</b> regardless of the grant term. Reports required to complete this section:		
*** Canned reports ne	CoC - APR (canned report)  ed to be submitted as a PDF and can be done directly in the browser settings.		
	p-alliance@oaklandhomeless.org if you have HMIS or Business Objects related questions.		
1. Length of Stay (Days)		Factor/Goal	Max Point Value
	RRH - Average Length of days from project entry to housing move in	<39 days	20 points
		Factor/Goal	Max Point Value
	<b>PSH</b> - Average length of days from project entry to housing move-in	<13 days	20 points
	TH - Average length of stay in project for leavers	<210 days	20 points
2. Exits to Positive I	Housing Destination (25 pts)	Factor/Goal	Max Point Value
RRH/PSH/TH -	- Percent total persons exited to positive housing destination	90%	25 points
	Total Percentage		
3. New or Increased	d Earned Income (10 pts)	Factor/Goal	Max Point Value
Α.	RRH/PSH/TH - Minimum % of participants with new or increased income for project stayers	8%	5 points
В.	RRH/PSH/TH - Minimum % of participants with new or increased income for project leavers	8%	5 points
4. New or Increased other (Non-Employment) Income (10 pts)			Max Point Value
A.	RRH/PSH/TH - Minimum % of participants with other (non-employment) income for project stayers	41%	5 points

B. RRH/PSH/TH - Minimum % of participants with other (non-employment) income for project leavers	16%	5 points
<b>5. Project/Cost Effectiveness</b> A=10 points; B or C or D= 10 points; Total points available=20 (RRH, PSH, <sup>-</sup>	Factor/Goal	Max Point Value
A. #DIV/0! RRH/PSH/TH - Minimum % leavers with health insurance.  + 1 Source of Health Insurance  More than 1 Source of Health Insurance  / Number of Leavers	85%	10 points
B. #DIV/0! RRH - Cost Effectiveness  Total Cost of Project  Total Persons Served	<\$2500	10 points
C. #DIV/0! PSH- Cost Effectiveness  Total Cost of Project  Total Persons Served	<\$6000	10 points
D. #DIV/0! TH - Cost Effectiveness  Total Cost of Project  / Total Persons Served	<\$5300	

## Component # 6: HMIS Compliance 34 Points

HMIS compliance will be evaluated and scored using data from a variety of sources. Comments are added to each box to describe where you can find the element. Cells highlighted in grey will autocalculate. Cells highlighted in black will be provided by the HMIS SA1 or CoC Director. Only answer the questions relevant to the specific project type for each renewal.

Reports	need to be run	for <b>7/1/2022</b> to <b>6/30/2023</b> regardless of the grant term. Reports required to complete this section:
		CoC - APR (canned report)
•		

Please contact hmishelp-alliance@oaklandhomeless.org if you have HMIS or Business Objects related questions.

1. HMIS Operation		Facto	r/Goal	Max Point Value
A. Average utilization rate.  For Question 1A. only use your Funding Year 2022 Application in E-Snaps				4 Points
Т	otal Beds Written in FY22 Application			
#DIV/0! Ja	anuary			
#DIV/0!	pril			
#DIV/0!	uly			
#DIV/0! C	October			
B. Did your agency complete a	successful program audit in 2023?		Yes	4 Points
C. Was your most recent APR	submitted to SAGE on time?		Yes	2 Points
2. Data Quality		Facto	r/Goal	Max Point Value
A. Were the Reports Required	for this Application Run Correctly?		Yes	2 Points
B. Was this Application Compl	eted Correctly?		Yes	2 Points
C. Attended all mandatory mo	nthly Agency Administrator/Data Quality	meetings.	Yes	2 Points
D. Submitted all monthly data	quality reports to the Oakland County HM		Yes	2 Points
E. Personally Identifiable Information- % Error	Rate			
% Name	<5% <u>1 Point</u>			
% SSN	<5% <u>1 Point</u>			
% Date of Birth	<5% <u>1 Point</u>			
% Race	<5% <u>1 Point</u>			
% Ethnicity	<5% <u>1 Point</u>			

% Gender	<5%	1 Point
F. Universal Data Elements % Error Rate		
% Veteran	<5%	1 Point
% Project Start Date	<5%	1 Point
% Relationship to HoH	<5%	1 Point
% Client Location	<5%	1 Point
% Disabling Condition	<5%	1 Point
G. Income and Housing Data Quality % Error Rate		
% Destination	<5%	1 Point
% Income and Sources at Start	<5%	1 Point
% Income and Sources at Annual Assessment	<5%	1 Point
% Income and Sources at Exit	<5%	1 Point
H. Chronic Homelessness % Of Records Unable to Calculate		
% TH or PH (RRH & PSH)	<5%	1 Point

#### PIT PARTICIPATION SCORING TOOL

Variable	Value	Description
Α	0	# of People available to Canvas Per Organzation (Staff paid out of HUD)
В	0	A/3 (Max # of Teams Possible Per Organization)
С	0	# Teams That Participated in 2022 PIT Count
D	#DIV/0!	C/B (% of Teams Participating/Possible Teams)
Score	#DIV/0!	Points Towards Renewal Application

Points	D% Range
5	81 - 100 %
4	61 - 80%
3	41 - 60 %
2	21 - 40%
1	0 - 20%

### Directions

### Only type in the yellow cells

A = How many people that are part of your organization that are available to canvass during PIT. (Internal agency decision/ Staff paid out of HUD grants)

B = 3 is the minimum amount of people that can be on a PIT team

C = How many Teams did your organization have particiapte in the 2023 PIT Count

D = The number of teams your organization had participate in the 2023 PIT Count divided by the max amount of teams your organization could have

12.1.21 1.30.22 ALLIANCE FOR HOUSING

18.4h

### Alliance for Housing FY2023 scoring

**Renewal Project Scoring Overview** 

		POSSIBLE POINTS	POINTS SCORED
#1	Financial Performance	14	14
#2	Consumer Satisfaction	8	· 8
#3	CoC Participation	6	4
#4	Coordinated Services/Connection to services	20	70
#5	Program Performance	85	55
#6	HMIS Compliance	34	
#7	Point in Time Participation	5	4.
To	tal Points Possible	172	135

CRITERIA	FACTOR/ GOAL	POSSIBLE POINTS	POINTS SCORED
FINANCIAL PERFORMANCE	•		-
<b>Grant Expenditures;</b> % of grant funding expended during last project year	100-98%	10	14
<b>Quarterly Drawdown of funds;</b> Minimum of quarterly drawdown	Y/N	4	4
	TOTAL	14	14
CONSUMER SATISFACTION  Copy provided of participant feedback, survey	Y/N	2	2
Results of program satisfaction survey; project enhancement or change	Narrative	2	9
Narrative of the survey results	Narrative	2	2
<b>Participant involvement;</b> Position on Board of Director's, peer counselor, participant advisory	Narrative	2	2

	TOTAL	8	8
			10
Coc Participation	T		
Agency Participation; at least one committee	Y/N	1	<u> </u>
Agency Leadership; at least one workgroup	Y/N	3	
Organization representation; 5 or more meetings	Y/N	2	2
	TOTAL	6	4
COORDINATED SERVICES/CONNECTION TO	SERVICES	6	
Reducing burdens to accessing CE	Narrative	2 2	
Connection to mainstream resources	Narrative	2	
Data use for positive outcomes	Narrative	2 2	
Employment Services/ training	Narrative	2 1	
Connection to mainstream health resources	Narrative	2	
Ensuring families are not separated	Narrative	2	
Increased services for domestic violence survivors	Narrative	4 4	
LGBTQ+ needs	Narrative	2 2	
Lived experience	Narrative	2 2	
	TOTAL	20 (	
		<u> </u>	
PROGRAM PERFORMANCE			
Length of Stay (RRH, PSH); Length of Participation (TH)	Days RRH - 39 PSH - 13 TH - 210	20	0
2. Exits to Positive Housing	90%	25	25
New or Increased Earned Income (RRH, P	SH, TH)		
A. Minimum % of participants with new or increased income for project stayers	8%	5	5
B. Minimum % of participants with new or	8%	5	

New or Increased other (Non-Employmen	nt) Income (	RRH, PSH	, TH)
A. Minimum % of participants with other (non-employment) income for project stayers	41%	5	0
B. Minimum % of participants with other (non-employment) income for project leavers	16%	5	2
Project/Cost Effectiveness			
A. Minimum % leavers with health insurance	85%	10	10
B. RRH ONLY- Cost Effectiveness	<2500	10	
C. PSH ONLY- Cost Effectiveness	<6000	10	10
D. TH ONLY- Cost Effectiveness	<5300	10	
	TOTAL	85	
HMIS Operation	98%	4	
HMIS Operation  A. Utilization rate  B. Agency Completed Successful Audit	98% Y/N	4	0
HMIS Operation			0
HMIS Operation  A. Utilization rate  B. Agency Completed Successful Audit  C. Submitted APR to SAGE on time	Y/N	4	0
HMIS Operation  A. Utilization rate  B. Agency Completed Successful Audit  C. Submitted APR to SAGE on time	Y/N	4	0 4 2
A. Utilization rate B. Agency Completed Successful Audit C. Submitted APR to SAGE on time Data Quality	Y/N Y/N	4 2	2 2 2
A. Utilization rate B. Agency Completed Successful Audit C. Submitted APR to SAGE on time Data Quality A. Required APR run correctly	Y/N Y/N Y/N	2	
A. Utilization rate B. Agency Completed Successful Audit C. Submitted APR to SAGE on time Data Quality A. Required APR run correctly B. Application completed correctly C. Attended all mandatory Agency Admin	Y/N Y/N Y/N Y/N	2 2 2	2 2 2 2
A. Utilization rate B. Agency Completed Successful Audit C. Submitted APR to SAGE on time  Data Quality A. Required APR run correctly B. Application completed correctly C. Attended all mandatory Agency Admin meetings	Y/N Y/N Y/N Y/N Y/N	2 2 2 2	2 2 2 2 2 2 0
A. Utilization rate B. Agency Completed Successful Audit C. Submitted APR to SAGE on time  Data Quality A. Required APR run correctly B. Application completed correctly C. Attended all mandatory Agency Admin meetings D. Submitted all monthly data quality reports	Y/N Y/N Y/N Y/N Y/N	2 2 2 2 2	2 2 2 2 2 2
A. Utilization rate B. Agency Completed Successful Audit C. Submitted APR to SAGE on time  Data Quality A. Required APR run correctly B. Application completed correctly C. Attended all mandatory Agency Admin meetings D. Submitted all monthly data quality reports E. Personal Identifiable Information PII)	Y/N Y/N Y/N Y/N Y/N	2 2 2 2 2 2	2 2 2 2 2 2 5 4
A. Utilization rate B. Agency Completed Successful Audit C. Submitted APR to SAGE on time  Data Quality A. Required APR run correctly B. Application completed correctly C. Attended all mandatory Agency Admin meetings D. Submitted all monthly data quality reports E. Personal Identifiable Information PII) F. Universal Data Elements (UDE)	Y/N Y/N Y/N Y/N Y/N	2 2 2 2 2 2 6 5	2 2 2 2 2 2 2 5 4

#### POINT IN TIME PARTICIPATION

Number of people available to canvas per  $$81${\text{-}}\ 100\%\,{\text{\bf 5}}$$  organization

TOTAL 5



### The Alliance for Housing 2023 Renewal Application and Scoring Continuum of Care Program Competition

The Alliance for Housing developed a renewal process to determine if Permanent Housing, Transitional Housing and Rapid Rehousing projects are performing in accordance with HUD requirements and CoC expectations. This year, grants will be renewable under the CoC Program Competition as set forth in 24 CFR 578.33 to continue ongoing leasing, operating, rental assistance, HMIS, and project administration costs. Projects are eligible for renewal if they are currently in operation and have a signed grant agreement with HUD expiring between January 1, 2023 and December 31, 2023. Renewal grants will be limited to 1 year of funding.

Annually, the Alliance for Housing reviews these projects and provides guidance for renewal project funding. Scoring guidelines are listed within this document to determine if agencies comply with renewal criteria and meet the required threshold. The Alliance for Housing will provide explanations for projects that are rejected.

The deadline for submitting this scoring application and supplemental information (attachments) is due **Wednesday**, **August 16**, **2023 by 5PM** to the Grants and Community Manager via email (acuniberti-alliance@oaklandhomeless.org). Applicants that do not meet this deadline may be subject to funding reallocation or loss of funding.

The Alliance for Housing Prioritization Committee will meet, review and provide priority and ranking of projects on **Tuesday**, **August 29**, **2023** During this meeting applicants will have an opportunity to talk about their application and answer any questions the committee may have. Zoom information will be sent to the applicants if requested. The priority ranking (tier 1 tier 2 and bonus) will be sent out via listserve and posted on the Alliance for Housing Website on **Wednesday**, **August 30**, **2023**.

The deadline for submitting all project renewal applications in ESNAPS as well as submitting an email pdf copy of the ESNAPS application to the Alliance for Housing, Grants and Community Manager (<a href="mailto:acuniberti-alliance@oaklandhomeless.org">acuniberti-alliance@oaklandhomeless.org</a>) is Wednesday, August 16, 2023.

#### Ranking

In alignment with the 2023 CoC Program NOFO, existing projects will not be automatically renewed during the FY 2023 competition. As stated in the FY 2023 NOFO, projects will be divided into two tiers, wherein Tier 1 applicants will have funding priority over Tier 2. Tier 1 applicants will be prioritized by their ranking score, HUD/CoC determined high priority projects (Chronically Homeless, Youth, Veteran, and Families with Children), high performance, and meeting the needs and gaps as identified by the CoC. The CoC will review system performance measures related to the projects.

Based on guidelines set forth by HUD, ranking will also be prioritized for projects in

### the following order:

Renewal/new projects.

- a. HMIS
- b. PSH
- c. RRH
- d. TH
- e. New projects created through bonus (ranking of bonus application priority TBD by Alliance Board/Prioritization committee)

Refer to 2023 Notice of Funding Opportunity (NOFO) for the Continuum of Care Program Competition for a more detailed description of applicant updates.

The FY2023 CoC planning grant will not be ranked per the NOFO therefore will not be tiered.

This renewal application is for your last fully completed HUD grant.

### **Renewal Project Threshold Score**

Renewal projects are scored on 7 components: Financial performance, consumer satisfaction, CoC participation, coordinated services/connection to services program performance, HMIS compliance an Point in Time participation. The threshold for renewal is 65%. Projects below this threshold may not be eligible for refunding and will be offered technical assistance to improve project performance for future applicability.

The Alliance for Housing reserves the right to make decisions on which projects should receive funding and/or the amount awarded based upon recommendations of the Prioritization Committee and the Alliance for Housing Board of Directors.

### Any applications submitted after Wednesday, August, 16, 2023 5PM will lose 10 points.

**Renewal Project Scoring Overview** 

	ATTACHMENT 1 Points			
ATTACI	TIMENT 1	Points		
#1	Financial Performance	14		
#2	Consumer Satisfaction	8		
#3	CoC Participation	6		
#4	Coordinated Services/Connection to services	20		
ATTAC	ATTACHMENT 2			
#5	Program Performance	85		
#6	HMIS Compliance	34		
ATTACHMENT 3				
#7	Point in Time Participation	5		
Total I	Points Possible	172		

### Threshold: All Projects must score 65% (112 points) or higher to be eligible for renewed funding.

Agency Name:	South Oakland Shelter dba Lighthouse MI
Grant Name:	
Grant Type (PSH/RRH/TH):	PSH
Grant Number:	MI0372L5F042009
Component #1	Financial Performance 14 Points

Financial performance is measured by the extent to which each project has expended its budgeted grant during the last project year fully completed.

Applicants are responsible for submitting information from the Electronic Line of

Credit Control System (ELOCCS) from your HUD representative, and financial performance evidence from an Independent Auditor Report.

Renewal projects must draw project funds, at a minimum, on a quarterly basis. Instances where drawdown is delayed or not serving participants may result in the project not being funded in the FY2023 CoC Program Competition.

# A. What percentage of your project's grant funding has been expended during the most recently completed year? 99.5%

### B. How often has your project completed a drawdown from ELOCCS?

- 98% grant funding expensed: 10 points
- 97% 0% grant funding expensed: 0 points
- Evidence of drawdown of funds at least quarterly: 4 point
  - Please provide:
    - Electronic Line of Credit Control System (ELOCCS print out from draws)
    - Evidence of drawdown of funds at least quarterly

Projects expending less than 100% of their grant are required to provide a written explanation. Depending on explanation, the Alliance for Housing will determine whether to target follow-up technical assistance or to deem the project ineligible.

This grant underspent in leasing because clients pulled from the registry were having a hard time finding adequate housing to lease up with the PSH program. There were also a few clients that successfully transferred over to the Moving Up Voucher at the end of the grant year and their program slots weren't filled until the client's signed leases with the voucher.

### Component #2 Consumer Satisfaction- 8 Points

Projects will be scored on their submission of the following items:

Category	Points Possible
A. Provide a copy of your client satisfaction/feedback form or survey.	2
B. Survey Results	2
C. Project enhancement or change via feedback narrative	2
D. Current or past program participants with lived expertise involvement in decision-making or other role within the organization	2
TOTAL	8

### A. Who do you give your survey to, leavers and/or stayers?

Submission of form/survey w/ explanation of those surveyed: 2 point

No submission: 0 point

Lighthouse makes an effort to collect feedback from all of our CoC clients on a regular, monthly basis. We survey both leavers and stayers. Information collected includes overall satisfaction with staff and services, feelings of safety within their home and community, feelings of being treated with dignity and respect and being in charge of their housing plans, etc. Additionally, we specifically survey new clients into the program within their first month of entry. This survey is designed to assess our community's referral system and Lighthouse's intake process. Sample questions include, what agency they connected with first prior to being enrolled in Lighthouse's program, how they felt during the intake process, and if the program was well explained to them. This last year we collected 34 Satisfaction Surveys and 46 Intake Surveys. We are working to increase the number of surveys collected by offering incentives and simplifying the survey process. Copies of the surveys and summary results have been provided as an attachment to this application. This year we also added questions to all of our surveys related to DEI to ensure our services are both culturally relevant and provided equitably.

### B. Please send the results of your participant feedback survey.

Provided survey results: 2 Points

No submission: 0 points

Our Intake and Housing Satisfaction surveys and survey results have been provided as attachments.

### C. In what way(s) does your agency use your survey results to enhance your project(s)?

Narrative with examples: 2 points

Narrative: 1 Point

No narrative or example: 0 points

Survey results are collected and reviewed by C-level staff, Directors, program staff, and an Advisory Group consisting of staff, people with lived experience, volunteers, and representatives from non Oakland County CoC agencies. This Advisory Group is newly established and we are excited to fully use their input in the coming year. Staff review feedback to look for trends, gaps in services, and gaps in staff competencies. Information is used to curate trainings for staff and modify policies and procedures. For example, we were getting feedback that our intake process was overwhelming. In response, we reduced the amount of information given during intakes and provided non-critical information within the first month of enrollment. Past improvements in response to client feedback have included our overall goal to diversify the housing clients can move into. In the past, many clients

have expressed feeling unsafe in their homes and communities and wanting to relocate. Lighthouse has worked to gain new landlords, ensure clients can visit units (ideally a few times) prior to committing to a lease, and have also worked to build more affordable housing within our community to help add to the number of options our clients have.

- D. Describe how your organization incorporates the input and experience of person's with Lived Experience in your organization structure, decision making and quality improvement efforts, which may include, but not limited to, activities such as:
  - Representation on the organizations Board of Director's or other decision-making board
  - Client / Consumer Advisory Board
  - Emphasis on hiring person's with Lived Experience
  - Use of Peer Mentors that provide feedback
  - Satisfaction surveys / comment cards

Provides narrative with specific examples: 2 points

Provides narrative: 1 point No narrative provided: 0 points

Yes. We currently have four Lighthouse employees with lived experience with homelessness and three who have received financial assistance to secure or maintain their housing. This information was collected confidentially and so we do not know the names of titles of these staff members. However, Rita Fields, our Chief Strategy and Talent Officer and former board member, and Shannon Smith, our Director of Community Development, both have lived experiences that they are open about sharing. In particular, Rita has accessed Lighthouse's shelter during her time of need. Through the same confidential process we know we have one direct service temp staff who have received financial assistance to secure or maintain their housing, and one intern with lived experience with homelessness. We also have two board members, Dr. Chanel Hamption and Racheal Allen, with lived experience with homelessness and one Advisory Group member, James Tinson, who has recent lived experience with homelessness and accessed Lighthouse's programs.

### Component #3: Continuum of Care Participation 6 Points

An agency's participation is measured by the number of Continuum of Care meetings attended during 2021-2023.

Agency's Participation in the CoC Meetings (applies to only one category)	Possible Points
A. Agency participation on at least one CoC committee	1
B. General membership attendance/Annual retreat	3
C. Organization represented at 5 or more meetings	2
Total:	6

## A. Does your agency participate in at least one CoC committee, and, if so, which one (s)?

Yes: participated: 1 point

No: 0 points

Yes. We have staff represented on the Performance and Outcome Committee and the Affordable Housing Committee when it is active. We also have representation on the CoC Board and our COO just volunteered to Chair the Strategic Planning, Funding, and Advocacy Committee.

B. How many CoC general membership meetings including the Annual Retreat was your organization represented at in the last fiscal year? Last fiscal year is 10.1.21 – 9.30.22 (Meeting dates include: 11.3.21, 1.5.22, 3.2.22, 5.11.22, 7.6.22, 9.7.22)

Participated in all 6 meetings: 3 point

Participated in less than 6 meetings: 1 point

No: 0 points

Lighthouse had staff participation in 4 out 6 meetings last fiscal year. (10.1.21-9.30.22)

1.5.22- C May, M. Hess, E. Johnson

5.11.22- 7 ppl

7.6.22-B.Agnello, T.Swan, S. Neuenfeldt

9.7.22-B.Agnello, T.Swan

C. Was the organization represented at five or more Alliance meetings (GM, board, committee or workgroup)? If yes, please list meeting title.

Yes: participated in 5 or more: 2 points

Less than 5: 0 points

Yes, Lighthouse has participated in five or more Alliance meetings including the following:

(4)CoC GM: 1.5.22, 5.11.22, 7.6.22, 9.7.22

Performance Outcomes Committee (2+): 11.8.21, 12.13.21

Prioritization Registry (all)

Category	<b>Points Possible</b>
A. Reducing burdens/ CE	2
B. Connection to mainstream community-based resources	2
C. Data usage for positive outcomes	2
D. Employment services/training	2
E. Connection to mainstream health resources	2
F. Ensuring families are not separated	2
G. Increased services for domestic violence survivors	4
H. LGBTQ+ needs	2
I. Lived Experience	2
Total:	20

### A. What steps does your agency take to reduce burdens on potential participants access Coordinated Entry?

Narrative provides specific action steps your agency has put in place: 2 points

Narrative provided: 1 point No narrative: 0 points

We have staff dedicated to answering and responding to crisis calls. Community members receive accurate and updated information on resources in the community and how to connect with the HARA. Lighthouse refers every caller to the HARA to be connected with the CES. Additionally, Lighthouse reduces the duplication of questions and information that may have already been collected from the participant if collected from another partnering agency or if this is not the first time the person is calling Lighthouse for services.

B. Please describe the mainstream and other community-based resources and partnerships your agency has to sustain permanent exits from the program (ex: job training, life skills, treating substance abuse, etc.).

Narrative provides specific examples: 2 Points

Narrative provided: 1 point No narrative: 0 points

Lighthouse strives to connect clients to all and any resources available to them in order to maintain stability. This includes partnerships with DHHS (MiBridges

Navigator), Community Mental Health agencies, Honor Community Health, and MSHDA subsidized housing waitlists, among many others. Internally, we offer all clients enrollment in our Follow-up Care Program which provides an additional year of case management after exiting their housing program into housing. Participants enrolled in Follow-up Care also have access to our Centers for Working Families (CWF) program to build upon their financial literacy. Services in CWF are centered around employment coaching, income supports, and financial capability coaching and services.

# C. Does your agency use data and evidence to measure impact of homelessness programs on positive outcomes, recovery, self-sufficiency, and reducing homelessness?

Narrative provides specific examples: 2 Points

Narrative provided: 1 point No narrative: 0 points

Yes. Lighthouse strives to collect and analyze data across various domains to help inform the impact of our work and areas in which we might improve. Such data includes financial statements and program level data captured through HMIS and internal tracking logs. For our long-term housing programs, we strive to track upward mobility at the household level. This is largely done through our regular SPDAT assessments and comparing scores over time within households. We also look at destination discharge reports and the CoC APR reports regularly, to both monitor data quality and performance. As an agency, we are always looking for positive impacts of our housing and supportive service programs. We are also always looking for ways to most effectively use our funding to help as many households as possible. To track the cost effectiveness of specific programs, we take the number of positive outcomes as defined by that program (i.e. people housed or people exiting into housing) and divide it by the total expenses of

## D. Does your agency work with local employment agencies and employers for training and employment opportunities for participants in project?

Narrative provides specific examples: 2 Points

Narrative provided: 1 point No narrative: 0 points

Yes, through our CWF program we partner with Michigan Works, temp agencies, and local community employers who reach out to us when they have a staffing need. Most opportunities are related to the medical field and service industry. Lighthouse also houses Center for Employment Opportunities (CEO) within our Pontiac office. CEO helps returning citizens connect with job training and employment opportunities.

# E. How does your agency connect participants to mainstream health (e.g., local and state health agencies, hospitals)?

Narrative provides specific examples: 2 Points

Narrative provided: 1 point

No narrative: 0 points

Our clients are connected with mainstream healthcare providers in a few different ways. Some participants are already connected when they enter the program and we encourage them to maintain that connection if it has been successful. For those who don't have healthcare upon entering our programs, we refer them to Honor Community Health, The Wellness Plan, or help them look up providers based on their insurance. The Wellness Plan has a clinic co-located within Lighthouse's Pontiac office. The Wellness Plan has also recently launched a mobile program that we will be parenting with them on to help ensure all out clients have access to the care they need.

F. How does your agency ensure sure families are not separated?

Please demonstrated how your agency does not deny admission to or separate family members when they enter housing, including serving all family members together and in accordance with each family member's self-reported sexual orientation and gender identity.

Narrative provides specific examples: 2 points

Narrative provided: 1 point No narrative: 0 points

Lighthouse has identified that families being separated while seeking shelter is a barrier to services. Lighthouse has implemented a family-style environment shelter program where families of any makeup can have their own living space while looking for housing. Lighthouse is the only family shelter in Oakland County that offers this level of inclusion and support to families in need of emergency housing. Lighthouse's other housing programs assist families with finding safe, affordable housing throughout Oakland County so families can avoid separation.

G. Please identify your agencies current efforts in increase access to housing and services defined as safe by survivors of domestic violence, dating violence, sexual assault and stalking. What types of survivor-centered practices have been adopted that maximize client choice while maintaining safety and confidentiality?

Narrative provides specific examples: 4 points

Narrative provided: 1 point No narrative: 0 points

Lighthouse has over 29 years of experience specific to the DV population. Working with and providing housing programs and services for individuals and families impacted by domestic violence has been a critical and essential component of our work. Lighthouse has operated TH for women and children since 1991 and RRH for women and children since 2015. In the current program year, LH has served 66 families who have experienced domestic violence. Staff receive ongoing training and professional development geared towards best practices in working with this population including trauma-informed, client-centered approaches. These approaches include safety planning, identifying family members or friends who are "safe" to communicate with or to stay with in case of an emergency. It also includes offering additional grace and patience in the event the client does not wish to meet in person, or if they prefer secure and private locations for meetings. Case managers focus on the immediate safety of the household in addition to finding future stable housing in areas that the household would feel the most comfortable. Lighthouse has specific experiences in re-housing households escaping DV situations or otherwise impacted by DV. This experience guides how we work with clients and landlords and our safety planning measures for clients and our case managers.

H. Describe how your agency/project helps address the needs of LGBTQ+, transgender, gender non-conforming, and non-binary individuals and families including privacy, respect, safety, and access regardless of gender identity or sexual orientation in projects.

Narrative provides specific examples: 2 points

Narrative provided: 1 point No narrative: 0 points

Lighthouse as an organization that prides it self on having the ability to support individuals from any walk of life including LGBTQ+, transgender, gender nonconforming, and non-binary individuals. We pride ourselves on providing a safe environment for all. We have been successful with this by providing personal space, counseling, community resources and case management. We have policies and procedures to address any discrimination experienced from staff to program participants. We are very diligent in our confidentiality and we do not share any information unless permission is granted by the individual. We have developed a culture that all of our participants experience an environment that is safe, respectful, and inclusive regardless of gender identity, or sexual orientation. Specifically how we accomplish this is by allowing clients to openly express how they identify, and in turn, our staff use the appropriate pronouns. Another example is that we keep families together regardless of their gender identity, sexual orientation, etc.

I. Describe at least one change your agency has made to your project over the past year in response to the input received from individuals with

# lived expertise. This change could have been made within the project that receives CoC funding or another homeless projects within your agency.

Narrative provides specific examples: 2 points

Narrative provided: 1 point No narrative provided: 0 points

We regularly solicit feedback from those we serve. We conduct monthly surveys with our shelter clients, housed clients, and food clients to seek feedback on how well we are meeting their needs, if staff are treating clients with dignity and respect, and how we can improve our programs and services. We also conduct focus groups prior to implementing new programming to gain feedback and insight from clients. We communicate feedback back to relevant committees of the board and program staff including Directors and case managers. Most importantly, we use this feedback to improve current programming, change and update polices and procedures, inform future programming, and inform our community advocacy efforts. For example, feedback from our clients on the difficulty of securing quality affordable housing despite having a housing voucher, and their discomfort in their housing units after being rehoused, fueled our desire to embark on affordable housing development work.

We also have people with lived experiences with homelessness serving on our board and employed with Lighthouse within executive roles and direct services roles. When surveyed, 18 out of the 42 Lighthouse employees who responded to the survey, stated having lived experience with homelessness. Additionally, we are in the process of establishing a Client Advisory Board to help us even more elevate the voices of those served and engage current and former clients within our advocacy work and program improvement and development.

Moreover, feedback on design was sought directly from shelter clients. When planning for our NCS project, Lighthouse surveyed nearly 100 clients enrolled or recently enrolled in our current emergency shelter or enrolled within a partnering shelter program. An example of how we incorporated client feedback into our design is reflected in our dining plans. Lighthouse asked shelter clients if they preferred to cook for themselves and their families while enrolled in the shelter or preferred to have meals provided to them. About 50% preferred to have meals provided, 25% preferred to cook for themselves, and 25% expressed no preference. Ultimately, we decided it was important to provide options to our shelter guests. This informed our decision to establish an onsite commercial kitchen where volunteers can prepare and serve meals as well as smaller, shared kitchenettes where clients can warm or prepare meals on their own. Clients will also have the option of dining within a larger dining hall or within their own private dining spaces. This transition to formally deliver prepared meals for shelter families began this past year once we made the full transition to the station shelter site.

### **Appeals Process**

An appeals process will be available for renewal projects that do not pass the scoring threshold (65% or 112 points).

All appeals will be reviewed by a group established by the Alliance for Housing Board of Directors and Project Review Committee. Members of the Appeals Committee will not have any projects that receive HUD CoC Homeless Assistance Program funding.

Appeals must to be submitted in writing via email to <a href="mailto:lmccall-alliance@oaklandhomeless.org">lmccall-alliance@oaklandhomeless.org</a>. Address all appeals to the Appeals Committee/prioritization committee and submit the following details: the issue being appealed, the argument for overturning the score, and evidence to support the argument. Please ensure that your appeal is concise and includes appropriate detail to process the review. Changes made to the project after application will not be considered.

- The appeal must be received by the close of the business day within 5 business days of the communication of denial of eligibility to submit for funding. Submission must be received in a type written format (with attachments if appropriate) electronically.
- The decisions of the Appeal/Prioritization Committee are final.
- Applicants that are rejected may also appeal directly to HUD by submitting a Solo Application prior to the deadline per the 2023 NOFO.

Attac	chment Checklist:	
	HMIS Reports- Run report for 1	
П	<ul><li>CoC - APR (canned repo SAGE</li></ul>	rt)
П	<ul><li>Most recently completed</li></ul>	L COC APR
П	Line of Credit Control System (	
		of funds at least quarterly
		e from an Independent Auditor Report
	Copy of consumer survey	·
	(ag	ency) confirms it has read, reviewed and
is in		NOFO as well as ensured has a <b>Code of</b>
	•	equirements of 2 CFR part 200 and is
inclu	ded on HUD's website.	
Dlose	se sign and date below.	
rieas	se sign and date below.	
	(6:50)	
	(Sign)	(Date)

## Component # 5: Program Performance 85 points

Performance will be evaluated and scored using data from a variety of sources. Comments are added to each box to describe where you can find the element. Cells highlighted in grey will autocalculate. Only answer the questions relevant to the specific project type for each renewal. <u>It is recommended to complete this application in Excel and save as PDF for submission.</u>

Reports need to be run for 7/1/2022 to 6/30/2023 regardless of the grant term. Reports required to complete this section:

Yes CoC - APR (canned report)

\*\*\* Canned reports need to be submitted as a PDF and can be done directly in the browser settings.

Please contact hmishelp-alliance@oaklandhomeless.org if you have HMIS or Business Objects related questions.

Please contact hmishelp-alliance@oaklandhomeless.org if you have HMIS or Business Objects related questions.		
1. Length of Stay (Days) 20 points	Factor/Goal	Max Point Value
RRH - Average Length of days from project entry to housing move in	<39 days	20 points
	Factor/Goal	Max Point Value
PSH - Average length of days from project entry to housing move-in	<13 days	20 points
TH - Average length of stay in project for leavers	<210 days	20 points
2. Exits to Positive Housing Destination (25 pts)	Factor/Goal	Max Point Value
RRH/PSH/TH – Percent total persons exited to positive housing destination	90%	25 points
91% Total Percentage		
3. New or Increased Earned Income (10 pts)	Factor/Goal	Max Point Value
A. 21% RRH/PSH/TH - Minimum % of participants with new or increased income for project stayers	8%	5 points
B. 0% RRH/PSH/TH - Minimum % of participants with new or increased income for project <i>leavers</i>	8%	5 points
4. New or Increased other (Non-Employment) Income (10 pts)	Factor/Goal	Max Point Value
A. 38% RRH/PSH/TH - Minimum % of participants with other (non-employment) income for project stayers	41%	5 points
B. 43% RRH/PSH/TH - Minimum % of participants with other (non-employment) income for project <i>leavers</i>	16%	5 points

<b>5. Project/Cost Effectiveness</b> A=10 points; B or C or D= 10 points; Total points available=20 (RRH, PSH, TH)	Factor/Goal	Max Point Value
A. 100% RRH/PSH/TH - Minimum % leavers with health insurance.  + 10	85%	10 points
11 Number of Leavers		
B. #DIV/0! RRH - Cost Effectiveness Total Cost of Project	<\$2500	10 points
Total Persons Served		
C. \$5,567 PSH- Cost Effectiveness 406,411.80 Total Cost of Project	<\$6000	10 points
73 Total Persons Served		
D. #DIV/0! TH - Cost Effectiveness  Total Cost of Project	<\$5300	10 points
Total Persons Served		

### Component # 6: HMIS Compliance 34 Points

HMIS compliance will be evaluated and scored using data from a variety of sources. Comments are added to each box to describe where you can find the element. Cells highlighted in grey will autocalculate. Cells highlighted in black will be provided by the HMIS SA1 or CoC Director. Only answer the questions relevant to the specific project type for each renewal.

Reports need to be run for 7/1/2022 to 6/30/2023 regardless of the grant term. Reports required to complete this section:

Yes CoC - APR (canned report)

Please contact hmishelp-alliance@oaklandhomeless.org if you have HMIS or Business Objects related questions.

1. HMIS Operation Factor/Goal Max Point Value

A. Average utilization rate.	98%	<u>4 Points</u>
For Question 1A. only use your Funding Year 2022 Application in E-Snaps		
Total Beds Written in FY22 Application		
139% 68 January		
127% 62 April		
133% 65 July		
131% October		
B. Yes Did your agency complete a successful program audit in 2023?	Yes	4 Points
C. Yes Was your most recent APR submitted to SAGE on time?	Yes	2 Points
2. Data Quality	Factor/Goal	Max Point Value
A. Yes Were the Reports Required for this Application Run Correctly?	Yes	2 Points
B. Yes Was this Application Completed Correctly?	Yes	2 Points
C. Yes Attended all mandatory monthly Agency Administrator/Data Quality meetings.	Yes	2 Points
D. Yes Submitted all monthly data quality reports to the Oakland County HMIS System Administrators.	Yes	2 Points
E. Personally Identifiable Information- % Error Rate		
0% Name <5% <u>2 Points</u>		
1% SSN <5% <u>2 Points</u>		
0% Date of Birth <5% <u>2 Points</u>		
0% Race <5% <u>2 Points</u>		
0% Ethnicity <5% <u>2 Points</u>		
0%         Gender         <5%		

#### F. Universal Data Elements % Error Rate 0% Veteran 2 Points <5% 0% Project Start Date 2 Points <5% 0% Relationship to HoH 2 Points <5% 0% Client Location <5% 2 Points 0% Disabling Condition 2 Points <5% G. Income and Housing Data Quality % Error Rate 0% Destination 2 Points <5% 0% Income and Sources at Start <5% 2 Points 0% Income and Sources at Annual Assessment <5% 2 Points 0% Income and Sources at Exit 2 Points <5% H. Chronic Homelessness % Of Records Unable to Calculate 0% TH or PH (RRH & PSH) <5% 2 Points

PROJECT:			
SOS-LH 9199 CLAP			
PROGRAM PERFORMANCE			SCORE
Length of Stay (RRH, PSH); Length of Participation for Leavers(TH)	Days	20	
	RRH – 39		
	PSH - 13		0
	TH - 210		
2. Exits to Positive Housing	90%	25	25
3. New or Increased Earned Income (RRH, PSH, TH)			
A. Minimum % of participants with new or increased income for project stayers	8%	5	5
B. Minimum % of participants with new or increased income for project leavers	8%	5	0
4. New or Increased other (Non-Employment) Income (RRH, PSH, TH)			
A. Minimum % of participants with other (non-employment) income for project stayers	41%	5	0
B. Minimum % of participants with other (non-employment) income for project leavers	16%	5	5
5. Project/Cost Effectiveness			
A. Minimum % leavers with health insurance	85%	10	10
B. RRH ONLY- Cost Effectiveness	<2500	10	

C. PSH ONLY- Cost Effectiveness	<6000	10	10
D. TH ONLY- Cost Effectiveness	<5300	10	
	PROGRAM PERFORMANCE TOTAL	85	55

HMIS PERFORMANCE	HMIS PERFORMANCE							
1. HMIS Operation								
A. Utilization rate 98% 4 4								
B. Agency Completed Successful Audit	Y/N	4	4					
C. Submitted APR to SAGE on time	Y/N	2	2					
2. Data Quality								
A. Required APR run correctly	Y/N	2	2					
B. Application completed correctly	Y/N	2	2					
C. Attended All Mandatory Agency Admin meetings	Y/N	2	2					
<ul> <li>D. Submitted all monthly data quality reports</li> </ul>	Y/N	2	2					
E. Personal Identifiable Information		6	6					
F. Universal Data Elements (UDE)%		5	5					
G. Income and Housing DQ		4	4					
H. % Chronic Unable to Calculate		1	1					
	HMIS PERFORMANCE TOTAL	34	34					

Variable	Value	Description
Α	21	# of People available to Canvas Per Organzation (Staff paid out of HUD)
B 7 A/3 (Max # of Teams Possible Per Organization)		A/3 (Max # of Teams Possible Per Organization)
C # Teams That Participated in 2022 PIT Count		
D	71%	C/B (% of Teams Participating/Possible Teams)
Score	4	Points Towards Renewal Application

Points	D% Range
5	81 - 100 %
4	61 - 80%
3	41 - 60 %
2	21 - 40%
1	0 - 20%

#### Directions

### Only type in the yellow cells

A = How many people that are part of your organization that are available to canvass during PIT. (Internal agency decision/ Staff paid out of HUD grants)

B = 3 is the minimum amount of people that can be on a PIT team

C = How many Teams did your organization have particiapte in the 2023 PIT Count

D = The number of teams your organization had participate in the 2023 PIT Count divided by the max amount of teams your organization could have

From: Leah McCall To: mcraig@chninc.net

Cc: Kirsten Elliott; Taylor Eberhart; eburton@chninc.net; Ashley Cuniberti

Subject: HUD FY23 bonus

Date: Thursday, August 31, 2023 12:12:16 PM CHN - PSH Expansion Bonus project.pdf Attachments:

Good afternoon Marc, please see the attached letter regarding the HUD bonus proposal that Community Housing Network submitted for funding consideration.

If you have any questions please let me know, thank you.

Sincerely, Leah McCall, MA Alliance for Housing 1 N. Saginaw Suite 208 Pontiac, MI 48342 248-221-1854

www.oaklandhomeless.org



Community Housing Network, Inc. 5505 Corporate Dr #300, Troy, MI 48098

Mr. Craig,

This is to inform you that the Alliance for Housing, Oakland County's Continuum of Care has rejected your bonus application, PSH Expansion, for funding under the HUD FY2023 Notice of Funding Opportunity.

The reason(s) for the rejection are:

• After detailed review of information, scoring and discussion with the Prioritization Committee, we have decided to go with another applicant for this bonus.

If you have any questions or would like to discuss your application, please call Leah McCall at 248 -221-1854 or email at lmccall-alliance@oaklandhomeless.org

We appreciate your interest and thank you for considering HUD FY2023 bonus funding this year.

Leah McCall, Executive Director

Leah McCall

Alliance for Housing

248 -221-1854

Imccall-alliance@oaklandhomeless.org

From: Leah McCall
To: "Ryan Hertz"

Cc: <u>Jenny Poma</u>; <u>Caitlin May</u>; <u>Ashley Cuniberti</u>

**Subject:** HUD FY23 Bonus

Date: Thursday, August 31, 2023 12:13:22 PM
Attachments: LH- DV RRH Expansion Bonus project.pdf

Good afternoon Ryan, please see the attached letter regarding the HUD bonus proposal that Lighthouse submitted for funding consideration.

If you have any questions please let me know, thank you.

Sincerely, Leah McCall, MA Alliance for Housing 1 N. Saginaw Suite 208 Pontiac, MI 48342 248-221-1854 www.oaklandhomeless.org



South Oakland Shelter (dba Lighthouse MI) 46156 Woodward Avenue Pontiac, MI 48342

Mr. Hertz,

This is to inform you that the Alliance for Housing, Oakland County's Continuum of Care has rejected your bonus application, DV-RRH Expansion project, for funding under the HUD FY2023 Notice of Funding Opportunity.

The reason(s) for the rejection are:

• After detailed review of information, scoring and discussion with the Prioritization Committee, we have decided to go with another applicant for this bonus.

If you have any questions or would like to discuss your application, please call Leah McCall at 248 -221-1854 or email at lmccall-alliance@oaklandhomeless.org

We appreciate your interest and thank you for considering HUD FY2023 bonus funding this year.

Leah McCall, Executive Director

Leah McCall

Alliance for Housing

248 -221-1854

Imccall-alliance@oaklandhomeless.org

From: Ashley Cuniberti

To: Jenny Poma; Caitlin May; Princess Staples; jrusher@lighthousemi.org; Taylor Eberhart; Jessica Lasher; "Kirsten

Elliott"; Eric Burton; Kevin Bogg (kbogg@ttiinc.org); dpermaloff@cghelps.org; Tallarigo, Rebecca (DHHS);

Hendges, Lynn (DHHS)

Cc: Leah McCall; Audrey White; Holly Gauthier (hgauthier-alliance@oaklandhomeless.org)

Subject: FW: HUD/Alliance FY2023 Tier 1 & 2, Bonus and Planning Grant Information 2 views

**Date:** Wednesday, August 30, 2023 1:03:00 PM

Attachments: HUD FY23 Alliance Ranking Sheet - Tier 1 - Tier 2 FINAL.pdf

Forwarding to ensure you received.

Any questions please reach out to Leah and I.

Ashley Cuniberti, MSM
Grants and Community Manager
Alliance for Housing, Oakland County Continuum of Care
1 N. Saginaw Suite 208
Pontiac, MI 48342
(810) 771-8570
www.oaklandhomeless.org

From: octhah@googlegroups.com <octhah@googlegroups.com> On Behalf Of Ashley Cuniberti

Sent: Wednesday, August 30, 2023 1:01 PM

**To:** Alliance for Housing, Oakland County Continuum of Care <octhah@googlegroups.com> **Subject:** HUD/Alliance FY2023 Tier 1 & 2, Bonus and Planning Grant Information 2 views

Good Afternoon,

Please see attached for the Alliance/HUD FY2023 ranking information. You can also find it posted on the Alliance website at <a href="https://www.oaklandhomeless.org/hudfy2023">https://www.oaklandhomeless.org/hudfy2023</a>

If you have any questions please contact Leah at <u>lmccall-...@oaklandhomeless.org</u>

Thank you,

Ashley Cuniberti

#### Please do not reply to this email, the sender will not receive it.

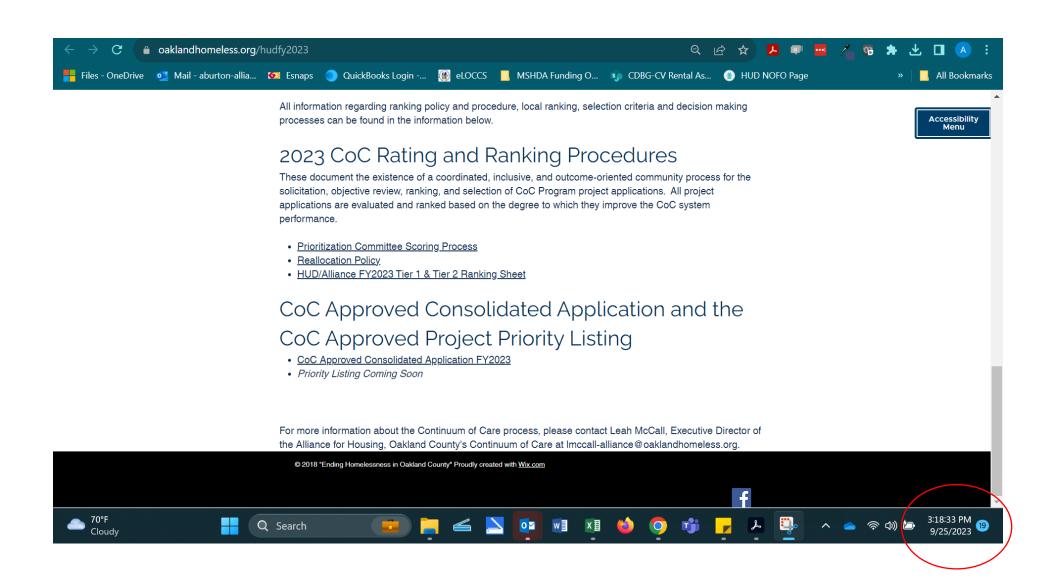
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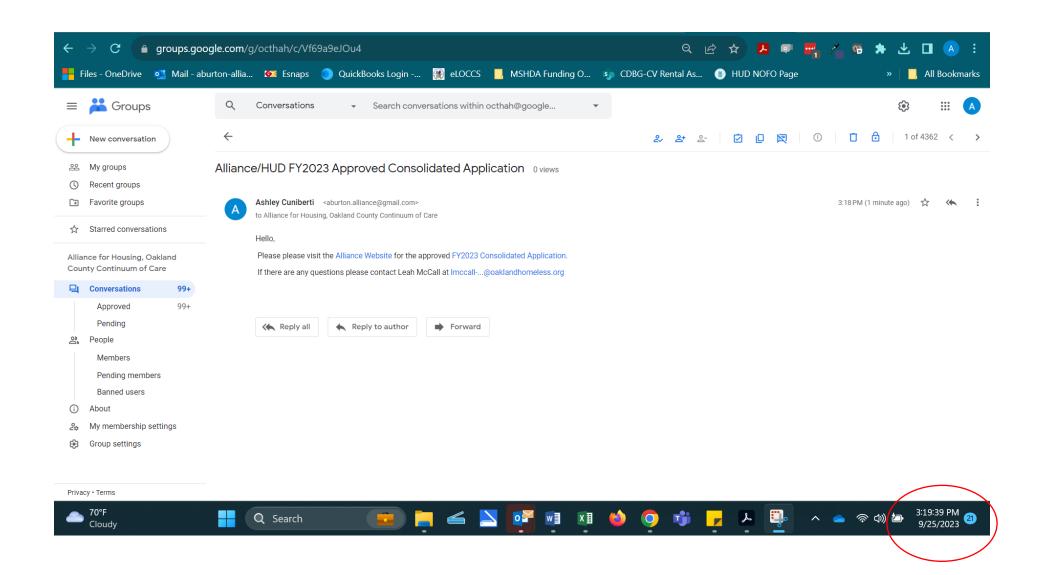
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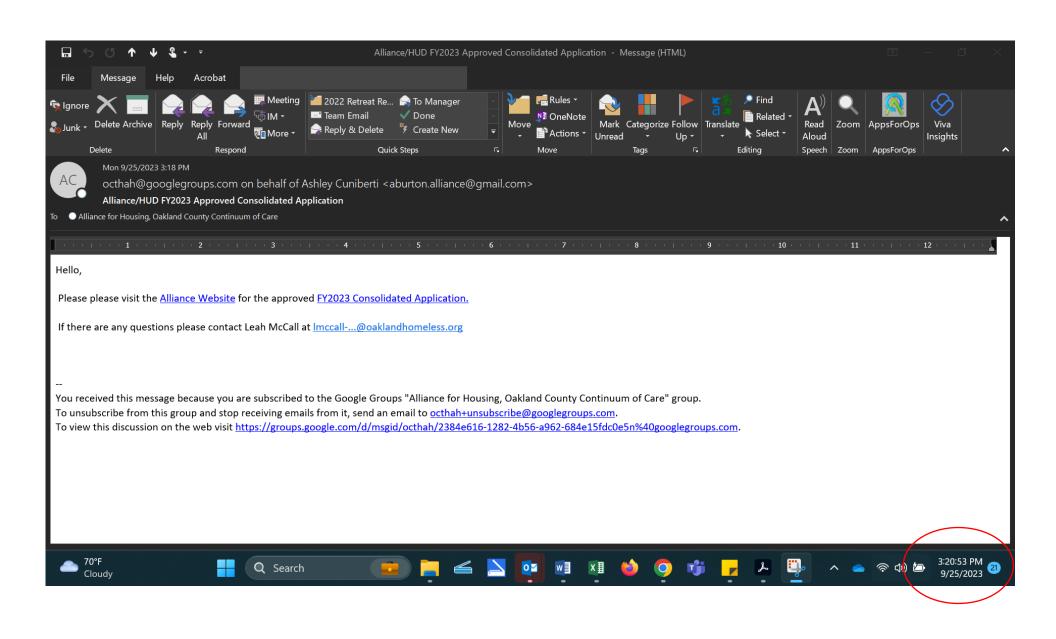
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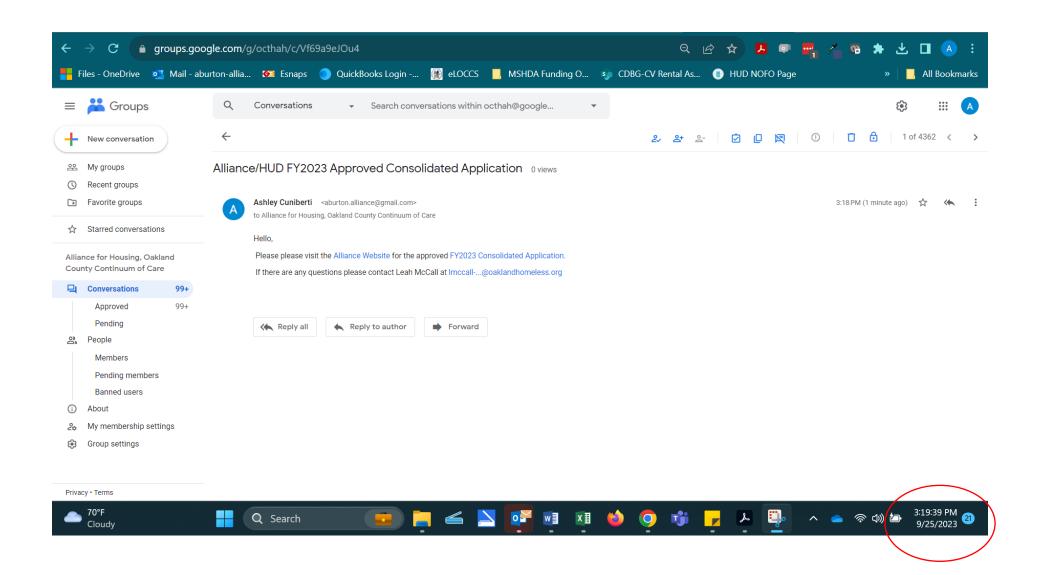
To view this discussion on the web visit <a href="https://groups.google.com/d/msgid/octhah/517f196f-51dc-4700-b3a3-81d196fd14c3n%40googlegroups.com">https://groups.google.com/d/msgid/octhah/517f196f-51dc-4700-b3a3-81d196fd14c3n%40googlegroups.com</a>.

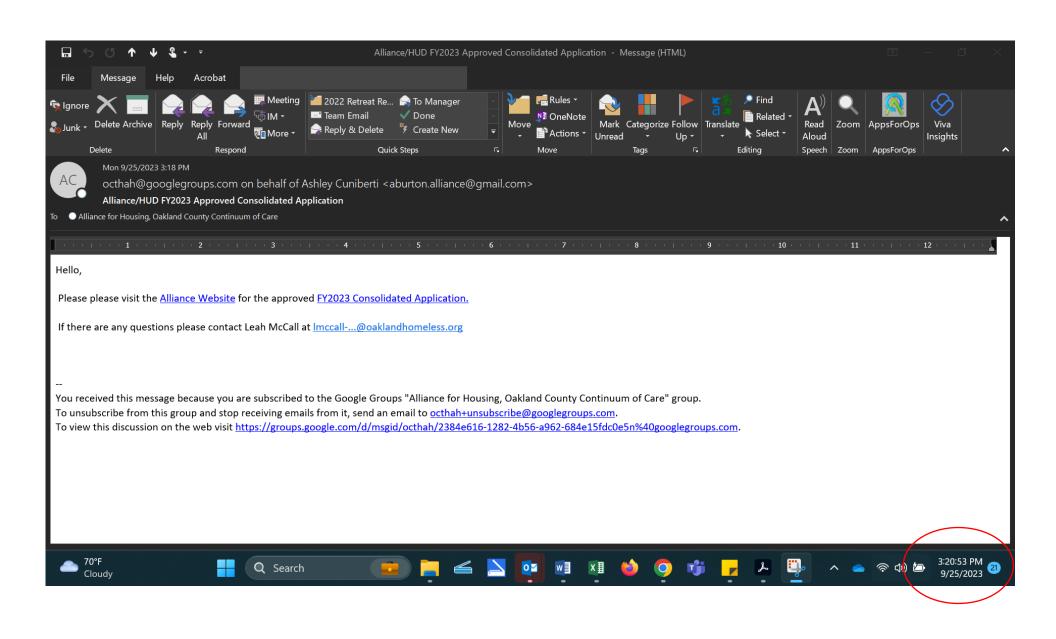
			HUD F	Y2023						
Rank	Applicant Name	Project Name	Project Type	Grant number	Accepted or Rejected	Available points: 172		Amount Requested	Amount Funded	
TIER 1										
1	Alliance for Housing	OCHMIS FY22	HMIS	MI0128L5F042215	Accepted		\$	92,825.00	\$ 92,825.00	
2	South Oakland Shelter	CLAP2	PSH	MI0395L5F042210	Accepted	153/172	\$	205,715.00	\$ 205,715.00	
3	Community Housing Network, Inc.	ORRH1	RRH	MI0431L5F042209	Accepted	151/172	\$	93,997.00	\$ 93,997.00	
4	South Oakland Shelter	LH Teen	TH	MI0124L5F042215	Accepted	145/172	\$	144,243.00	\$ 144,243.00	
5	South Oakland Shelter	DV RRH	Joint TH and PH-RRH	MI0710D5F042201	Accepted	143/172	\$	330,007.00	\$ 330,007.00	
6	Lighthouse	GAP	TH	MI0115L5F042215	Accepted	141/172	\$	242,752.00	\$ 242,752.00	
7	South Oakland Shelter	CLAP1	PSH	MI0372L5F042211	Accepted	139/172	\$	417,880.00	\$ 417,880.00	
8	South Oakland Shelter	RRH	RRH	MI0503L5F042207	Accepted	137/172	\$	156,741.00	\$ 156,741.00	
9	South Oakland Shelter	LOC-CLAP	PSH	MI0331L5F042213	Accepted	135/172	\$	123,992.00	\$ 123,992.00	
10	Community Housing Network, Inc.	OLAPCG	PSH	MI0122L5F042215	Accepted	127/172	\$	943,103.00	\$ 943,103.00	
11	Community Housing Network, Inc.	OLAP2	PSH	MI0129L5F042215	Accepted	125/172	\$ 1	1,136,328.00	\$ 1,136,328.00	
12	Michigan Department of Health and Human Services	PSH Oakland Renewal FY22	PSH	MI0135L5F042215	Accepted	122.5/172	\$	821,523.00	\$ 821,523.00	
	Training and Treatment Innovations, Inc	HLA	PSH	MI0118L5F042215	Accepted	119/172	\$	637,320.00	\$ 637,320.00	
14	Community Housing Network, Inc.	OCHLAP5	PSH	MI0445L5F042208	Accepted	106/172	\$	124,311.00	\$ 124,311.00	
15	Community Housing Network, Inc.	OCHLAP2	PSH	MI0127L5F042215	Accepted	102/172	\$	329,220.00	\$ 329,220.00	
16	Community Housing Network, Inc.	OCHLAP1	PSH	MI0126L5F042215	Accepted	97/172	\$	322,362.00	\$ 322,362.00	
17*	Community Housing Network, Inc.	ORRH2	RRH	MI0501L5F042207	Accepted	135/172	\$	566,927.00	\$ 320,418.00	
	, 5							-	TIER 1 TOTAL	\$ 6,442,737
IER 2										
17*	Community Housing Network, Inc.	ORRH2	RRH	MI0501L5F042207	Accepted	135/172	\$	566,927.00	\$ 246,509.00	
	South Oakland Shelter	Apt & Housing (Scattered Site)	TH	MI0133L5F042215	Accepted	107/172	\$	238,428.00	\$ 238,428.00	
									TIER 2 TOTAL	\$ 484,937
ONUS										
19	Alliance for Housing SSO CE Bonus		SSO CE		Accepted		\$	60,000.00	\$ 60,000.00	
20	LH PSH Bonus		PSH		Accepted		\$	424,937.00	\$ 424,937.00	
	CHN PSH Expansion Bonus		PSH		Rejected		\$	424,937.00	\$0.00	
					-				COC BONUS TOTAL	\$ 484,937
21	CHN DV RRH bonus		RRH				\$	609,127.00	\$ 609,127.00	
	LH DV RRH Expansion Bonus		RRH		Rejected		\$	609,127.00	\$0	
									DV BONUS TOTAL	\$ 609,127
OT RANK	KED									
	CoC Planning Grant								\$ 346,384.00	
Pro	ject ranked #17 (Community Housing Netw	ork, Inc., Oakland Rapid-ReHousing Pro	gram 2 Renewal) straddles th	ne two tiers, but is one	project. For purp	oses of				
llustratin	g the tier breaksown, it is listed in each tier	with its respective tier amount. However	er, it will be one project whe	n submitted to HUD, w	hich is why you s	ee #17 listed t			TOTAL FUNDS REQUESTED	\$ 8,368,122
		wice.								

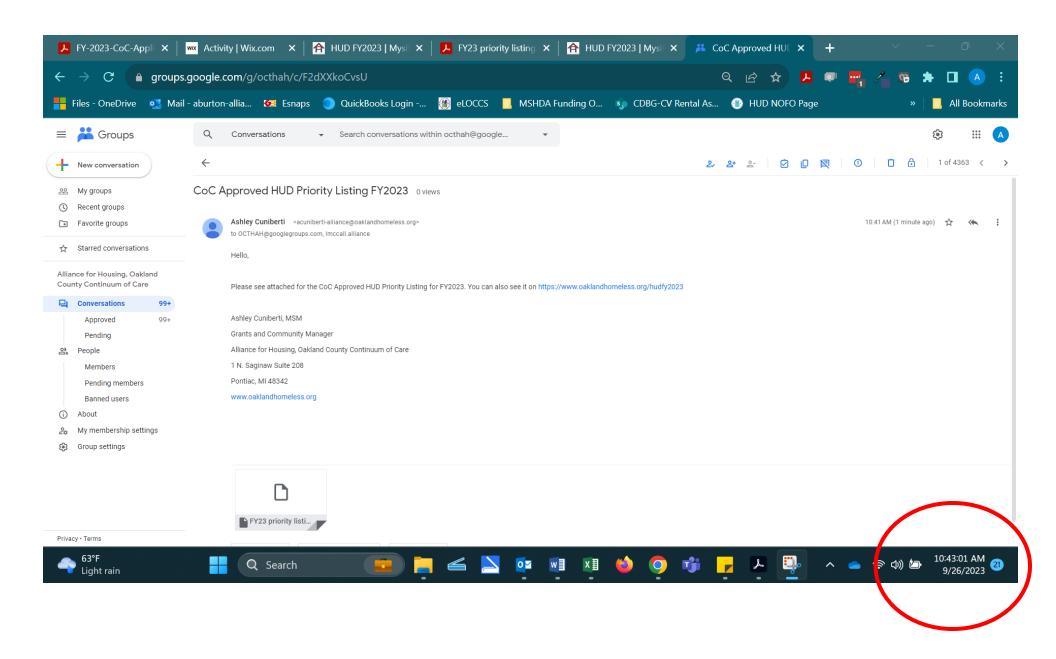












From: Ashley Cuniberti

To: "OCTHAH@googlegroups.com"

Cc: <u>Leah McCall</u>

Subject: CoC Approved HUD Priority Listing FY2023

Date: Tuesday, September 26, 2023 10:41:00 AM

**Attachments:** <u>FY23 priority listing.pdf</u>

Hello,

Please see attached for the CoC Approved HUD Priority Listing for FY2023. You can also see it on <a href="https://www.oaklandhomeless.org/hudfy2023">https://www.oaklandhomeless.org/hudfy2023</a>

Ashley Cuniberti, MSM
Grants and Community Manager
Alliance for Housing, Oakland County Continuum of Care
1 N. Saginaw Suite 208
Pontiac, MI 48342
www.oaklandhomeless.org

## PIT Count Data for MI-504 - Pontiac, Royal Oak/Oakland County CoC

#### **Total Population PIT Count Data**

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	459	457	320	386
Emergency Shelter Total	221	246	226	251
Safe Haven Total	0	0	0	0
Transitional Housing Total	114	87	62	91
Total Sheltered Count	335	333	288	342
Total Unsheltered Count	124	124	32	44

#### **Chronically Homeless PIT Counts**

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	61	56	31	51
Sheltered Count of Chronically Homeless Persons	38	33	23	43
Unsheltered Count of Chronically Homeless Persons	23	23	8	8

### PIT Count Data for MI-504 - Pontiac, Royal Oak/Oakland County CoC

#### **Homeless Households with Children PIT Counts**

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	47	60	43	58
Sheltered Count of Homeless Households with Children	43	56	43	56
Unsheltered Count of Homeless Households with Children	4	4	0	2

#### **Homeless Veteran PIT Counts**

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	9	10	15	9	6
Sheltered Count of Homeless Veterans	9	8	13	6	6
Unsheltered Count of Homeless Veterans	0	2	2	3	0

<sup>\*</sup>For CoCs that did not conduct an unsheltered count in 2021, 2020 data were used.

## HIC Data for MI-504 - Pontiac, Royal Oak/Oakland County CoC

HMIS Bed Coverage Rates

Rates								Total Current,	
Project Type	Total Year- Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year- Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year- Round Beds	Total Year- Round, Current VSP Beds in an HMIS Comparable Database	Total Year- Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	248	140	196	71.43%	52	52	100.00%	192	77.42%
SH Beds	0	0	0	NA	0	0	NA	0	NA
TH Beds	96	82	96	85.42%	0	0	NA	82	85.42%
RRH Beds	181	181	181	100.00%	0	0	NA	181	100.00%
PSH Beds	625	544	625	87.04%	0	0	NA	544	87.04%
OPH Beds	312	217	312	69.55%	0	0	NA	217	69.55%
Total Beds	1,462	1,164	1,410	82.55%	52	52	100.00%	1,216	83.17%

HIC Data for MI-504 - Pontiac, Royal Oak/Oakland County CoC

#### HIC Data for MI-504 - Pontiac, Royal Oak/Oakland County CoC

#### Notes

In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds").

In the HIC, Current beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").

## **PSH Beds Dedicated to Persons Experiencing Chronic Homelessness**

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	272	357	215	160

## Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	58	32	26	38

#### **Rapid Rehousing Beds Dedicated to All Persons**

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	254	147	126	181

<sup>\*</sup>For OPH Beds, this does NOT include any beds that are Current, Non-VSP, Non-HMIS, and EHV-funded.

<sup>\*\*</sup>For OPH Beds, this does NOT include any beds that are Current, VSP, Non-HMIS, and EHV-funded.

HIC Data for MI-504 - Pontiac, Royal Oak/Oakland County CoC

### FY2022 - Performance Measurement Module (Sys PM)

#### Summary Report for MI-504 - Pontiac, Royal Oak/Oakland County CoC

#### **Measure 1: Length of Time Persons Remain Homeless**

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.

Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

	_	Universe (Persons)				verage LOT Homeless (bed nights)			n LOT Hon bed nights	
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference		
1.1 Persons in ES and SH	941	912	82	81	-1	56	65	9		
1.2 Persons in ES, SH, and TH	1062	1006	131	122	-9	73	78	5		

b. Due to changes in DS Element 3.17, metrics for measure (b) will not be reported in 2016.

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer to the client's entry date effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

## FY2022 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference	
1.1 Persons in ES, SH, and PH (prior to "housing move in")	1184	1248	242	277	35	134	156	22	
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	1366	1340	247	279	32	159	168	9	

### **FY2022** - Performance Measurement Module (Sys PM)

## Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons who Exited to a Permanent Housing	Returns to Homelessness in Less than 6 Months				Returns to Homelessness from 13 to 24 Months			of Returns Years
	Destination (2 Years Prior)	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	36	4	11%	3	8%	3	8%	10	28%
Exit was from ES	380	45	12%	16	4%	10	3%	71	19%
Exit was from TH	66	7	11%	0	0%	0	0%	7	11%
Exit was from SH	0	0		0		0		0	
Exit was from PH	406	25	6%	6	1%	8	2%	39	10%
TOTAL Returns to Homelessness	888	81	9%	25	3%	21	2%	127	14%

#### **Measure 3: Number of Homeless Persons**

Metric 3.1 – Change in PIT Counts

## FY2022 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons		320	
Emergency Shelter Total	246	226	-20
Safe Haven Total	0	0	0
Transitional Housing Total	87	62	-25
Total Sheltered Count	333	288	-45
Unsheltered Count		32	

#### Metric 3.2 - Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

	Submitted FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	1114	1043	-71
Emergency Shelter Total	993	935	-58
Safe Haven Total	0	0	0
Transitional Housing Total	138	127	-11

### **FY2022** - Performance Measurement Module (Sys PM)

## Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	358	350	-8
Number of adults with increased earned income	20	18	-2
Percentage of adults who increased earned income	6%	5%	-1%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	358	350	-8
Number of adults with increased non-employment cash income	108	81	-27
Percentage of adults who increased non-employment cash income	30%	23%	-7%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	358	350	-8
Number of adults with increased total income	119	98	-21
Percentage of adults who increased total income	33%	28%	-5%

## FY2022 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	226	259	33
Number of adults who exited with increased earned income	21	21	0
Percentage of adults who increased earned income	9%	8%	-1%

Metric 4.5 – Change in non-employment cash income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	226	259	33
Number of adults who exited with increased non-employment cash income	51	39	-12
Percentage of adults who increased non-employment cash income	23%	15%	-8%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	226	259	33
Number of adults who exited with increased total income	68	58	-10
Percentage of adults who increased total income	30%	22%	-8%

## FY2022 - Performance Measurement Module (Sys PM)

#### Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	921	841	-80
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	188	132	-56
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	733	709	-24

#### Metric 5.2 - Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1181	1180	-1
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	256	215	-41
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	925	965	40

#### **FY2022** - Performance Measurement Module (Sys PM)

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in FY2022 (Oct 1, 2021 - Sept 30, 2022) reporting period.

# Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	109	128	19
Of persons above, those who exited to temporary & some institutional destinations	26	23	-3
Of the persons above, those who exited to permanent housing destinations	53	47	-6
% Successful exits	72%	55%	-17%

Metric 7b.1 – Change in exits to permanent housing destinations

## FY2022 - Performance Measurement Module (Sys PM)

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	1023	937	-86
Of the persons above, those who exited to permanent housing destinations	641	540	-101
% Successful exits	63%	58%	-5%

#### Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	588	594	6
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	580	582	2
% Successful exits/retention	99%	98%	-1%

## FY2022 - SysPM Data Quality

## MI-504 - Pontiac, Royal Oak/Oakland County CoC

	All ES, SH			All TH			All PSH, OPH			All RRH			All Street Outreach		
	Submitted FY2020	Submitted FY2021	FY2022												
1. Number of non- DV Beds on HIC	115	119	129	115	87	97	710	862	879	254	147	126			
2. Number of HMIS Beds	115	95	109	115	87	97	637	741	766	254	147	126			
3. HMIS Participation Rate from HIC ( % )	100.00	79.83	84.50	100.00	100.00	100.00	89.72	85.96	87.14	100.00	100.00	100.00			
4. Unduplicated Persons Served (HMIS)	935	1060	934	125	139	88	905	871	896	604	511	761	100	117	143
5. Total Leavers (HMIS)	760	901	794	59	73	44	106	103	131	458	368	551	70	117	136
6. Destination of Don't Know, Refused, or Missing (HMIS)	83	51	37	8	0	2	3	10	9	32	1	22	3	0	0
7. Destination Error Rate (%)	10.92	5.66	4.66	13.56	0.00	4.55	2.83	9.71	6.87	6.99	0.27	3.99	4.29	0.00	0.00

## FY2022 - SysPM Data Quality

## Submission and Count Dates for MI-504 - Pontiac, Royal Oak/Oakland County CoC

#### **Date of PIT Count**

	Date	Received HUD Waiver
Date CoC Conducted 2023 PIT Count	1/30/2023	

### Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/20/2023	Yes
2023 HIC Count Submittal Date	4/20/2023	Yes
2022 System PM Submittal Date	2/23/2023	Yes



Alliance for Housing 1 N Saginaw Street Pontiac, MI 48342

Dear Leah McCall,

Community Housing Network is committed to serving 8 households to program participants of the Oakland Rapid ReHousing DV Project (Project #213818) submitted by Community Housing Network as part of the HUD CoC FY2023 Grant Program. These units are funded through the provision Low Income Housing Tax Credit (LIHTC) units with rental subsidy through project-based Housing Choice Vouchers from the Michigan State Housing Development Authority (statewide PHA) in Oakland County. These units are expected to be available March 2025. It is expected that the Oakland Rapid ReHousing DV Project will serve 30 households, thus committing 8 households will meet the 25% of households' threshold for the project. This project application has been chosen to be submitted to the Alliance for Housing, the local Collaborative Applicant in the Oakland County CoC Consolidated Application.

Thank you,

Justin Ellistt 9/21/2023

Kirsten Elliott Chief Operating Officer, Vice President



