

Before Starting the CoC Application

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

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

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

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

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2023 CoC Program Competition on behalf of your CoC.

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

Answering Multi-Part Narrative Questions

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

Attachments

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

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

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

1A. Continuum of Care (CoC) Identification

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

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

1A-1. CoC Name and Number: FL-508 - Gainesville/Alachua, Putnam Counties CoC

1A-2. Collaborative Applicant Name: United Way of North Central Florida

1A-3. CoC Designation: CA

1A-4. HMIS Lead: United Way of North Central Florida

1B. Coordination and Engagement–Inclusive Structure and Participation

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

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

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

16.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
17.	Organizations led by and serving LGBTQ+ persons	Yes	No	No
18.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	No	No
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	Yes	Yes
24.	Substance Abuse Service Organizations	Yes	Yes	Yes
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	No
26.	Victim Service Providers	Yes	Yes	No
27.	Domestic Violence Advocates	Yes	Yes	No
28.	Other Victim Service Organizations	Yes	Yes	No
29.	State Domestic Violence Coalition	Yes	Yes	No
30.	State Sexual Assault Coalition	No	No	No
31.	Youth Advocates	Yes	No	No
32.	Youth Homeless Organizations	Yes	No	No
33.	Youth Service Providers	Yes	No	No
	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).	

(limit 2,500 characters)

1. The CoC invitation process occurs throughout the year. New members may join at any time via website or email. New members are actively solicited by existing members and staff at CoC meetings, trainings, and events. CoC staff attend several community and networking events throughout the year and provide brochures, collect contact information, and encourage attendees to join the CoC. Requests for new members are also sent out on the CoC listserv to over 200 individuals and organizations. The CoC website and social media market the benefits of being a member and provide membership information all year.

2. CoC general meetings are held hybrid and are accessible to all persons. The CoC utilizes Zoom which offers closed captions and transcription. All membership forms and information are provided in electronic format and can be made available in other formats as requested by an individual.

3. The Lead Agency staff works to actively recruit organizations focused on addressing disparities in our system including disability rights organizations, LGBTQ+ organizations and advocates, faith-based organizations serving primarily BIPOC communities, organizations aimed at assisting previously incarcerated individuals, and organizations focused on the rights of immigrants. Current agencies involved in the provision of services are actively engaging these vulnerable and priority subpopulations including the DV Centers, Homeless shelters, and outreach programs.

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

(limit 2,500 characters)

1. The CoC solicits and considers opinions from a broad array of organizations and individuals through monthly board and subcommittee meetings, and bi-monthly general membership meetings involving stakeholders that are open to the public. CoC staff and members further solicit input from organizations and individuals unable to attend meetings through direct outreach. CoC staff, board members and general membership participate in community meetings, discussions, and workshops pertaining to housing, homelessness, and related issues. CoC staff and participants report back to General and Board members regarding issues discussed, action taken, and/or strategic partnerships developed. The CoC attends/holds events throughout the year in partnership with local organizations and advocates, inviting public involvement. The CoC conducts an annual Point-in-Time (PIT) Count during which the CoC engages individuals with lived experience, service providers, advocates, and community volunteers to determine means by which the CoC can better provide services to the community.

2. The CoC solicits public information through the above-described processes. The CoC also shares this same information – including notice of all CoC events - through a CoC listserv, social media, & CoC website. An example is the Lead Agency CEO attending a behavioral health forum in one of the CoC's rural counties to provide information and through that meeting was able to secure a county commissioner to serve on the CoC board.

3. CoC information is provided in electronic format and can be made available in other formats as requested by an individual. The CoC works with disability advocates providing further access to information necessary to CoC engagement.

4. The CoC regularly incorporates the feedback received during public meetings into its short-term and long-term strategic planning process. Feedback from individuals and organizations help shape processes including disaster preparedness, outreach strategies, emergency shelter protocols, and coordinated entry. CoC committee meetings involve frontline staff who receive input from participants and communicate the feedback to committees tasked with updating strategies. CoC staff regularly convey information gathered in public meetings to membership and committees to increase engagement, raise awareness and strengthen the homeless response system.

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

(limit 2,500 characters)

1. The CoC will work with all new applicants to ensure knowledge and understanding of Federal, State, and CoC guidelines/standards through meetings, and workshops. The CoC created a NOFO announcement that was shared publicly on the CoC website and social media, as well as through the CoC listserv to over 200 providers and advocates announcing the funding opportunity. An announcement was made at the CoC General and Board Meetings directing interested parties to the CoC website. Emails were sent to individual members and board members requesting solicitation from currently funded, previously funded, and orgs not previously funded. Direct contact from current or previously non-funded org was made by phone and email to ensure awareness of the funding opportunity.

2. The NOFO announcement contained detailed instructions on how to apply and specific deadlines for application. Applicants attended a mandatory workshop where the process and timeline were further detailed. All applications were due to the CoC by August 28, 2023. Reminders were sent out to all applicants following the workshop. Applications were delivered digitally to benefit applicants in outlying counties. CoC staff coordinated regularly with potential applicants via phone and email to confirm clear understanding of the application process.

3. This year, the CoC consolidated the application process to the benefit of applicants and the scoring tool was provided in advance. Further guidance was provided by CoC staff via phone and email. Applicants were informed their applications would be provided to a Rank and Review (R&R) committee and that they would have an opportunity to present to the committee, a new process for this year. Once the R&R committee finalized scores, the scores and priority listing were approved by the CoC board. Applicants were informed of their acceptance/rejection and priority ranking via email. Accepted applicants were then advised to complete applications in eSnaps.

4. All forms, materials and information are provided in accessible electronic pdf format and can be made available in any format requested by an individual or organization. All meetings were conducted virtually. The CoC works with disability advocates providing further access to information necessary to CoC membership.

1C. Coordination and Engagement

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

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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)	Nonexistent
9.	Housing Opportunities for Persons with AIDS (HOPWA)	No
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)	

18.		
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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. The CoC receives ESG & ESG-CV funding as a sub-recipient from the State of Florida Department of Children & Families. The CoC administers and monitors ESG & ESG-CV funding for 5-counties: Alachua, Bradford, Gilchrist, Levy & Putnam. The CoC consults with subrecipients to develop regional ESG & ESG-CV standards. The CoC develops and oversees the local competition through an RFP process to determine awards to sub-recipients. All subrecipients of ESG & ESG-CV funding are required to be active participants in the CoC, including attendance at both general membership and subcommittee meetings. The CoC director and board review ESG & ESG-CV spending reports and performance at monthly board meetings. If changes to funding allocations are necessary, ESG sub-recipients work collaboratively to implement changes. The CoC further collaborates with staff in each jurisdiction to leverage ESG & ESG-CV funding and evaluate and assess the effectiveness of ESG activities.

2. The CoC performs annual program monitoring and evaluation of ESG subrecipients to review fiscal and programmatic compliance. Sub-recipients are provided monitoring reports and feedback to correct any deficiencies and a corrective action plan when appropriate. In addition, the CoC director provides the Board with monthly reviews of ESG sub-recipient's spending to regularly track for fiscal compliance. Technical assistance and trainings are provided to focus on program requirements and updates, if necessary.

3. PIT count and HIC data are provided to the City of Gainesville, the only consolidated plan jurisdiction in our area via email and/or presentations at CoC meetings.

4. The City of Gainesville, as a consolidated plan jurisdiction, engages with the CoC and ESG sub-recipients regarding the Consolidated Plan. The City of Gainesville is represented on the CoC board and the City of Gainesville's Neighborhood Planning Coordinator is an active member of the CoC and facilitates coordination with the CoC and ESG sub-recipients. The CoC regularly provides updated information on PIT, HIC, and any needs assessments.

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

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

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	No
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	No
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	No
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	No
2.	State Education Agency (SEA)	No
3.	Local Education Agency (LEA)	No
4.	School Districts	Yes

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

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

(limit 2,500 characters)

The CoC does not have a current, formal MOU with any of the school districts although we have had them in prior years. Specific providers (DV Center) have active MOUs and utilize the McKinney-Vento process for residents of emergency shelter and supportive housing, and to continue school placements as they move into RRH placements. The primary contact for youth education providers is McKinney-Vento Homeless Liaisons (HLs). HLs are encouraged to access HMIS, which would help with data collection and performance, however it is not mandatory. Families and youth that are identified by HLs and are in need of housing are referred for services to either the Coordinated Entry System (CES) or family providers for emergency shelter, transitional housing, youth maternity transitional housing, permanent housing, case management, mental and medical services, education resources, etc. In addition, the CoC provided housing subsidies, client services, and financial assistance for 26 households through the HOME-TBRA program in Alachua County through a grant provided by Florida Housing Finance Corporation and in partnership with Alachua County, St. Francis House (a family emergency shelter), and Alachua County McKinney-Vento HL.

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

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

(limit 2,500 characters)

The CoC has adopted policies and procedures requiring all sub-recipients ensure participants are informed of their eligibility for educational services under Subtitle VII-B of the McKinney-Vento Homelessness Assistance Act and the Every Student Succeeds Act. These policies and procedures include: 1) immediately enrolling children in school, 2) children remain in their school of origin (when in the child’s best interest), 3) assistance with access to transportation, and 4) access to in-school support programs necessary for academic success.

The CoC monitors sub-recipients at least annually to confirm implementation of the above-described policies & procedures and that each agency has designated a staff person to be responsible for ensuring that children who were served in the program were enrolled in school and connected to appropriate services in the community, including: 1) early childhood programs such as Head Start, part C of the Individuals with Disabilities Education Act, and programs authorized under subtitle B of the McKinney-Vento Act. 2) the sub-recipient takes the educational needs of children into consideration when families are placed in housing and, to the maximum extent practicable, places families with children as close as possible to their school of origin so as not to disrupt such children’s education 3) When working with homeless families and youth, reinforce the importance of education and regular school attendance.

The CoC coordinates with the McKinney-Vento Homeless Liaisons (HLs) in each county served by the CoC to provide training and assistance with updates to CoC policies and procedures. Additionally, the COC reviews data on the homeless children, youths, and families served to identify needs and barriers and to strategize ways the CoC’s and the school districts can meet these needs and overcome any barriers.

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

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

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

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

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

	Organizations	
1.	state domestic violence coalitions	Yes
2.	state sexual assault coalitions	No
3.	other organizations that help this population	Yes

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

Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:

1.	update CoC-wide policies; and
2.	ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors.

(limit 2,500 characters)

1. The CoC has updated its policies to reflect the collaborative efforts to benefit survivors and their housing needs. These include agencies actively participating in Housing and Coordinated Entry subcommittees, making referrals to local partners in the CoC when safety needs arise, and creating networks for services and resources to meet survivors needs. The CoC has partnered to ensure that Domestic Shelters are utilizing best practices to guarantee the safety of clients and creating networks for services and resources that Survivors need. Monitoring by the CoC takes place annually. In these annual monitoring, agencies receive recommendations to align policies and procedures to ensure that agencies are in compliance with state, local, and federal laws and regulations.

2. In addition, training is a significant component offered by the CoC regarding trauma-informed services and the needs of survivors. With these trainings, advocates can build relationships with community organizations that provide housing, economic resources, and/or financial assistance to survivors. The goal is to ensure that all survivors have access to adequate and appropriate services and to help survivors obtain safe housing. For example, agencies discuss their intake processes and how they determine eligibility for services. Assessment tools such as the lethality assessment and basic needs assessment are used at intake to determine the safest relocation options to meet the survivor’s situation. Once a need(s) is identified then agencies can also identify any gaps in services and work together to eliminate gaps and enhance services. These partnerships help with addressing the barriers in finding housing. These partnerships lead to MOUs and the creation of referral protocols. The agency would also determine the type of housing option that would benefit the survivor whether it is Emergency Shelter, Transitional Housing, or Rapid Rehousing once income has been established. This includes providing survivors who have limited English access to interpreters, translation services, and materials in their native language. All services are non-discriminatory and culturally responsive.

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

(limit 2,500 characters)

1. The CoC partnered with Peaceful Paths to create comprehensive training following DCF curriculum. The learning outcome for this training is for CoC members to address 3 fundamental components of housing survivors: Safety and its impact in the housing first model; confidentiality and how it impacts survivor access and resource sharing; and the empowerment-based philosophy of DV services. Additionally, this training addresses trauma-informed, victim centered practices regarding safety and planning protocols in the service of DV and SV survivors. This training is to ensure advocates can conduct interviews, safety planning, and provide ongoing case management. It is done annually and made available to partners for use inhouse with new staff. To ensure staff is responsive to the needs of survivors, DV providers mandate training upon hire and throughout the year to assist advocates with recognizing the signs and symptoms of trauma to determine type of support needed. By getting to the core of the trauma, providers can help the survivors eliminate barriers to obtain safe and stable housing. Housing Team Advocate also attends trainings provided by HUD and the CoC related to Fair Housing and poverty, financial literacy, funding sources, and more.

2. Above-mentioned training also addresses the unique needs that survivors bring in implementing a Coordinated Entry Model. In collaboration with the CoC, DV providers have developed a comprehensive housing prioritization process using a coordinated entry model. This model looks at Housing, Basic Needs, and Lethality Assessment conducted with each Residential and Outreach Client. Survivors seeking RRH are then staffed weekly with advocates from Shelter, Supportive Housing, and Outreach programs. Individuals and families are then prioritized for RRH. For all housing clients, safety is first priority and we work to ensure that as they move from shelter or other unstable situations, their long-term safety is considered. DV providers provide service for Deaf and Hard of Hearing clients, Conflict Resolution and De-escalation training, and HIPPA training. All staff must read all program policies and handbooks upon hire, annually, and/or if any changes are made. These policies include but are not limited to Program Policies, Accessibilities and Accommodations Plan, LEP Plan, and Employee handbook to ensure that everyone is aware of how to uphold and support the agency’s survivor-focused, empowerment-based philosophy.

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

(limit 2,500 characters)

1. Domestic Violence providers have developed a comprehensive housing prioritization process that uses a coordinated entry model internally. This model looks at the Housing Assessment, Basic Needs Assessment, and Lethality Assessment that are conducted with each Residential and Outreach Client. All CoC partners have access to the DV specific intake assessments and safety planning/lethality assessment questions that can be asked in addition to the VISPDAT. This allows the safety concerns to be identified and addressed with referrals to the Centers. The housing options may be limited by the safety needs, and this allows for better CE practices internally and to any survivors referred into the CoC system.

2. Additionally, the CoC requires all DV members and staff to engage in technology safety training and HIPAA training. This provides them with the knowledge of the importance of protecting survivors' information they may be privy to. All files should have multiple levels of security to keep them protected. For example, files may be kept in a locked filing cabinet inside of locked offices that only advocates that are involved with the case have access to. All advocates are provided separate logins to the Osnium database in which passwords are not to be shared with anyone as well as separate computer logins. This allows the survivor's information to remain safe from view of outside sources.

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

(limit 2,500 characters)

1. All DV centers in the state of Florida utilize the Osnium database. This database allows centers to keep participant info confidential and individually tracks all victim services that outline advocacy, counseling, case management, and financial assistance that are provided. Osnium also allows advocates to complete lethality assessments and basic needs assessments to determine the safest options to meet the survivor's situation. With the survivor's approval, general information is entered such as the name, birthdate, history of domestic violence or homelessness. DV providers are also able to enter in case management information that can be used to help explore housing options. For example, income sources and disability can be utilized to determine if the survivor qualifies for income-based housing and/or if they are eligible for preference in housing due to disability.

2. Additionally, the database creates a HUD compatible HMIS stay that collects all data elements required by HUD, and provides comprehensive APR, CAPERS, and CE reporting. The DV Centers can provide aggregate data to the CoC on a variety of aspects of housing services, including all demographic data, nights of housing, length of stay, leaver statistics, and case management activities. Centers can provide these comprehensive numbers to the CoC and support all the CoC reporting.

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. Currently, the CoC does not have written CoC-wide policies and procedures that include an emergency transfer plan. We have created and shared a Landlord Agreement form with agencies to include VAWA protections securing the landlord's agreement to abide by those protections and abide by the respective agency's Emergency Transfer Plan. DV providers utilize the emergency Relocation Program through the Attorney General's Office to move survivors when here is a critical safety issue as a major component of the transfer process locally.

2. Individuals and families who wish to request an emergency transfer are immediately connected with DV specific services through partner agencies. DV staff will advocate on the participant's behalf to transfer and advise to provide a written statement expressing that the participant reasonably believes that there is a threat of imminent harm from further violence if the participant continued to live in the same place. Advocates also offer emergency shelter as an option until the transfer can be completed.

3. In response to individuals' and families' emergency transfer requests, the CoC uses 24-hour helpline and text lines for survivors where they can access certified trauma informed advocates through the hotline in their area from the agency they initially enter services with. This allows survivors to complete safety planning, lethality assessment, screen for emergency shelter, and receive referrals for specialized DV programs that can meet the needs stemming from victimization and homelessness.

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. DV advocates attend community meetings such as the CoC general membership meetings, which help us to understand each agency’s role in helping the survivor; determine funding sources that mutual clients can benefit from, and discuss any intersection of services, barriers, and/or successes. These discussions lead to establishing MOUs and creating referral protocols. In addition, individual DV providers collectively brainstorm county resources or referrals that can be provided to survivors or, agencies that providers could partner with to offer extended services. For example, the DV provider in the CoC’s heaviest populated area utilizes the best practices model of a Coordinated Community Response (CCR) to DV. The CCR is designed to create victim safety, make and receive referrals, predict and prevent IPV homicide, increase collaboration, and inform services.

2. The FL-508 CoC collaborates with three DV shelters, one located in the City of Gainesville which is the most urban area, and two others located in rural counties on either side of Gainesville. Through partnerships with housing, protocols have been created to help survivors overcome barriers that prevent them from receiving housing. For example, if a survivor was a prior tenant and owed a past balance, the housing advocate would work with the survivor and allow them to pay a portion of the balance to get on the waiting list instead of being denied. They would also allow for DV providers to help the survivor with financial assistance and/or help with future payments.

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

(limit 2,500 characters)

1. DV Centers have historically incorporated survivors and formally battered persons in all levels of agency operations. For example Peaceful Paths has two survivors on the Board of Directors, including one male survivor whose former wife was murdered by her new husband, leaving him as a single parent of their two children. His expertise in navigating trauma and the secondary victimization of child survivors has been instrumental in informing many of programs and initiatives the agency has developed over the years, including youth support groups, secondary and family survivor support groups, and donor messaging. Another avenue for ensuring that voices of survivors are included in the project is incorporating staff who have lived experience in Domestic Violence and homelessness. Currently, Peaceful Paths employs 6 persons (15% of the total FT staff) with lived expertise. This includes staff in both outreach and residential services, including the housing team.

2. The DV Centers employ a number of options to survivors in all programs to give feedback and rate their satisfaction with services anonymously or with staff contact for discussion. These include exit interview forms, satisfaction survey links, outcome evaluations, and grievance forms that are available throughout their service journey. These are reviewed by leadership so that feedback is incorporated into policy and program development, used to revise practice, and for our quality assurance process. This level of lived experience to inform services is a requirement and best practice standard for state DV Center Certification.

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

	1. Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination?	No
	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)?	No
	3. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access in Accordance With an Individual's Gender Identity in Community Planning and Development Programs (Gender Identity Final Rule)?	No

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

Describe in the field below:

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

(limit 2,500 characters)

1.The CoC is committed to complying with all non-discrimination and privacy laws. The CoC’s Anti-Discrimination Policies and Procedures adhere to HUD’s Equal Access Rule. These P&P’s are intended to guarantee the safety, dignity, and well-being of all individuals and families served by the CoC. Housing should be made available to all qualified persons, regardless of actual or perceived sexual orientation, gender identity, or marital status, by CoC partner organizations. Agencies shall guarantee that all persons and their families have equitable access to programs; offer housing, services, and/or accommodations based on a client’s gender identity; and establish eligibility without respect to actual or suspected sexual orientation, gender identity, or marital status. CoC Anti-discrimination P&P are reviewed annually and updated if appropriate based on stakeholder feedback.

2.In addition to HUD Equal Access Rule, all agencies must operate in accordance with federal and local nondiscrimination and equal opportunity provisions, as codified in the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act, Titles II and III of the Americans with Disabilities Act, HUD's Equal Access to Housing Rule, and the Gender Identity Final Rule, 24 CFR 5.100, 5.105(a)(2), and 5.106. (b). This involves developing an anti-discrimination policy consistent with CoC anti-discrimination P&P and grievance processes for the agency, as well as disseminating all policies and procedures with clients, staff, volunteers, and contractors.

3.COC evaluation for compliance with anti-discrimination P&P is done annually during CoC monitoring of provider programs and on a case-by-case basis through CoC and/or agency grievance process.

4.The CoC process for addressing noncompliance is detailed in the CoC’s grievance policy. Agencies are required to develop internal grievance policies to include noncompliance with anti-discrimination. The CoC grievance process requires Lead Agency staff review of grievance, a board approved grievance review workgroup followed by board-approved action.

1C-7.	Public Housing Agencies within Your CoC’s Geographic Area–New Admissions–General/Limited Preference–Moving On Strategy.
	NOFO Section V.B.1.g.
	You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.
	Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with—if there is only one PHA in your CoC’s geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Gainesville Housing Authority	32%	Yes-Both	No

Alachua County Housing Authority	42%	Yes-HCV	No
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1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section V.B.1.g.	

Describe in the field below:

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

(limit 2,500 characters)

1. The two largest PHA's in the CoC's geographic region are the Gainesville Housing Authority (GHA) and the Alachua County Housing Authority (ACHA). The CoC benefits from a strong relationship with both PHA's. The Executive Director of ACHA is a member of the CoC board and the Executive Director of GHA is a former board member. Both PHA's recognize the importance of an established homeless preference, and the CoC Leadership Council and staff are actively working to educate these entities on the need for further prioritization of homeless and dedicated moving on strategies. Even though both PHA's don't have dedicated moving on vouchers or units, they both have collaborated with the CoC when vouchers have come available through limited funding opportunities (i.e. Emergency Housing Vouchers) to utilize a small portion of them to move along those who no longer need CoC program funded PSH beds.

The Partners in Housing Initiative was established this past year to assist literally homeless families in obtaining permanent supportive housing through a collaboration between ACHA, Alachua County, and Family Promise of Gainesville. This initiative assists homeless families with a disabled parent with the ability to gain employment and increase income while securing suitable rental housing in Alachua County. All families referred come from the CoC's Coordinated Entry System.

2. The CoC works with the above PHA's serving Alachua County, the most densely populated area of the CoC catchment area for individuals and families in homelessness. The CoC is continuing to build relationships with the outlying county housing authorities for Bradford, Gilchrist, Levy, and Putnam.

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

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

1.	Multifamily assisted housing owners	No
2.	PHA	No
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.	
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In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process:

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	Yes
3.	Housing Choice Voucher (HCV)	No
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	Yes
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	No
8.	Other Units from PHAs:	
	Partners in Housing Initiative	Yes

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness. NOFO Section V.B.1.g.	
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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)?	Yes
		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.	HUD Stability Vouchers

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.	
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	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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1C-7e.1.	List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored—For Information Only	

	Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
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	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.	
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PHA		
Gainesville Housi...		

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

Name of PHA: Gainesville Housing Authority

1D. Coordination and Engagement Cont'd

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

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

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

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

1. Foster Care	No
2. Health Care	No
3. Mental Health Care	No
4. Correctional Facilities	No

1D-2.	Housing First—Lowering Barriers to Entry.	
	NOFO Section V.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	8
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	8
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

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

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

(limit 2,500 characters)

1. The CoC regularly evaluates whether sub-recipients are using a housing first approach. This occurs primarily through monitoring, training, coordinated entry and the CoC local competition ranking process.

2. Sub-recipients are monitored at least annually which includes CoC review of program policies and procedures and discussion on the prioritization of Housing First methodologies such as client stabilization and rapid movement into permanent housing. During monitoring, subrecipients provide program eligibility to determine no additional barriers are required of participants and how staff handle pre-existing participant barriers. Subrecipient practices must show participants are accepted to permanent housing programs regardless of participants sobriety/substance use, participation in services, and/or completion of treatment programs. Further, programs cannot reject applicants on the basis of poor credit or financial history, poor or lack of rental history, minor criminal convictions, or behaviors that indicate a lack of “housing readiness”. The CoC local competition includes ranking and scoring of housing first approach as well as system performance measures pertaining to time to housing placement, positive exits, and returns to homelessness.

3. The CoC’s coordinated entry specialist (CES) manages the CoC BNL and bimonthly case conferencing. CES regularly reviews referrals to ensure rapid placement. CES and Lead Agency staff review system flow to confirm strong referral partnerships exist between the crisis response system (emergency shelter providers, street outreach providers, etc.) and housing providers to expedite housing placements. CoC coordinated entry committee and HMIS committee reviews system performance data related to placement and retention in housing programs. This data can assist in the review of program efficacy, especially during the CoC local competition.

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

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

(limit 2,500 characters)

1. The CoC's street outreach is the product of a public/private partnership with the largest City and County within the CoC's geographic region. Street outreach efforts include: conducting regular visits to encampments, congregate sites, parks, and other places persons experiencing homelessness are known to stay; conducting regular visits to known service sites where unsheltered persons seek assistance, such as soup kitchens, libraries, shelters and health clinics; coordination with other systems, such as law enforcement, hospitals, emergency rooms, jails, mental health services; and participation in CoC Street Outreach sub-committee meetings and unsheltered PIT Survey. The CoC's street outreach efforts are coordinated through the street outreach sub-committee which developed policies and procedures to include a Housing First approach to outreach outcomes including connecting unhoused people to existing resources, with an emphasis on facilitating access to housing through the CES (including diversions, etc.). In addition, the CoC's outreach included a partnership with the University of Florida and Alachua County to provide mobile healthcare to individuals experiencing unsheltered homelessness. UF Mobile outreach clinic goes out 1x week to meet with individuals who don't utilize the mobile outreach clinic bus on location. GRACE outreach identifies most vulnerable and provides location and sets appointment for UF team. Last year, the outreach team added a UF Health psychiatrist 1x/week to provide mental health assessment and treatment for unsheltered individuals who do not otherwise receive mental health assistance.

2. The CoC's Street Outreach does not currently cover 100% of the CoC's geographic area. To address this, we are submitting an SSO-CE expansion project with this year's NOFO to expand street outreach services to the counties of Bradford, Gilchrist, Levy, and Putnam.

3. Street outreach is conducted daily and as needed within the largest City and County served by the CoC. Individuals identified through outreach are entered into the CES and discussed at bi-weekly case conferencing.

4. Through impactful outreach, outreach workers discern who individuals may want to engage with and why, establishing rapport and developing strategies to actively engage individuals who do not wish to engage or struggle to engage with a focus on meeting immediate needs and connecting people to existing resources.

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	No	No
2.	Engaged/educated law enforcement	No	No
3.	Engaged/educated local business leaders	No	No

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

1D-5.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC) or Longitudinal Data from HMIS.	
	NOFO Section V.B.1.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	160	97

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

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

	Mainstream Benefits	CoC Provides Annual Training?
1.	Food Stamps	No
2.	SSI–Supplemental Security Income	No
3.	SSDI–Social Security Disability Insurance	No
4.	TANF–Temporary Assistance for Needy Families	No
5.	Substance Use Disorder Programs	No
6.	Employment Assistance Programs	No
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:

- 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;
- 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
- works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

(limit 2,500 characters)

1. Broadly, the CoC through the Lead Agency, provides up-to-date information on mainstream resources at monthly CoC membership meetings, sharing agency partner information on the CoC listserv and the weekly basic needs chart provided through the Lead Agency contract with 211 to agency partners and on the CoC listserv. More specifically, bi-weekly case conferencing meetings attended by frontline staff, case managers and outreach, discuss updates and access to mainstream benefits for specific participants and assist making referrals to appropriate agency partners.

2. The CoC works collaboratively with multiple healthcare organizations including the largest health care system (UF Health) and the largest mental health and substance abuse treatment provider (Meridian Behavioral Health) in the CoC's geographic region. Partnerships with UF include a mobile outreach clinic available to program participants and individuals experiencing homelessness, partnerships with the outreach team for mobile health outreach teams accompanying street outreach and a UF psychiatrist working 1x/week with street outreach to connect with unsheltered individuals in need of mental health services. Collaboration with Meridian Behavioral Health includes social workers, substance abuse counselors and other case managers engaging with the CoC through outreach and attending bi-weekly case conferencing meetings where participants are discussed and referred, if appropriate.

3. County Social Services staff are SOAR certified and they assist PSH and RRH clients with the SSI/SSDI application process. SOAR certified SSI Disability facilitators provide access to services that include health insurance through partnerships with local shelters, day service providers, and street outreach. SOAR training is provided by agencies to ensure program participants have access to Federal disability income benefit programs.

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)

During the pandemic, City and County government supported and coordinated non-congregate sheltering of homeless residents. This model worked well and can be reactivated as a need is identified. The local DV Center has a comprehensive model for the continuum of housing that includes non-congregate supportive housing that could also be replicated. The CoC will continue working to increase its capacity to provide non-congregate sheltering as part of our commitment to addressing homelessness. Several strategies and initiatives are underway and include efforts to expand partnerships with entities that have available space for non-congregate sheltering and identifying temporary shelter sites in more rural areas. The CoC is working to enhance outreach efforts to continue building trust and increase coverage in more areas within the CoC's boundaries. Increasing community engagement will play a key role in gaining support for non-congregate sheltering solutions.

ID-8.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:	
1.	develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and	
2.	prevent infectious disease outbreaks among people experiencing homelessness.	

(limit 2,500 characters)

1. As a result of the COVID-19 pandemic, the CoC created policies and procedures to prepare and respond to future outbreaks and strengthened its relationships with state and local public health agencies during the pandemic. For instance, the CoC developed P&P’s to highlight the procedures that should be followed when collaborating with local stakeholders to design and execute sanitary rules for homeless encampments that can help avoid the spread of infectious diseases. These P&P’s will help the CoC, local stakeholders and homeless crisis response service providers develop and implement outreach strategies, as well as provide practical information and precautions for street outreach workers to help in maintaining safe environments within encampments to prevent the spread of infectious disease.

2. The CoC will continue to engage with state and local public health agencies, local stakeholders and the homeless crisis response system to respond to infectious disease outbreaks among homeless similar to the CoC’s response to the COVID pandemic. At the beginning of the pandemic, the CoC began meeting bi-weekly over Zoom with service providers, organizations, local governments, and advocates. Discussions focused on how agencies could address immediate safety needs for individuals and families during the pandemic and decrease the spread of COVID in the community. Primarily, issues of access to medical care, PPE, and sanitary supplies were discussed. At the outset, street outreach teams offered medical services and health screenings, and isolation for COVID positives when necessary. The CoC, in partnership with the Florida Department of Emergency Management, provided PPE such as masks and cleaning supplies to agencies and organizations throughout the CoC’s geographic region. The CoC facilitated ongoing discussion within the community to coordinate the availability of supplies and distribute supplies as needed. The CoC worked closely with the County Health Department to stay up-to-date on protocols and guidance. Shelter providers partnered with the Health Dept. to conduct tests and provide non-congregate sheltering to positive individuals, with meals delivered by a local shelter and medical follow-up provided through a partnership with the University of Florida medical outreach team. All shelters operated in accordance with CDC guidance, with some reducing capacity to meet guidelines. These processes will be implemented for future infectious disease outbreaks.

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC:	

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

(limit 2,500 characters)

1. The CoC continues to engage, as needed, with state and local public health agencies, local stakeholders, and the homeless crisis response system to respond to infectious disease outbreaks among the homeless in a manner similar to the CoC’s response during the COVID pandemic. The CoC coordinated meetings with service providers, organizations, local governments, and advocates. Discussions focused on how agencies could address immediate safety needs for individuals and families during the pandemic and decrease the spread of infectious disease in the community. Primarily, issues of access to medical care, PPE, and sanitary supplies were discussed. The United Way of North Central Florida, as the CoC lead agency, connected with local emergency management to share information through the 5-county CoC catchment area. Info sharing occurs through meetings, 211: a 24/7 community resource for referrals to services, CoC listserv, websites, and social media. Not only is information shared through CoC resources, but the Lead Agency leverages their resources as well.

2. Street outreach teams (SOT) are included in meetings between public health agencies and the CoC. SOT will offer medical services and health screenings, and coordinate isolation when necessary. The CoC, in partnership with the Florida Department of Emergency Management, provides PPE such as masks and cleaning supplies to agencies and organizations throughout the CoC’s geographic region. The CoC facilitated ongoing discussions within the community to coordinate the availability of supplies and distribute supplies as needed. The CoC worked closely with County Health Departments to stay up-to-date on protocols and guidance. Shelter providers continue to partner with the Health Dept. to conduct tests and provide non-congregate sheltering to individuals, with meals delivered by a local shelter and medical follow-up provided through a partnership with the University of Florida medical outreach team. All shelters will operate in accordance with CDC guidance, with some reducing capacity to meet guidelines.

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. The Coordinated Entry System (CES) covers all 5 counties in the CoC’s geographic area via 8 regional access points including emergency shelter, one-stop centers, and housing/prevention providers. Additionally, CES can be accessed via 2-1-1, and street outreach teams. The CoC Coordinated Entry Specialist manages a by-name list (BNL) for individuals, veterans and families across all five-counties and referrals are made through a single CES, thus increasing coverage across the entire region.

2. Providers are required to participate in the CES to be considered for ESG or CoC funding. DV Centers utilize a separate comprehensive CE protocol for victim confidentiality and safety. Non-funded providers voluntarily participate in CES to ensure participants have equal access to housing. All participating providers complete intake assessments and enter data into HMIS. The CES utilizes a centralized coordinated assessment tool to assess vulnerability and needs of individuals/families entering the CES in order to prioritize those most in need of assistance. All CES Access Points and contact methods (phone, in-person, etc.) provide the same intake, assessment, and referral process to ensure a uniform decision-making process and rapid placement into housing. Initial steps at strategic diversion are undertaken to prevent homelessness, but if diversion strategies are unsuccessful, clients are added to the by-name-list (BNL). Homeless individuals/families on the BNL with the greatest needs, as determined by CoC community priorities, receive priority for any type of housing and homeless assistance available in the CoC.

3. The CES and assessment tool are reviewed monthly by the Coordinated Entry committee using HMIS and system performance data to reduce burdens for individuals accessing CES. The committee is comprised of service providers, local government, mental health organizations, community members and individuals with LE. The tool is further discussed with frontline staff during bi-weekly case conferencing.

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

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

(limit 2,500 characters)

1.The CoC’s Coordinated Entry System (CES) reaches those least likely to apply for homeless assistance in several ways. First, the CES can be reached by phone or TTY by calling the CoC’s CES specialist directly, or by calling the Lead Agency managed 211 call center. Informational cards explaining how to access the CES are provided at various access points by local providers, advocates, and street outreach. Second, individuals/families identified through outreach are entered into the CES and discussed at bi-weekly case conferencing. Outreach workers actively engage individuals with a focus on meeting immediate needs and connecting people to the CES. Through impactful outreach, outreach workers establish rapport and develop strategies to actively engage individuals who do not wish to engage or struggle to engage with the crisis response system with a focus on meeting immediate needs and connecting people to existing resources. Outreach uses a weekly case conferencing to discern which individuals are most in need of outreach assistance.

2.The CES utilizes a centralized coordinated assessment tool (VI-SPDAT) to assess vulnerability and need of households entering the CES to prioritize those most in need of assistance. All CES Access Points and contact methods (phone, in-person, etc.) provide the same intake, assessment, and referral process. The CES relies on VI-SPDAT score, length of homelessness and case worker observations to determine prioritization. Three separate bi-weekly case conferencing occurs: veteran, families and individuals. Case conferencing model allows for discussion of individual needs/preferences and allows for dynamic eligibility determinations. Those determined most vulnerable are referred to appropriate housing program.

3.Initial steps at strategic diversion are undertaken to prevent homelessness, but if diversion strategies are unsuccessful, clients are added to the by-name list (BNL). Homeless individuals/families on the BNL with the greatest needs, as determined by CoC community priorities, receive priority for any type of housing and homeless assistance available in the CoC.

4.The CES and assessment tool are reviewed monthly by the Coordinated Entry committee using HMIS performance measure data to reduce burdens for individuals accessing CES. The committee is comprised of service providers, local government, mental health organizations, community members and individuals with LE.

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

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

(limit 2,500 characters)

1. The CoC engages street outreach teams to connect with homeless individuals in various settings such as shelters, streets, and encampments. Service providers who are members of the CoC also market housing and other CoC services to clients.

2. The CoC utilizes a "Street Card" which folds into a pocket-sized resource of information on local shelters, free medical care, meals, Veterans services, and pet care. The card also includes a "Know Your Rights: Street Laws" section which provides individuals with local civil rights laws.

3. Any conditions or actions that are found to impede fair housing choice will be documented and reported to the jurisdiction responsible for certifying consistency with the Consolidated Plan. In our CoC catchment area, this jurisdiction is the City of Gainesville.

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.	03/04/2022

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

Describe in the field below:

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

(limit 2,500 characters)

1. CoC used HUD Analysis Tool 2.1 and 3.0, LSA , and current HMIS data to review racial disparities. Racial equity data was reviewed by Data Performance and Coordinated Entry committees, gov board & general CoC meetings. CoC contracted with a business intelligence analyst to deep dive into HMIS data and SPM to further review racial disparities. Racial equity analysis is a monthly presentation in the CES committee and will continue to be further integrated into the CoC system planning process. With current HMIS capacity, CoC can analyze trends based on the CoC APR. The CoC is in the process of comparing data with a more granular approach by filtering project categories and by partnering agencies. This will help to identify trends and pinpoint areas for improvement. Granular reporting will look at the outcome or outflow by race, rather than just inflow. This analysis will be shared with agencies and provided to future rank and review committees to determine racial equity of CoC-funded programs. Beyond data analysis, CoC efforts to understand how racial and ethnic discrepancies play out in the homeless crisis response system include persons with lived experience, members of historically marginalized groups, and frontline staff working directly with individuals experiencing homelessness. Each of these groups are included in system design and assessment through committees and workgroups.

2. The CoC reviewed the HUD Analysis Tool 3.0, which represents the 2021 PIT data, and the CoC Analysis Tool 2.1 version which represents the 2019 PIT data. CoC is seeing a decrease in black or African American experiencing homelessness (42% 2019 v. 39% 2021) while White is starting to increase (52% 2019 v. 54% 2021). HUD’s Analysis tool shows that although black or African American make up just over 22% of the total population, over 40% of black or African American experience homeless in the CoC. Although this disparity exists within the CoC, it aligns with data from the state of Florida. Additional review of LSA data from FY 20-21 shows black or African American have an almost equal length of homelessness (182 days) as White (191 days). Exits to Permanent destinations was slightly lower for black or African American (33%) than White (36%). Returns to homelessness varied based on time. 30% black or African American returned in 6 months v. 27% White; 21% black or African American in 12 months v. 19% white; and 21% black or African American in 12-24 months v. 20% white.

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.	No
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.		

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

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

(limit 2,500 characters)

The CoC has adopted a multi-tiered framework for tracking and addressing racial disparities. 1.) This framework starts with identifying the decision-makers within our homeless response system and ensuring a diversity of experiences is represented. The CoC Leadership Council is the primary decision-maker for our CoC and is comprised of diverse stakeholders including individuals from traditionally under-represented populations and individuals with lived experience. The Coordinated Entry System committee and HMIS committee are comprised of equally diverse stakeholders and frontline staff from service agencies. 2.) Focus on data quality. The CoC HMIS manager provides comprehensive training and technical assistance to HMIS users to guarantee data quality. Reviewing racial disparities requires client-level data to be complete and accurate. 3.) Review of system outcomes such as LOT homeless, returns to homelessness and exits to permanent housing. Review of SPM's help track disparities. 4.) Finally, implementing necessary changes to the homeless response system following robust discussion with diverse stakeholders.

The CoC begun the transition from system-wide analysis to agency and program specific analysis of racial disparities this past year. This analysis will be shared with the agency and will be provided to future rank and review committees to determine racial equity of CoC-funded programs. The Lead Agency implemented a racial equity training for all CoC staff last year and is in the process of implementing an Equity Framework provided by United Way Worldwide. The CoC through its CES committee has begun the process over overhauling the CES policies and procedures to include provisions relating to racial equity. Further, the CES has begun reviewing an alternative to the VISPDAT to avoid the possibility of the assessment perpetuating racial and ethnic disparities. Beyond data analysis, CoC efforts to understand how racial and ethnicity discrepancies play out in the homeless crisis response system include persons with lived experience of homelessness, members of historically marginalized racial and ethnic groups, and frontline staff who work directly with individuals experiencing homelessness. Each of these groups are included in system design and assessment through committees and workgroups.

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

(limit 2,500 characters)

1. Racial equity data presentations are reviewed by Data Performance and Coordinated Entry committees, at CoC board and general member meetings. The CoC continues its deep dive into HMIS data and SPM to further review racial disparities. With current HMIS capacity, CoC can analyze trends based on the CoC APR. The CoC is in the process of comparing data with a more granular approach by filtering project categories and by partnering agencies. This will help to identify trends and pinpoint areas where improvement is needed. The CoC APR only allows for analysis of race by inflow which is why the CoC is looking to develop granular reports that also look at the outcome or outflow by race. This analysis will be shared with agencies and provided to future rank and review committees to determine racial equity of CoC-funded programs. Beyond data analysis, CoC efforts to understand how racial and ethnic discrepancies play out in the homeless crisis response system include persons with lived experience, members of historically marginalized racial and ethnic groups, and frontline staff who work directly with individuals experiencing homelessness. Each of these groups are included in system design and assessment through committees and workgroups. Lead Agency staff took part in a HUD region IV CE community workshop with discussions including equity analysis, as well as numerous equity workshops provided by HUD TA's. Lead Agency staff continues to attend equity workshops for up-to-date guidance on systems changes to eliminate disparities.

2. CoC will continue to track disparities using HUD Analysis Tool 2.1 and 3.0, LSA , and current HMIS data.

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

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

(limit 2,500 characters)

The CoC actively recruits individuals with lived experience (LE) for participation in every phase of the CoC process. Beginning with the CoC Leadership Council, two individuals with LE are appointed to sit on the Council and are active voting members. The CoC prioritizes input from individuals with LE and this year, the CoC launched a Lived Experience Committee chaired by two individuals with LE. The committee meets monthly with one month's meeting serving as a planning session (held via Zoom) and the following month's meeting serving as an open, in-person meeting for anyone with LE to attend as well as case managers. Lead agency staff oversee the coordination and implementation of all meetings. Committee meetings are currently held at the Library Headquarters in downtown Gainesville, a centrally located facility with lunch provided to incentivize attendance by those with LE. The CoC advertises the LE Committee through the distribution of flyers, outreach to homeless service agencies, and electronic communications (email, e-newsletter, social media).

Additionally, the CoC includes individuals with LE in the PIT count through various levels of engagement. The PIT Count committee is the primary planning body and consists of members with LE who provide feedback on PIT planning, survey questions, and overall PIT methodology. The PIT surveys include several questions that allow the CoC to perform a gaps analysis from information provided by currently homeless.

Finally, the CoC rank and review committee includes a member with LE. This member provides valuable insight and experience to the rank and review process.

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

You must enter a value of '0' or more for elements 1 through 4 in both columns in question 1D-11a.

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

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

(limit 2,500 characters)

CoC membership provides varying levels of professional development and employment opportunities to individuals with lived experience of homelessness. For example, Gainesville Opportunity Center (GOC), works with individuals who have mental health conditions which make it difficult for them to secure or even obtain jobs. The GOC operates under a clubhouse model where members work with staff to accomplish important tasks that are vital to the daily operation of the GOC. Work is divided into a Culinary Unit and an Office Unit where members gain professional development. The Culinary Unit plans menus, prepares meals, and maintains the house. The Office Unit participates in activities to keep the business operations running with members participating in record-keeping, marketing, and development. A new Garden Unit was added where members help to grow vegetables in raised flower beds which help to build skills in agriculture. For individuals who secure jobs, the GOC works with them and their employer (if requested) to ensure they have a solid working relationship with GOC staff stepping in to cover a member's shift in times of mental health crisis. The GOC also has monthly Employment Dinners for those who are working or seeking employment, social activities, wellness activities, and confidence building by still helping run the Clubhouse.

The Tri County Community Resource Center (covering 2 rural counties in the CoC) partners with CareerSource on direct referrals for one on one employment, assistance and assistance with resumes. The resource center also provides direct volunteers that can assist patrons that walk in with job applications and resumes. This year, they cohosted an employment workshop with CareerSource in the College of Central Florida in July. The resource center also has a community scholarship program, that provides financial assistance for people, age 16 and up, to help them overcome barriers to employment and educational goals. They initially received a grant this year to support that program from Capital City for \$5000, but last month Suncoast Credit Union approached them about wanting to sponsor the program independently and they have pledged \$25,000 toward that program.

CoC member, Santa Fe College, prioritizes students experiencing homelessness for work study so they can achieve employment on-campus thus limiting their needs for transportation while also working around their class schedules.

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

(limit 2,500 characters)

1. The CoC actively recruits individuals with lived experience (LE) for participation in every phase of the CoC process. Beginning with CoC governance, two individuals with LE sit on the CoC Leadership Council and are active, voting members of the board and several committees. This year, the CoC will launch the Lived Experience committee chaired by two individuals with LE and includes other members with LE, case managers, and Lead Agency staff. The board-approved committee acts as a focus group as well as a clearinghouse for system planning and policies and procedures. Lead agency staff works with members of the committee to create meeting agendas and speakers. The CoC also includes at least one individual with LE on the rank and review committee for all funding opportunities.

2. The CoC utilizes the Lived Experience Committee to routinely gather feedback from people who have received assistance through the CoC or ESG program. Committee meetings are open to anyone with LE including current and formerly homeless individuals and agency partners are encouraged to post and share flyers about the meetings to encourage participation. Lead Agency staff take minutes during each meeting and share feedback with the CoC Council, general membership, and subcommittees so as to include the voices of those we serve in all that we do.

3. As mentioned above, the CoC actively shares feedback from individuals with LE so as to improve processes, procedures, and service standards to better address and overcome challenges. In some instances, the CoC has been able to address a challenge through the LE Committee by providing trainings and/or connecting those with LE to a resource. For example, during one meeting, an individual expressed difficulties scanning documents needed to apply for jobs. The CoC was able to secure a speaker from the Library to present on re-entry services that they provide to assist those struggling to re-enter the workforce. Since the CoC hosts committee meetings at the Library, committee participants were familiar with the location but not with all of the services that were available. Committee participants were excited to hear they could receive free one-on-one help as well as access in-person classes and online trainings through the library, including those who were previously incarcerated.

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. Due to changes in CoC staff leadership, there have been no steps taken in the past 12 months to reform zoning and land use policies to permit more housing development. The CoC did advocate for an affordable housing project led by Ability Housing and backed by the Florida Housing Finance Corp. This project would have brought 96 units to east Gainesville with 86 units at or below 60% of area median income. Despite multiple letters to City and County Commissioners as well as public comment at meetings, the deal fell through.

2. Due to changes in CoC staff leadership, there have been no steps taken in the past 12 months to reduce regulatory barriers to housing development.

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

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

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

1E-1.	Web Posting of Your CoC’s Local Competition Deadline–Advance Public Notice. NOFO Section V.B.2.a. and 2.g. You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.	
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1.	Enter your CoC’s local competition submission deadline date for New Project applicants to submit their project applications to your CoC—meaning the date your CoC published the deadline.	08/28/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC’s local competition—meaning the date your CoC published the deadline.	07/06/2023

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e. You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen. Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	

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

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

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

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

1.	What were the maximum number of points available for the renewal project form(s)?	175
2.	How many renewal projects did your CoC submit?	9
3.	What renewal project type did most applicants use?	PH-PSH

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

Describe in the field below:

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

(limit 2,500 characters)

1. The CoC analysis of housing projects for rank and review is multi-faceted. First, the CoC local competition requires each applicant to submit APR's for each project application for the prior FY. Second, the HMIS program administrator reviews APR's and SPM's for each project application. APR's provide in-depth analysis of project efficacy and the SPM review looks for projects improving performance and scores each project on Length of Time Homeless, Returns to Homelessness, Employment and Income Growth, and Successful Exits to Permanent Housing.

2. Rapid placement analysis is done by reviewing project APR's for length of time between project start date and housing move-in date and SPM 1 for each applicant. The CoC has worked with agencies throughout the CoC to improve data quality and ensure accurate reporting. This analysis is done by the HMIS program administrator.

3. Rank and review scoring includes SPM's 1, 2, and 7 for projects with a history of participants entering and remaining in permanent housing. Although the rank and review committee used a uniform scoring process for all housing projects, project application narratives could score higher for working with high vulnerability individuals.

4. Local thresholds for rank and review require all applicants to accept referral through CES based on local priorities, the use of a standardized vulnerability assessment tool (VI-SPDAT), and emphasis on a Housing-First Approach as a core principle. Project scoring includes HUD NOFO priorities including reducing unsheltered homelessness, housing-first, partnerships with PHA and health agencies. If a project serving high-vulnerability households scored lower on performance, this reduction can be overcome with higher scores on project description responses pertaining to program experience with hardest to serve populations.

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

Describe in the field below:

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

(limit 2,500 characters)

1. The FY 2023 HUD NOFO Rank and Review Committee included persons of different races and one individual with lived experience. The Committee convened to review the scoring process from the previous year, to gather input, and discuss changes to the procedure for the current NOFO.

2. The Rank & Review Tool was updated during the FY 2022 HUD NOFO to include measures for racial equity. The Rank & Review Committee for this year's NOFO carried over the tool from prior year for consistency with these measures. The rank and review committee was comprised of 50% BIPOC and included one person with lived experience. Each committee member was provided with a copy of each project application and the scoring matrix to review on their own time. The committee convened to discuss individual committee member scoring of projects and ranking. The Lead Agency compiled the scores from each committee member into one consolidated and weighted score. The committee's scoring and ranking recommendations were then presented to the CoC Leadership Council for final determination and approval.

3. The local competition scoring tool included factors pertaining to racial equity for the first time last year. Applicants could receive points for clearly explained responses for the following questions: Is the applicant addressing racial equity and racial disparities in the provision or outcome of services; and, Has the applicant reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies.

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

(limit 2,500 characters)

1. The CoC, through its data performance committee and CoC Leadership Council develops performance standards for funded programs and reviews them annually as part of the evaluation process for determining whether reallocation is appropriate due to poor performance and/or reduced local need. If a program performs poorly, a program review of how and why the program performed poorly is completed collaboratively by CoC staff, CoC committees, and the CoC Council. Once this review is completed, a recommendation is made and voted on by the CoC Council requesting lower-performing projects to elect either full or partial reallocation. If an agency does not elect reallocation, the CoC Council can move for involuntary reallocation. The CoC's Council and committees further develop local priorities and regularly assess local needs to determine whether an existing project should be considered for reallocation due to reduced need.
2. The CoC did not identify any projects meeting the reallocation threshold described above.
3. The CoC did not reallocate any low-performing or less-needed projects during this years competition.
4. Not applicable as no low-performing or less-needed projects were identified.

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

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	No
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	Yes
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/12/2023

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/12/2023
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project accepted or rejected status; 4. Project Rank–if accepted; 5. Requested Funding Amounts; and 6. Reallocated funds.	Yes
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1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website–which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	
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You must enter a date in question 1E-5c.

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

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC’s website or partner’s website.	
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You must enter a date in question 1E-5d.

2A. Homeless Management Information System (HMIS) Implementation

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

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

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

	Enter the name of the HMIS Vendor your CoC is currently using.	Wellsky
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored—For Information Only	

	Select from dropdown menu your CoC's HMIS coverage area.	Single CoC
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section V.B.3.a.	

	Enter the date your CoC submitted its 2023 HIC data into HDX.	04/28/2023
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2A-4.	Comparable Database for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

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

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

(limit 2,500 characters)

1. To ensure that DV housing and service providers collect data and meet comparable database requirements, the CoC conducts annual monitoring wherein the CoC reviews HMIS compliance. Through these audits the CoC reviews HMIS compliance with comparable databases. To ensure DV providers are collecting the required data elements, the HMIS lead provided all DV providers with the HUD Homeless System Response: Comparable Database Vendor Checklist and the FY 2022 HMIS Comparable Database Manual, released in March of 2022. The HMIS Lead agency is available to provide expertise and address HMIS reporting inquiries as well as respond to Coordinated Entry related questions.
2. FL-508 DV housing and service providers use a HUD-compliant comparable software facilitated by Osnum. Osnum is compliant with HMIS data elements and generates APR and CAPER reports.
3. The CoC is compliant with the 2022 HMIS Data Standards and all parties are aware of the required data elements.

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	284	109	175	100.00%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	73	0	73	100.00%
4. Rapid Re-Housing (RRH) beds	299	160	139	100.00%
5. Permanent Supportive Housing (PSH) beds	661	0	661	100.00%
6. Other Permanent Housing (OPH) beds	0	0	0	

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

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

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

(limit 2,500 characters)

Not applicable

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

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

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

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

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

	Enter the date your CoC conducted its 2023 PIT count.	01/23/2023
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/28/2023
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2B-3.	PIT Count–Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

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

(limit 2,500 characters)

1. The CoC partners with a local youth shelter and RHY provider to coordinate PIT count methodology.
2. Providers serving youths worked with the CoC by supplying feedback for PIT surveys as well as location identification for likely areas to find unsheltered youth. Feedback from the Street Outreach team was also useful in identifying these locations.
3. Providers serving youths provide PIT and HIC data for youths experiencing homelessness and served on the night of the PIT. The CoC did not directly engage youth experiencing homelessness as counters during the most recent unsheltered PIT 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.	

(limit 2,500 characters)

1. No changes were made to sheltered PIT count methodology from 2022 to 2023. However, data quality changes were implemented. The System Administrator worked with ABT associates and HMIS participating agencies to ensure better data quality and integrity of sheltered homeless clients on the night of the PIT.
2. In 2023, there was a change in the methodology for conducting the unsheltered PIT count compared to 2022. This change was implemented with the aim of improving the accuracy of the count. There was an increase in the number of paid homeless surveyors. Surveyors were compensated at a rate of \$15/hour, a rate which was implemented in 2022. This increase in surveyors led to a higher number of hours worked which resulted in a higher raw count of individuals surveyed in the unsheltered PIT count compared to the previous year. During the deduplication process, it was observed that this increase in paid homeless volunteers and overall hours worked may have had the unintended consequence of an increase in duplicate individuals. To rectify this issue, the HMIS administrator cross-referenced coordinates and geolocation data cross-referenced with timestamps and surveyor user IDs. These methods provided a much more likely and reliable total count for 2023.
3. The 2023 methodology changes initially resulted in an inflated raw count of unsheltered individuals. However, the subsequent deduplication efforts and improvements in data quality ultimately led to a more reliable and accurate estimate of the unsheltered population.

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

(limit 2,500 characters)

1. FL-508 CoC engages in the ongoing assessment of risk factors that are indicative of individuals experiencing homelessness for the first time. The CoC utilizes HMIS reports to discern cases in which individuals have transitioned into homelessness for the first time, and provides that detail to the prevention sub-committee. This committee convenes to make informed determinations based on historical data. The System Performance Measures report primarily fulfills the purpose of annual HUD reporting, and is therefore limited in supporting a proactive approach. In response to this limitation, the CoC determines risk factors through bi-weekly case conferencing of the By-Name-List (BNL). Through usage of the universal intake form, case managers can determine who is currently seeking assistance and who may be entering homelessness for the first time. Since these cases are actively going through the Coordinated Entry System (CES), case managers engage in conversations with the clients using progressive engagement and a trauma-informed approach. These interactions are instrumental in identifying the causes of homelessness and the associated risk factors.

2. United Way of North Central Florida serves as Lead Agency for the CoC and their research into the ALICE (Asset Limited. Income Constrained. Employed.) population provides the CoC with data highlighting the number of households in the CoC catchment area who are struggling to afford basic needs. As of the latest ALICE Report, released in April 2023, nearly 52% of all households in the CoC catchment area are ALICE and/or in poverty. The Lead Agency also provides 211, a 24/7 resource referral line that tracks callers' needs and makes referrals. Monthly 211 reports provide the CoC with details on the how many calls are coming in for rent and utility assistance, as well as other basic needs such as food and shelter. 211 also shares the top 10 referral agencies where callers are being sent and top zip codes where requests for assistance are originating. Using data from the ALICE report and 211, the CoC is able to drill down at the local level where to target prevention services.

3. The organization that oversees the CoC's strategy to reduce homelessness is the Lead Agency for FL-508, the United Way of North Central Florida, and in collaboration with the CoC's prevention sub-committee, HMIS committee, and case managers involved with case conferencing.

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

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

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

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

In the field below:

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

(limit 2,500 characters)

1. The CoC has the following strategies to reduce the Length of Time individuals and families experience homelessness. A) Data and Monitoring: Assessing project performance by examining permanent housing outcomes and the associated Length of Time homeless in relation to those outcomes. B) Coordinated Entry: Providing efficient assessments and housing connections via a transparent prioritization process. C) Housing: Advocacy for affordable housing and collaboration with housing authorities. Efforts to increase availability of housing units. D) Collaboration and Partnerships: Working with the government agencies, non-profits, and community leaders for pathways to stable housing. E) Outreach: Providing a street outreach team that connects individuals experiencing homelessness with resources and referrals to service providers.

2. Identification of individuals' and families' time homeless is determined through bi-weekly BNL calls and HMIS reporting. The CoC has been actively working with Built for Zero (BFZ) to reduce the LOT homeless. BFZ provides cohorts, consulting, and funding opportunities focused on effectively ending homelessness. Throughout CES and BNL calls, individuals and families are filtered based on their time in queue for assistance. When reviewing those in queue for assistance, RRH and PSH resources are determined by both the vulnerability index and the LOT homeless. This allows for a rapid connection to resources ultimately reducing the time homeless. The CoC hopes to expand the HMIS services and enhance reporting to develop a more inclusive BNL. This will help to identify those not only going through the CES process but those in ES, TH, and SO. We also would like to view the "approximate start date" as a factor of LOT homeless but a lot is being done manually due to HMIS current capabilities.

3. The organization that oversees the CoC's strategy to reduce the length of time individuals and families remain homeless is the Lead Agency for FL-508, the United Way of North Central Florida. The Coordinated Entry Specialist is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless in collaboration with the HMIS committee and all ES/TH partners and stakeholders.

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

	3. provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.
--	--

(limit 2,500 characters)

1. For all projects, the CoC works to improve performance by reviewing individual APR's. The Coordinated Entry System (CES) improves its process every year, attempting to identify clients that are appropriate for TH and RRH interventions in hopes of placing those who will benefit from the service provided by each program. For ES, TH, and RRH it is the CoC's goal to enhance training with development of goals through progressive engagement. Allowing the participants of the program to develop their success strategy will be key in them obtaining their goals. By using motivational interviewing, collaboration, evoking, and autonomy participants will hopefully have a better understanding of the length of temporary assistance and want to develop successful plans. In the development of these plans, we intend to identify supportive services that will help participants in their journey to success.

2. With PH programs, the CoC's strategy is to increase supportive service visits and utilize progressive engagement to allow those within PH the ability to remain or exit to PH destination. The CoC also provides training to partners and organizations to provide financial literacy, vocational resources, job training, and access to non-employment income to ensure individuals/families remain housed.

3. The organization that oversees the CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing is the Lead Agency for FL-508, the United Way of North Central Florida, in collaboration with the CoC Leadership Council and stakeholders involved in the programs. With their feedback, the CoC will be able to determine strategies to increase the rate of permanent housing exits and retention.

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

In the field below:

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

(limit 2,500 characters)

1. The CoC currently identifies individuals and families who return to homelessness through retroactive reporting. Additionally, the CoC fosters collaboration and record-sharing among service providers within the local homeless crisis response system. Each organization has access to HMIS data which provides historical detail about those seeking services. Case managers assess the ongoing needs and vulnerabilities of clients and can detect triggers that may indicate a return to homelessness through regular assessments. Case Managers use the client record to identify the participants previous place of residence and recorded services to determine if the individual or family is returning to homelessness.

2. The CoC employs a strategy aimed at reducing the rate of additional returns to homelessness that uses several components. The CoC has a Housing First Approach, recognizing the importance of housing stability and prioritizing quick exits to permanent housing. The CoC also has prevention programs that assist eligible clients with rent and utility payments. An emphasis on collaboration among service providers and housing agencies along with case management is used in an effort to ensure resources are efficiently allocated. Additionally, rapid rehousing programs help individuals exit to permanent housing placements. For individuals with chronic needs, Permanent Supportive Housing programs are available to help those individuals maintain stable housing.

3. The organization overseeing this strategy is the Lead Agency of FL-508, the United Way of North Central Florida. This is also a collaborative effort which includes the HMIS Administrator providing reports and findings to the HMIS Committee and Coordinated Entry Committee, as well as stakeholders to ensure participants aren't falling back into 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.	

(limit 2,500 characters)

1.The CoC continues to increase access to employment income by building partnerships and relationships with community organizations who provide financial literacy, vocational resources, job training, and access to local workforce resources. Our network of CoC service providers plays a critical role in connecting individuals experiencing homelessness with necessary resources to enhance work readiness. This includes assisting them in resume building and guiding them through the job application process aimed to ensure successful job placement. Service providers help remove barriers that hinder employment with supportive services such as childcare, food, case management, and housing resources.

2.The CoC promotes access to employment through community partner programs and distribution of job opportunities via job boards, and access to computers and job fairs. The CoC also targets employers by developing relationships with business owners and managers who are willing to provide employment opportunities to those served throughout the CoC.

3.The organization overseeing this strategy is the Lead Agency of FL-508, the United Way of North Central Florida in collaboration with the CoC's HMIS committee.

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

(limit 2,500 characters)

1. The CoC currently provides an intake upon program entry to determine if individuals and families need non-employment cash income like SSA, SSDI, and TANF. Through the initial conversation, the CoC can identify if the participant would be a candidate for non-employment services. There is training provided to partnering agencies to access SSA, SSDI, and TANF as well as SOAR trained case managers. A lot of the non-employment cash income has rules and regulations for receiving and not all participants qualify or are able to receive more than they already do.

2. The organization overseeing this strategy is the Lead Agency of FL-508, the United Way of North Central Florida in collaboration with the CoC Leadership Council and general membership.

3A. Coordination with Housing and Healthcare

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

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

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	No
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3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	No
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3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections V.B.6.a. and V.B.6.b.	
	If you selected yes to questions 3A-1. or 3A-2., use the list feature icon to enter information about each project application you intend for HUD to evaluate to determine if they meet the criteria.	

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

3B. New Projects With Rehabilitation/New Construction Costs

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

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

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

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

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

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

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

(limit 2,500 characters)

Not applicable

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

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

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

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

	Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
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3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.

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

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

(limit 2,500 characters)

Not applicable

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

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

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

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

Did your CoC submit one or more new project applications for DV Bonus Funding?	Yes
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4A-1a.	DV Bonus Project Types.	
	NOFO Section I.B.3.I.	

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2023 Priority Listing.

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

You must 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.	
	NOFO Section I.B.3.I.(1)(c)	

1.	Enter the number of survivors that need housing or services:	307
2.	Enter the number of survivors your CoC is currently serving:	130
3.	Unmet Need:	177

4A-3a.	How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(c)	

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

(limit 2,500 characters)

1. The three DV Centers in the CoC Region each operate emergency shelters that serve families and individuals fleeing abusive, unsafe, and unstable housing environments. Upon review of the shelter populations for the centers in the past year, the number of individuals (adults and children) that reported homelessness and needing housing services were 307.

2. This is supported by PIT survey data that demonstrates the high number of homeless individuals that report DV as the initial cause of the unstable housing that they experience. This data is further upheld by national studies that continue to find homeless women report DV as a factor in their lack of stable housing in more than 75% of those surveyed.

3. Currently the CoC is not able to meet the housing needs of DV survivors living in emergency shelters. These individuals need extensive housing support that includes employment support, childcare, transportation, access to mainstream benefits, and credit repair. DV Centers have the capacity to address these issues through their comprehensive case management, counseling, economic justice, and advocacy programming. The three certified centers in the CoC offer these services to all survivors in shelter programs, but lack the financial resources and local housing inventory to secure stable, community based housing with current funding. The barriers include rural communities with a lack of local housing, transportation and employment options. The suburban community of Gainesville has barriers that include overabundance and focus on student housing related to the University of Florida, job markets that cater to the services industry that does not offer fulltime, livable wages, and transportation options that are not responsive to employment needs. The CoC has forged partnerships with landlords, the chamber of commerce, and local government to create solutions to these barriers for long-term solutions for all populations, including DV survivors.

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
Peaceful Paths Do...

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	Peaceful Paths Domestic Abuse Network, Inc.
2.	Project Name	Expanded RRH DV Bonus 2023
3.	Project Rank on the Priority Listing	8
4.	Unique Entity Identifier (UEI)	U6AYGM98MAB9
5.	Amount Requested	\$101,836
6.	Rate of Housing Placement of DV Survivors—Percentage	92%
7.	Rate of Housing Retention of DV Survivors—Percentage	94%

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)

1. Using data from the Osnum HMIS system, Peaceful Paths did RRH intakes for 74 heads of households in the past grant year. Of that number, 68 were able to find and enter a safe community-based housing placement (92%). Of those 68 heads of households placed, 30 heads of household exited the program in the year, and only 2 were not retained in the project for the full length of stay and service (94%).

2. Of those that exited (a total of 50 persons) 48 exited to safe locations, which tracks with the two individuals who were not retained in the project.

3. This data comes directly from the HUD APR and CAPERS reports that the agency generates from the Osnum database. This success rate reflects the intensive wrap around services, case management, and ongoing financial support and referrals that Peaceful Paths is able to provide to all families in the project through our comprehensive Economic Empowerment Program.

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.

(limit 2,500 characters)

1. Peaceful Paths has a fully functional RRH project that can move survivors into safe housing within 3 days of contact.
2. Through our Coordinated Entry Process (implemented in 2019 with a HUD SSO grant) the team uses dynamic prioritization of outreach and residential referrals to determine needs and placement. Weekly meetings ensure that referrals are addressed quickly, and emergency housing is provided as a stop gap if needed. All services start with an intake and assessments that identifies the safety concerns, eligibility, and stabilizing needs.
3. Advocates determine the safest relocation options to meet the survivor’s situation.
4. This comprehensive CE process is available to any victim identified by CoC partner agencies through our 24-hour helpline, where any survivor can complete the screening for services regardless of the agency they initially contacted. From there, advocates on the Housing Team help the survivor prepare for housing placement through case management. This includes budgeting, landlord advocacy, relocation Safety plan, service plan goals, and connecting with mainstream services, support programs, financial literacy education, and children’s services. The project uses best practices for domestic violence victims by addressing the two critical Federal Family Violence Prevention and Services Act (FVPSA) outcome measures: Does the survivor have greater resources to stay safe? Does the survivor have greater knowledge and access to community resources?
5. Survivors can access the continuum of housing on our campus, from emergency shelter (up to 12 weeks) to supportive housing (up to one year), and prepare them for community-based housing through RRH funds. This ensures all safety issues are resolved before new housing is secured. Last year, the grant had a 94% success rate for moving clients to housing they could sustain after the housing subsidy ended. We anticipate the same level of success for this expansion.

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

(limit 2,500 characters)

1. Homeless victims fleeing domestic violence need extensive support due to the danger they face and their need for confidentiality and safety.
2. Through the comprehensive Housing Program Peaceful Paths operates, we are able to ensure that victims outlined in paragraph (4) of the definition of homelessness have the housing safeguards in place to transition from unstable housing and emergency shelter to supportive housing and safe housing in the community using the HUD Rapid Rehousing project.
3. As the state certified Domestic Violence Center for this area, we adhere to the guidelines for confidentiality outlined in Florida Statute Ch. 39.908 which specifies the requirements for confidential location, stay, and services for all survivors.
4. Certification also requires 30 hours of initial domestic violence training that includes extensive confidentiality training, and 16 hours of annual training that includes data security, physical plant security, and advocate privilege. We include HUD Toolkit training on the RRH project for all housing advocates.
5. The Center ensures that victims can be housed safely on our Campus, and have intensive security measures in place to keep them and their children safe from discovery. Advocates can work on housing goals and placements while safety issues are resolved, which allows survivors to take advantage of services as needed as they transition to permanent housing. The expanded RRH project proposed here will continue to take survivors immediately from the emergency shelter, supportive housing, and outreach services, and moves them into safe RRH units in the community using the Housing First model.

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.	

(limit 2,500 characters)

Peaceful Paths’ state certified center projects use best practices for domestic violence victim safety by addressing the two critical Federal Family Violence Prevention and Services Act (FVPSA) outcome measures: Does the survivor have greater resources to stay safe? Does the survivor have greater knowledge and access to community resources? All agency programs ensure services are safety focused, and provide the necessary support that survivors need to create a path to self-sufficiency. By providing every client the opportunity to complete an anonymous satisfaction survey at any time throughout their stay, we are constantly evaluating service delivery, confidentiality, and unmet needs. By soliciting client feedback, we are able to adjust the program as needed. Over the past year, we have added more financial literacy programming, provided wellness activities, presented a zoom support group for survivors with transportation issues, and built a new consolidated entryway. This project was based on client feedback about the safety of the courtyard entryway, which we enclosed to create better line of sight and indoor lobby space for survivors. We ask for feedback through paper forms, survey monkey tools, and exit interviews to gather responses on gaps and improvements we can make.

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.

(limit 5,000 characters)

1. Peaceful Paths has operated as a state certified domestic violence center since 1978. Our empowerment-based, trauma informed services focus on assisting survivors in building safety, support, and a path to self-sufficiency. Empowerment best practice requires that all services are client driven and directed, and that self-determination is the basis for all programs, referrals, and interventions.

2. All advocates receive 30 hours of intensive training to gain privilege and understand confidentiality, empowerment, and trauma informed practices. This training incorporates key components in de-escalation language, culturally sensitive practice, ADA accommodations and services provision, ESL and Deaf and Hard of Hearing programming, crisis response to SAMH co-occurrence, and system vulnerabilities (immigration status, non-binary, literacy, and disability). Implementation of these techniques ensure that every survivor is offered relevant and inclusive interventions that meet them where they are and without judgment.

3. The overall goal of this project is to successfully transition clients from the violent, unstable homes they are fleeing to safe, stable community-based housing they find. Advocates guide survivors using coaching techniques that create self-confidence, personal agency, and individual power that can overcome the diminishment techniques employed by abusers. Programs are voluntary, comprehensive, have concurrent children's services, and prioritize client needs over prescribed curriculum. Case management approaches are strengths based and nonjudgmental.

4. Service plans, developed after discussion of basic needs, give survivors the opportunity to explore what is most critical to them, and don't include required "categories" or benchmarks, but instead focus on survivor access to resources, feelings of safety, and meetings needs. Advocates adjust planning as needed throughout a survivor's journey in services. Services include a range of options from support groups and individual trauma therapy to Financial Literacy classes and legal services. Survivors can take advantage of any and all services that meet their needs, all of which are free and confidential.

5. Agency experience in developing and delivering highly effective, empowerment-based services is well documented, with numerous competitive grant awards for trauma services, population specific programming (abuse in later for example) and underserved communities (rural and LGBTQ+).

6. In addition, if there are client-specific services needed, such as faith-based counseling or body work therapy (acupuncture for example), the agency connects survivors with these resources.

7. Since all programming for adults includes concurrent child and youth programs, parenting is integrated into all services. Child and youth advocates can support parents in developing parenting skills that are strengths based, include natural consequence redirection instead of punishment, and build rapport and attachment in the absence of the battering parent.

4A-3f.	Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section I.B.3.I.(1)(d)		

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

(limit 5,000 characters)

Peaceful Paths provides safe confidential programming, residential and outreach, for survivors on domestic violence on a comprehensive Campus and community offices in a tri-county region. Advocates provide services 24 hours a day, 365 days a year to the adults and children who need intervention and support to address the violence in their lives, including need for safe housing interventions. These families and individuals are facing immediate danger, and come to Shelter and Outreach services with needs ranging from safety and support, housing and employment, to trauma intervention and legal advice. The extensive nature of our Campus programming allows for survivors to enter in Outreach, move to Shelter, and transition to the Supportive Housing units we operate seamlessly. This continuum of services means that our RRH project is highly effective in stabilizing survivors and safely housing them because we are able to build strong trust through long-term advocacy. Survivors are housed rapidly and receive progressive case management and empowerment-based coaching for up to year while they work on a path self-sufficiency and safe affordable housing in the community.

Intervention services provided include:

- Comprehensive Safety planning including financial safety planning.
- Individualized service plans, basic needs assessment, and lethality assessment to address immediate needs.
- Emergency shelter housing, housing assessment and supportive housing that lead into the rapid rehousing, relocation, and safe permanent housing placements that are survivor directed.
- Emergency food, clothing, and hygiene products, medical and prescription support.
- Financial Literacy classes and Economic Empowerment programming to address employment, generational poverty, credit, mainstream benefits and education.
- Transportation support
- Referral and connection to community resources for services outside the Campus.
- Children's services including assessment, education, childcare, and activities to engage all ages.
- Full services legal support for injunctions, legal advice and legal referrals.
- Trauma counseling, support groups, life skills classes, community mentors, book club, and wellness classes.

Peaceful Paths will provide services to eligible individuals regardless of race, religion, color, national origin, gender, mental or physical disability, sexual orientation, citizenship, immigration status, marital status or language spoken. Male survivors will also be served on the campus in all programs. All services are free and confidential, and empower survivors and their children to address immediate needs and long-term goals for themselves with agency support. The impact of Center services range from meeting basic needs to helping survivors establish support networks that can dramatically change their lives. While in services, safety planning is a core component of programming, addressing the potential dangerousness of their partner, risks to themselves and their children, and addressing the systems available that can help. Referrals to community partners help to ensure that survivors can address employment, childcare, housing, transportation, and other essential needs. Staff work to connect survivors with mainstream benefits, such as food stamps and Medicaid, as they are eligible. In addition, children and youth are assessed to determine exposure and provided intervention and enrichment activities to help them cope with the

violence in their homes and other pressures that they may be experiencing. Parents are also given support from child and youth advocates who can provide respite childcare and guidance with parenting concerns. Research shows that survivors need a range of services and solutions to address the DV in their lives. “Solutions must encompass a range of options such as emergency shelter, transitional housing, and permanent housing options, including housing vouchers, mortgage assistance, and federally subsidized housing. Survivors need living-wage jobs, tax credits, access to benefits, and access to child care, as well as economic literacy, financial education, and job training. We need consistent, stable funding for domestic violence programs that are poised to provide many of these options, alongside housing advocacy and confidential services to help survivors,” (NNEDV.org) Peaceful Paths is a model of the comprehensive and collaborative approach that is best practice and necessary for outreach and residential services to be effective for long-term survivor stability. Peaceful Paths focuses on two major outcomes, prescribed by Federal funders, as the underpinning of all intervention services: That survivors have more tools to stay safe after services, and that they are more aware of community resources after services. By highlighting these vital outcomes Center services can concentrate efforts to make the most impact on the lives of adults and children.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Practices for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(e)	

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

(limit 5,000 characters)

1. Peaceful Paths has operated as a state certified domestic violence center since 1978. This expanded new project will utilize the established staff training, survivor interventions, community partnerships and support networks for survivors in order to create even more access to safe community-based housing. Our empowerment-based, trauma informed services focus on assisting survivors in building safety, support, and a path to self-sufficiency.

2. Empowerment best practice requires that all services are client driven and directed, and that self-determination is the basis for all programs, referrals, and interventions. All advocates receive 30 hours of intensive training to gain privilege and understand confidentiality, empowerment, and trauma informed practices. This training incorporates key components in de-escalation language, culturally sensitive practice, ADA accommodations and services provision, ESL and Deaf and Hard of Hearing programming, crisis response to SAMH co-occurrence, and system vulnerabilities (immigration status, non-binary, literacy, and disability). Implementation of these techniques ensures that every survivor is offered relevant and inclusive interventions that meet them where they are and without judgment.

3. The overall goal of this project is to successfully transition clients from the violent, unstable homes they are fleeing to safe, stable community-based housing they find. Advocates guide survivors using coaching techniques that create self-confidence, personal agency, and individual power that can overcome the diminishment techniques employed by abusers. Programs are voluntary, comprehensive, have concurrent children’s services, and prioritize client needs over prescribed curriculum. Case management approaches are strengths based and nonjudgmental.

4. Service plans, developed after discussion of basic needs, give survivors the opportunity to explore what is most critical to them, and don’t include required “categories” or benchmarks, but instead focus on survivor access to resources, feelings of safety, and meeting needs. Advocates adjust planning as needed throughout a survivor’s journey in services. Services include a range of options from support groups and individual trauma therapy to Financial Literacy classes and legal services. Survivors can take advantage of any and all services that meet their needs, all of which are free and confidential.

5. Agency experience in developing and delivering highly effective, empowerment-based services is well documented, with numerous competitive grant awards for trauma services, population specific programming (abuse in later for example) and underserved communities (rural and LGBTQ+).

6. In addition, if there are client-specific services needed, such as faith-based counseling or body work therapy (acupuncture for example), the agency connects survivors with these resources. Since all programming for adults includes concurrent child and youth programs, parenting is integrated into all services.

7. Child and youth advocates can support parents in developing parenting skills that are strengths based, include natural consequence redirection instead of punishment, and build rapport and attachment in the absence of the battering parent.

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. Peaceful Paths has historically incorporated survivors and formally battered persons in all levels of agency operations. This new project will benefit from these established practices by ensuring that as programming evolves, it is always informed by the input of persons with lived experience. Currently, the agency has two survivors on the Board of Directors, including one male survivor whose former wife was murdered by her new husband, leaving him as a single parent of their two children. His expertise in navigating trauma and the secondary victimization of child survivors has been instrumental in informing many of programs and initiatives that we have developed over the years, including youth support groups, secondary and family survivor support groups, and donor messaging. Another avenue for ensuring that voices of survivors are included in the project is incorporating staff who have lived experience in Domestic Violence and homelessness. Currently, the agency employs 6 persons (15% of the total FT staff) with lived expertise. This includes staff in both outreach and residential services, including the housing team. The Team includes one individual who was homeless for more than a year, one who is a survivor that received clemency after being incarcerated for DV Manslaughter for 11 years, two survivors of physical and sexual abuse by their batterer, and two who were in long term marriages that included financial abuse, emotional abuse and violence.

2. Their participation in program development, annual policy and practice review, and feedback on client materials is all critical to ensuring inclusivity, access, and empowerment language. Finally, the agency employs a number of feedback options to survivors in all program to give feedback and rate their satisfaction with services anonymously or with staff contact for discussion. All survivors are given exit interview forms, satisfaction survey links, outcome evaluations, and grievance forms that are available throughout their service journey. These are reviewed by leadership so that feedback is incorporated into policy and program development, used to revise practice, and for our quality assurance process. Annually, we receive between 60-100 feedback forms and 200+ satisfaction surveys, including from residents exiting RRH programs for permanent housing. This level of lived experience to inform services is a requirement and best practice standard for our state DV Center Certification.

4B. Attachments Screen For All Application Questions

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

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

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

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

Attachment Details

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Submission Summary

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

Page	Last Updated
1A. CoC Identification	08/22/2023
1B. Inclusive Structure	09/21/2023
1C. Coordination and Engagement	09/21/2023
1D. Coordination and Engagement Cont'd	Please Complete
1E. Project Review/Ranking	Please Complete
2A. HMIS Implementation	09/21/2023
2B. Point-in-Time (PIT) Count	09/20/2023
2C. System Performance	09/21/2023
3A. Coordination with Housing and Healthcare	09/17/2023
3B. Rehabilitation/New Construction Costs	09/17/2023
3C. Serving Homeless Under Other Federal Statutes	09/17/2023

4A. DV Bonus Project Applicants	09/21/2023
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required